

UnitedHealth Premium

Total cost of care scoring and rating



Additional UnitedHealth Premium® methodology documents are located on unitedhealthpremium.uhc.com.

Total cost of care

Total cost of care is evaluated with the same methodology used for efficient quality care with the following key differences:

- Premium only uses health plan claims data for patients enrolled in UnitedHealthcare commercial fee-for-service plans.
- Premium uses actual allowed costs, which are the amounts paid by the health plan and the patient for the care received.
- Premium uses only the most recent year for evaluation when there are enough patients or episodes attributed. When there are not enough patients or episodes attributed for the most recent year alone, both years are used.
- Premium uses a target benchmark rather than a minimum score benchmark. The target benchmark is established at the 75th percentile.

Physicians whose performance is not statistically different than the target benchmark receive a total cost of care score of 25. Physicians whose performance is statistically different than the target benchmark receive the score corresponding to the lowest or highest percentile level at which the physician's performance is statistically lower or higher than the adjusted sum of ranks at that level.

Physicians are also assigned a total cost of care rating. Total cost of care ratings range from A to G, with A being the most cost efficient and G being the least cost efficient. A rating may be assigned based on the physician's or an affiliated specialty group's performance for the current version or the physician's performance for the previous version.

Step 1. Physician performance – Current version

Physicians are assigned a rating as follows based on their performance percentile.

Rating assignments	
Percentile	Rating
< 10th	A
< 50th	B
< 75th	C
Not enough data to evaluate	D
Not different than 75th	E
> 75th	F
> 90th	G

Step 2. Specialty group result – Current version

Physicians who do not have enough attributed patients or episodes may be assigned a rating based on an affiliated medical group's performance for their Premium specialty within the same geographic area.

To qualify, the affiliated specialty group must meet the Premium Care criteria and have a rating of A, B, C or E. If a physician has more than one qualifying affiliated specialty group, the physician is assigned the highest rating.

Step 3. Physician result – Previous version

Physicians from step 2 who are not affiliated with a qualifying specialty group as well as physicians with a current version rating of E may be assigned their previous version rating, provided:

- Their current and previous version Premium specialty is the same.
- Their previous version rating was based on that version's physician or specialty group performance; and
- Their previous version rating was an A, B or C.

Physicians with enough attributed patients or episodes with an E rating are assigned the previous version rating if the previous version rating is A, B or C with a designation of Premium Care.

Step 4.

Physicians with a rating of D after steps 1–3, are assigned a rating of E if any affiliated specialty group has a rating of F or G (statistically high cost).

Important notes about UnitedHealth Premium

The information from UnitedHealth Premium is not an endorsement of a particular physician or health care professional's suitability for the health care needs of any member. UnitedHealthcare does not practice medicine nor provide health care services. Physicians are solely responsible for medical judgments and treatments.

A Premium Care Physician designation does not guarantee the quality or the outcome of any health care services members receive. The fact that a physician does not have a Premium Care Physician designation does not mean the physician does not provide quality health care services.

All physicians in the UnitedHealthcare Network have met certain minimum credentialing requirements. Regardless of whether a physician has received a Premium Care Physician designation, members have access to all physicians in the UnitedHealthcare Network as described in the member's benefit plan.

There are various reasons why a physician may not be designated as a Premium Care Physician. A physician may not receive a designation because that physician has not been evaluated. This occurs when a physician does not practice in a specialty or market that is evaluated by Premium, or the physician's evaluation is in process. This also occurs when there are not enough measures, patients, and or episodes attributed to the physician for evaluation. This is not an indicator of the total number of patients treated by the physician, or the number of procedures performed by the physician.

UnitedHealthcare informs members that designations are intended only as a guide when choosing a physician and should not be the sole factor in selecting a physician. Members are encouraged to discuss designations with a physician before choosing them or consult with their current physician(s) for advice on selecting other physicians.

As with all programs that evaluate performance based on evaluation of a sample, there is a risk of error.

There is a risk of error in the claims data used and in the way patient care is attributed to physicians. UnitedHealth Premium uses statistical testing to compare a physician's performance to benchmarks. There is a risk of error in statistical tests when applied to the data and a result based on statistical testing is not a guarantee of correct inference or classification. Physicians have the opportunity to review the data and evaluation results and may submit requests for changes and or corrections.

The information contained in this document is subject to change.

Learn more

UnitedHealth Premium | unitedhealthpremium.uhc.com

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