Episode of Care:

Acute Exacerbation of Asthma (EOC-F-ASTHMA)

Episode Design Summary

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Health Care Innovation
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**ASTHMA EPISODE DESIGN**

**EPISODE DEFINITION**

**EPISODE SUBTYPES**

There are no subtypes for this episode type.

**EPISODE TRIGGER(S)**

An Asthma Episode is triggered by the following:

- Asthma episodes are triggered by an emergency department (ED) or inpatient medical claim with a primary diagnosis related to the presentation of an acute exacerbation of asthma.
- The trigger must be preceded by 30-day “clean period” with no previous or repeat presentations of an acute asthma exacerbation as indicated by paid claims.

*See the Appendix for a list of triggering codes.*

**EPISODE DURATION**

- An asthma episode begins with a triggering claim in a hospital setting (ED or inpatient).
- The episode ends 30 days after discharge or upon discharge from an asthma-relevant readmission occurring within the initial 30-day post-discharge period.

**EPISODE SERVICES**

The episode will include the following services rendered within the duration of the episode:

- During the triggering event (i.e., emergency room visit and/or duration of inpatient stay): all services related to the triggering event (ED/inpatient facility, professional, diagnostic, pharmacy, etc.) reflected by paid claims.
- Within the 30-day post-discharge period all inpatient and outpatient facility services, professional services, related medications, treatment for post-discharge complications, and readmissions or repeat ED visits.

**PRINCIPAL ACCOUNTABLE PROVIDER**
• The Principal Accountable Provider (PAP) for an Asthma episode is the facility (i.e., hospital) where the episode began.

EPISODE EXCLUSIONS

Episodes meeting any of the following criteria will be excluded:

GLOBAL EXCLUSIONS

• Medicaid and Medicare dual enrollment (i.e., “dual-eligible”) during the episode.
• Beneficiaries who do not have continuous Medicaid enrollment for the duration of the episode.
• Beneficiaries with Third Party Liability.
• Beneficiaries with select comorbid conditions.
• Beneficiaries leaving against medical advice.
• Beneficiaries expiring during the episode duration.
• Beneficiaries admitted to hospice care.
• Episodes that are a result from trauma.
• Beneficiaries who are pregnant during episode duration.

EPISODE SPECIFIC EXCLUSIONS:

• Beneficiaries who are intubated or have home oxygen usage during the episode.
• Beneficiaries with ICU admissions greater than 3 days.
• Beneficiaries under the age of 5 on the episode trigger date.

EPISODE ADJUSTMENTS

For the purposes of determining a PAP’s performance, the total reimbursement attributable to the PAP for an Asthma Episode is adjusted based on:

• Patient comorbidities and statistically significant risk factors that influence an episode cost.
• The age of the beneficiary.
• Episodes that meet high or low-cost outlier criteria, applied after other cost adjustments.

QUALITY MEASURES
QUALITY MEASURES “TO PASS”

The following quality measures are linked to gain sharing eligibility, and must be met in order “to pass”:

- The rate of corticosteroid and/or inhaled corticosteroid usage determined by filled prescription rate for medication within 30 days (before or after) of an episode start date must meet minimum threshold of 59%.
- The percentage of episodes where the patient follows up (visits) with an outpatient physician within 30 days after discharge must meet minimum threshold of 38%

Note: All metrics are based on paid Medicaid claims data.

QUALITY MEASURES “TO TRACK”

The following quality measures are tracked for informational/reporting purposes:

- The rate of repeat acute exacerbation within 30 days after the initial discharge.

MINIMUM CASE VOLUME

The minimum case volume is five valid episodes during the 12-month performance period.
## APPENDIX

### EPISODE TRIGGERING DIAGNOSIS CODES

<table>
<thead>
<tr>
<th>ICD-10 DX Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>J4520</td>
<td>Extrinsic Asthma</td>
</tr>
<tr>
<td>J4521</td>
<td>Intrinsic asthma with (acute) exacerbation</td>
</tr>
<tr>
<td>J4522</td>
<td>Extrinsic asthma with status asthmaticus</td>
</tr>
<tr>
<td>J4530</td>
<td>Extrinsic Asthma</td>
</tr>
<tr>
<td>J4531</td>
<td>Intrinsic asthma with (acute) exacerbation</td>
</tr>
<tr>
<td>J4532</td>
<td>Extrinsic asthma with status asthmaticus</td>
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<tr>
<td>J4540</td>
<td>Extrinsic Asthma</td>
</tr>
<tr>
<td>J4541</td>
<td>Intrinsic asthma with (acute) exacerbation</td>
</tr>
<tr>
<td>J4542</td>
<td>Extrinsic asthma with status asthmaticus</td>
</tr>
<tr>
<td>J4550</td>
<td>Extrinsic Asthma</td>
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<tr>
<td>J4551</td>
<td>Extrinsic asthma with status asthmaticus</td>
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<tr>
<td>J4552</td>
<td>Intrinsic asthma with status asthmaticus</td>
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<tr>
<td>J45901</td>
<td>Asthma, unspecified type, with (acute) exacerbation</td>
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<tr>
<td>J45902</td>
<td>Asthma, unspecified type, with status asthmaticus</td>
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<tr>
<td>J45909</td>
<td>Asthma, unspecified type, unspecified</td>
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<td>J45990</td>
<td>Exercise induced bronchospasm</td>
</tr>
<tr>
<td>J45991</td>
<td>Cough variant asthma</td>
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<tr>
<td>J45998</td>
<td>Asthma, unspecified type, unspecified</td>
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<tr>
<td>J9801</td>
<td>Acute bronchospasm</td>
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