



# 2022 Quality Rewards program

UnitedHealthcare Community Plan of Pennsylvania

## Quality Rewards program overview

We created the Quality Rewards program to:

- **Recognize care providers** for offering quality service to UnitedHealthcare Community Plan members
- **Help our members get the right care, at the right time** and the right place
- **Reward excellence with cash incentives\***
- **Address member care opportunities** based on Healthcare Effectiveness Data and Information Set (HEDIS®) measures tied to access to care, doctor/patient communication, children's health and diabetes monitoring/treatment
- **Help improve access** for our members by rewarding care providers for accepting new patients and decreasing inpatient admissions

**The Quality Rewards program is available to eligible:**

- Primary care providers (PCPs)
- Federally Qualified Health Centers (FQHCs) with dental practices
- Accountable care organizations (ACOs)
- OB-GYN/nurse-midwife practices

The program has different requirements and benchmarks based on care provider and/or organization type.

*\*Incentive bonuses will be paid to network UnitedHealthcare Community Plan care providers who are in good standing as of Dec. 31, 2022.*

## PCP quality benchmarks

### Structured data incentive

#### Eligible PCPs:

- Continuity of care documents (CCDs) and flat files monthly or an agreed upon cadence by the health plan
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

### Well-Child Visits in the First 15 Months of Life (6 or more visits)

#### Eligible pediatricians and family practice care providers:

- Have at least 20 UnitedHealthcare Community Plan members who are assigned to their tax ID number (TIN) and included in their HEDIS denominator for the 2022 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

### Well-Child Visits (ages 3–21)

#### Eligible pediatricians and family practice care providers:

- Have at least 100 children who are UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2022 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

### Controlling High Blood Pressure (ages 18–85)

#### Eligible care providers:

- Have at least 50 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2022 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

Note: All HEDIS measure target rates are subject to change when NCQA Quality Compass data is released in 2022.

HEDIS measure	Goal	Incentive reward
Comprehensive Diabetes Care (CDC)	Monthly files	\$1,000
Controlling Blood Pressure (CBP)	Monthly files	\$1,000

\*Annual bonus based on being active as of Dec. 31, 2022.

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	55% or more	20	\$20 per member
75th	61% or more	20	\$50 per member

\*Target rate subject to change when NCQA Quality Compass data is released in 2022

\*\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2022

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	45% or more	100	\$10 per member
75th	54% or more	100	\$20 per member

\*Target rate subject to change when NCQA Quality Compass data is released in 2022

\*\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2022

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	55% or more	50	\$10 per member
75th	63% or more	50	\$50 per member

\*Target rate subject to change when NCQA Quality Compass data is released in 2022

\*\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2022

## Comprehensive Diabetes Care — HbA1c Poor Control > 9% (ages 18–75)

### Eligible care providers:

- Have at least 50 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2022 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

To get credit for this measure, CPT® II codes should be billed on claims on the date of service.

## Asthma Medication Ratio (ages 5–64)

### Eligible care providers:

- Have at least 20 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2022 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

## Blood Lead Level Screening for Children

### Eligible pediatrician and family practice care providers:

- Have at least 20 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2022 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

## Developmental Screening In the First 3 Years of Life

### Eligible pediatrician and family practice care providers:

- Have at least 20 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2022 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

To get credit for this measure, CPT code 96110 should be billed on claims on the date of service.

## Incentive programs for the following health equity measures:

- Prenatal Care in the First Trimester
- Postpartum Care
- Well-Child Visits in the First 15 Months of Life
- Controlling High Blood Pressure
- Comprehensive Diabetes Care: HbA1c Poor Control (>9.0%)

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	43% or less*	50	\$50 per member
75th	38% or less*	50	\$100 per member

\*Target rate subject to change when NCQA Quality Compass data is released in 2022

\*\*Annual bonus based on HEDIS denominator as of Dec. 31, 2022

Note: Inverse measure means lower result value is better

Note: You do not need to send us test results if they were processed through Quest and LabCorp

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	65% or more	20	\$25 per member
75th	71% or more	20	\$75 per member

\*Target rate subject to change when NCQA Quality Compass data is released in 2022

\*\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2022

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	72% or more	20	\$10 per member
75th	78% or more	20	\$25 per member

\*Target rate subject to change when NCQA Quality Compass data is released in 2022

\*\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2022

HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
At least 62% compliance rate	20	\$25 per member

\*Target rate subject to change when NCQA Quality Compass data is released in 2022

\*\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2022

## Health equity measure goal

We'll use the measure rate results of the African-American and Caucasian populations and will calculate a percentage difference in overall measure performance. Those groups with a 5% or less disparity in performance difference will receive \$500 per measure. (Minimum of 50 members for each denominator, containing a minimum of 20 African-American members in that denominator.)

## FQHCs with dental practices quality benchmark

### Annual Dental Visit (ADV) (members ages 2–20)

**Eligibility:** FQHCs with dental practices in their primary care offices

**To determine the ADV incentive amount for each eligible FQHC:**

- We'll use data from Jan. 1 to Dec. 31, 2021, as a baseline for the number of ADVs for members ages 2 to 20
- We'll compare the baseline result with the number of ADVs during the same time frame in 2022

The minimum panel size is 150 UnitedHealthcare Community Plan members as of Dec. 31, 2022.

#### Incentive opportunities

**Opportunity 1:** FQHCs that have a 5% improvement in their ADV\* rate will receive \$7,500 based on claim encounter data.

**Opportunity 2:** FQHCs will receive a \$5,000 bonus for reaching an ADV rate of at least 46% (50th percentile).<sup>†</sup>

FQHCs will receive a \$10,000 bonus for reaching an ADV rate of at least 52% (75th percentile).<sup>†</sup>

*\*Target rate subject to change when NCQA Quality Compass data is released in 2022*

*\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2022*

*Note: FQHCs are eligible for improvement, HEDIS percentile and PCP ADV care opportunity incentives*

## ACOs with shared savings agreements quality benchmark

### Reducing potentially preventable readmissions

**Eligibility:** ACOs with shared savings agreements and high-volume care providers

We're offering this incentive to ACO care providers because they have access to our population registry.

#### Incentive opportunities

ACOs will receive \$5,000 if a care provider has a 10% reduction in their hospital readmission rate from 2021 to 2022.

## OB-GYN/nurse-midwife practice quality benchmarks

### Prenatal care in the first trimester

**Eligibility:** OB-GYNs/nurse-midwives participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

#### Incentive opportunities

**Opportunity 1:** Care providers will receive \$15 for each completed Obstetrical (OB) Needs Assessment form sent within 5 days of a member's first OB visit.

**Opportunity 2:** Care providers can earn \$40\* for forms sent electronically using the OB cloud application.

*\*The \$40 payment amount for electronic form submission is in place of the \$15 for paper submission. You can earn one incentive or the other for each plan member – not both.*

### Postpartum care

**Eligible OB-GYNs/nurse-midwives:**

- Have at least 20 patients who are UnitedHealthcare Community Plan members and assigned to their TIN or are seen by the practice
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2022

#### Incentive opportunities

**Opportunity 1:** Care providers will receive \$50 per OB patient when the 50th percentile (76%)<sup>†</sup> of members reach the measure goal.

**Opportunity 2:** Care providers will receive \$200 per OB patient when the 75th percentile (80%)<sup>†</sup> of plan members reach the measure goal.

*\*Target rate subject to change when NCQA Quality Compass data is released in 2022*

*\*\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2022*



## Care opportunity closure incentives

Care providers can earn additional incentives for addressing the following care opportunities based on the claim data or medical record documentation we receive.

- **Annual dental visit** — \$10 per member
- **Postpartum care** — \$50 per chart received
- **Blood lead level screening for children** — \$25 per chart received
- **Comprehensive diabetes care — HbA1c poor control > 9%**
  - For any lab result charts we receive, you get \$25. If that result is 9% or less, you get an additional \$25 for a total of \$50. When the initial lab result received is 9.1% or higher, and the member is retested and we receive that lab result from the care provider, another \$25 will be awarded.

In mid-2022, we'll send you a list of members who may need these care opportunities addressed. We'll make payments quarterly once you submit appropriate documentation showing members' care opportunities are closed.



## Incentive payment schedule

### PCP incentive

- We'll send the incentive payment(s) for meeting quality benchmarks during a calendar year by the second quarter of the following year
  - For example, we'll send payments when you reach quality benchmarks in 2022 by the second quarter of 2023
- We'll send the payments for care opportunity closures periodically during a calendar year based on the timing of our care opportunity list mailings

### OB-GYN/nurse-midwife incentive

- We'll send the incentive payment(s) for paper and electronic OB Assessment forms quarterly, within 120 days from the end of a quarter
- We'll pay all other incentives semi-annually by Dec. 31, 2022, and June 30, 2023

**Note:** The Quality Rewards program runs by calendar year and is funded by the Pennsylvania Department of Human Services. Financial bonuses under the program won't exceed 24.99% of the total potential annual payments we make to PCPs.



# Preferred Provider overview

Care providers can earn Preferred Provider status by meeting 8 of 10 requirements. The minimum panel size is 250 UnitedHealthcare Community Plan members.

## Preferred Provider status requirements

Accepting new plan members

Offer extended office hours, including 2 weeknights until 7 p.m. or a combined 3 hours on Saturday or Sunday

Have a claims electronic data interchange (EDI) submission rate greater than 90%

Developmental Screening compliance of 62% or higher

HEDIS Well-Child Visit (ages 3–21) rate higher than the 50th percentile

HEDIS Controlling High Blood Pressure measure rate higher than the 50th percentile

HEDIS Comprehensive Diabetes Care – HbA1c level  $\leq 9$  rate better than the 50th percentile

HEDIS Well-Child Visits in the First 15 Months of Life measure rate higher than the 50th percentile – members had 6 or more visits

HEDIS Asthma Medication Ratio rate higher than the 50th percentile

HEDIS Blood Lead Level Screening rate higher than the 50th percentile

Care providers who reach Preferred Provider status will receive:

- Recognition of Preferred Provider designation in the UnitedHealthcare Community Plan care provider directory
- First preference for member auto-assignment/reassignment
- PIN number for expedited service when calling Provider Services or utilization management
- Care management bonus of \$1.50 per member based on member panel size as of Dec. 31, 2022
- Waiver of prior authorization requirements for some services

Waiver of prior authorization requirements doesn't include:

- Admissions to hospitals or skilled nursing and rehab facilities
- Durable medical equipment (DME) more than \$500
- Dental benefits
- Non-covered benefits
- Non-formulary drugs and medications that require prior authorization
- Home health aide
- Enteral nutrition
- Services from out-of-network care providers
- Skilled nursing visits and private duty/shift care nursing services
- Specific medical injectable J codes and CPT codes found on the UnitedHealthcare Community Plan Prior Authorization Pennsylvania Medicaid list located at [UHCprovider.com/PACommunityPlan](https://UHCprovider.com/PACommunityPlan) > Prior Authorization and Notification



## We're here to help

If you have questions, please contact Northeast Provider Relations at [northeastprteam@uhc.com](mailto:northeastprteam@uhc.com).

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