



maryland
health services
cost review commission

Episode Quality Improvement Program Subgroup

November 2022



Agenda

Agenda

1. Administrative and Enrollment Updates
2. PY1 Performance Data Overview
3. PY3 Episode Development

Administrative and Enrollment Updates

EQIP Enrollment Process

September 2nd, 2022

- Deadline for Submission of Care Partners in EEP for CMS vetting

September 2022

- EQIP Entities finalize their episode and intervention selection
- EQIP Entities may split or combine with others if their Care Partners were included in vetting to CMS

October 2022

- CMS Vetting Results are available in EEP
- Care Partner Arrangements Distributed

November – December 2022

- EQIP Entities follow-up with their Care Partners to ensure Arrangement signature

December 31st, 2022

- All Care Partners who signed their Arrangement will be determined 'enrolled'
- Care Partners who do not sign their Arrangements are removed from EQIP Entities for Performance

We are Here

Enrollment Update for Performance Year Two

Enrollment as of November 18th:

- 3,558 Care Partners*
- Representation from 43 specialties
- 68 EQIP Entities
- Participation in all 45 available EQIP Entities
- *Final participation will not be determined until 1/1/23

Through the end of 2022, the HSCRC and CRISP will work with participants to:

- Finalize CMS vetting status and eligibility
- Complete contracting and payment operations with UMMC

November - December 2022 Enrollment Activities

- Results from initial CMS vetting was posted in EEP
 - 25 Care Partners did not pass vetting and are not permitted to participate in PY2
 - Program Integrity and Law Enforcement CMS vetting results will be returned late 2022, impact should be small
- Care Partner Arrangements distributed 11/10
 - Lead Care Partners and Administrative Proxies received a link to access the SharePoint folder created for your Entity. You will be able to download all Care Partner Agreement PDFs for your entity.
 - LCPs and APs are responsible for disseminating the Agreements, obtaining signatures of the individual Care Providers, and sending back signed copies prior to Dec 31st
 - Signed copies must be sent to EQIP@umm.edu
 - Only new providers and those who changed entities, are required to sign a CPA for PY2. PY1 Providers who remain with the same entity do not need to re-sign, their participation is automatically renewed

Renewal of Care Partner Arrangements

- Renewal of the Care Partner Agreements (CPA) is automatic for subsequent measurement periods, including the next period.
- To ensure the listed providers are registered under the correct entity, we are asking you to confirm in the [EEP Care Partner Dashboard](#) that the providers registered under your EQIP entity are still participating.
- If a Care Partner is no longer enrolled with your EQIP entity or if a Care Partner wishes to terminate participation in the program, email EQIP@crisphealth.org prior to December 31st.

Care Partner Arrangement Status

- Log into EEP, navigate to your Care Partner Dashboard and reference the column “Care Partner Arrangement Status”
- “Signed” indicates the Care Partners that have an existing CPA on file
- Those with no CPA on record (blank) will need to sign to participate in PY2.
- Dashboard will be updated weekly to reflect newly executed CPAs

The screenshot displays the EQIP Entity Portal interface. At the top left is the CRISP logo, and at the top right is the text "EQIP Entity Portal". Below the logo is a "Program Links & Information" sidebar with links to "HSCRC EQIP Program Page", "EEP User Guide", "EQIP Help", and "CRISP Learning Collaborative Forum". A "Program period:" dropdown menu is set to "PY2 (CY2023)". The main content area is divided into two sections: "Enrollment" and "Program Management". The "Enrollment" section contains three buttons: "Start Enrollment Process" (grey), "Revise Enrollment Process" (blue), and "Add Administrative Proxy" (blue). The "Program Management" section contains two buttons: "Care Partner Dashboard" (blue, circled in red) and "Edit / View Episode & Intervention Selection" (grey).

EQIP Timeline

| | |
|-----------------------------------|---|
| Jul. 5th, 2022 | <ul style="list-style-type: none">• EEP opened for PY2 enrollment• Technical Policy and Portal User Guides available• Baseline Episode experience available in EEP |
| Sep. 2nd, 2022 | <ul style="list-style-type: none">• EEP closes for PY2 enrollment• Deadline to submit National Provider Identification (NPI) and other enrollment initiation information into EEP• Providers submitted to CMS for vetting |
| Oct/Nov 2022 | <ul style="list-style-type: none">• First PY1 quarterly data update available (<i>refer to Performance Data Release Schedule</i>)• CMS returns preliminary vetting results and status available in EEP• Contracting with CRP begins |
| Dec. 31st, 2022 | <ul style="list-style-type: none">• Care Partner Arrangement Contracting Deadline• Enrollment Status Finalized |
| Jan. 1, 2023 PY2 Start | <ul style="list-style-type: none">• Care Partner participation opportunity will be annual• Preliminary Target Prices and Baseline Data available in EEP |
| <i>Jan 23, 2023</i> | <ul style="list-style-type: none">• Second PY1 quarterly data update available (<i>refer to Performance Data Release Schedule</i>) |
| <i>July 1, 2023</i> | <ul style="list-style-type: none">• PY3 (2024) Enrollment Opens |
| Q3 2023 | <ul style="list-style-type: none">• PY1 Incentive Payments distributed |



PY1 Performance Data

1st Quarter Data Availability

- The EQIP portal has been updated to include data on episodes ending in the first quarter of 2022.
 - This allows participants to see how they are performing on the initial tranche of EQIP episodes.
 - We encourage participants not to over interpret the results that are based on relatively small sample sizes.
- Participants can view the performance data through the EQIP Portal.

Program Links & Information

- [HSCRC EQIP Program Page](#)
- [EEP User Guide](#)
- [EQIP Help](#)
- [CRISP Learning Collaborative Forum](#)

Program period: PY1 (CY2022)

EQIP Entity: UMOA - 9

Enrollment[Start Enrollment Process](#)[Revise Enrollment Process](#)[Add Administrative Proxy](#)**Program Management**[Care Partner Dashboard](#)[Edit / View Episode & Intervention Selection](#)**Program Data**[View Baseline Data](#)[View Performance/ Savings Summary](#)[Performance Dashboard \(requires PHI Access\)](#)

The Performance Dashboard shows details breakdowns of episodes and other data.

The Performance Summary shows a summary of EQIP Entity Performance.

Enrollment Status TrackerEnrollment: Care Partner Vetting: Care Partner Contracting: **Enrollment is now closed**

Enrollment for the next performance period will open July 1st next year.

Report Navigation

EQIP Summary

EQIP Performance Summary

EQIP Dashboard

Refresh

Revert

EQIP Perform

EQIP Entity

(All)

| EQIP Entity | Episode Name | Episodes Initiated | Total Payments | Preliminary Target Price | Preliminary Aggregate Target Price |
|---|----------------------------------|--------------------|----------------|--------------------------|------------------------------------|
| Anne Arundel Gastroenterology Associates - 10 | Colonoscopy | 741 | \$647,721 | \$947 | \$701,561 |
| | Upper GI Endoscopy | 420 | \$640,157 | \$1,434 | \$602,472 |
| Ascension Saint Agnes Hospital - 13 | Acute Myocardial Infarction | 13 | \$323,672 | \$30,653 | \$398,488 |
| | Coronary Angioplasty | 48 | \$1,637,810 | \$27,322 | \$1,311,440 |
| | Hip Replacement & Hip Revision | <11 | <11 | \$24,350 | <11 |
| | Hip/Pelvic Fracture | <11 | <11 | \$36,349 | <11 |
| | Knee Arthroscopy | <11 | <11 | \$7,809 | <11 |
| | Knee Replacement & Knee Revision | <11 | <11 | \$26,802 | <11 |
| | Lumbar Laminectomy | <11 | <11 | \$14,094 | <11 |
| | Lumbar Spine Fusion | <11 | <11 | \$38,485 | <11 |
| Associates in Cardiology - 15 | Pacemaker / Defibrillator | 22 | \$825,192 | \$32,191 | \$708,204 |
| | Pacemaker / Defibrillator | 14 | \$267,151 | \$32,219 | \$451,070 |
| Bethesda Chevy Chase Orthopaedic Associates, LLC - 20 | Hip Replacement & Hip Revision | 36 | \$892,262 | \$20,881 | \$751,714 |
| | Hip/Pelvic Fracture | 22 | \$683,197 | \$30,839 | \$678,459 |
| | Knee Arthroscopy | <11 | <11 | \$3,924 | <11 |
| | Knee Replacement & Knee Revision | 90 | \$2,131,366 | \$20,114 | \$1,810,268 |
| | Lumbar Laminectomy | <11 | <11 | \$12,030 | <11 |
| | Lumbar Spine Fusion | 13 | \$638,191 | \$53,390 | \$694,065 |
| Capital Digestive Care, LLC - 7 | Shoulder Replacement | 17 | \$685,137 | \$21,221 | \$360,758 |
| | Colonoscopy | 1,981 | \$1,999,710 | \$1,069 | \$2,118,430 |
| Capitol Cardiology Associates PA - 38 | Upper GI Endoscopy | 936 | \$1,251,838 | \$1,446 | \$1,353,552 |
| | Coronary Angioplasty | <11 | <11 | \$21,852 | <11 |
| Cardiology/CABG/JHH - 48 | Pacemaker / Defibrillator | 23 | \$841,264 | \$28,816 | \$662,778 |
| | CABG &/or Valve Procedures | 14 | \$919,778 | \$69,777 | \$976,873 |
| Cardiology/CABG/Suburban - 55 | CABG &/or Valve Procedures | <11 | <11 | \$74,395 | <11 |
| Cardiology/Mitral Valve Surgery - 50 | CABG &/or Valve Procedures | 12 | \$1,013,956 | \$72,879 | \$874,550 |
| Cardiology/Pacemaker/JHCP - 52 | Pacemaker / Defibrillator | 45 | \$1,144,122 | \$24,744 | \$1,113,474 |
| Cardiology/Pacemaker/JHRP - 42 | Pacemaker / Defibrillator | 17 | \$464,616 | \$25,419 | \$432,121 |
| Cardiology/Pacemaker/JHUSOM - 43 | Pacemaker / Defibrillator | 70 | \$2,781,955 | \$32,023 | \$2,241,599 |

The difference between the target price and the total payments indicates how much savings the entity has produced. It is **not** a measure of the entity's savings. The quality adjustment, shared savings percent, and minimum savings rate has not yet been applied.

The Target Price Summary breaks down the target prices for each individual episode individual episode category.

Report Navigation

- Performance Dashboard
 - Target Price Summary
 - Place of Service Report
 - Sequence of Care Report
 - Provider Comparison Tool
 - Post-Trigger Hospitalizations – Provide...
 - Post-Trigger Hospitalizations – Clinical ...
 - Potentially Avoidable Episode Complic...
 - Composite Quality Score
 - Reconciliation

EQIP Dashboard | DEX | Refresh | Revert

Target Price Summary

EQIP Entity: (All) | Attributed Care Partner: (All) | Episode Name: (All) | Base/Perf Period: Perf Y1 | Episode Time Period: (All)

| Trigger Place of Service | Episode Volume | Total Episode Cost | Avg. Total Episode Cost | Target Price |
|-------------------------------|----------------|--------------------|-------------------------|-----------------|
| Ambulatory Surgical Center | 170 | \$562,651 | \$3,310 | \$6,504 |
| Inpatient Hospital | 76 | \$2,402,657 | \$31,614 | \$26,842 |
| On Campus-Outpatient Hospital | 298 | \$5,870,441 | \$19,699 | \$14,419 |
| Grand Total | 544 | \$8,835,749 | \$16,242 | \$13,681 |

| Episode Name | Episode Volume | Total Episode Cost | Avg. Total Episode Cost | Target Price | Episodes above Target Price | % Episodes above Target Price |
|----------------------------------|----------------|--------------------|-------------------------|-----------------|-----------------------------|-------------------------------|
| Acute Myocardial Infarction | 16 | \$548,729 | \$34,296 | \$29,444 | 6 | 37.50% |
| Colonoscopy | 138 | \$220,555 | \$1,598 | \$1,210 | 63 | 45.65% |
| Coronary Angioplasty | 43 | \$1,303,734 | \$30,319 | \$28,305 | 19 | 44.19% |
| Hip Replacement & Hip Revision | 61 | \$1,706,588 | \$27,977 | \$23,933 | 40 | 65.57% |
| Hip/Pelvic Fracture | 11 | \$466,782 | \$42,435 | \$35,811 | 10 | 90.91% |
| Knee Arthroscopy | 21 | \$60,303 | \$2,872 | \$3,339 | 3 | 14.29% |
| Knee Replacement & Knee Revision | 155 | \$4,311,247 | \$27,814 | \$22,545 | 120 | 77.42% |
| Upper GI Endoscopy | 99 | \$217,812 | \$2,200 | \$1,706 | 53 | 53.54% |
| Grand Total | 544 | \$8,835,749 | \$16,242 | \$13,681 | 314 | 57.72% |

The Price Summary shows the percentage of episodes exceeding the target price.

Average Episode Cost Vs. Target Price

The Place of Service Report breaks down the average cost of each episode based on the Trigger place of service and the first setting post-trigger.

Report Navigation

- Performance Dashboard
- Target Price Summary
- Place of Service Report**
- Sequence of Care Report
- Provider Comparison Tool
- Post-Trigger Hospitalizations – Provide...
- Post-Trigger Hospitalizations – Clinical ...
- Potentially Avoidable Episode Complic...
- Composite Quality Score
- Reconciliation

[EQIP Dashboard](#)
[DEX](#)
[Refresh](#)
[Revert](#)

Trigger and First Post-Trigger Place of Service Summary

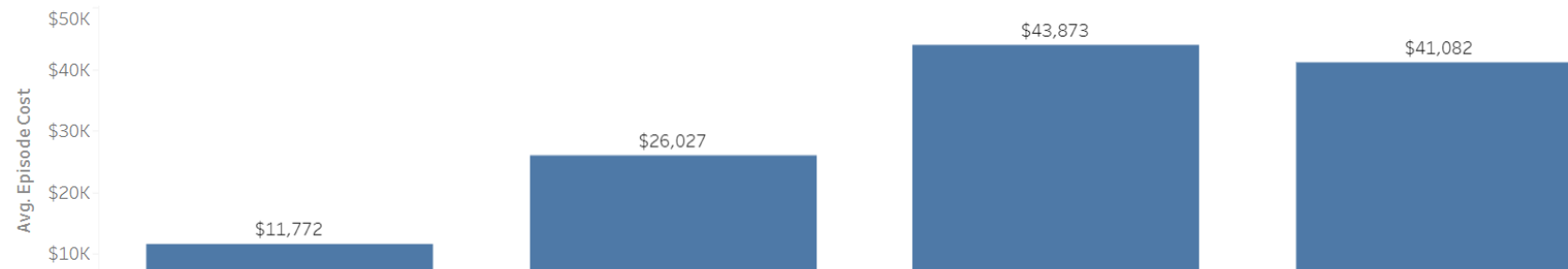
EQIP Entity: (All) |
 Attributed Care Partner: (All) |
 Episode Name: (All) |
 Base/Perf Period: Perf Y1 |
 Episode Time Period: (All)

| Trigger Place of Service | Episode Volume | % of Total Episodes | Total Episode Cost | Avg. Total Episode Cost | Avg. Pre-Trigger Amount | Avg. Trigger Amount | Avg. Post-Trigger Amount |
|----------------------------|----------------|---------------------|--------------------|-------------------------|-------------------------|---------------------|--------------------------|
| Ambulatory Surgical Cent.. | 170 | 31.25% | \$562,651 | \$3,310 | \$26 | \$2,679 | \$605 |
| Inpatient Hospital | 76 | 13.97% | \$2,402,657 | \$31,614 | \$1,043 | \$22,597 | \$7,974 |
| On Campus-Outpatient H.. | 298 | 54.78% | \$5,870,441 | \$19,699 | \$998 | \$14,336 | \$4,365 |

First Post-Trigger Setting

| First Post-Trigger Setting | Episode Volume | % of Total Episodes | Total Episode Cost | Avg. Total Episode Cost | Avg. Pre-Trigger Amount | Avg. Trigger Amount | Avg. Post-Trigger Amount |
|----------------------------|----------------|---------------------|--------------------|-------------------------|-------------------------|---------------------|--------------------------|
| Community | 406 | 74.63% | \$4,779,517 | \$11,772 | \$2,732 | \$9,465 | \$3,496 |
| Home Health | 109 | 20.04% | \$2,836,939 | \$26,027 | \$4,365 | \$17,983 | \$6,522 |
| Inpatient Hospital | 10 | 1.84% | \$438,733 | \$43,873 | \$114 | \$18,317 | \$25,534 |
| Skilled Nursing Facility | 19 | 3.49% | \$780,559 | \$41,082 | \$511 | \$24,153 | \$16,822 |

Avg. Episode Cost by First Post-Trigger Setting



Report Navigation

- Performance Dashboard
 - Target Price Summary
 - Place of Service Report
 - Sequence of Care Report**
 - Provider Comparison Tool
 - Post-Trigger Hospitalizations – Provide...
 - Post-Trigger Hospitalizations – Clinical ...
 - Potentially Avoidable Episode Complic...
 - Composite Quality Score
 - Reconciliation

[EQIP Dashboard](#)
[DEX](#)
[Refresh](#)
[Revert](#)
[Print](#)
[Excel](#)
[User Guide](#)

Episode Care Sequence from Trigger Place of Service

EQIP Entity: (All) |
 Attributed Care Partner: (All) |
 Episode Name: (All) |
 Base/Perf Period: Perf Y1 |
 Episode Time Period: (All)

| Trigger Place of Service | Episode Sequence | Episode Volume | Total Episode Cost | Avg. Total Episode Cost | Avg. Pre-Trigger Amount | Avg. Trigger Amount | Avg. Post-Trigger A.. |
|-------------------------------|------------------|----------------|--------------------|-------------------------|-------------------------|---------------------|-----------------------|
| Ambulatory Surgical Center | C | 158 | \$432,771 | \$2,739 | \$22 | \$2,367 | \$351 |
| | C-H-C | 7 | \$80,030 | \$11,433 | \$21 | \$8,658 | \$2,754 |
| | C-E-C | 2 | \$13,770 | \$6,885 | | \$4,560 | \$2,324 |
| | E-C | 1 | \$2,948 | \$2,948 | \$915 | \$1,553 | \$481 |
| | C-I-H-C | 1 | \$31,997 | \$31,997 | | \$9,175 | \$22,822 |
| | C-E | 1 | \$1,135 | \$1,135 | | \$985 | \$150 |
| Inpatient Hospital | A-C | 19 | \$519,024 | \$27,317 | \$1,859 | \$24,089 | \$1,368 |
| | A-H-C | 8 | \$215,548 | \$26,944 | | \$22,824 | \$4,120 |
| | A-S | 7 | \$287,493 | \$41,070 | | \$23,172 | \$17,898 |
| | A-S-C | 3 | \$128,557 | \$42,852 | | \$27,387 | \$15,465 |
| | A-C-E-C | 3 | \$162,931 | \$54,310 | | \$42,487 | \$11,823 |
| | A | 3 | \$82,525 | \$27,508 | \$11,563 | \$15,938 | \$7 |
| | A-C-A | 2 | \$60,412 | \$30,206 | | \$15,794 | \$14,413 |
| | H-A-H-H-E-C | 1 | \$22,789 | \$22,789 | \$2,409 | \$18,882 | \$1,498 |
| | H-A-H-H-C | 1 | \$42,539 | \$42,539 | \$2,682 | \$37,362 | \$2,494 |
| | E-C-H | 1 | \$3,443 | \$3,443 | \$2,200 | \$896 | \$348 |
| | C-S-C | 1 | \$7,218 | \$7,218 | \$862 | \$2,619 | \$3,737 |
| | C-A-S-H-C | 1 | \$39,150 | \$39,150 | \$3 | \$20,013 | \$19,134 |
| | C-A-S-C | 1 | \$30,973 | \$30,973 | \$10 | \$20,389 | \$10,575 |
| | C-A-H-C | 2 | \$52,296 | \$26,148 | \$85 | \$10,842 | \$15,221 |
| | C-A-E-C | 1 | \$46,790 | \$46,790 | \$114 | \$31,501 | \$15,175 |
| | C-A-C-E-C | 1 | \$26,207 | \$26,207 | \$515 | \$23,157 | \$2,535 |
| | C-A-C | 5 | \$138,770 | \$27,754 | \$42 | \$17,580 | \$10,133 |
| | C | 1 | \$2,154 | \$2,154 | \$116 | \$300 | \$1,737 |
| | A-S-H | 1 | \$36,177 | \$36,177 | | \$18,363 | \$17,814 |
| | A-S-E-E | 1 | \$44,163 | \$44,163 | | \$25,029 | \$19,134 |
| On Campus-Outpatient Hospital | C | 226 | \$3,509,061 | \$15,527 | \$319 | \$12,808 | \$2,400 |
| | C-H-C | 27 | \$1,217,722 | \$45,101 | \$29 | \$22,789 | \$10,894 |

The Care Partner and Episode Level Summary allows the EQIP entity to compare individual care partners to the average of the entire EQIP entity.

- Report Navigation**
- Performance Dashboard
 - Target Price Summary
 - Place of Service Report
 - Sequence of Care Report
 - Provider Comparison Tool**
 - Post-Trigger Hospitalizations – Provide...
 - Post-Trigger Hospitalizations – Clinical ...
 - Potentially Avoidable Episode Complic...
 - Composite Quality Score
 - Reconciliation

[EQIP Dashboard](#)
[DEX](#)
[Refresh](#)
[Revert](#)

Care Partner and Episode Level Cost Summary

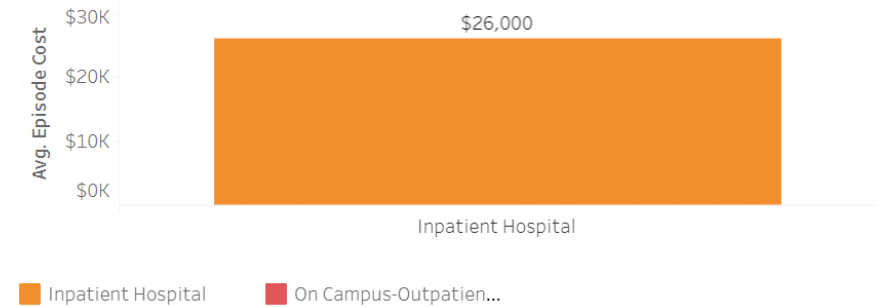
EQIP Entity:
 Episode Name:
 Base/Perf Period:
 Episode Time Period:

Select a care partner and / or episode above to compare their performance in the tables on the left to all your attributed care partners in the tables on the right.

Attributed Care Partner:

Trigger Place of Service : Physician 1 - 4495657221

| Trigger Place of Service | Episode Volu.. | % of Total Epi.. | Total Episode .. | Avg. Total Epi.. |
|--------------------------|----------------|------------------|------------------|------------------|
| Inpatient Hospital | 1 | 100.00% | \$26,000 | \$26,000 |

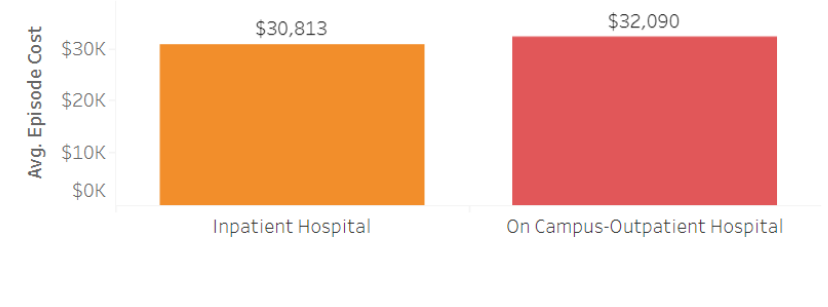


First Post-Trigger Setting : Physician 1 - 4495657221

| First Post-Trigger Setting | Episode Volume | % of Total Episodes | Total Episode Cost | Avg. Total Episode Cost |
|----------------------------|----------------|---------------------|--------------------|-------------------------|
|----------------------------|----------------|---------------------|--------------------|-------------------------|

Trigger Place of Service : All Attributed Care Partners

| Trigger Place of Service | Episode Volu.. | % of Total E.. | Total Episod.. | Avg. Total E.. |
|----------------------------|----------------|----------------|----------------|----------------|
| Inpatient Hospital | 32 | 54.24% | \$986,027 | \$30,813 |
| On Campus-Outpatient Hos.. | 27 | 45.76% | \$866,436 | \$32,090 |



First Post-Trigger Setting: All Attributed Care Partners

| First Post-Trigger Setting | Episode Volume | % of Total Episodes | Total Episode Cost | Avg. Total Episode Cost |
|----------------------------|----------------|---------------------|--------------------|-------------------------|
|----------------------------|----------------|---------------------|--------------------|-------------------------|

The Post-Trigger Hospitalization Summary shows the number of episodes that have a hospitalization post-trigger.

Report Navigation

- Performance Dashboard
 - Target Price Summary
 - Place of Service Report
 - Sequence of Care Report
 - Provider Comparison Tool
 - Post-Trigger Hospitalizations – Provide...**
 - Post-Trigger Hospitalizations – Clinical ...
 - Potentially Avoidable Episode Complic...
 - Composite Quality Score
 - Reconciliation

EQIP Dashboard | DEX | Refresh | Revert

Post-Trigger Hospitalization Summary

Episodes are broken down by the first post-acute setting of care.

Attributed Care Partner: (All) |
 Episode Name: (All) |
 Base/Perf Period: Perf Y1 |
 Episode Time Period: (All)

| First Post-Trigger Setting | Episode Volume | Episodes with Post-Trigger Hospitalization | Post-Trigger Hospitalization Rate | Post-Trigger Hospitalization Count* | Post-Trigger Hospitalization Amount | Avg. Post-Trigger Hospitalization Amount | Total Episode Cost | Avg. Total Episode Cost | Avg. Post-Trigger Hospitalization Length of Stay |
|----------------------------|----------------|--|-----------------------------------|-------------------------------------|-------------------------------------|--|--------------------|-------------------------|--|
| Community | 406 | 9 | 2.22% | 9 | \$117,247 | \$13,027 | \$4,779,517 | \$11,772 | 6.0 |
| Home Health | 109 | 2 | 1.83% | 2 | \$28,117 | \$14,058 | \$2,836,939 | \$26,027 | 2.5 |
| Inpatient Hospital | 10 | 10 | 100.00% | 10 | \$205,075 | \$20,508 | \$438,733 | \$43,873 | 8.7 |
| Skilled Nursing Facility | 19 | 2 | 10.53% | 3 | \$25,660 | \$12,830 | \$780,559 | \$41,082 | 5.0 |
| Grand Total | 544 | 23 | 4.23% | 24 | \$376,099 | \$16,352 | \$8,835,749 | \$16,242 | 6.8 |

Post-Trigger Hospitalization by Attributed Care Partner

| Attributed Care Partner Name | Episode Volume | Episodes with Post-Trigger Hospitalization | Post-Trigger Hospitalization Rate | Post-Trigger Hospitalization Count* | Post-Trigger Hospitalization Amount | Avg. Post-Trigger Hospitalization Amount | Total Episode Cost | Avg. Total Episode Cost | Avg. Post-Trigger Hospitalization Length of Stay |
|------------------------------|----------------|--|-----------------------------------|-------------------------------------|-------------------------------------|--|--------------------|-------------------------|--|
| Physician 1 | 1 | 0 | 0.00% | | | | \$26,000 | \$26,000 | |
| Physician 2 | 5 | 0 | 0.00% | | | | \$95,389 | \$19,078 | |
| Physician 3 | 2 | 0 | 0.00% | | | | \$44,982 | \$22,491 | |
| Physician 4 | 1 | 0 | 0.00% | | | | \$38,800 | \$38,800 | |
| Physician 5 | 2 | 0 | 0.00% | | | | \$49,813 | \$24,906 | |
| Physician 6 | 2 | 0 | 0.00% | | | | \$5,725 | \$2,863 | |
| Physician 7 | 7 | 0 | 0.00% | | | | \$5,708 | \$815 | |
| Physician 8 | 11 | 0 | 0.00% | | | | \$328,751 | \$29,886 | |
| Physician 9 | 1 | 0 | 0.00% | | | | \$7,490 | \$7,490 | |
| Physician 10 | 1 | 0 | 0.00% | | | | \$23,608 | \$23,608 | |
| Physician 11 | 2 | 0 | 0.00% | | | | \$41,142 | \$20,571 | |
| Physician 12 | 1 | 0 | 0.00% | | | | \$8,861 | \$8,861 | |
| Physician 13 | 5 | 1 | 20.00% | 1 | \$25,173 | \$25,173 | \$185,111 | \$37,022 | 17.0 |
| Physician 14 | 2 | 0 | 0.00% | | | | \$18,225 | \$9,113 | |

The Post-Trigger Hospitalization Summary shows the number of episodes that have a hospitalization post-trigger.

Report Navigation

- Performance Dashboard
 - Target Price Summary
 - Place of Service Report
 - Sequence of Care Report
 - Provider Comparison Tool
 - Post-Trigger Hospitalizations – Provide...
 - Post-Trigger Hospitalizations – Clinical...**
 - Potentially Avoidable Episode Complic...
 - Composite Quality Score
 - Reconciliation

EQIP Dashboard | DEX | Refresh | Revert

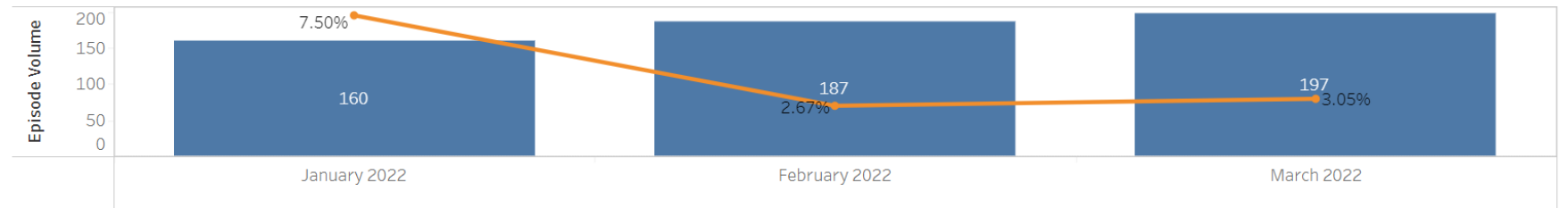
Post-Trigger Hospitalization Summary

EQIP Entity: (All) | Attributed Care Partner: (All) | Episode Name: (All) | Base/Perf Period: Perf Y1 | Episode Time Period: (All)

| Episode Name | Episode Volume | Episodes with Post-Trigger Hospitalization | Post-Trigger Hospitalization Rate | Post-Trigger Hospitalization Count* | Post-Trigger Hospitalization Amount | Avg. Post-Trigger Hospitalization Amount | Total Episode Cost | Avg. Total Episode Cost | Avg. Post-Trigger Hospitalization Length of Stay |
|----------------------------------|----------------|--|-----------------------------------|-------------------------------------|-------------------------------------|--|--------------------|-------------------------|--|
| Acute Myocardial Infarction | 16 | 5 | 31.25% | 6 | \$84,610 | \$16,922 | \$548,729 | \$34,296 | 6.6 |
| Colonoscopy | 138 | 0 | 0.00% | | | | \$220,555 | \$1,598 | |
| Coronary Angioplasty | 43 | 3 | 6.98% | 3 | \$62,926 | \$20,975 | \$1,303,734 | \$30,319 | 9.0 |
| Hip Replacement & Hip Revision | 61 | 4 | 6.56% | 4 | \$62,246 | \$15,562 | \$1,706,588 | \$27,977 | 8.3 |
| Hip/Pelvic Fracture | 11 | 0 | 0.00% | | | | \$466,782 | \$42,435 | |
| Knee Arthroscopy | 21 | 0 | 0.00% | | | | \$60,303 | \$2,872 | |
| Knee Replacement & Knee Revisi.. | 155 | 11 | 7.10% | 11 | \$166,317 | \$15,120 | \$4,311,247 | \$27,814 | 5.7 |
| Upper GI Endoscopy | 99 | 0 | 0.00% | | | | \$217,812 | \$2,200 | |
| Grand Total | 544 | 23 | 4.23% | 24 | \$376,099 | \$16,352 | \$8,835,749 | \$16,242 | 6.8 |

Episodes are broken down by episode type.

Episode Volume and Rate of Post-Trigger Hospitalization by Month



This page shows the number of Potentially Avoidable Episode Complications.

- Report Navigation**
- Performance Dashboard
 - Target Price Summary
 - Place of Service Report
 - Sequence of Care Report
 - Provider Comparison Tool
 - Post-Trigger Hospitalizations – Provide...
 - Post-Trigger Hospitalizations – Clinical ...
 - Potentially Avoidable Episode Complic...**
 - Composite Quality Score
 - Reconciliation

[EQIP Dashboard](#)
[DEX](#)
[Refresh](#)
[Revert](#)

Potentially Avoidable Episode Complication Summary

| EQIP Entity | Attributed Care Partner | | Episode Name | | Base/Perf Period | | Episode Time Period | | | | |
|---------------------------------|-------------------------|--------------------|-------------------------|---------------------|-------------------------|-------------------------|------------------------------|-------------------------------------|--|---|--|
| (All) | (All) | | (All) | | Perf Y1 | | (All) | | | | |
| Episode Name | Episode Volume | Total Episode Cost | Avg. Total Episode Cost | Total PAEC Episodes | % of Total PAEC Episode | Total Episode PAEC Cost | Avg. Total Episode PAEC Cost | Total Typical Complication Episodes | % of Total Typical Complication Episodes | Total Episode Typical Complication Cost | Avg. Total Episode Typical Complication Cost |
| Acute Myocardial Infarction | 16 | \$548,729 | \$34,296 | 12 | 75.00% | \$91,766 | \$5,735 | 12 | 75.00% | \$368,771 | \$23,048 |
| Colonoscopy | 138 | \$220,555 | \$1,598 | 5 | 3.62% | \$367 | \$3 | 9 | 6.52% | \$12,975 | \$94 |
| Coronary Angioplasty | 43 | \$1,303,734 | \$30,319 | 28 | 65.12% | \$61,891 | \$1,439 | 25 | 58.14% | \$708,012 | \$16,465 |
| Hip Replacement & Hip Revision | 61 | \$1,706,588 | \$27,977 | 20 | 32.79% | \$46,041 | \$755 | 11 | 18.03% | \$258,134 | \$4,232 |
| Hip/Pelvic Fracture | 11 | \$466,782 | \$42,435 | 9 | 81.82% | \$7,500 | \$682 | 10 | 90.91% | \$329,426 | \$29,948 |
| Knee Arthroscopy | 21 | \$60,303 | \$2,872 | 3 | 14.29% | \$190 | \$9 | 0 | 0.00% | \$0 | \$0 |
| Knee Replacement & Knee Revis.. | 155 | \$4,311,247 | \$27,814 | 41 | 26.45% | \$110,127 | \$710 | 27 | 17.42% | \$471,398 | \$3,041 |
| Upper GI Endoscopy | 99 | \$217,812 | \$2,200 | 8 | 8.08% | \$1,053 | \$11 | 3 | 3.03% | \$1,036 | \$10 |
| Grand Total | 544 | \$8,835,749 | \$16,242 | 126 | 23.16% | \$318,936 | \$586 | 97 | 17.83% | \$2,149,752 | \$3,952 |

Potentially Avoidable Complication Details

| Complication Type | Complication Group | PAC | | | TypicalWithComplication | | |
|---------------------------------------|---|----------------|------------------|-----------|-------------------------|------------------|-----------|
| | | Episode Volume | PAEC Claim Count | PAEC Cost | Episode Volume | PAEC Claim Count | PAEC Cost |
| 1 - PACs related to the index stay(s) | Atrial Flutter / Fibrillation | 10 | 26 | \$6,237 | 22 | 44 | \$341,091 |
| | Compl of joint prosthesis orthopedic proced | 16 | 53 | \$31,774 | 11 | 25 | \$312,187 |
| | Hypotension / Syncope | 9 | 23 | \$13,105 | 9 | 15 | \$229,390 |
| | Fluid Electrolyte Acid Base Problems | 10 | 32 | \$22,858 | 7 | 12 | \$40,669 |

This sheet shows each EQIP entity's performance on meeting each of the quality measures.

Report Navigation

- Performance Dashboard
- ▶ Target Price Summary
- ▶ Place of Service Report
- ▶ Sequence of Care Report
- ▶ Provider Comparison Tool
- ▶ Post-Trigger Hospitalizations – Provide...
- ▶ Post-Trigger Hospitalizations – Clinical ...
- ▶ Potentially Avoidable Episode Complic...
- ▶ **Composite Quality Score**
- ▶ Reconciliation

EQIP Dashboard DEX Refresh Revert

Quality Score Summary

EQIP Entity: (All) | Attributed Care Partner: (All) | Base/Perf Period: Perf Y1 | Episode Name: (All)

| EQIP Entity | EQIP Probation | Advance Care Performance Rate | Advance Care Score | Current Medications Perfo.. | Current Medications Score | BMI Performance Rate | BMI Performance Score | Composite Quality Score |
|-------------------|----------------|-------------------------------|--------------------|-----------------------------|---------------------------|----------------------|-----------------------|-------------------------|
| EQIP Entity 1 - 1 | No | 39.71% | 10 | 40.28% | 9 | 14.99% | 7 | 86.67 |
| EQIP Entity 2 - 2 | No | 42.71% | 10 | 32.32% | 6 | 13.47% | 6 | 73.33 |
| EQIP Entity 3 - 3 | No | 47.26% | 10 | 38.31% | 8 | 12.94% | 5 | 76.67 |

| EQIP Entity | EQIP Probation | Advance Care Numerator | Advance Care Denominator | Current Medications Numerator | Current Medications Denominator | BMI Numerator | BMI Denominator |
|-------------------|----------------|------------------------|--------------------------|-------------------------------|---------------------------------|---------------|-----------------|
| EQIP Entity 1 - 1 | No | 486 | 1,224 | 493 | 1,224 | 183 | 1,221 |
| EQIP Entity 2 - 2 | No | 337 | 789 | 255 | 789 | 106 | 787 |
| EQIP Entity 3 - 3 | No | 95 | 201 | 77 | 201 | 26 | 201 |

Care Partner Level Quality Score Summary

Advance Care Advance Care Advance Care Advance Care Current Current Current Current BMI BMI BMI BMI

This sheet shows also shows how each Care Partner is performing on each of the quality measures.

Report Navigation

- Performance Dashboard
- ▶ Target Price Summary
- ▶ Place of Service Report
- ▶ Sequence of Care Report
- ▶ Provider Comparison Tool
- ▶ Post-Trigger Hospitalizations – Provide...
- ▶ Post-Trigger Hospitalizations – Clinical ...
- ▶ Potentially Avoidable Episode Complic...
- ▶ Composite Quality Score**
- ▶ Reconciliation

[EQIP Dashboard](#)
[DEX](#)
[Refresh](#)
[Revert](#)

Care Partner Level Quality Score Summary

| Attributed Care Partner | Advance Care Numerator | Advance Care Denominator | Advance Care Performance Rate | Advance Care Score | Current Medications Numerator | Current Medications Denominator | Current Medications Performance Rate | Current Medications Score | BMI Numerator | BMI Denominator | BMI Performance Rate | BMI Performance Score |
|---------------------------|------------------------|--------------------------|-------------------------------|--------------------|-------------------------------|---------------------------------|--------------------------------------|---------------------------|---------------|-----------------|----------------------|-----------------------|
| Physician 1 - 4495657221 | 0 | 1 | 0.00% | 0 | 0 | 1 | 0.00% | 0 | 0 | 1 | 0.00% | 0 |
| Physician 2 - 4405307286 | 6 | 21 | 28.57% | 9 | 6 | 21 | 28.57% | 4 | 2 | 21 | 9.52% | 3 |
| Physician 3 - 4425715198 | 5 | 9 | 55.56% | 10 | 6 | 9 | 66.67% | 10 | 2 | 9 | 22.22% | 10 |
| Physician 4 - 4425867584 | 4 | 4 | 100.00% | 10 | 4 | 4 | 100.00% | 10 | 1 | 4 | 25.00% | 10 |
| Physician 5 - 4435645385 | 0 | 12 | 0.00% | 0 | 0 | 12 | 0.00% | 0 | 0 | 12 | 0.00% | 0 |
| Physician 6 - 4455869716 | 0 | 10 | 0.00% | 0 | 4 | 10 | 40.00% | 9 | 1 | 10 | 10.00% | 3 |
| Physician 7 - 4455017827 | 23 | 24 | 95.83% | 10 | 23 | 24 | 95.83% | 10 | 1 | 24 | 4.17% | 0 |
| Physician 8 - 4475027186 | 67 | 69 | 97.10% | 10 | 14 | 69 | 20.29% | 0 | 3 | 69 | 4.35% | 0 |
| Physician 9 - 4475068297 | 2 | 4 | 50.00% | 10 | 0 | 4 | 0.00% | 0 | 0 | 4 | 0.00% | 0 |
| Physician 10 - 4485163328 | 11 | 20 | 55.00% | 10 | 12 | 20 | 60.00% | 10 | 11 | 20 | 55.00% | 10 |
| Physician 11 - 4485178912 | 4 | 17 | 23.53% | 8 | 4 | 17 | 23.53% | 1 | 2 | 17 | 11.76% | 5 |
| Physician 12 - 4596204608 | 3 | 11 | 27.27% | 9 | 5 | 11 | 45.45% | 10 | 1 | 11 | 9.09% | 2 |
| Physician 13 - 4596222378 | 1 | 15 | 6.67% | 0 | 1 | 15 | 6.67% | 0 | 0 | 15 | 0.00% | 0 |
| Physician 14 - 4506484175 | 2 | 10 | 20.00% | 6 | 7 | 10 | 70.00% | 10 | 7 | 10 | 70.00% | 10 |
| Physician 15 - 4506565553 | 9 | 11 | 81.82% | 10 | 7 | 11 | 63.64% | 10 | 1 | 11 | 9.09% | 2 |
| Physician 16 - 4526597940 | 5 | 10 | 50.00% | 10 | 8 | 10 | 80.00% | 10 | 7 | 10 | 70.00% | 10 |
| Physician 17 - 4536614131 | 18 | 20 | 90.00% | 10 | 20 | 20 | 100.00% | 10 | 19 | 20 | 95.00% | 10 |

This sheet shows the calculation of the Shared Savings Payments for each of the EQIP entities.

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- Performance Dashboard
 - Target Price Summary
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 - Provider Comparison Tool
 - Post-Trigger Hospitalizations – Provide...
 - Post-Trigger Hospitalizations – Clinical ...
 - Potentially Avoidable Episode Complic...
 - Composite Quality Score
 - Reconciliation**

[EQIP Dashboard](#)
[DEX](#)
[Refresh](#)
[Revert](#)

PY1 (CY2022) Reconciliation Summary

Jan 2022 - Mar 2022

All numbers displayed in this report are considered preliminary until the final reconciliation after a performance period ends and may change substantively as additional episodes complete and data becomes available.

Click on an EQIP Entity in the table below to display a detailed episode category breakdown.

| EQIP Entity | Total Participating Episode Categories | Total Volume | Aggregate Target Price | Aggregate Episode Payments | Minimum Savings Threshold | Total Savings (Dissavings) Generated | Shared Savings Tercile* | Participant Savings Share |
|-------------------|--|--------------|------------------------|----------------------------|---------------------------|--------------------------------------|-------------------------|---------------------------|
| EQIP Entity 1 - 1 | 3 | 289 | \$1,450,823 | \$1,914,675 | \$43,525 | (\$463,851) | 2 | \$0 |
| EQIP Entity 2 - 2 | 4 | 196 | \$4,303,521 | \$5,068,611 | \$129,106 | (\$765,091) | 2 | \$0 |
| EQIP Entity 3 - 3 | 2 | 59 | \$1,688,191 | \$1,852,463 | \$50,646 | (\$164,272) | 2 | \$0 |

Reminder: Participants earn a share of the difference between the target price and the episode costs based on their relative cost in the baseline period.

Participants only earn savings if they exceed the minimum savings threshold.

** Tercile 1 (1st – 33rd percentiles): 50% savings paid to EQIP Entity / 50% savings paid to Medicare
 Tercile 2 (34th – 66th percentiles): 65% savings paid to EQIP Entity / 35% savings paid to Medicare
 Tercile 3 (67th – 100th percentiles): 80% savings paid to EQIP Entity / 20% savings paid to Medicare*

Quality Adjusted Savings

This sheet also shows the application of quality adjustment.

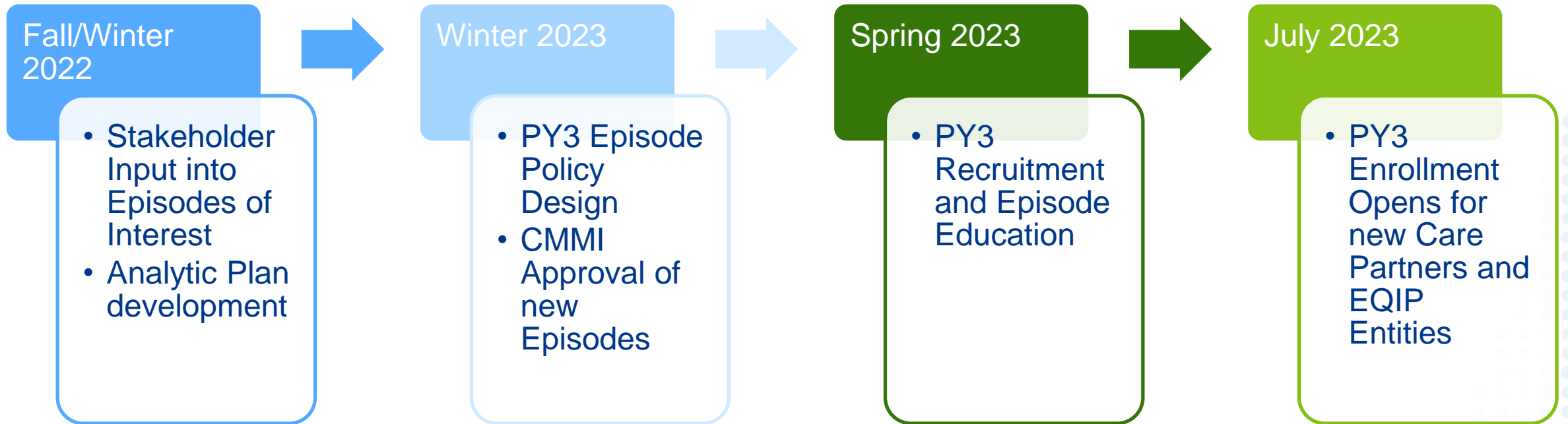
| EQIP Entity | Quality Score(%) | Quality Withholding | Earned Quality Adjustment | Quality Adjusted Shared Savings | Prior Year Dissavings | Aggregate Incentive Payment Cap | Final Shared Savings Total |
|-------------------|------------------|---------------------|---------------------------|---------------------------------|-----------------------|---------------------------------|----------------------------|
| EQIP Entity 1 - 1 | 86.67 | \$0 | \$0 | \$0 | \$0 | \$13,102,780 | \$0 |
| EQIP Entity 2 - 2 | 73.33 | \$0 | \$0 | \$0 | \$0 | \$15,462,127 | \$0 |
| EQIP Entity 3 - 3 | 76.67 | \$0 | \$0 | \$0 | \$0 | \$3,926,742 | \$0 |

Additional Data Availability to Come

- More data is available through DEX. This includes:
 - Summary data on each episode.
 - Claims level detail on each episode.
- HSCRC will be holding a webinar to walkthrough the EQIP Portal Data and the DEX files in December.
- Additional data will be added to the EQIP Portal on a quarterly basis.

PY3 Episode Development

Performance Year Three Episode Development Process



Additional Episode Development

- We welcome ideas from other stakeholders. In order to develop an episode, stakeholders will need to identify:
 - A list of triggering procedures or diagnosis
 - Included and excluded costs for the episode
- The HSCRC is committed to working with all interested stakeholders, but we have limited bandwidth.
 - We anticipate adding 1-2 new episodes per year
 - We will prioritize based on the number of interested physicians

Potential New Episodes

We have been discussing adding the following episodes:

- Additional Prometheus episodes
 - Acute CHF / Pulmonary Edema
 - Chronic Obstructive Pulmonary Disease
 - Deep Vein Thrombosis / Pulmonary Embolism
 - Pneumonia
 - Sepsis
 - Oncology Episodes
- Chronic Kidney Disease / ESRD
- Behavioral Health Episodes

We would be happy to discuss additional episodes. But we need to begin discussions prior to the end of the year.

Thank you!