

Network Adequacy Information for Providers

How we build our medical network:

Our medical network consists of a variety of primary care professionals, specialists, hospitals and other facilities across the country. To help provide members with reasonable access to providers who meet their needs, we look at the number of providers and the types of services offered within a geographic area. Additionally, we conduct an assessment of how well the network meets members' cultural needs and preferences, as well as, any special healthcare needs. We make outreach to providers, as needed, in order to recruit them to our network. We also accept requests from employers, members, and providers to accommodate needs and preferences.

Network Provider Quality:

Most providers and facilities must complete our credentialing verification process before joining the network and every three years thereafter. Our credentialing program helps us maintain and improve the quality of care and services delivered to our members.

Between credentialing verifications, we monitor provider quality through a variety of efforts including our Quality Management Program. These efforts include monitoring:

- Access to care
- Quality of care and quality of service
- Trends in grievances and appeals

Access Standards:

Providers must comply with standards that include, but are not limited to:

- Our appointment standards or state specific appointment standards
- PCPs must arrange for 24 hours a day, seven days per week coverage of patients
- Privileges at a participating facility or an arrangement with a participating provider to admit
- Provide services in a culturally competent manner to all members

Please click [here](#) to view our UnitedHealthcare Administrative Guide which is a comprehensive guide to our plans, processes and tools and also describes our provider credentialing program.

