August 27, 2021

Subject: Episodes of Care Program Updates

Dear Ohio Medicaid Providers and Managed Care Organizations:

In the spring and summer of 2020, the Ohio Department of Medicaid (ODM) issued several notices pertaining to the Episodes of Care program (EOC). The intent of these communications was to ensure that the program’s activities did not increase the considerable burdens and strain experienced by providers and the overall healthcare system during the most difficult seasons of the COVID-19 pandemic. As we are adapting to a new normal, it is time to resume, at least in part, the core EOC activities of financial incentives and reporting as outlined below:

2018 Negative Incentives Collection Resumed

In May 2020, ODM released a memo requiring the Managed Care Organizations (MCOs) to delay the collection of remaining 2018 episodes of care negative incentives until Ohio’s State of Emergency declared by Governor Mike DeWine in Executive Order 2020-01D was no longer in effect. As of June 18, 2021, the State of Emergency was lifted, and effective immediately MCOs are permitted to resume the collection of outstanding 2018 negative incentives from principal accountable providers (PAPs) for the nine episodes of care tied-to-payment for this year (Asthma, COPD, Cholecystectomy, Colonoscopy, GI Bleed, EGD, Perinatal, URI, and UTI). To minimize any confusion, the deadline for the plans to collect outstanding 2018 negative incentives will be the same as the 2019 incentives (see below for more details).

2019 Annual Reports & Incentives to be Released Soon

ODM will soon be releasing the final episode performance reports for the eighteen episodes of care tied-to-payment for the 2019 calendar year (ADHD, Asthma, COPD, Cholecystectomy, Colonoscopy, Congestive Heart Failure Exacerbation, GI Bleed, EGD, Headache, Low Back Pain, Neonatal Low-Risk, Otitis Media, Pediatric Acute Lower Respiratory Infection, Perinatal, Skin & Soft Tissue Infection, Tooth Extraction, URI, and UTI). The MCOs must collect and/or pay 2019 incentives to PAPs within 180 days of the release of these reports to providers. The exact date will be communicated through email to the MCOs, via the EOC subscription list, and posted on the EOC webpage.

Incentives Suspended for 2020, 2021, and 2022

After the release of the July 16, 2020 Director’s letter, ODM received input from stakeholders who supported the continuation of EOC reporting during the program’s planned suspension in 2020 and 2021. While providers will not be held financially accountable to quality metrics and spend thresholds during the disruption of the pandemic, there is value in continuing to monitor providers’ performance...
for informational purposes. EOC reports may offer a look into the care experience of Medicaid beneficiaries and the effectiveness of providers, ultimately contributing to a fuller understanding of COVID-19’s impact on Ohio Medicaid’s healthcare system. Therefore, ODM will release future years’ reports for select episodes to providers and MCOs. Because providers are continuing to adapt to a different environment, consistent claims data required to anchor the EOC program for 2022 remains unavailable. **Both positive and negative incentives for program years 2020, 2021, and 2022 will be suspended as the healthcare community continues to recuperate.**

**Additional Information:**

Information regarding the release of future reports, updates and new program developments will be communicated through the EOC subscription list, [webpage](https://medicaid.ohio.gov/wps/portal/gov/medicaid/home/subscribe-form/subscribe-form), and by the managed care organizations. Providers and other stakeholders are encouraged to sign up for EOC communications at: [https://medicaid.ohio.gov/wps/portal/gov/medicaid/home/subscribe-form/subscribe-form](https://medicaid.ohio.gov/wps/portal/gov/medicaid/home/subscribe-form/subscribe-form)

Thank you for your ongoing efforts and commitment to high quality care.

Sincerely,

Maureen M. Corcoran, Director