# **Breast Biopsy Episode Executive Summary**

## **Episode Design**

- **Trigger:** punch biopsy, core needle biopsy, or open biopsy procedure
- **Quarterback type:** professional (provider or group that performs the procedure)
- Care included: all breast biopsy-related care including anesthesia, imaging and testing, evaluation and management, and medications

### **Sources of Value**

- Appropriate recall rates after screening mammograms
- Timeliness of diagnostic imaging following abnormal screening mammogram
- Appropriate choice of imaging modalities
- Appropriate selection of patients for biopsy
- Timeliness of biopsy after abnormal diagnostic imaging
- Appropriate selection of biopsy type
- Appropriate use of pathology
- Appropriate choice of anesthesia
- Timeliness of communication of results and appropriate referral
- Reduction in complications

# **Episode Duration**

Pre-Trigger

Trigger

Post-Trigger

90 days prior to the trigger window

Duration of the episodetriggering encounter or stay

30 days, beginning the day
after the trigger window

## **Quality Metrics**

#### **Tied to Gain-Sharing**

- Appropriate diagnostic workup rate (higher rate is better)
- Core needle biopsy rate (higher rate is better)

#### **Informational Only**

- Surgical complication rate
- Subsequent biopsy/excision rate
- Appropriate genetic testing rate
- Difference in average morphine equivalent dose (MED) per day

# **Making Fair Comparisons**

#### **Exclusions**

- Business exclusions: inconsistent enrollment, third-party liability, dual eligibility, FQHC/RHC, no PAP ID, incomplete episodes, overlapping episodes
- Clinical exclusions: different care pathway (e.g., COVID-19, peritonitis, shock, mastectomy, sentinel lymph node biopsy, axillary lymphadenectomy, radiation therapy, antineoplastic therapy administration, oral antineoplastics except hormonal therapy, end-stage renal disease, multiple sclerosis, organ transplant, Parkinson's disease, tuberculosis, DCS custody)
- Patient exclusions: age (less than 13 or greater than 64 years old), death, left against medical advice
- High-cost outlier: episodes with risk-adjusted spend greater than three standard deviations above the average risk-adjusted episode spend for valid episodes are excluded.

**Risk adjustment** is used to ensure appropriate comparisons between patients.

**To learn more about the episode's design**, please reference the Detailed Business Requirements (DBR) and Configuration File on our website at <a href="https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care/searchable-episodes-table.html">https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care/searchable-episodes-table.html</a>.

