

August 19, 2008

UnitedHealthcare announces its next review cycle for the UnitedHealth Premium® designation program

UnitedHealthcare is announcing its upcoming review cycle for the UnitedHealth Premium® designation program. This month UnitedHealthcare will send an introductory letter to practice administrators in the markets where the Premium program is implemented. This letter will describe the process for the new assessment period.

UnitedHealthcare is committed to working in collaboration with physicians and medical specialty societies. The enhancements to the Premium program for 2008 incorporate recommendations from the physician community, medical specialty societies, and physician advisory boards. The UnitedHealth Premium designation program will continue to seek out and respect the collegial and collaborative input of physicians and their organizations as we all work together to advance performance assessment, improve clinical care, and support consumers through access to health information to make more informed and personally appropriate health care decisions.

The assessment reports for the next designation cycle are based on refreshed paid claims data and will be sent to physicians in October. Comprehensive information about the program is available on UnitedHealthcare's physician Web site located at www.UnitedHealthcareOnline.com. Physicians are encouraged to access this information in order to prepare for the review of their individual data when the reports are issued in October. UnitedHealthcare will notify physicians of their individual designation status at least 45 days prior to any public disclosure of the results to give physicians the opportunity to seek clarification and, if necessary, to request reconsideration. New designations will be available on their consumer Web sites by the end of the year.

UnitedHealthcare looks forward to working with physicians and state medical societies to make the operation of this program as fair, transparent and convenient as possible. UnitedHealth Premium program advisors are available to answer your questions toll-free at (866) 270-5588 or via email at unitedpremium@uhc.com.

UnitedHealth Premium[®] physician designation program

Methodology Enhancements for 2008

Resources

- ▶ **Phone:** Toll-free, (866) 270-5588
- ▶ **Email:** unitedpremium@uhc.com
- ▶ **Web site:**
www.unitedhealthcareonline.com
 > Clinician Resources
 > UnitedHealth Premium

Quality Designation	Rationale for Change
Minimum sample size increased to 30 measures among 5 patients for designation.	Larger sample sizes are more statistically robust.
Quality measures removed: <ul style="list-style-type: none"> ▪ Obesity ▪ Acute otitis media, re-evaluation within 6 weeks for children under 5 years of age 	<p>Variations in member benefit plans could lead to inconsistent results that are not due to physician factors</p> <p>Acceptable clinical variation and practice patterns for otitis media make this rule less applicable.</p>
Quality measures added: <ul style="list-style-type: none"> ▪ Infectious disease: Hyperlipidemia, diabetes ▪ Ob-Gyn: Hyperlipidemia, hypertension, osteoporosis, depression, diabetes 	Recognize and give credit for the primary care delivered by gynecologists and infectious disease practitioners. Increase sample size by increasing the number of measures available.
Increase the quality threshold from 70% to 75%.	Incent the delivery of the highest number of evidence-based services to our members.

Efficiency Designation	Rationale for Change
Costs of routine examinations and vaccinations removed from cost efficiency calculations.	Encourage the provision of these services by not counting episodes which contain them primarily.
Added a minimum threshold for attribution of episodes of care: a physician must be responsible for at least 30% of an episode's costs.	Although the large majority of episodes are clearly managed by one physician alone, we add this safeguard so that physicians with < 30% of an episode's costs will not be evaluated on episodes involving multiple physicians.
Establish separate benchmarks (expected costs) for episodes among patients with and without prescription claims.	Recognize physicians who are cost-efficient in prescribing patterns as well as those who are cost-efficient in other areas.
Market episode benchmark: Require at least 50 episodes to establish an average (expected) cost.	Prevent uncommon conditions from affecting physician cost-efficiency measurement

These changes apply to nonprocedural physicians. For a complete description of the program's methodology, please visit our physician Web site at UnitedHealthcareOnline.com > Clinician Resources > UnitedHealth Premium and select "UnitedHealth Premium Methodology – Detail."



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