There are two types of exclusions. Global Exclusions are either policy related or clinically pertinent medical conditions that will exclude a beneficiary from all Episodes of Care.

Global Exclusions (applied to all Episodes of Care):
A. Medicaid and Medicare dual eligibility
B. Beneficiaries with non-continuous Medicaid enrollment for the duration of the episode
C. Beneficiaries with Third Party Liability
D. Beneficiaries with one or more of the following:
   1. End-Stage Renal Disease
   2. Clinically pertinent metabolic, nutritional, immunity disorders
   3. Clinically pertinent disorders of blood and blood forming organs
   4. Clinically pertinent cancers
   5. Active chemotherapy treatments
   6. Clinically pertinent organ transplants
   7. Acute Leukemia
   8. Cystic Fibrosis
E. Beneficiaries leaving against medical advice
F. Beneficiaries expiring during the episode duration
G. Beneficiaries admitted to hospice care
H. Episodes that are a result from trauma
I. **Beneficiaries who are pregnant during episode duration with the following episode-specific exclusions:**
   1. Perinatal

The second type of exclusions, referred to as Episode-Specific Exclusions, are at the episode type level. These exclusions are determined through consultation with providers and are identified as a significant impact on a particular episode. Episode-Specific Exclusions are identified for each episode of care.