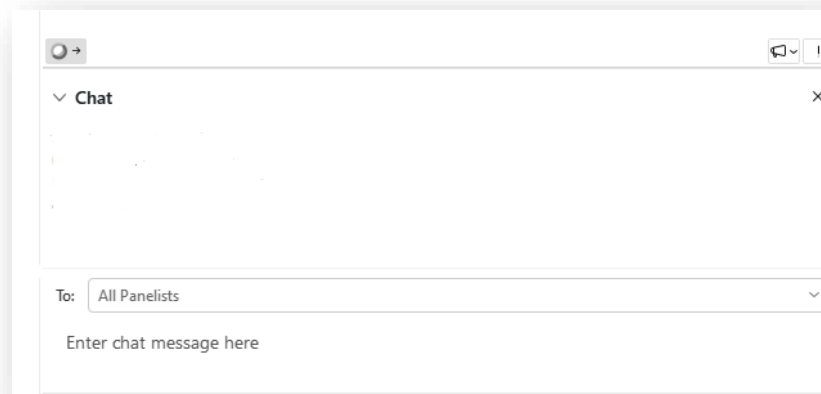


Episodes of Care Annual Feedback Session

May 11th, 2022

Welcome!

- The event will start at **8:00 am CST/9:00 am EST**.
- Upon logging in, all participants will be automatically muted with cameras disabled.
- Please use the **chat function** within WebEx to let us know you'd like to speak. The moderator will grant you control of your mute button when it's your turn.





EPISODES OF CARE ANNUAL FEEDBACK SESSION

May 11th, 2022

Episodes of Care Annual Feedback Session

Agenda

1. Welcome/Introduction
2. Feedback from Specialist Providers
3. Feedback from Facility Providers
4. Feedback from Behavioral Health Providers
5. Feedback from Primary Care Providers
6. Feedback from Miscellaneous Stakeholders

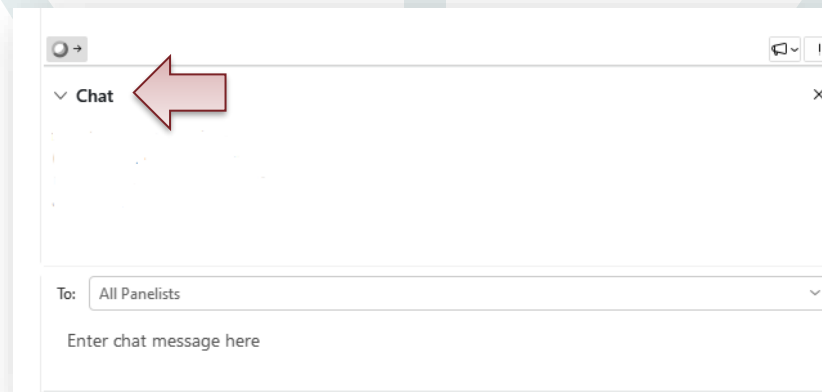
The Feedback Session will end once all stakeholders have had an opportunity to speak. We anticipate the event will take one hour.

Episodes of Care Annual Feedback Session

We want to hear from you!

Ways to Share Your Feedback:

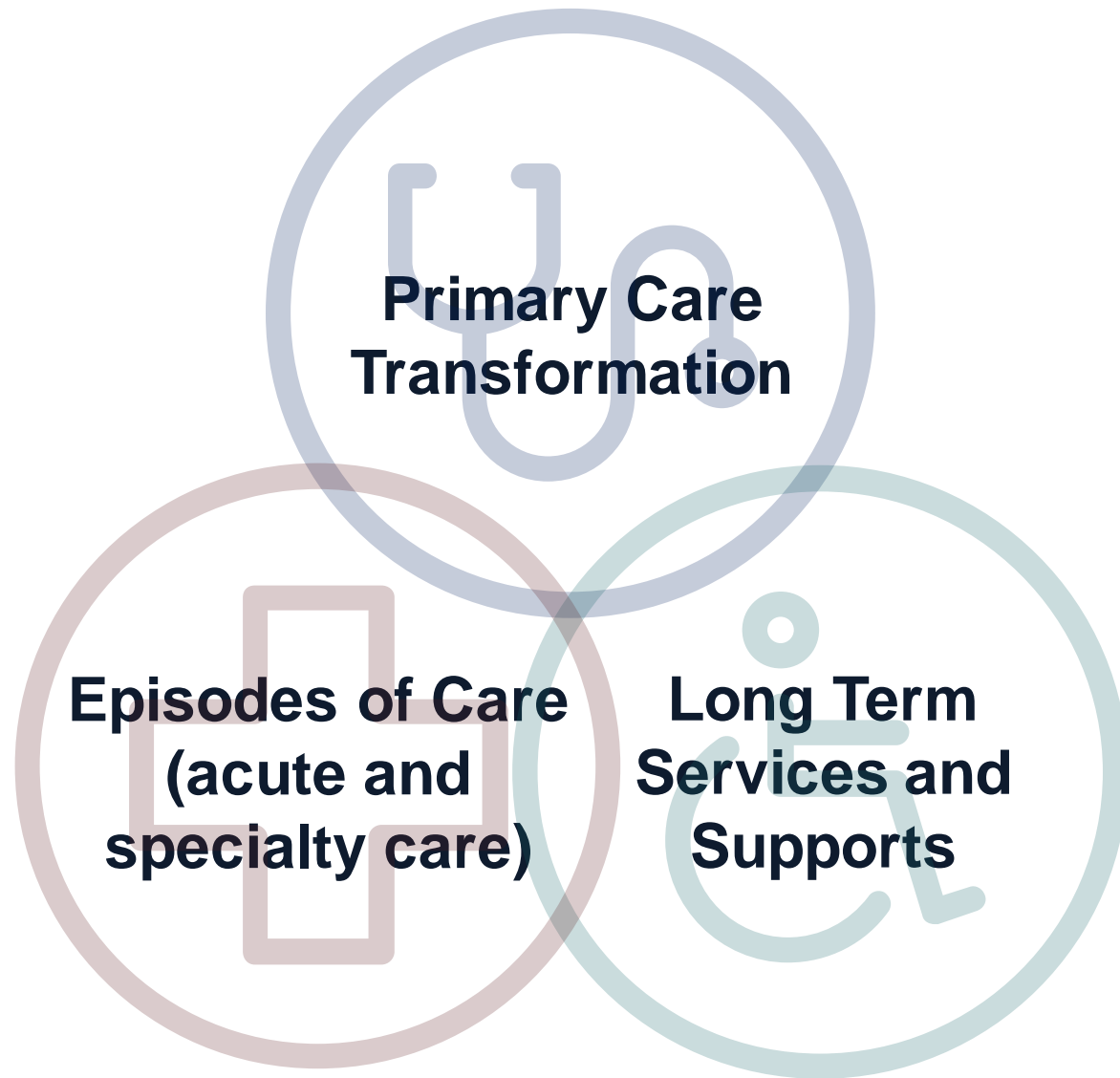
- **Now:** Use the **chat** function on WebEx to tell us you would like to speak. The moderator will introduce you and unmute you.
- **Always:** Send an email to Payment.Reform@tn.gov
- **Always:** Contact your MCO representative



TennCare Episodes of Care Team

- **Jessica Hill:** Chief of Staff
- **Johnny Lai:** Episodes Strategy Manager
- **Dr. Vaughn Frigon:** Episodes Medical Director
- **Carl Mueller:** Episodes Data Scientist
- **He Huang:** Episodes Data Analyst
- **Beth DeWeese:** Episodes Strategy Specialist /
Provider Engagement Lead

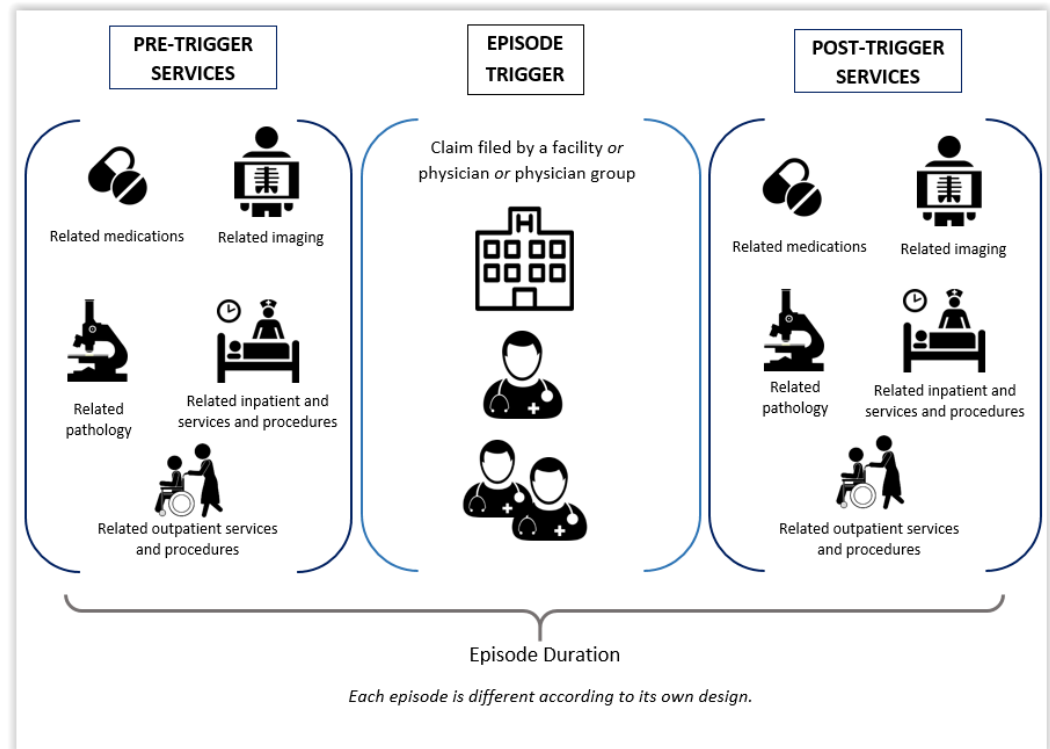
Tennessee Delivery System Transformation Strategies



Episodes of Care Definition

An **Episode of Care** is a defined set of services designed by TN clinical experts that allows for fair comparisons across providers state-wide.

The purpose is to increase data sharing, best practices adoption, and quality of care across the state, all for the benefit of the patients receiving the care.



Key Principles

- **Coordinated care** for all services related to a specific condition
- Share **new information** with providers so they can make more informed decisions for their patients
- Providers are **accountable** for all related services across the episode
- High quality, cost-effective care is **rewarded** beyond current reimbursement through incentive payments at the end of a performance year

48 TennCare Episodes of Care

Status	Wave	Episode
In Performance	1	Asthma acute exacerbation
		Perinatal
		Total joint replacement
	2	Cholecystectomy
		Colonoscopy
		COPD acute exacerbation
		PCI – acute
		PCI – non acute*
		EGD
	3	GI hemorrhage
		Pneumonia
		Respiratory infection
		UTI – inpatient
		UTI – outpatient
		ADHD
	4	Bariatric surgery
		CABG*
		CHF acute exacerbation
ODD		
Valve repair and replacement*		

Status	Wave	Episode
In Performance	5	Breast biopsy
		Otitis media
		Tonsillectomy
	6	Diabetes acute exacerbation
		HIV*
		Pancreatitis
		Skin and soft tissue infections
		Back / neck pain
		Femur / pelvic fracture*
	7	Knee arthroscopy
		Non-operative ankle injury
		Non-operative knee injury
		Non-operative shoulder injury
		Non-operative wrist injury
		Spinal decompression
	Spinal fusion	

Status	Wave	Episode
In Performance	8	Acute gastroenteritis
		Acute seizure
		Appendectomy
		Bronchiolitis
		Colposcopy
		Gastrointestinal obstruction
		Hernia repair
		Hysterectomy
	Pediatric pneumonia	
	Syncope	
	9	Acute kidney and ureter stones
		Cystourethroscopy

*Episode type has informational-only reporting as of January 2021.

Results of the Episodes of Care Program

CY 2015	CY 2016	CY 2017	CY 2018	CY 2019
<p><i>Estimated Savings*:</i> \$10.8 million</p> <ul style="list-style-type: none"> Providers and hospitals reduced costs while maintaining quality of care Gain sharing payments to providers exceeded risk sharing payments by \$280,000 <p>Includes the 3 episodes in performance in CY 2015</p>	<p><i>Estimated Savings*:</i> \$14.5 million</p> <ul style="list-style-type: none"> Quality metrics improved for perinatal, total joint replacement, and COPD, and were mostly maintained for the remaining episodes Gain sharing payments to providers exceeded risk sharing payments by \$395,000 <p>Includes the 8 episodes in performance in CY 2016</p>	<p><i>Estimated Savings*:</i> \$28.6 million</p> <ul style="list-style-type: none"> Quality metrics improved or maintained for most episodes Gain sharing payments to providers exceeded risk sharing payments by \$206,900 <p>Includes the 19 episodes in performance in CY 2017</p>	<p><i>Estimated Savings*:</i> \$38.3 million</p> <ul style="list-style-type: none"> Quality metrics improved or maintained for most episodes Gain sharing payments to providers exceeded risk sharing payments by \$686,000 <p>Includes the 27 episodes in performance in CY 2018</p>	<p><i>Estimated Savings*:</i> \$45.2 million</p> <ul style="list-style-type: none"> Quality metrics improved or maintained for most episodes Gain sharing payments totaled \$1.9 million Due to COVID-19, all risk-sharing payments have been waived for the 2019 performance period <p>Includes the 45 episodes in performance in CY 2019</p>

*Compared to 3% projected medical cost trend

COVID-19 and 2020 Episodes of Care Results

Due to the ongoing COVID-19 pandemic, estimated savings were not calculated for the Calendar Year (CY) 2020 performance period.

The state recognizes that COVID-19 continues to be an unprecedented health and economic crisis for the provider community. In order to continue to support providers during this difficult time, the three TennCare Managed Care Organizations (MCOs) waived all episodes of care risk sharing payments for the 2020 performance period. Providers who have gain sharing payments in their final 2020 performance reports will receive those payments as planned, with no changes. For 2020, gain sharing payments totaled **\$1.1 million**.

Waiving Episodes of Care Risk-Sharing Payments for 2021 and Reinstating Risk Sharing Payments for 2022

- **MCOs will waive risk-sharing payments for the 2021 performance year.**
 - MCOs will waive all Episodes of Care risk-sharing payments in the final reports for the 2021 performance period.
 - If a provider owes a final episode risk-sharing payment to an MCO based on their final 2021 episodes results, then the provider will not have to make that payment.
- **MCOs will reinstate risk-sharing payments for the 2022 performance year.**
 - Episodes of Care risk-sharing payments will resume for the 2022 performance year, in order to continue incentivizing high-quality, cost-effective care in the Episodes of Care program.

Thank you for your continued dedication to provide quality care to TennCare members during the COVID-19 pandemic. The state recognizes that COVID-19 has created an unprecedented health and economic crisis for the provider community, including financial pressures on many providers.

Best Practices and Stakeholder Relationships

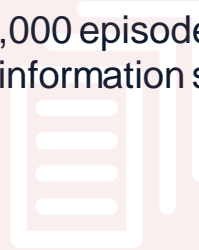
Technical Advisory Groups

26 Technical Advisory Groups with over 360 providers



Provider Reports

Over 330,000 episodes reports with new information sent to providers



Episode Design

Made over 200 changes to episode design based on Stakeholder feedback:

- Updated quality metric definitions
- Low volume exclusions
- Overlapping episode exclusion

Stakeholders

More than 1,500 stakeholder meetings

- 8 annual episodes design feedback sessions
- Bi-monthly meetings with TAMHO on episodes and TN Health Link between 2017-2019
- Additionally, hundreds of meetings per quarter between MCOs and providers

“I do feel 100% that I have been allowed to voice my opinions and to voice my concerns, to see the positives and the negatives. And I’ve always felt that you and your staff have always been very listening and approachable.”

An orthopedic provider

“I felt like we actually had a significant input and changed a few ideas, again to avoid unintended consequences.”

A general surgeon

Best Practices and Stakeholder Relationships

Let's hear from some providers!

We have some special guest speakers to talk about their experiences in the Episodes of Care program.

How the Episodes Team Processes Your Feedback

Approach and Process

- 1. May 2022:** Gather feedback from stakeholders across the state on all episodes
- 2. Summer 2022:** Conduct analyses to inform how to incorporate feedback
- 3. Fall 2022:** Release memo to public with responses to all proposed episode changes
- 4. January 2023:** Accepted changes are implemented for 2023 performance period. Providers will see this year's changes reflected in their August 2023 reports, which capture Q1 2023 performance data.

Stakeholder feedback is important to TennCare and integral to the success of the Episodes program!

Sample of Program Changes (2022)

Providers will see these changes for the first time in their 2022 Q1 reports released in August.

Episode Type(s) Impacted	Change to Episode Design
Multiple Episodes	The Difference in Average MED/day informational quality metric will be updated to the percentage of valid episodes that have a difference in MED that is less than or equal to a set amount as opposed to the average difference across all valid episodes.
All episodes	An episode is excluded if the patient has a diagnosis code related to COVID-19 (U071) or pneumonia due to COVID-19 (J1282).
Acute Pancreatitis	The time period for the Follow-up Care gain-sharing quality metric will be expanded from 14 days to 30 days.
Asthma Acute Exacerbation	The asthma acute exacerbation episode will have a new informational quality metric added for Follow-up Care for Newly-diagnosed Asthma Cases.
ADHD	The Long-acting Stimulants for Members Aged 6 to 11 Years quality metric will be moved from gain-sharing to informational.
ADHD	The temporary Level 1 Case Management exclusion will be permanently removed for the 2022 performance period.
ADHD	The state will add new clinical exclusions that are based on diagnosis codes found on Level 1 Case Management claims in excluded ADHD episodes.
ADHD	The state will remove the informational quality metric Utilization of Level 1 Case Management from the ADHD episode.
ADHD	The Long-acting Stimulants for Members Aged 12 to 20 Years quality metric will be moved from gain-sharing to informational.
Diabetes Acute Exacerbation	The time period for the Follow-up Care gain-sharing quality metric will be extended from 14 days to 30 days.
Hysterectomy	The look-back period for the Alternative Treatments gainsharing quality metric will be extended from 180 days to 690 days.
Hysterectomy	The ICD-10 diagnosis codes related to personal history of contraception (Z92.0) will be added to the Alternative Treatments quality metric of the hysterectomy episode.
Hysterectomy	The ICD-10 diagnosis codes related to post-endometrial ablation syndrome (N99.85) will be added to the Alternative Treatments quality metric of the hysterectomy episode.
ODD	The evaluation and management (E&M) and medication management codes currently listed under the Utilization (excluding medication) informational quality metric will be added to count towards the Minimum Care Requirement gain-sharing quality metric.
Perinatal	The state is changing the Primary C-section quality metric that is informational to align with the Agency for Healthcare Research and Quality (AHRQ) definition of primary Csection delivery rate. This design change will add exclusions for deliveries with complications (such as abnormal presentation, breech, etc.).
Perinatal	The state will update the episode trigger logic in the episode to capture more invalid episodes. This change will identify episodes with an incomplete trigger (for example, a delivery claim with no associated facility claim) and count these episodes as invalid.

Perinatal Spend Exclusion for Maternity Quality Payment Initiatives

- The MCOs have been working closely with TennCare to support (1) the launch of perinatal incentive payments in January 2022 and (2) the launch of the updated maternal health benefits package in April 2022.

Incentive payments are given to providers who:

1. Complete a pregnancy notification form
2. Complete a postpartum visit for uncomplicated, routine care
3. Complete a mental health screening

- To align with the launch of the perinatal incentive payments, **TennCare added spend exclusions to the perinatal episode for the 2022 performance period.**

How to Learn More About Episodes of Care

- **Contact your MCO reps**
 - **Amerigroup**
 - AGPEpisode.Reporting@Amerigroup.com
 - **BlueCross BlueShield**
 - Darlene_Smith-Darlene_Smith@bcbst.com
 - Scott_Fontana-Scott_Fontana@bcbst.com
 - Janelle_Ring-Janelle_Ring@bcbst.com
 - **UnitedHealthcare**
 - SE_Government_Programs@uhc.com
- **Delivery System Transformation Conferences**
 - Conferences are free for providers and hosted every spring, summer, and fall
- **Our Website (Check frequently for new content!)**
 - Visit tn.gov/tenncare/health-care-innovation/episodes-of-care.html
- **Email us any time at payment.reform@tn.gov**

Polling Question #1

Please take a moment to find the polling panel in your WebEx window and submit your answer.

Episodes of Care Annual Feedback Session

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Episodes of Care: Managed Care Organization Contacts



Teresa Price, MSN, RN
*Provider Clinical
Liaison- TN Provider
Solutions*



AGPEpisode.Reporting@Amerigroup.com



Darlene C. Smith
*Network Strategy
and Value Based
Contracting*



Darlene_Smith@bcbst.com



Amber Huggins
*Director of
Government
Programs, SE Region*



SE_Government_Programs@uhc.com

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Thank you for participating!

Please email payment.reform@tn.gov with any questions.

Visit our website at:

<https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care.html> to get more information and **sign up for the Episodes newsletter**

This WebEx will remain open to allow any last-minute feedback to be entered into the chat box.