

Measurement Period	Episode-Based Cost Measure		Episode Window (Days)	
			Pre-trigger	Post-trigger
June 1, 2016, through May 31, 2017	Procedural	Elective Outpatient Percutaneous Coronary Intervention (PCI)	0	30
	Acute Inpatient Medical Condition	Intracranial Hemorrhage or Cerebral Infarction	0	90
	Procedural	Knee Arthroplasty	30	90
	Acute Inpatient Medical Condition	Pneumonia with Hospitalization	0	30
	Procedural	Revascularization for Lower Extremity Chronic Critical Limb Ischemia	30	90
	Procedural	Routine Cataract Removal with Intraocular Lens (IOL) Implantation	60	90
	Procedural	Screening/Surveillance Colonoscopy	0	14
	Acute Inpatient Medical Condition	ST-Elevation Myocardial Infarction (STEMI) with PCI	0	30

For **procedural** episode groups, episodes are attributed to the clinician(s) rendering the trigger services (HCPCS/CPT procedure codes).

For **acute inpatient medical condition episode groups**, episodes are attributed to the clinician(s) rendering at least 30 percent of inpatient evaluation and management (E&M) services during an inpatient hospitalization with the medical Medicare Severity Diagnosis-Related Groups (MS-DRGs) for the episode group.