

Premium Specialty: Cardiology

Credentialed Specialties include: Cardiac Diagnostic; Cardiology; Cardiovascular Disease; Clinical Cardiac Electrophysiology; Interventional Cardiology

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 cardiology Premium specialty using the patient episode cost measurement with the 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. Please view the Attribution Methods document to learn more.

Patient episode cost measurement for Cardiology 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.

For procedure-based episodes, once an anchor procedure is identified, non-anchor claims from related episode treatment groups and “target” procedures that are clinically related to the anchor procedure, are grouped to each episode within the Claims Grouping Timeframe noted below. Please view the Patient Episode Cost document to learn more.

Cardiology Condition-Based Episodes

Aortic Aneurysm
Arterial Inflammation
Atrial Fibrillation & Flutter*
Cardiac Congenital Disorder
Cardiac Infection
Cardiomyopathy
Cardiovascular Diseases Signs & Symptoms
Congestive Heart Failure
Coronary Artery Catheterization - Diagnostic
Coronary Artery Catheterization with Drug Stent
Coronary Artery Catheterization with Non-Drug Stent
Heart Failure, Diastolic
Hypertension
Implantable Device Defibrillator
Implantable Device Pacemaker
Invasive Therapeutic Electrophysiology (Ablation)
Ischemic Heart Disease
Non-Cerebral, Non-Coronary Atherosclerosis
Other Conduction Disorders
Other Diseases of Veins
Pulmonary Heart Disease*
Severe Ventricular Rhythms
Valvular Disorder

Cardiology Condition-Based Episodes (continued)
Varicose Veins of Lower Extremity
Endocrinology Condition-Based Episodes
Diabetes*
Hyperlipidemia, Other*
Hypo-Functioning Thyroid Gland
Obesity
Neurology Condition-Based Episodes
Cerebral Vascular Disease
Preventive & Administrative Condition-Based Episodes
Conditional Exam
Routine Exam
Pulmonology Condition-Based Episodes
Chronic Obstructive Pulmonary Disease
Pulmonary Embolism
Pulmonology Diseases Signs & Symptoms

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

Cardiology Procedure-Based Episodes	Claims Grouping Timeframe	
	Days Before	Days After
Coronary Artery Catheterization - Diagnostic	0	21
Coronary Artery Catheterization with Drug Stent	0	42
Coronary Artery Catheterization with Non-Drug Stent	0	42
Implantable Device Defibrillator	14	42
Implantable Device Pacemaker	14	42
Invasive Therapeutic Electrophysiology (Ablation)	14	42

General Exclusions:

- Procedure-based episodes with a diagnosis code included on the Agency for Healthcare Research and Quality (AHRQ) Trauma Diagnosis Code list (except meniscus tears)
- Procedure-based episodes that are a redo of a prior surgical procedure
- Procedure-based episodes that include services that are grouped to a cancer-related condition-based episode

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