

UnitedHealth Premium® Program Quality Performance Evaluation Example

Use this document with the UnitedHealth Premium® Program Methodology document at [UnitedHealthPremium.UHC.com](https://www.unitedhealthpremium.com). Please review all methodology documents to understand the entire Premium program methodology.

Overview

The Premium program uses a four-step process to evaluate the physician's quality performance.



We've provided an example to help you understand how each step in the process works. You can follow each step to understand how we evaluate a fictional Dr. Smith's quality performance.

Step 1 – Count measures and patients

Using claims data, count the total number of quality measures attributed to the physician. A minimum of 20 measures among at least five patients across all patient populations, conditions and procedures is required to proceed to step 2. If the minimum is not met, proceed directly to Step 4. **In the following example, Dr. Smith is attributed 30 measures for diabetes, 20 measures for coronary artery disease and five measures for hypertension, for a total of 55 measures.**

Step 2 – Determine performance

Sum the attributed measures where the patient meets the quality measure criteria. **In Dr. Smith's example, the number of compliant measures is 23, 20 and 3 resulting in Dr. Smith's quality performance of 46.**

Step 3 – Establish benchmark

Determine the number of measures expected to be compliant at the 50th percentile compliance level by multiplying the number of each measure attributed to the physician by the national compliance rate.¹ **In this example, the national compliance rates for the measures attributed to Dr. Smith are 70%, 70% and 80%. Therefore, the target benchmark is $((.70 * 30) + (.70 * 20) + (.80 * 5)) = 39$.**

Quality measure	Attributed measures	Dr. Smith's quality performance		National compliance rate	Target benchmark	
		Compliant	Non-compliant		Compliant	Non-compliant
Diabetes: Patient(s) 18 - 75 years of age that had a HbA1c test in last 12 reported months	30	23	7	70.0%	21	9
Atrial fibrillation: Patient(s) at high risk for thromboembolism who are currently taking warfarin, an oral thrombin inhibitor, or an oral factor Xa inhibitor	20	20	0	70.0%	14	6
Breast cancer screening: Patient(s) 52 - 74 years of age that had a screening mammogram in last 27 reported months	5	3	2	80.0%	4	1
Totals	55	46	9		39	16
Compliance rate		83.64%			70.91%	

¹ For the National Committee for Quality Assurance (NCQA) all-cause readmission measure, rather than calculating the national compliance rate, the Premium program uses the NCQA specified method to calculate the risk-adjusted expected rate of readmission based on prior and current health of the patient among other factors.

Step 4 – Determine evaluation result

Determine if the physician's quality performance is not statistically less than the target benchmark with 98% confidence by calculating the chi-square result and the phi coefficient.

Formula: chi-square result = $((\text{physician}[\text{compliant}] - \text{benchmark}[\text{compliant}])^2 / \text{benchmark}[\text{compliant}]) + ((\text{physician}[\text{non-compliant}] - \text{benchmark}[\text{non-compliant}])^2 / \text{benchmark}[\text{non-compliant}])$. **When the physician's quality performance is less than the target benchmark, we express the chi-square result as a negative value. In this example, Dr. Smith's chi-square result is $((46 - 39)^2 / 39) + ((9 - 16)^2 / 16) = 4.3189$.**

Formula: phi-coefficient = $\sqrt{\text{chi-square result} / \text{total number of measures attributed to the physician}}$

In this example, Dr. Smith's phi coefficient is $\sqrt{(4.3189/55)} = .2802$

The physician meets the Premium program quality care criteria when the physician's performance is not statistically less than the target benchmark determined by the combination of the chi-square result and phi-coefficient as shown in the table below.

Chi-square result	Phi-coefficient	Evaluation result
Not less than -5.4118	Any value	Meets Criteria
Equal to or less than -5.4118	Equal to or less than (0.112)	Meets Criteria
Equal to or less than -5.4118	Greater than (0.112)	Does Not Meet Criteria
Not Calculated ²	Not Calculated ²	Not Evaluated

² A chi-square result is not calculated for physicians with fewer than 20 measures attributed among at least 5 patients.

In this example, Dr. Smith's chi-square result is not less than -5.4118 so his quality performance is not statistically less than the target benchmark. Therefore Dr. Smith's quality evaluation result is Meets Criteria.

Important notes about the UnitedHealth Premium Program

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 or Quality 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.

Likewise, the fact that a physician has a Not Evaluated for Premium Care or a Does Not Meet Premium Quality Criteria designation does not mean that 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 further described under the member's benefit plan.

The designation of "Not Evaluated for Premium Care" is given 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 is also given 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 Quality Performance Evaluation Example document is subject to change.

Learn more

[UnitedHealthPremium.UHC.com](https://www.unitedhealthcare.com/UnitedHealthPremium.UHC.com)

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