

UnitedHealth Premium Patient annual cost



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

Overview

Patient annual cost is the risk-adjusted total cost per month for a patient for a 1-year period and includes services from episodes for conditions relevant to the scope of practice for the physician's peer specialty. Patient annual cost is risk adjusted by dividing the patient's total cost per month by the patient's risk score, which is based on the patient's conditions and demographic characteristics.

Only patients with at least 7 months of eligibility during calendar years 2025 and/or 2024 are included.

Episodes of care

Patient annual cost includes services from relevant episodes identified by Symmetry® Episode Treatment Groups® (ETG), which group patients' medically consistent illnesses and severities to the same ETG. ETG builds treatment episodes that incorporate inpatient, outpatient, professional, and ancillary services, including pharmaceutical services. Once treatment for an episode starts, ETG continues to collect all clinically relevant information until an absence of treatment is detected. That means all appropriate procedural and cost information is collected and assigned to one treatment episode.

Relevant conditions

There are two methods used to determine if costs from an eligible treatment episode should be included. The method used depends on the episode and the physician's peer specialty.

- **Always include:** Costs from an eligible treatment episode for an attributed patient regardless of the attributed physician's level of involvement in the treatment of the patient's condition
- **Include if involved:** Costs from an eligible treatment episode for an attributed patient only when the attributed physician is responsible for at least 50% of the costs

Annual cost

Annual cost is calculated by adding the costs incurred across all included treatment episodes for a patient for the attributed physician separately for calendar years 2025 and 2024. Costs are included from both complete and incomplete treatment episodes. For cost of care, only the most recent year is used when there are enough patients attributed for evaluation. When there are not enough patients attributed for cost of care for the most recent year alone, both years are used. For efficiency of care evaluation both years are always used.

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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