

State of Tennessee Health Care Innovation Initiative



Illustrative Provider Report

[Report Date]

[Report Period: Start/end dates of period]

Payer Name (TennCare/Commercial)

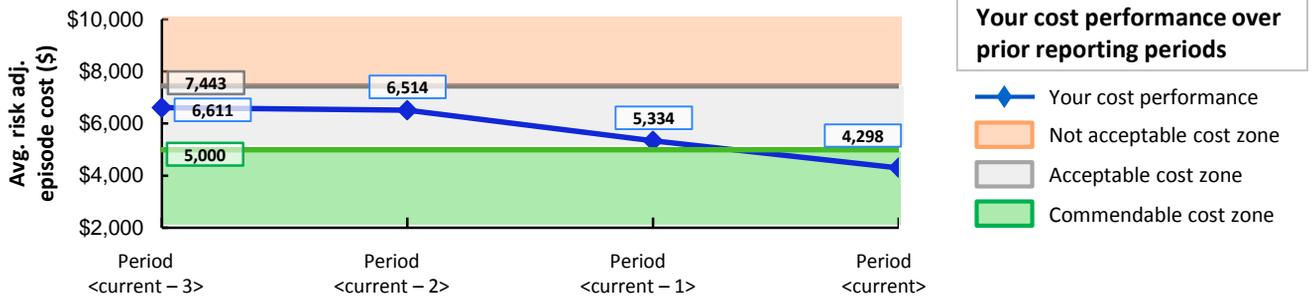
Provider Name

Provider Code

[1. Perinatal] Overall Performance Summary

Payer Name (TennCare/Commercial)	Provider Name	Provider Code
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Episode of care	Quality metrics	Average risk adj. episode cost (\$)		Gain/risk share eligibility	Share Value (\$)
1. Perinatal [Start/end dates of period]	Met	4,298	Commendable	Gain Sharing	\$81,783



Description of gain / risk sharing	You	Description
1. Total cost across episodes	\$1,221,749	Total of all associated claims submitted and paid during this cycle
2. Total # of included episodes	233	Net of episodes excluded for clinical or operational considerations
3. Avg. episode cost (non adj.)	\$5,244	Raw claims average ; Equals line (1) divided by line (2)
4. Risk adjustment factor* (avg.)	1.22	Average adjustment to raw claims to account for clinical variability
5. Avg. episode cost (risk adj.)	\$4,298 Commendable	Adjusted cost per episode; Equals line (3) divided by line (4)
6. Versus: commendable cost	\$5,000	Commendable threshold
7. Total upside generated**	\$163,566	Total difference in adjusted cost vs. commendable cost; Equals difference between line (5) and line (6), then multiplied by total included episodes i.e. line (2)
8. Risk sharing factor	50%	Portion of total upside to be shared with you
9. Total gain / risk share	\$81,783	Net proceeds to you above claims already paid

*Risk adjustment factor calculated for select provider's patient base and rounded to the nearest hundredth

** If the average episode cost (risk-adjusted) is below the gain sharing limit, then the gain sharing limit is substituted for the amount from line (5).

[1. Perinatal] A. Episode Summary

1 Overview

Total episodes: **262**

Total episodes included: **233**

Total episodes excluded: **29**

2 Cost of care (avg. adj. episode cost) comparison



YOUR GAIN/ RISK SHARE

You are eligible for gain sharing

+ \$81,783

Commendable cost (\$)	—	Your avg. cost (\$)	X	Number of episodes	X	Share factor
5,000		4,298		233		50%

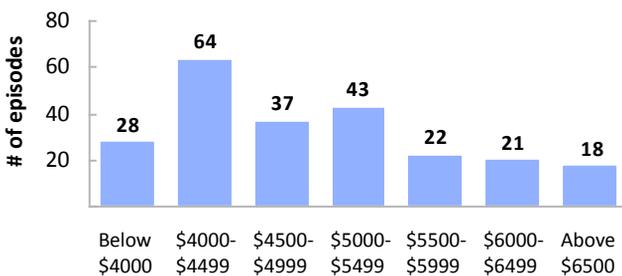
3 Episode cost summary

✓ Your average episode cost is commendable

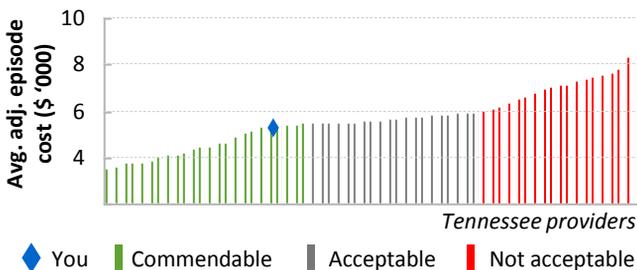
Parameters	You	Provider base average
1. Total cost across episodes	\$1,221,749	\$1,445,654
2. Total # of included episodes	233	235
3. Avg. episode cost (non adj.)	\$5,244	\$6,152
4. Risk adjustment factor* (avg.)	1.22	1.13
5. Avg. episode cost (risk adj.)	\$4,298 Commendable	\$5,444 Acceptable

* Risk adjustment factor calculated for select provider's patient base

Your episode cost distribution (risk adj.)



Distribution of provider average episode cost (risk adj.)



4 Episode quality and utilization summary

✓ You achieved selected quality metrics

Quality metrics linked to gain sharing	You	Gain share standard	Met standard
1. HIV screening	97%	85%	✓
2. Group B Strep screening	90%	85%	✓
3. C-section rate	20%	41%	✓

Quality metrics not linked to gain sharing	You	Provider base average
1. Gestational DM screening	56%	50%
2. Bacteriuria screening	90%	62%
3. Hepatitis B screening	58%	55%
4. Tdap vaccination rate	90%	62%

Top 5 Prescribed Drugs, by spend

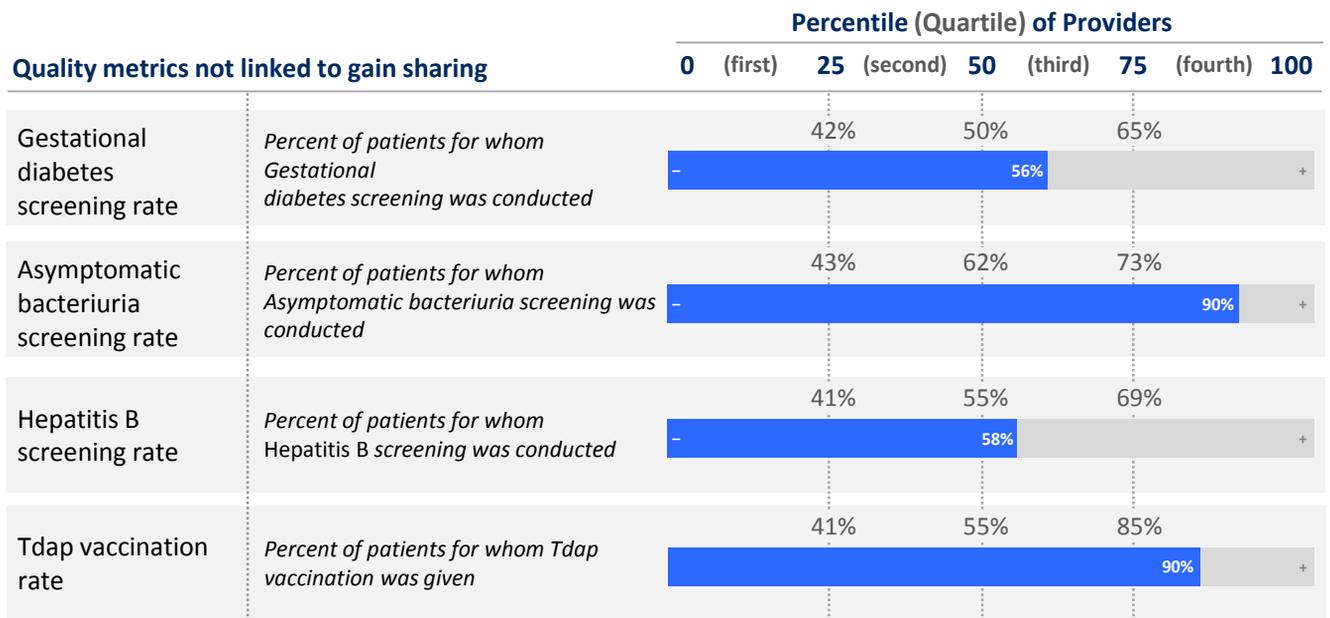
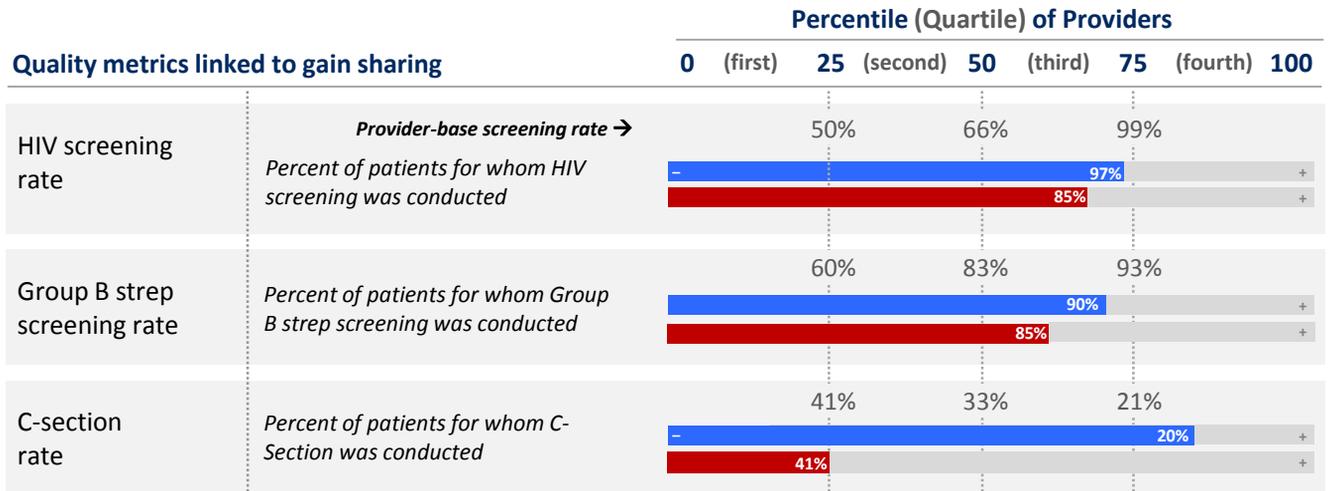
1. Prenatal Plus Tablet	\$2,485
2. Ibuprofen Tablet	\$1,259
3. Hydrocodone-Acetaminophen Tablet	\$1,099
4. Ferrous Sulfate Tablet	\$1,039
5. Zofran Tablet	\$997

[1. Perinatal] B. Episode quality and utilization details

5 Quality and utilization (metrics) comparison with provider base

■ Your performance ■ Minimum standard for gain sharing

 You achieved selected quality metrics linked to gain sharing



[1. Perinatal] C. Episode cost details

6 Episode cost breakdown by care category (risk adj.)

Total episodes included: 233

■ Your performance ■ Provider base average

Care category	# of episodes with claims in care category	% of episodes with claims in care category	Avg. adj. cost per episode when care category utilized					
			Percentile (Quartile) of Providers					
			0 (first)	25 (second)	50 (third)	75 (fourth)	100	
Outpatient Professional	195	Your performance: 84% Provider base average: 82%	< \$100	< \$125	< \$150	\$120	\$120	
Pharmacy	11	Your performance: 5% Provider base average: 5%	< \$25	< \$45	< \$65	\$50	\$50	
Emergency department or observation	90	Your performance: 39% Provider base average: 30%	< \$200	< \$230	< \$260	\$235	\$230	
Outpatient lab	220	Your performance: 96% Provider base average: 84%	< \$145	< \$195	< \$245	\$190	\$200	
Outpatient radiology/ procedures	215	Your performance: 94% Provider base average: 88%	< \$275	< \$325	< \$375	\$320	\$330	
Inpatient professional	220	Your performance: 96% Provider base average: 91%	< \$950	< \$1,000	< \$1,200	\$960	\$1,000	
Inpatient facility	233	Your performance: 100% Provider base average: 99%	< \$1,200	< \$1,300	< \$1,650	\$1,255	\$1,315	
Outpatient facility	0	Your performance: 0% Provider base average: 0%	\$0	\$0	\$0	0%	0%	
Other	210	Your performance: 90% Provider base average: 88%	< \$165	< \$190	< \$210	\$170	\$180	

Preliminary draft of the provider report template for State of TN (for discussion only) | All content/ numbers included in this report are purely illustrative

[1. Perinatal] D. List of included episodes with cost and quality information

[LINK TO LIST OF INCLUDED EPISODES](#)

The Excel document contains detailed information for each patient included in your episode results, such as:

- Provider
- Episode ID
- Patient Identifier
- Episode risk factor
- Cost information
- Quality metrics

[1. Perinatal] E. List of excluded episodes

[LINK TO LIST OF EXCLUDED EPISODES](#)

The Excel document contains detailed information for each patient excluded from your episode results, such as:

- Episode ID
- Provider
- Patient Identifier
- Non-risk adjusted cost
- Reason for exclusion