

Premium Specialty: Ear, Nose and Throat

Credentialed Specialties Include: Laryngology, Otolaryngology, Otology, Pediatric Otolaryngology, Rhinology, Surgery Head and Neck

Patient Episode Cost

Use this document with the UnitedHealth Premium® Program Methodology document at UnitedHealthPremium.UHC.com. Please review all of the methodology documents to understand the entire Premium methodology.

We evaluate physicians in the Ear, Nose and Throat Premium specialty using the patient episode cost measurement with the attributed condition-based and procedure-based episodes listed in the following chart.

Attribution methods determine which physicians and groups are responsible for care given to patients. Patient episode cost measurement uses the cost-attribution method for condition-based episodes and the rendering-attribution method for procedure-based episodes.

- **Cost:** The physician who was responsible for generating the highest percentage of services, based on normalized cost, in the episode. To make sure there was significant involvement, the attributed physician must be responsible for at least 50% of the normalized cost of the episode.

- **Rendering:** The physician who performed the primary procedure. Performing the primary procedure constitutes significant involvement and therefore no cost percentage threshold is applied.

Please view the [Attribution Methods](#) document to learn more.

For procedure-based episodes, once an anchor procedure is identified, non-anchor claims from related episode treatment groups "target" procedures that are clinically related to the anchor procedure. The non-anchor claims are then grouped to each episode within the Claims Grouping Timeframes noted below.

Please view the [Patient Episode Cost](#) document to learn more.

Condition-Based Episodes

Acute Sinusitis

Allergic Rhinitis

Chronic Sinusitis

Conditional Exam

Congenital and Acquired Anomalies of Ear/Nose/Throat

Hearing Disorders, Bilateral

Hearing Disorders, Single Side

Inflammation of Esophagus

Inflammation of Oral Cavity

Malignant Neoplasm of Ear/Nose/Throat

Neurological Diseases Signs and Symptoms

Non-Malignant Neoplasm of Ear/Nose/Throat

Obstructive Sleep Apnea

Condition-Based Episodes
Other Disorders of Ear/Nose/Throat
Other Infections of Ear/Nose/Throat
Other Inflammatory Conditions of Ear/Nose/Throat
Other Sleep Disorders*
Otitis Media, Bilateral
Otitis Media, Single Side
Otolaryngology Diseases Signs and Symptoms
Routine Exam
Tonsillitis, Adenoiditis or Pharyngitis

*Episodes for these conditions are excluded from patient episode cost measurement for patients whose pharmacy cost data isn't available.

Procedure-Based Episodes	Claims Grouping Timeframe	
	Days Before	Days After
Adenoidectomy	14	30
Adenoidectomy and Tonsillectomy	14	30
Adenoidectomy and Tonsillectomy - 12 Years and Under	14	30
Laryngoscopy with Endoscopy - Direct	14	42
Laryngoscopy with Endoscopy - Flexible	14	42
Laryngoscopy with Treatment	14	42
Myringotomy (Note: evaluation for single-side and bilateral procedures is performed separately)	14	14
Nasal Ablation	14	42
Nasal Ablation - Submucosal	14	42
Nasal Endoscopy with CSF Leak Repair (Note: evaluation for single-side and bilateral procedures is performed separately)	14	14
Nasal Endoscopy with Dilation (Note: evaluation for single-side and bilateral procedures is performed separately)	14	14
Nasal Endoscopy with Treatment (Note: evaluation for single-side and bilateral procedures is performed separately)	14	14
Nasal Vestibule Repair	14	42
Septoplasty	14	42
Thyroidectomy	14	42
Tonsillectomy	14	30
Tonsillectomy - 12 Years and Under	14	30
Turbinate Excision (Note: evaluation for single-side and bilateral procedures is performed separately)	14	42

Procedure-Based Episodes	Claims Grouping Timeframe	
	Days Before	Days After
Tympanic Membrane Repair (Note: evaluation for single-side and bilateral procedures is performed separately)	14	42
Tympanoplasty (Note: evaluation for single-side and bilateral procedures is performed separately)	14	42
Tympanostomy - with Anesthesia (Note: evaluation for single-side and bilateral procedures is performed separately)	14	30
Tympanostomy - without Anesthesia (Note: evaluation for single-side and bilateral procedures is performed separately)	14	30

Important Notes

The information from the UnitedHealth Premium program is not an endorsement of a particular physician or health care professional's suitability for the health care needs of any particular member. UnitedHealthcare does not practice medicine nor provide health care services. Physicians are solely responsible for medical judgments and treatments supplied. A Premium Care Physician designation does not guarantee the quality of health care services members will receive from a physician and does not guarantee the outcome of any health care services members will receive. The fact that a physician doesn't have a Premium Care Physician designation doesn't mean the physician doesn't 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 further described under 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 Premium Care designation because that physician has not been evaluated for a Premium Care designation. This occurs when a physician does not practice in a specialty that is evaluated by the Premium program, or when a physician's evaluation is in process. It also occurs 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, which includes only health plan claims associated with specific Premium program measures and relevant to the physician's specialty. In some cases, there may not be enough data to complete the analytic process from a statistical standpoint. 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. As with all programs that evaluate performance based on analysis of a sample, there is a risk of error. There is a risk of error in the claims data used in the evaluation, the calculations used in the evaluation, and the way the Premium program determined that an individual physician was responsible for the treatment of the patient's condition. Physicians have the opportunity to review this data and submit a reconsideration request. UnitedHealthcare uses statistical testing to compare a physician's results to expected or normative results. 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. We inform members that it is important that they consider many factors and information when selecting a physician. We also inform our members that they may wish to discuss designations with a physician before choosing him or her, or confer with their current physician for advice on selecting other physicians. The information contained in this document is subject to change.

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