Frequently asked questions about the UnitedHealth Premium® Designation Program

1) What is the purpose of the UnitedHealth Premium designation program?
The UnitedHealth Premium® program provides physician designations based on quality and cost efficiency criteria to help members make more informed and personally appropriate choices for their medical care. Physicians may also use these designations when referring patients to other physicians.

2) Why is this information important?
According to a study published in The New England Journal of Medicine, “adults receive the recommended medical treatment only 55 percent of the time.”¹ Poor quality care can lead to higher complication and surgical repeat rates, unnecessary hospitalizations and a higher chance of a wrong diagnosis.


3) What are the possible UnitedHealth Premium designations?
Doctors receive one of the following designations:

- **Premium Care Physician**
  - The physician meets the criteria for providing quality and cost-efficient care.

- **Quality Care Physician**
  - This physician meets the criteria for providing quality care but does not meet the criteria or is not evaluated for cost-efficient care.

- **Does Not Meet Quality**
  - The physician does not meet the criteria for providing quality care so the physician is not eligible for the cost-efficient care designation.

- **Quality Not Evaluated**
  - The program does not evaluate physicians in this specialty, there is not enough health plan claims data to evaluate, or evaluation is in process.

The fact that a physician has a Quality Not Evaluated or a Does Not Meet Quality designation does not mean that the physician does not provide quality health care services. All physicians in the UnitedHealthcare Network have met certain minimum credentialing requirements (separate from the Premium program).

The designation of “Quality Not Evaluated” is given when a physician does not practice in a specialty that is evaluated by the Premium program. It is also given when a physician does not have enough health plan claims data to be evaluated, but it is not an indicator of the total number of patients treated by the physician or the number of procedures performed by the physician. Rather, it reflects the statistical requirements of the Premium program.

4) How do I find out if my doctor received a UnitedHealth Premium designation?
You can find a doctor’s designation information on myuhc.com or oxfordhealth.com using the Physician and Facility Search. You may search for a doctor by name, location and/or specialty, or based on a particular condition/procedure.

The designation status results were posted in September 2017.
5) What are the criteria for the UnitedHealth Premium program and where did it come from?

The Premium program first uses clinical quality measures from the National Quality Forum (NQF) - Endorsed measures when available for the specialties being evaluated. Consistent with the Patient Charter, those measures are supplemented with others as necessary to evaluate clinically important conditions and specialties. Additional measures are selected from or developed using published literature and information from organizations such as:

- The AQA Alliance (formerly the Ambulatory Care Quality Alliance)
- The National Committee for Quality Assurance (NCQA)
- American Medical Association Physician Consortium for Performance Improvement® (PCPI®)
- Specialty societies relevant to a specific disease and clinical condition
- Government agencies
- Other national expert panels

From these sources, the Premium program uses relevant measures that can be evaluated using health plan claims data and that are useful in determining differences in physician performance.

Attribution methods based on health plan claims data determine which physicians are responsible for care given to patients. The Premium program compares the physician’s quality measure performance to a case-mix adjusted benchmark. When there are a sufficient number of quality measures attributed, a statistical test is applied to determine if there is a statistically significant difference between the physician’s performance and the benchmark. The physician meets the Premium program quality criteria when the physician’s performance is statistically not different or is statistically higher than the benchmark.

There are two measurements applied for the evaluation of cost efficiency: patient total cost measurement and patient episode cost measurement. To determine the physician’s cost efficiency statistical result, the Premium program uses the cost measurement(s) applicable to the physician’s Premium specialty. For specialties where both measurements are applied, the patient total cost statistical result is used. Attribution methods based on health plan claims data determine which physicians are responsible for care given to patients. The Premium program compares the physician’s cost efficiency performance to a case-mix adjusted benchmark. When there are a sufficient number of episodes and/or patients attributed, a statistical test is applied to determine if there is a statistically significant difference between the physician’s performance and the benchmark. The physician meets the Premium program cost efficiency criteria when the physician’s performance is statistically lower than the benchmark and the physician meets the Premium program quality criteria.

Use the links below to view the detailed methodology available to physicians, which includes information about the data, measures and statistical methods used to determine a physician’s designation:

- UnitedHealth Premium Designation Program Detailed Methodology

- UnitedHealth Premium Designation Program Supplemental Methodology for the Medica Service Area (Minnesota, North Dakota, South Dakota and portions of western Wisconsin)

6) What is the evaluation process for determining designations?

Designation is a two-stage process. First, a doctor is evaluated for quality. Those that meet the quality guidelines are then evaluated for cost efficiency.

**Quality designation:** The evaluation of quality is based on an analysis of 38 months of collected paid claims for UnitedHealthcare members. Quality is the primary program
measurement, assessed using national standardized measures. The Premium program uses relevant measures that can be assessed using health plan claims data and that are useful in determining differences in physician performance. The Premium program also counts several non-claims based programs towards quality designation for the specialties appropriate to each program. These include National Committee for Quality Assurance (NCQA) recognition programs and Bridges to Excellence (BTE) programs.

**Cost efficiency designation:** Only doctors who meet the UnitedHealth Premium quality criteria are eligible for the cost efficiency evaluation. Cost efficiency is based on factors such as the use and price of diagnostic testing, prescribed medications, procedures and follow-up care in comparison to other doctors in the same specialty in the same geographic area. In order to make an “apples-to-apples” comparison, the cost efficiency evaluation accounts for the case mix of the patient that the doctor treats.

7) **Who is eligible for evaluation in the program?**
The Premium program evaluates more than 375,000 doctors across most states. Physicians are evaluated by the Premium program when they:
- Have an active UnitedHealthcare Commercial fee-for-service contract and
- Practice in a state and county included in the Premium program; and
- Practice in a credentialed specialty included in the Premium program. For purposes of evaluation, multiple credentialed specialties may be combined into a single Premium specialty.

Doctors who do not have enough data to be evaluated may meet the quality and/or cost efficiency criteria based on their affiliated medical group results for their Premium specialty. Medical group quality and cost efficiency results are determined for each Premium specialty represented within the medical group using the same methodology applied to physicians.

The UnitedHealth Premium program includes specialties that have national quality standards that can be evaluated using paid claims data. Click here to see a complete list of all specialties and conditions.

8) **Why does the Premium Designation program designate individual doctors and not designate the group?**
The Premium designation program bases its methodology on clinical information from individual doctors’ health care claims. This designation also helps consumers make more informed and personally appropriate physician choices for their medical care.

9) **Can a doctor appeal his or her designation?**
Yes, doctors have the opportunity to review and request a reconsideration of the data that was used for the Premium designation evaluation. All reconsideration requests are processed as described in the program’s detailed description. A reconsideration request can correct facts that are used in the methodology, but the methodology itself is fixed under this NCQA accredited program. Doctors can submit a Premium reconsideration request online via the Premium website located on UnitedHealthcareOnline.com.

10) **Are doctors in all areas of the U.S. evaluated for the program?**
The UnitedHealth Premium program is available in a majority states. Click here to see Premium Program availability.

The UnitedHealth Premium program includes specialties that have national quality standards that can be evaluated using paid claims data. Click here to see a complete list of all specialties and conditions.
Who do I contact if I have a question, feedback, or a complaint about the program?

If you have questions or a complaint about the UnitedHealth Premium designation program, you may call Customer Care at the number found on your ID card from 8:00 a.m. - 8:00 p.m. ET, Monday-Friday.

The National Committee for Quality Assurance (NCQA) is an independent not-for-profit organization that uses standards, clinical performance measures and member experience to evaluate the quality of health plans. NCQA serves as an independent ratings examiner for UnitedHealthcare, reviewing how the UnitedHealth Premium designation program meets criteria required by the State of New York. The NCQA Ratings Examiner Report provides information on how health plans in New York evaluate physicians in their networks for quality and cost efficiency. You can view the report by visiting http://nyrxreport.ncqa.org/Overview.aspx.

If you have a complaint about the UnitedHealth Premium designation program, in addition to registering that complaint with UnitedHealthcare, you may also register your complaint with the NCQA by writing to customersupport@ncqa.org or to NCQA Customer Support, 1100 13th Street NW, Suite 1000, Washington, DC 20005.

As part of the development of the UnitedHealth Premium program, we solicit input and feedback from consumers, employers and physicians. We have established national and local physician advisory committees, and we gain additional input from surveys and meetings with physicians, consumers and employers. Such input and feedback is incorporated into the program on an ongoing basis. If you would like to provide feedback on the program, please email PremiumProgram@uhc.com.

Additional Information on the Premium Designation Program

If you have questions about program methodology (including a complete list of measures used to evaluate physicians, measure specifications, how patients are attributed to physicians, how the program considers measurement error and measure reliability, and how outlier cases are handled), please email PremiumProgram@uhc.com. If you have questions about program logistics (including the number or percentage of physicians that have results in your area, and the percentage of payments made to physicians based on performance) or you would like to provide feedback on the program, please send an email to PremiumProgram@uhc.com.

Important Notes about the Program

The UnitedHealth Premium® designation program is a resource for informational purposes only. Designations are displayed in UnitedHealthcare online physician directories at myuhc.com® and oxfordhealth.com. You should always visit myuhc.com or oxfordhealth.com for the most current information. Premium designations are a guide to choosing a physician and may be used as one of many factors you consider when choosing a physician. If you already have a physician, you may also wish to confer with him or her for advice on selecting other physicians. Physician evaluations have a risk of error and should not be the sole basis for selecting a physician. Please visit myuhc.com for detailed program information and methodologies.

Click here to see a complete list of the specialties and medical conditions.

All UnitedHealthcare contracted doctors, regardless of designation status, remain part of the UnitedHealthcare network. The UnitedHealth Premium designation program is not a separate network or a network within a network.