# Medicaid quality metrics and spend thresholds for performance period 1, CY2019 – Tooth extraction

<table>
<thead>
<tr>
<th>Quality metric</th>
<th>Threshold</th>
<th>Spend thresholds¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>QM1: Difference in MED/day</td>
<td>&lt; 20.0</td>
<td></td>
</tr>
<tr>
<td>QM2: Related post-trigger emergency department visits</td>
<td>≤ 10%</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Acceptable</th>
<th>Commendable</th>
<th>Positive incentive limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value, $</td>
<td>$214</td>
<td>$160</td>
<td>$12</td>
</tr>
<tr>
<td>‘All Medicaid’ percentile</td>
<td>90&lt;sup&gt;th&lt;/sup&gt; percentile</td>
<td>64&lt;sup&gt;th&lt;/sup&gt; percentile</td>
<td>N/A</td>
</tr>
</tbody>
</table>

1 Spend thresholds for performance year 2019 are set based on CY2017 Ohio Medicaid claims data and adjusted for medical cost inflation
All Medicaid PAP curve (used to set thresholds) – Tooth extraction

Provider risk-adjusted cost distribution

PAP average episode cost

<table>
<thead>
<tr>
<th>Adj. avg cost/episode $</th>
<th>‘All Medicaid’ summary statistics</th>
<th>Positive incentive payments²</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Negative incentive payments</strong></td>
<td>• Providers below commendable threshold 823</td>
</tr>
<tr>
<td></td>
<td>• Providers above acceptable threshold 128</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Episodes attributed to negative incentive providers 11,164</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Total negative incentive amount $1.2M</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Episodes attributed to positive incentive providers 69,334</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Total positive incentive amount $1.2M</td>
<td></td>
</tr>
</tbody>
</table>

1 Top 10% of providers by volume  
2 Assumes all providers pass quality metrics tied to gain sharing  
3 All thresholds and incentive limit have been adjusted for medical cost inflation

SOURCE: OH Medicaid FFS and encounter data, CY2017