



maryland
health services
cost review commission

EQIP Subgroup

November Meeting

11/21/2025

Agenda

- AHEAD Update
- Performance Year 5
 - Enrollment Updates
 - Contracting and Next Steps
 - Practice Transformation Grant
- PY6 Episode Development/Requests
- CRISP Outreach HIE Panel
 - Review CRISP Tools
 - Panel Review
 - HIE Admin Audit
- Performance Year 3 Analysis
- Upcoming Dates/Meetings

AHEAD Update

PY5: Administrative and Enrollment Updates

EQIP Timeline

Performance Year 4 (PY4)	Performance Year 5 (PY5)
January 1 – December 31, 2025	January 1 – December 31, 2026

Performance Year 5 (PY5) Periods	
July – August	Enrollment Period for Upcoming PY5
September – December	CMS Vetting, Eligibility Auditing, and Contracting
January 1 st	Performance Year Begins
December 31 st	Performance Year Ends
9-12 Months After Performance Year Ends	Incentive Payments (if earned) Distributed

November 2025 Enrollment Updates

- Results from PECOS audit from CMS will be posted in EEP
 - Due to the government shutdown, this audit is currently delayed
 - Care Partners who did not pass PECOS screening are not permitted to participate in PY5
 - Program Integrity and Law Enforcement CMS vetting results will be returned late 2025, impact should be smaller
- Claim Threshold edits have been updated and can be found reflected in EEP
 - If there are any changes to the composition of an entity following the PECOS audit and CPAs distribution, entities may be required to make additional edits to meet their claim threshold
- Entity Continuity
 - During the audit process, the HSCRC reviews the consistency of the Care Partner (CP) composite within an Entity year over year. If your entity meets the criteria to be considered a new entity for the performance year, our team will be assigning your entity a new EQIP ID.
- Succession Entities
 - Any entity with greater than 60% of Care Partners that overlap with another entity from the previous performance year will be considered a succession entity
 - Entity POCs will be notified of their succession and will receive a new entity ID

Contracting: Care Partner Arrangement – PY5 Requirement

- All Care Partners will be **required to** sign a Care Partner Arrangement
- Care Partner Arrangements have been sent out to individual Care Partners and the Entity Admin Proxies via DocuSign on **November 17th**
- Contracts will be pre-filled and standardized across the state and no changes will be allowed
 - Email will come from the CRP Entity, EQIP@meritushealth.com

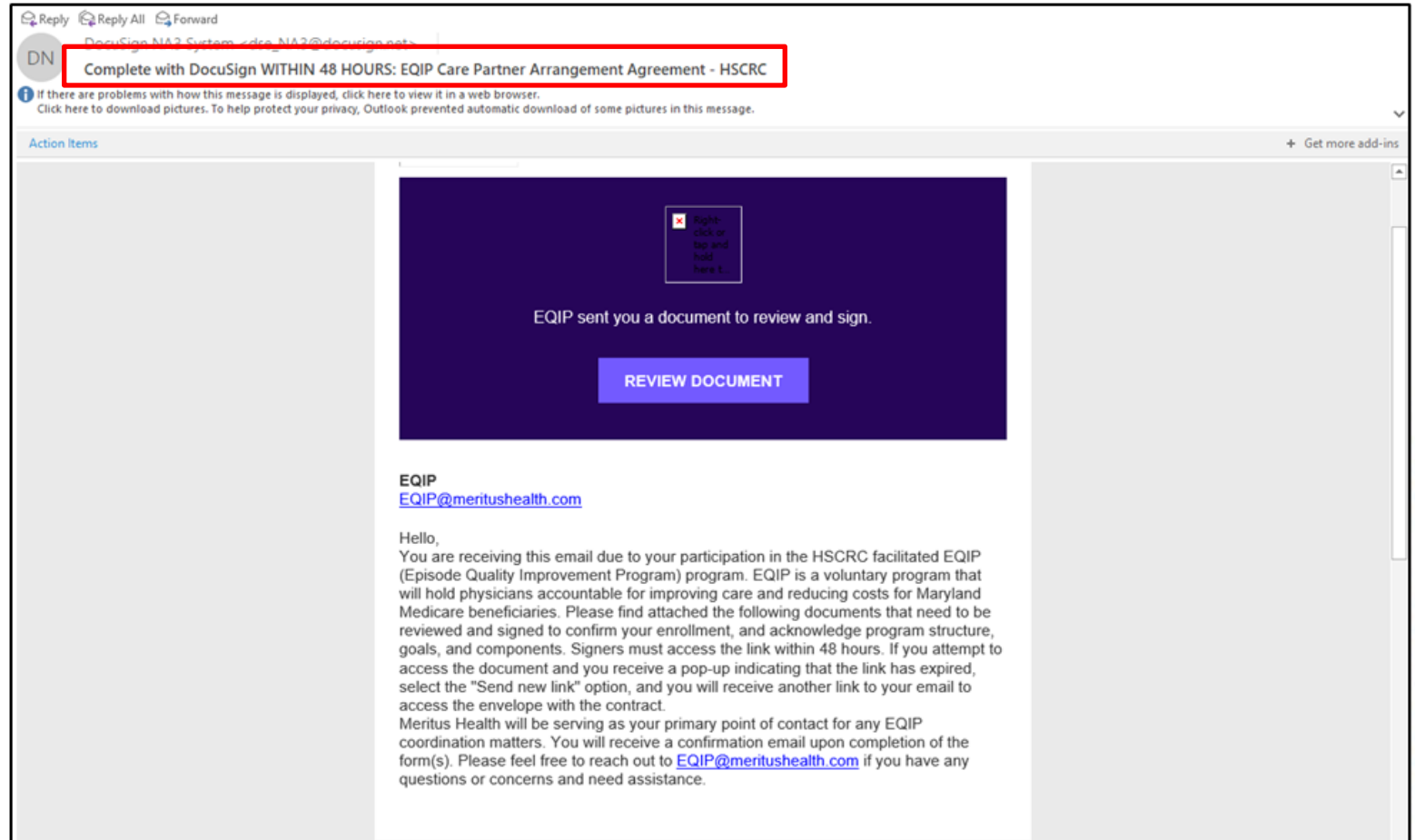
Please Note: Care Partner Arrangements must be signed, dated and returned no later than December 12, 2025, to participate in the EQIP

Contracting: Care Partner Arrangement Updates and Notes

- Please note that any requests such as **email changes for providers, requests for a CPA to be resent, CPA status updates in EEP, or an expired CPA link** will have a processing time of 48 hours before it can be completed
- The EQIP team is working to ensure that starting next week any provider who has not signed their CPA will receive an updated link every Monday, Wednesday and Friday.
 - CPA links do expire every 48 hours for security purposes
- All administrative proxies will be copied on all completed CPAs, however other POCs (Lead Care Partner and Payment Remission Recipient) will be removed starting next week
 - This is required for tracking purposes
- To track your entity's CPA submission status, please reference the Care Partner Dashboard in the EEP Portal under the column listed "Care Partner Arrangement Status"

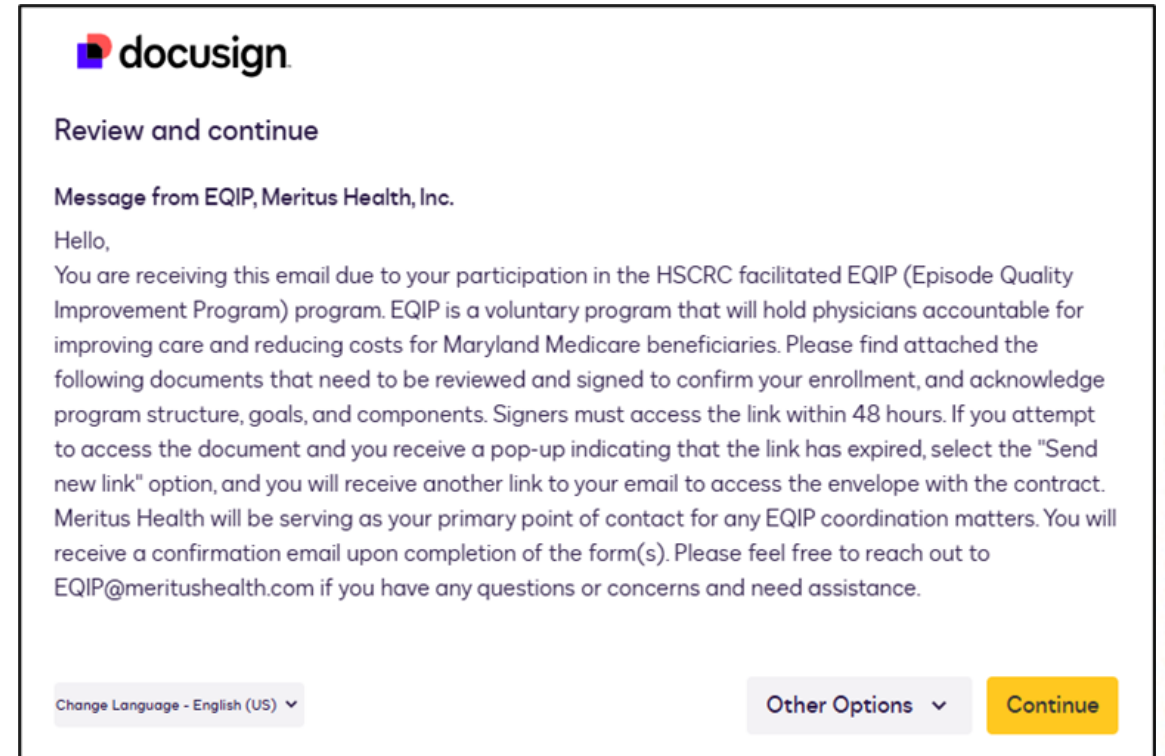
Contracting: Care Partner Arrangement – PY5 Requirement

- If you are a Care Partner enrolled in EQIP, you will receive an email from DocuSign, prompted by EQIP@meritushealth.com. The subject of the email will be: **Complete with DocuSign WITHIN 48 HOURS: EQIP Care Partner Arrangement Agreement- HSCRC**



Contracting: Care Partner Arrangement – PY5 Requirement

- After clicking “Review Document,” Care Partners will receive the following pop-up message detailing the purpose of the agreement and steps to take if the DocuSign link expires.
- If the link has expired
 - Select "Send New link" option
 - And you will receive another link to your email to access the envelope with the contract.
- Once you have signed the forms, you will receive a confirmation email.
 - Save this email for your documentations



docuSign

Review and continue

Message from EQIP, Meritus Health, Inc.

Hello,

You are receiving this email due to your participation in the HSCRC facilitated EQIP (Episode Quality Improvement Program) program. EQIP is a voluntary program that will hold physicians accountable for improving care and reducing costs for Maryland Medicare beneficiaries. Please find attached the following documents that need to be reviewed and signed to confirm your enrollment, and acknowledge program structure, goals, and components. Signers must access the link within 48 hours. If you attempt to access the document and you receive a pop-up indicating that the link has expired, select the "Send new link" option, and you will receive another link to your email to access the envelope with the contract. Meritus Health will be serving as your primary point of contact for any EQIP coordination matters. You will receive a confirmation email upon completion of the form(s). Please feel free to reach out to EQIP@meritushealth.com if you have any questions or concerns and need assistance.

Change Language - English (US) ▼

Other Options ▼

Continue

Contracting: Care Partner Arrangement – PY5 Requirement

- The CPA will look like this screenshot below. Care Partners should click “Start” to begin signing.



Contracting: Care Partner Arrangement – PY5 Requirement

- Once the Care Partner clicks start, DocuSign will guide the user through the document. On page 11 of the agreement, the Care Partner will be prompted to input their signature and the date the document is signed.

Next

By signing this form, I acknowledge the heretofore Care Partner Arrangement Agreement and consent to my participation in the Episode Quality Improvement Program. I acknowledge my participation is voluntary and will comply with the policy set forth by the Maryland Health Services Cost Review Commission and Centers for Medicaid and Medicare Services.

EQIP Entity Name:

Care Partner Name:

Care Partner NPI:

Signature: 

Date:

Accepted on behalf of the CRP Entity, Meritus Health, by:

Name: Joshua A. Repac

Title: Chief Financial Officer

Signature: *Joshua A Repac*

Date: 08/22/2025

§

<https://hscrc.maryland.gov/Documents/Care%20Redesign/CRP%20PP4%20Participation%20Agreement%20.docx>

11

EQIP – Practice Transformation Grant - Update

- Practice Transformation Grant (PTG) awards have been issued and awardees notified.
 - Only Entities who have been awarded the Grant can attend the Vendor Webinars
- **Vendor Webinar Schedule:**
 - **Netrin Health:** November 24, 2025 at 12:00 pm [[Registration Link](#)]
 - **Blue Agilis:** December 1, 2025 at 12:00 PM [[Registration Link](#)]
 - **Guidehouse:** (We are still awaiting a date and time for this to be scheduled)
- Webinars will allow entities to compare vendor offerings before making their selections.
- All vendor webinars are expected to be completed by **the week of December 5, 2025.**
 - Vendor webinar recordings and one-pagers will be sent out immediately after the last presentation
 - Vendor Selection Form will be sent out at the same time as the presentation recordings.
 - The selection form will need to be completed **NO LATER THAN December 12, 2025 at 5 pm.**
- The PTG program officially launches in **January 2026.**

EQIP PTG Timeline (PY5)

Application period (Entities submit
via Microsoft Forms)

Sep.–Oct. 2025

Oct.–Nov. 2025

Dec. 2025

Jan. 2026

Vendor Selection and Onboarding

Practice Assessments and Grant
Selections

Kick-off Meetings with Vendors

PY6 Episode Development

PACES Vetted Episodes

PROCEDURES = 42

Cardiology/CV

- Cardiac Catheterization
- CABG
- Percutaneous Cardiac Intervention
- Open Heart Valve Surgery
- Pacemaker Insertion

General Surgery

- Mastectomy
- Ventral Hernia Repair
- Inguinal Hernia Repair
- Breast Reconstruction

GI

- Cholecystectomy
- Colonoscopy
- Colectomy
- EGD Endoscopy
- Bariatric Surgery
- ERCP
- GE Reflux Surgery

GU

- TURP
- Prostatectomy
- Urinary Endoscopy

OB/GYN

- Colpopexy
- Colporrhaphy
- C-section
- Vaginal Delivery

Ophthalmology

- Cataract Surgery IOL
- Cataract Surgery Secondary Membranous
- Glaucoma Surgery
- Retina and Vitreous Procedures
- Retina/Choroid Destructive Therapy

Ortho Surgery

- Hip Replacement
- Knee Replacement
- Knee Arthroscopy
- Shoulder Arthroscopy/Rotator Cuff Repair
- Shoulder Replacement
- Lumbar and Sacral Spine Surgery
- Fracture/Dislocation Treatment Pelvis/Hip/Femur
- Repair Fracture/Dislocation of Arm, Wrist, Hand
- Repair Fracture/Dislocation of Lower Leg, Ankle, Foot

Thoracic Surgery

- Lung Resection

Vascular Surgery

- Leg Vein Ablation
- Leg Revascularization
- Leg Vein Angioplasty
- AV Fistula Creation and Revision



CONDITIONS = 51

Cardiology

- Acute MI
- HF Acute
- HF Chronic
- IHD
- Atrial Fibrillation/Flutter Acute
- Atrial Fibrillation/Flutter Chronic
- Chronic HTN, Essential
- Chronic HTN, Secondary

Endocrine

- Diabetes
- Diabetic Ketoacidosis
- Hyperosmolar Non-Ketotic Coma
- Hypoglycemia
- Osteoporosis

ENT

- Sleep Apnea
- Acute Sinusitis
- Chronic Sinusitis

GI

- Chronic Cholecystitis
- Diverticulitis of Colon
- C-Difficile Colitis
- Acute Cholecystitis
- Acute Intestine Perforation
- Chronic Esophagitis
- Acute Peptic Ulcer
- Chronic Peptic Ulcer
- Acute UGI Bleed/Hemorrhage
- Chronic UGI Bleeding Other

Hematology

- Acute DVT Extremity
- Chronic Anemia

ID

- Cellulitis

Musculoskeletal

- Osteoarthritis
- Spine Stenosis/Spondylosis, Cervical
- Low Back Pain
- Spine Stenosis/Spondylosis Thoracic

Neuro

- Acute Ischemic Stroke
- Parkinsons DX

OB/GYN

- Pregnancy

Oncology

- Colon Ca
- Lung Ca
- Breast Ca

Ophthalmology

- Macular Degeneration

Primary Care

- UTI
- Diabetes

Pulmonary

- Acute URI
- Acute PE
- Pneumonia
- Asthma
- COPD

Rheumatology

- Rheumatoid Arthritis
- Osteoarthritis

Vascular

- Abd Aneurysm
- Thoracic Aortic Aneurysm
- Peripheral ASVD
- Varicose Veins (Venous Insufficiency Varicosities)

Additional Episode Development

- We plan to leverage the extensive PACES catalogue to continue to add episodes for future performance years
 - A list of PACES episodes can be requested
 - Please contact equip@crisphealth.org to express interest
- The HSCRC is committed to working with all interested stakeholders and will communicate guidelines around new episode requests and timelines for future performance periods.

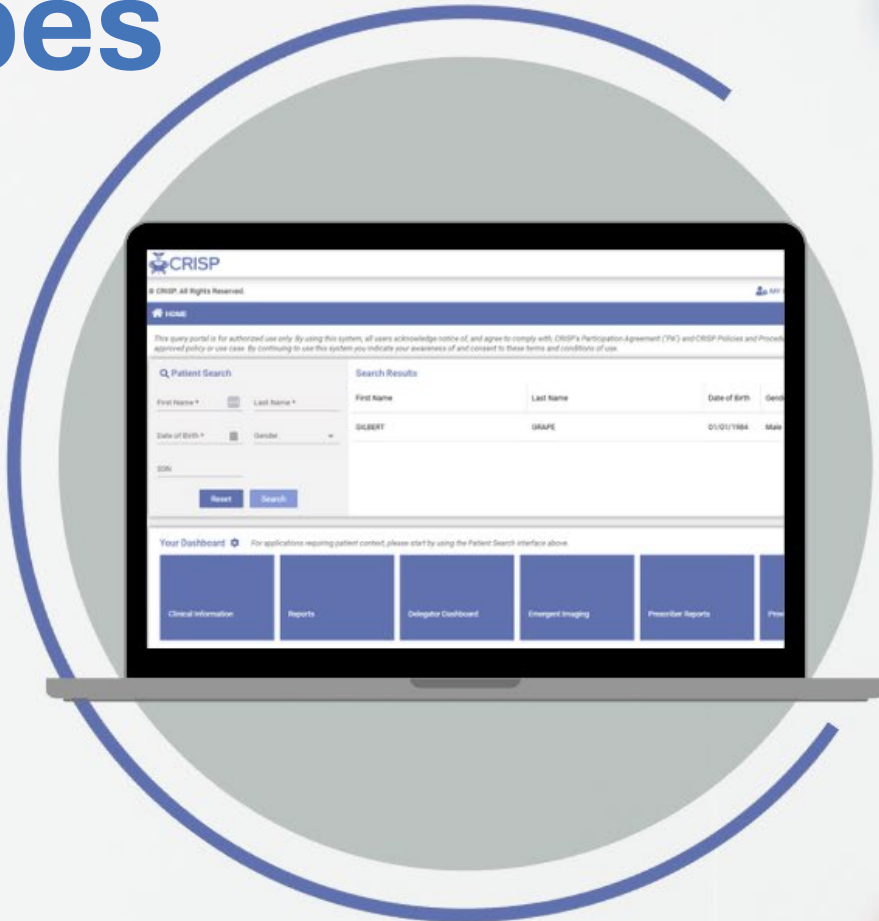


CRISP HIE Review

CRISP 101

*Designed to help new and returning users understand
CRISP's mission, value, and tools*

CRISP Service Types



Point of Care

Access prior records and care team info.



Care Coordination

Real-time hospital admission and discharge event alerts.



Reporting & Analytics

Dashboards to measure outcomes and interventions.



Public Health

Data services & tools for state and local health officials



Program Support

Support for policy, best practices, and transparency



Technical Integration

Seamless connections with clinical systems

Data Exchange



Who Can Access Data on CRISP?



- Treatment
- Public Purpose
 - Legislation
 - Approved use case
- Quality Improvement and Care Coordination
 - HIPAA covered entities
 - Non-HIPAA covered entities
 - BAA + Approved Use Case
 - Patient Consent
- Research
 - Approved Use Case

CRISP Policies Pertaining to Usage of Patient Data

CRISP participants can view patient data for the following permitted purposes only. Each permitted purpose has specific use cases approved by the Clinical Advisory Committee. View a category or purpose below to access the associated use cases.



Treatment

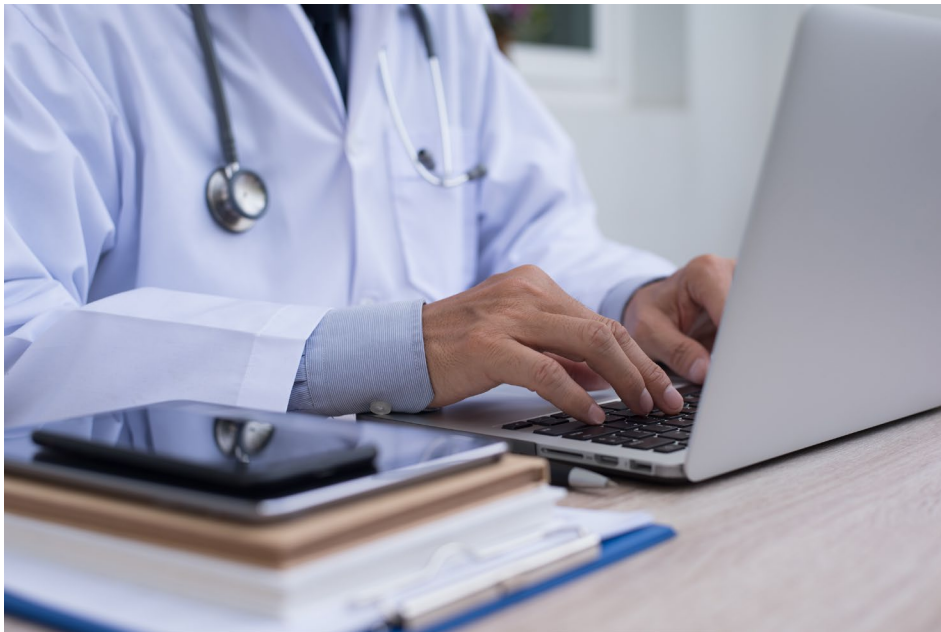


Approved Use Case – Clinical Guidance Notifications
July 6, 2020



Account Set Up

Panels

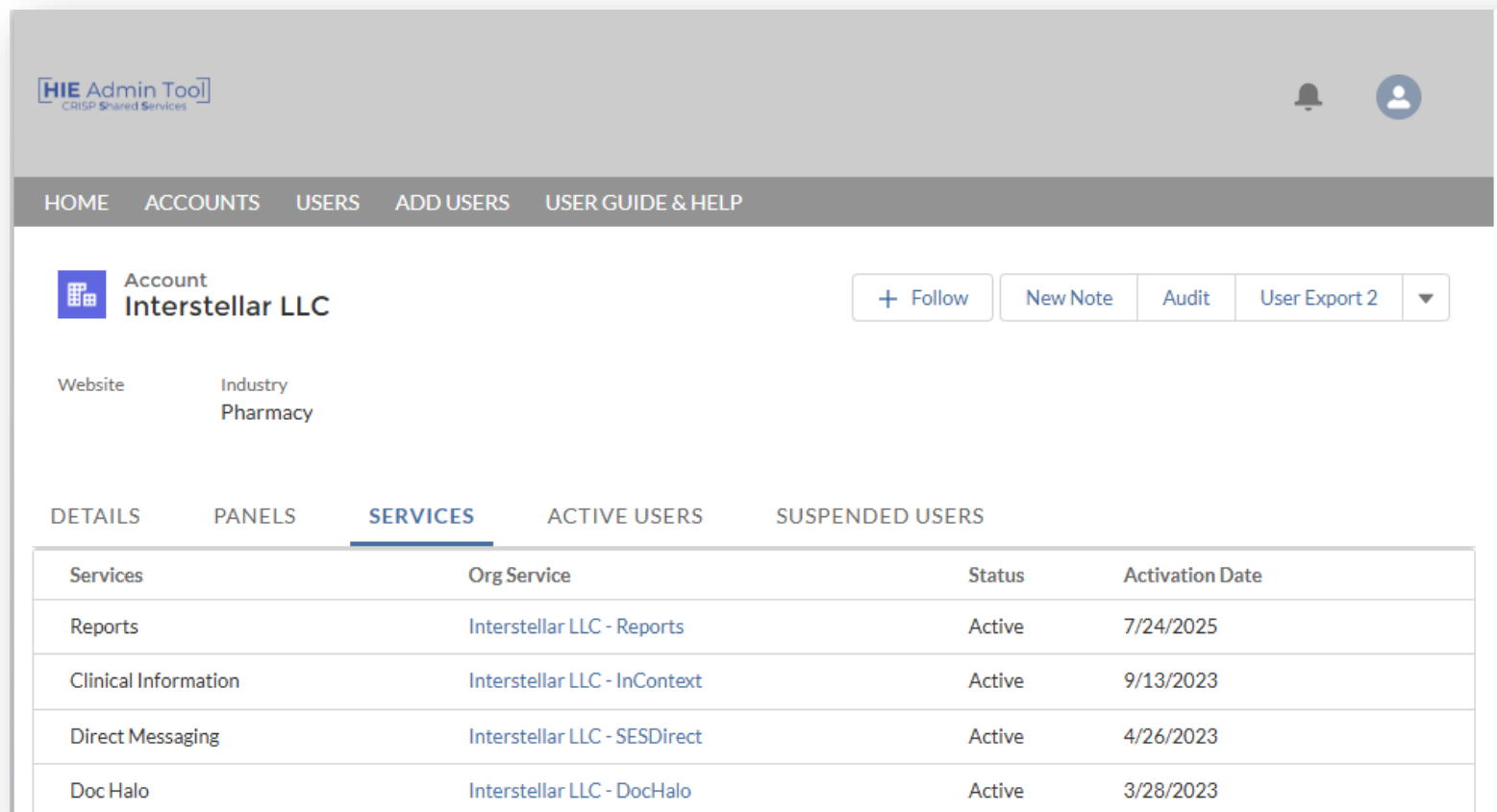


- A panel is a list of patients your organization has a treatment relationship with.
 - These are used to support services like notifications, patient search, and care coordination.
- **Why panels matter:**
 - Enables access to patient data without "breaking the glass"
 - Powers timely alerts and insights for your patient population
 - Supports smoother workflows across CRISP tools
- <https://www.crisphealth.org/what-is-a-panel/>

HIE Admin Tool

HIE Admin Tool:

Empower HIE administrators to efficiently manage user access, services, and security so their organizations stay compliant and fully connected to the HIE from day one.



The screenshot displays the HIE Admin Tool interface. At the top, there's a header with the tool's name and navigation links: HOME, ACCOUNTS, USERS, ADD USERS, and USER GUIDE & HELP. The main content area shows the 'Account' for 'Interstellar LLC', with a 'Website' and 'Industry' (Pharmacy) listed. Below this, there's a tabbed interface with 'SERVICES' selected. The 'SERVICES' tab shows a table of services and their activation dates.

Services	Org Service	Status	Activation Date
Reports	Interstellar LLC - Reports	Active	7/24/2025
Clinical Information	Interstellar LLC - InContext	Active	9/13/2023
Direct Messaging	Interstellar LLC - SESDirect	Active	4/26/2023
Doc Halo	Interstellar LLC - DocHalo	Active	3/28/2023

User Status



- **Active Users** – has access to HIE tools
- **Suspended Users** –access has lapsed due lack of HIE Admin auditing every 90 days.
- **Deactivated Users** –access has lapsed due to inactivity, inappropriate use, or changes to employment.
 - Re-activation of these users can only be done by CRISP Staff when HIE Admins contact them for assistance.

Tutorial Video:

<https://www.youtube.com/watch?v=GYOV8Sb-cjU>

Products Domains

Portal

InContext

CEND

PDMP

Reports

Self Service

Portal:

Provide an intuitive, all-in-one portal where users can securely search patients, launch applications, and navigate CRISP tools with speed and ease.

The screenshot displays the CRISP Patient Search portal. At the top, the CRISP logo is on the left, and the tagline "Connecting Providers with Technology to Improve Patient Care" is on the right. Below the logo, a copyright notice "© CRISP. All Rights Reserved." is visible. To the right of the copyright notice are links for "MY HIE ADMIN(S)", "SEND FEEDBACK", "PRODUCT UPDATES", and a user profile for "KEVIN PHILLIP" with a "LOGOUT" button. A "HOME" button is located on the left side of the main content area. A search bar labeled "Search Applications & Reports" is positioned on the right. A disclaimer text is present below the search bar. The main content area is divided into two sections: "Patient Search" on the left and "Search Results" on the right. The "Patient Search" section includes fields for "First Name" (filled with "Gilbert"), "Last Name" (filled with "Grape"), "Date of Birth" (filled with "01/01/1984"), "Gender" (a dropdown menu), and "SSN". There are "Reset" and "Search" buttons at the bottom of this section. The "Search Results" section displays a table with columns: "First Name", "Last Name", "Date of Birth", "Gender", "Address", and "Match Sc". The table contains five rows of search results for "Gilbert Grape". To the right of the search results is a "Population Explorer" panel with a "View Panel" dropdown, an "Export" button, and a notification "No notifications for this panel." At the bottom of the page is a "Your Dashboard" section with a gear icon and a note: "For applications requiring patient context, please start by using the Patient Search interface above." The dashboard contains four tiles: "Panel Processor", "HIE Admin Tool", "CRISP Role Manager", and "Reports".

CRISP

Connecting Providers with Technology to Improve Patient Care

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MY HIE ADMIN(S) SEND FEEDBACK PRODUCT UPDATES KEVIN PHILLIP LOGOUT

HOME Search Applications & Reports

This query portal is for authorized use only. By using this system, all users acknowledge notice of, and agree to comply with, CRISP-MD's Participation Agreement ("PA") and CRISP-MD Policies and Procedures. [Click here to review the policies and procedure.](#) CRISP-MD uses a privacy monitoring tool to ensure all users are adherent to an approved policy or use case. By continuing to use this system you indicate your awareness of and consent to these terms and conditions of use.

Patient Search

First Name * Last Name *
Gilbert Grape

Date of Birth * Gender
01/01/1984

SSN

Reset Search

Search Results

First Name	Last Name	Date of Birth	Gender	Address	Match Sc
Gilbert	Grape	01/01/1984	Male	4145 Earl C ...	117 - p
Gilbert	Grape	01/01/1984	Female	1620 Eye Str...	117 - p
GILBERT	GRAPE	01/01/1984	Female	123 AUDACI...	117 - p
Gilbert	Grape	01/01/1984	Male	123 Fake Ro...	117 - p
Gilbert	Grape	01/01/1984	Female	28 Artisan P...	117 - p

Population Explorer

View Panel

Export

No notifications for this panel.

Your Dashboard For applications requiring patient context, please start by using the Patient Search interface above.

Panel Processor HIE Admin Tool CRISP Role Manager Reports

<https://idp.crisphealth.org/#login>

Products Domains

Portal

InContext

CEND

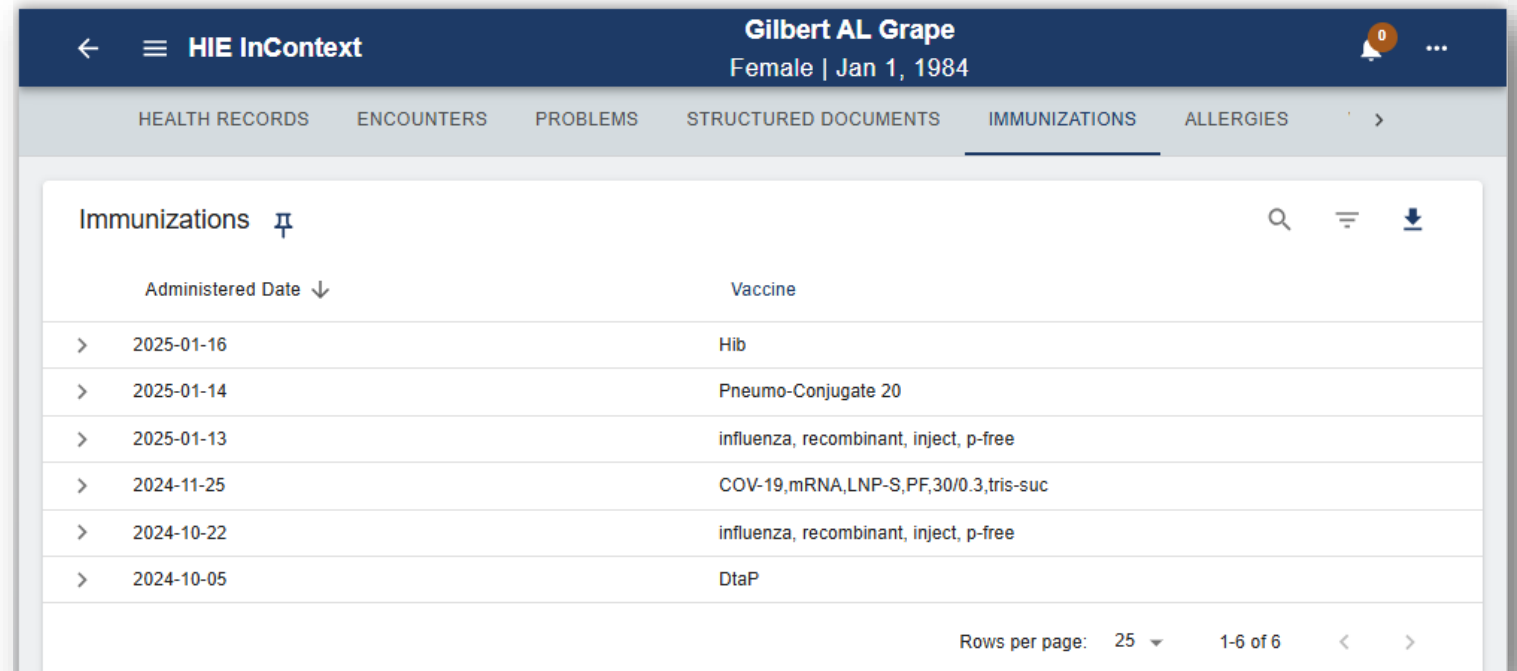
PDMP

Reports

Self Service

InContext:

InContext embeds real-time, cross-organizational clinical data directly into the EHR workflow & Portal, giving providers seamless access to the information they need to coordinate care and improve patient outcomes



The screenshot displays the HIE InContext interface for a patient named Gilbert AL Grape, born January 1, 1984. The 'IMMUNIZATIONS' tab is selected, showing a list of administered vaccines. The table includes columns for 'Administered Date' and 'Vaccine'. The data shows six immunizations, with the first one scheduled for 2025-01-16. The interface includes a search bar, filter icon, and download icon at the top right of the table. At the bottom right, it indicates 'Rows per page: 25' and '1-6 of 6'.

Administered Date ↓	Vaccine
> 2025-01-16	Hib
> 2025-01-14	Pneumo-Conjugate 20
> 2025-01-13	influenza, recombinant, inject, p-free
> 2024-11-25	COV-19,mRNA,LNP-S,PF,30/0.3,tris-suc
> 2024-10-22	influenza, recombinant, inject, p-free
> 2024-10-05	DtaP

Available through Portal or EHR

Products Domains

Portal

InContext

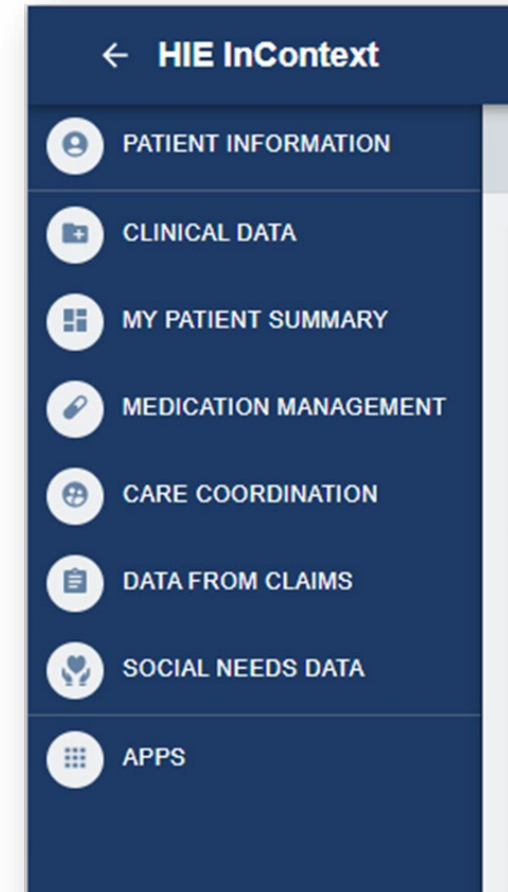
CEND

PDMP

Reports

Self Service

- **Demographics**
 - Next of Kin
- **Medication Management**
 - PDMP; Medications from CCDs
- **Clinical Data**
 - Encounters; Clinical Notes; Labs; Radiology Reports
 - CCDs
 - Problems, Allergies, Immunizations, Vitals*, Procedures*
- **Care Coordination**
 - Care Team
- **Claims**
- **Social Needs**
- **NEW: My Patient Summary**



Products Domains

Portal

InContext

CEND

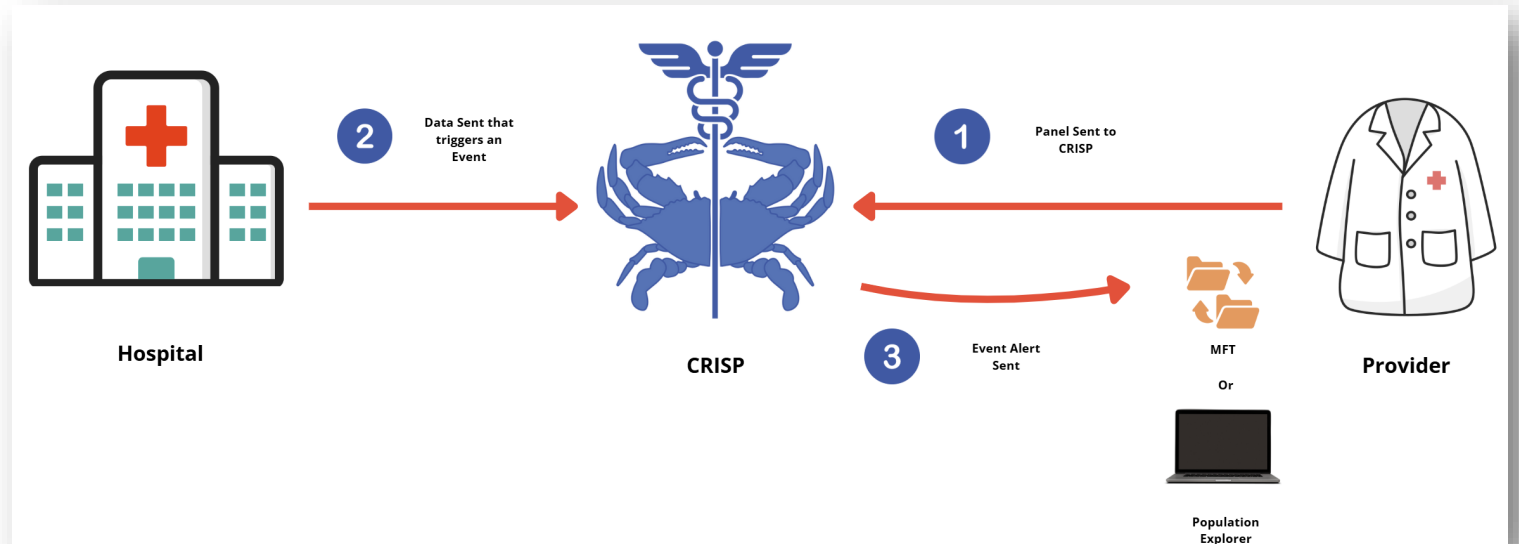
PDMP

Reports

Self Service

CEND:

Deliver real-time, customizable health event alerts that keep care teams connected to their patients' most important encounters and risks.



Products Domains

Portal

InContext

CEND

PDMP

Reports

Self Service

Population Explorer:

Transform patient alerts into actionable insights with an intuitive portal view of encounters and care history

The screenshot displays the 'Population Explorer' interface. At the top, there's a 'View Panel' dropdown set to 'DC Demo Panel 2 (DC_C)' and buttons for 'Export' and 'Configure Advanced Filter'. Below this is a 'DETAIL' tab and a 'TABLE' view. The 'Display Type' is set to 'All'. A list of patients is shown, including STEIN_DEMO, BARBARA, PAYNE_DEMO, SASHA, MOORE_DEMO, MICHAEL, and JONES_DEMO, OLIVIA. The right panel shows detailed information for the selected patient, PAYNE_DEMO, SASHA, including 'Follow-Up Status' (Not Started) and 'Patient Demographics' (First Name: SASHA, Middle Name: PAYNE_DEMO, Last Name: PAYNE_DEMO, Gender: Female, Address: PO BOX 99887, BETHESDA, MD, 20814, Home Phone, Work Phone, Date of Birth: 1983-06-01). A 'Quick Filter' section on the right shows 'Encounter Type' set to 'Inpatient' with an 'APPLY' button. At the bottom right, there's a 'Saved Filters' section with a 'Load' button and 'Clear Filters' and 'Save Current Filter' buttons.

Patient Name	DOB	Admit Date	Gender	Notification Type	Facility
STEIN_DEMO, BARBARA	1941-06-01	2024-02-02 04:31 PM	Female	Inpatient Encounter	NATIONAL REHABILITATION HOSPITAL I
PAYNE_DEMO, SASHA	1983-06-01	2024-02-02 08:24 AM	Female	Inpatient Encounter	Sibley Memorial Hospital
MOORE_DEMO, MICHAEL	1984-06-01	2024-02-01 08:40 PM	Male	Inpatient Encounter	Medstar Georgetown University Hospital
JONES_DEMO, OLIVIA	2024-06-01	2024-01-31 06:48 PM	Female		

Products Domains

Portal

InContext

CEND

PDMP

CRS

Self Service

PDMP:

Equip providers with timely, integrated insights into controlled substance prescriptions to support safe prescribing, prevent misuse, and improve patient care.

The screenshot displays the PDMP web application interface. At the top, there is a navigation bar with a 'HOME' icon and a search bar labeled 'Search Applications & Reports'. Below the navigation bar, a sidebar menu titled 'Reports & Applications' contains links for 'Prescriber Reports', 'Referral Portal', 'Provider Directory', and 'Delegator Dashboard'. The main content area is titled 'Prescriber Reports' and features several tabs: 'Personal CS Prescribing History', 'Unsolicited Reports', 'Prescriber Insights', 'Buprenorphine Report', and 'Prescriber Utilization'. The 'Prescriber Insights' tab is currently selected. Below the tabs, there is a section titled 'My Prescriptions' with a 'Run Query' button and a link that says 'Report lost or stolen prescription pads to the Board of Pharmacy'. The 'My Prescriptions' section includes input fields for 'Patient First Name', 'Patient Last Name', 'Dispenser Name', 'Prescriber DEA(s)', and 'Prescription Number'. There are also 'Print' and 'Download CSV' buttons in the top right corner of the 'My Prescriptions' section.

Prescriber Insights Report

Products Domains

Portal

InContext

CEND

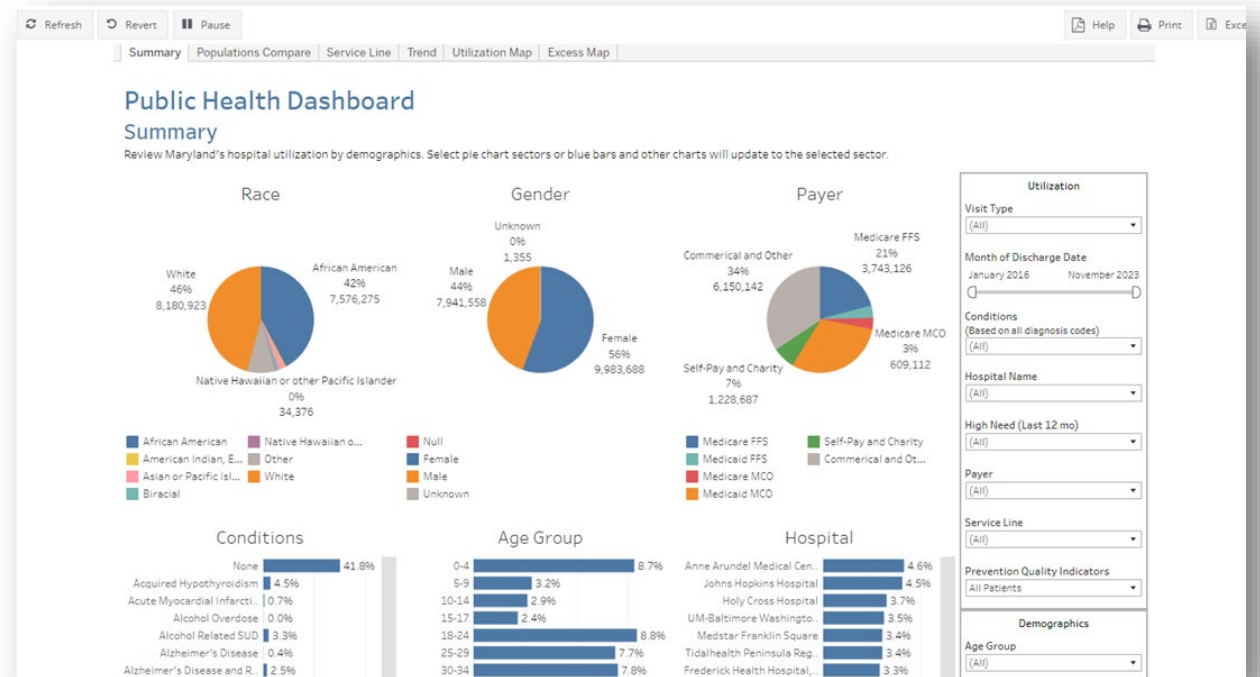
PDMP

Reports

Self Service

Reports:

Delivers comprehensive, easy-to-access dashboards & reports—integrating multiple diverse data sets—so organizations can monitor performance, track outcomes, and identify opportunities for improvement.



Products Domains

CEND

PDMP

Reports

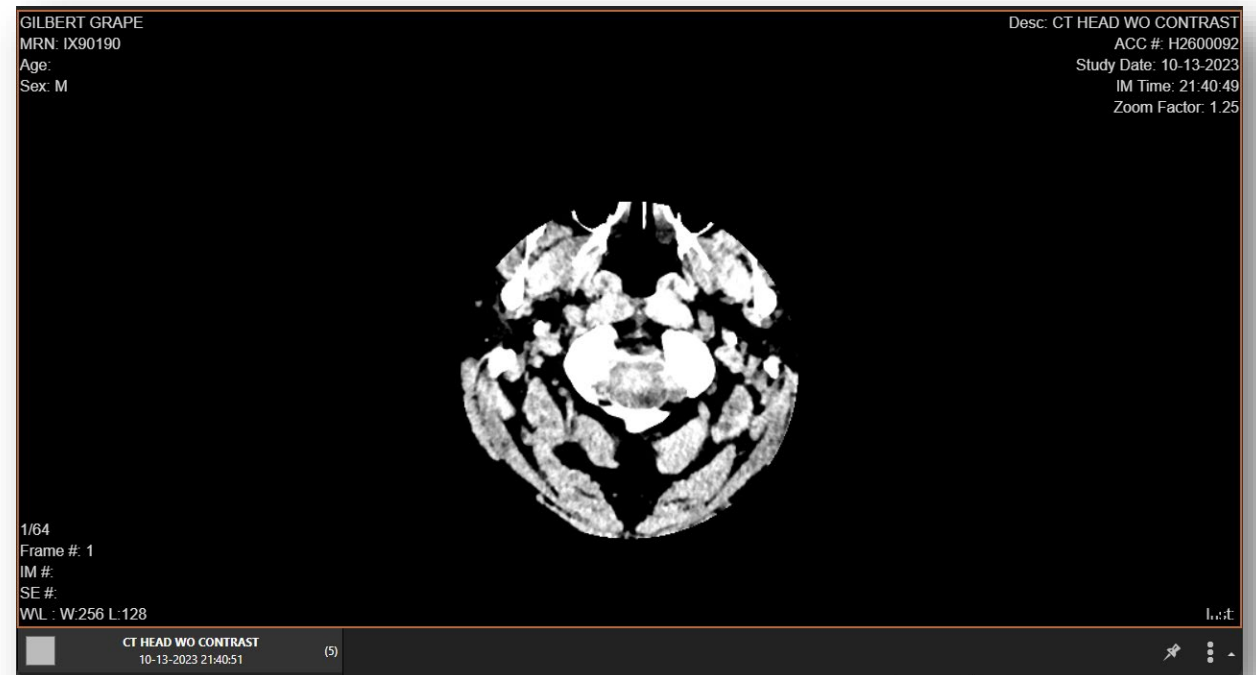
Self Service

Consent

Imaging

Imaging:

Secure, centralized access to patient diagnostic images for faster, collaborative care.



Products Domains

PDMP

Reports

Self Service

Consent

Imaging

SDOH

Social Determinants of Health (SDOH):

Empowers providers to integrate SDOH data into care, enabling coordinated, informed clinical decisions and streamlined referrals to community resources.

The screenshot shows a web interface titled "Referral Program Selection". It features a search form with two main sections: "Organization Name" and "Search Area". The "Organization Name" section has a text input field labeled "Search for Organization Name" and a "Find Organization" button. The "Search Area" section has three input fields: "Search Resources", "Address, City, or Zip", and "Search Radius (In Miles)". Below these fields are "Search" and "Clear" buttons. At the bottom left of the form, there is a "Create Referral for Program" button.

Program Directory Used to Make Referrals



CRISP

Chesapeake Regional Information
System for our Patients

Questions?

Please take our survey



User Guides, Training
Videos, Fact Sheets can
be found at:

www.crisphealth.org/

CRISP Support

support@crisphealth.org

877-952-7477

PY3 (CY 2024) Results

PY3 Savings – Key Takeaways

- 1 new clinical episode categories in PY3
 - Pulmonology
- 71 new entities in PY3, with a total of 117 entities participating
 - 46 of 50 entities from PY2 participating in PY3
- EQIP generated \$62.6 million in PY3 positive savings, an increase of 70.6% from \$36.7 million in positive savings in PY2.
- Net distribution was \$29.1 million in PY3 compared to \$23.1 million in PY2
- PY3 EQIP episode volume totaled 144,260 episodes, an increase from 78,644 episodes in PY2.

Overview of EQIP Results – PY2 vs. PY3

Clinical Episode Category	Number of EQIP Clinical Categories		Average Entity Size by Number of CPs		Average Episode Volume		Number Exceeding Target Price		Percent Exceeding Target Price	
	PY2	PY3	PY2	PY3	PY2	PY3	PY2	PY3	PY2	PY3
Allergy	21	35	133	67	59	137	12	14	57%	40%
Cardiology	38	38	117	40	87	75	12	11	23%	29%
Dermatology	3	1	362	21	40	55	3	0	100%	0%
Emergency Department	110	127	173	61	269	264	72	76	65%	60%
Gastroenterology	46	40	108	29	549	610	18	11	39%	28%
Ophthalmology	6	10	335	15	680	1840	0	0	0%	0%
Orthopedics	120	184	83	36	123	309	34	66	28%	36%
Urology	5	4	42	40	67	56	4	2	80%	50%
Pulmonology	-	24	-	68	-	134	-	8	-	33%

Notes: CPs = Care Partners. EQIP episodes exceeding target price are episodes where total cost exceeded the aggregate target price in that performance year. Averages reported across participating entities in each category.

Overview of EQIP Results – PY2 vs. PY3

Episode Category	Number of EQIP Clinical Categories		Average Episode Volume		Number Exceeding Target Price		Percent Exceeding Target Price	
	PY2	PY3	PY2	PY3	PY2	PY3	PY2	PY3
Procedural	152	145	265	311	45	32	30%	22%
Acute	137	174	226	275	85	102	62%	59%
Chronic	60	142	122	362	25	54	42%	38%

Notes: CPs = Care Partners. EQIP episodes exceeding target price are episodes where total cost exceeded the aggregate target price in that performance year. Averages reported across participating entities in each category.

Next EQIP Subgroup: January 16th, 2026

Register for 2026 EQIP Subgroup Meetings [here](#)



Thank You!

