

# 2018 Quality Rewards Program

## UnitedHealthcare Community Plan of Pennsylvania

### Quality Rewards Program Overview

We created the UnitedHealthcare Community Plan of Pennsylvania Quality Rewards Program to:

- **Recognize care providers** for offering quality health care services to UnitedHealthcare Community Plan members.
- **Help our plan members get the right care at the right time** – and in 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 plan members by rewarding care providers for accepting new patients.
- **Help reduce hospitalizations and emergency room visits.**

\*Incentive bonuses will be paid to in-network UnitedHealthcare Community Plan care providers who are in good standing as of Dec. 31, 2018.

### New for 2018

Starting this year, you can earn an incentive for addressing the **Annual Dental Visit** care opportunity for your patients ages 2-20 who are UnitedHealthcare Community Plan members.

### Primary Care Incentive: All Primary Care Providers (PCPs)

#### Emergency Room (ER) Utilization

**Eligibility:** PCPs at practices who:

- Have 250 or more UnitedHealthcare Community Plan members assigned to their tax ID.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

**Important note:** The ER visit rate is defined as the number of visits per 1,000 UnitedHealthcare Community Plan members. The rate will be risk-adjusted based on the episode risk group (ERG) score for each assigned member within a practice’s sample size.

The ERG model helps support risk assessment for all population, and is based on member demographics, age and gender, including both elderly and non-elderly individuals. This allows for consistent methodology across the sample.

### Quality Targets and Incentive Amounts

HEDIS Percentile	HEDIS Measure Target Rate	Number of Plan Members	Incentive Reward
50 <sup>th</sup>	63 ER Visits	Per 1,000 members per month	\$2 per member*
75 <sup>th</sup>	52 ER Visits	Per 1,000 members per month	\$4 per member*

\*Annual bonus based on number of members in panel size as of Dec. 31, 2018.



## Primary Care Incentive: Pediatricians and Family Practice Adolescent Well-Care Visits (members ages 12-21)

**Eligibility:** Pediatricians and family practice care providers who:

- Have at least 100 adolescent UnitedHealthcare Community Plan members who are assigned to their tax ID and included in their HEDIS denominator for the 2018 measurement year.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

### Quality Targets and Incentive Amounts

HEDIS Percentile	HEDIS Measure Target Rate	Minimum Number of Eligible Members	Incentive Reward
50 <sup>th</sup>	50% or more	100	\$10 per member*
75 <sup>th</sup>	60% or more	100	\$20 per member*

\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2018.

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

**Eligibility:** Pediatricians and family practice care providers who:

- Have at least 20 children who are UnitedHealthcare Community Plan members assigned to their tax ID and in their HEDIS denominator for the 2018 measurement year.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

### Quality Targets and Incentive Amounts

HEDIS Percentile	HEDIS Measure Target Rate	Minimum Number of Eligible Members	Incentive Reward
50 <sup>th</sup>	62% or more	20	\$50 per member*
75 <sup>th</sup>	69% or more	20	\$100 per member*

\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2018.

## Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life

**Eligibility:** Pediatricians and family practice care providers who:

- Have at least 20 children who are UnitedHealthcare Community Plan members assigned to their tax ID and in their HEDIS denominator for the 2018 measurement year.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

### Quality Targets and Incentive Amounts

HEDIS Percentile	HEDIS Measure Target Rate	Minimum Number of Eligible Members	Incentive Reward
50 <sup>th</sup>	72% or more	20	\$25 per member*
75 <sup>th</sup>	79% or more	20	\$50 per member*

\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2018.

**Primary Care Incentive: PCPs – Adult Members**  
**Controlling High Blood Pressure (members ages 18-85)**

**Eligibility:** Care providers who:

- Have at least 50 UnitedHealthcare Community Plan members assigned to their tax ID and in their HEDIS denominator for the 2018 measurement year.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

**Important note:** To get credit for this measure, CPT® II codes **must** be billed on claims on the date of service.

**Quality Targets and Incentive Amounts**

HEDIS Percentile	HEDIS Measure Target Rate	Minimum Number of Eligible Members	Incentive Reward
50 <sup>th</sup>	57% or more	50	\$50 per member*
75 <sup>th</sup>	65% or more	50	\$100 per member*

\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2018.

**Comprehensive Diabetes Care HbA1c Poor Control > 9 percent (members ages 18-75)**

**Eligibility:** Care providers who:

- Have at least 50 UnitedHealthcare Community Plan members assigned to their tax ID and in their HEDIS denominator for the 2018 measurement year.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

**Important note:** To get credit for this measure, CPT II codes **must** be billed on claims on the date of service.

**Quality Targets and Incentive Amounts**

HEDIS Percentile	HEDIS Measure Target Rate	Minimum Number of Eligible Members	Incentive Reward
50 <sup>th</sup>	41% or less*	50	\$50 per member**
75 <sup>th</sup>	36% or less*	50	\$100 per member**

\*Inverse measure means lower result value is better.

\*\*Annual bonus based on HEDIS denominator as of Dec. 31, 2018.

**Primary Care Incentive: PCPs – Adult and Child Members**

**Medication Management for People With Asthma – 75 Percent of Treatment Period (members ages 5-64)**

**Eligibility:** Pediatricians and family practice care providers who:

- Have at least 20 UnitedHealthcare Community Plan members assigned to their tax ID and in their HEDIS denominator for the 2018 measurement year.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

**Quality Targets and Incentive Amounts**

HEDIS Percentile	HEDIS Measure Target Rate	Minimum Number of Eligible Members	Incentive Reward
50 <sup>th</sup>	33% or more	20	\$50 per member*
75 <sup>th</sup>	40% or more	20	\$100 per member*

\*Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2018.



## Dental Incentive: Federally Qualified Health Centers (FQHCs) With Dental Practices Annual Dental Visit (members ages 2-20)

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

**Important note:** To determine the Annual Dental Visit (ADV) amount for each eligible FQHC:

- **We'll use data from Jan. 1 to Dec. 31, 2017**, as a baseline for the number of ADVs for plan members ages 2 to 20.
- **We'll compare the baseline result** with the number of ADVs during the same timeframe in 2018.
- **The minimum panel size is 150 UnitedHealthcare Community Plan members** as of Dec. 31, 2018.

### Quality Targets and Incentive Amounts

Incentive Opportunities
<b>Opportunity 1:</b> FQHCs that have a 5 percent improvement in their ADV* rate will receive \$7,500 based on claim encounter data.
<b>Opportunity 2:</b> FQHCs will receive a \$5,000 bonus for reaching an ADV rate of at least 55 percent (50 <sup>th</sup> percentile).
FQHCs will receive a \$10,000 bonus for reaching an ADV rate of at least 62 percent (75 <sup>th</sup> percentile).

\*FQHCs are eligible for improvement, HEDIS percentile and PCP ADV care opportunity incentives.

## Accountable Care Organizations (ACOs) With Shared Savings Agreements

### Reducing Potentially Preventable Readmissions

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

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

### Quality Targets and Incentive Amounts

Incentive Opportunity
ACOs will receive \$25,000 if a care provider has a 10 percent reduction in their hospital readmission rate from 2017 to 2018.

## OB-GYN/Nurse-Midwife Practice Incentives

### Prenatal Care in the First Trimester

**Eligibility:** OB-GYNs/nurse-midwives who are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

### Quality Targets and Incentive Amounts

Incentive Opportunities
<b>Opportunity 1:</b> Care providers will receive \$25 for each completed Obstetrical (OB) Needs Assessment Form sent within five days of a plan member's first OB visit.
<b>Opportunity 2:</b> Care providers can earn \$75* for forms sent electronically using the OB Cloud Application.

\*The \$75 payment amount for electronic form submission is in place of the \$25 for paper submission. You can earn one incentive or the other for each plan member – not both.



## Frequency of Ongoing Prenatal Care $\geq$ 81 Percent

**Eligibility:** OB-GYNs/nurse-midwives who:

- Have at least 20 patients who are UnitedHealthcare Community Plan members and assigned to their tax ID or are seen by the practice.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

### Quality Targets and Incentive Amounts

Incentive Opportunities
<b>Opportunity 1:</b> Care providers will receive \$100 per OB patient when 61 percent of plan members reach the measure goal.
<b>Opportunity 2:</b> Care providers will receive \$200 per OB patient when 72 percent of plan members reach the measure goal.

## Postpartum Care

**Eligibility:** OB-GYNs/nurse-midwives who:

- Have at least 20 patients who are UnitedHealthcare Community Plan members and assigned to their tax ID or are seen by the practice.
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2018.

### Quality Targets and Incentive Amounts

Incentive Opportunities
<b>Opportunity 1:</b> Care providers will receive \$100 per OB patient when 64 percent of plan members reach the measure goal.
<b>Opportunity 2:</b> Care providers will receive \$200 per OB patient when 69 percent of plan members reach the measure goal.

## Care Opportunity Closure Incentives

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

- **NEW! Annual Dental Visit** – \$50 per plan member
- **Adolescent Well-Care Visits** – \$25 per plan member
- **Comprehensive Diabetes Care – HbA1c Poor Control > 9 Percent**
  - **\$25 per chart received** – any HbA1c test received, even if poor result
  - **\$75 per chart received** – HbA1c test received with result  $\leq$  8.9 percent
- **Postpartum Care** – \$50 per plan member

**Important note:** In mid-2018, we'll send you a list of UnitedHealthcare Community Plan members who may need these care opportunities addressed. Payments will be made quarterly once you submit appropriate documentation showing members' care opportunities are closed.



## Incentive Payment Schedule

### PCP Incentive

- Incentive payment(s) for meeting quality benchmarks during a calendar year will be sent by the second quarter of the following year.
  - For example, payments for reaching quality benchmarks in 2018 will be sent by second quarter 2019.
- Payments for care opportunity closures will be sent periodically during a calendar year based on the timing of our care opportunity list mailings.

### OB-GYN/Nurse-Midwife Incentive

- Incentive payment(s) for paper and electronic OB Assessment Forms will be sent quarterly within 120 days from the end of the quarter.
- All other incentives will be paid semi-annually by Dec. 31, 2018, and June 30, 2019.

**Important note:** The Quality Rewards Program runs by calendar year and is funded by the Pennsylvania Department of Human Services. Financial bonuses under the program will not exceed 24.99 percent of the total potential annual payments made by UnitedHealthcare Community Plan for Families to PCPs.

## Preferred Provider Overview

**Care providers can reach Preferred Provider status for meeting eight of the following 10 required goals:\***

1. Accepting new plan members
2. Offering extended office hours – two weeknights until 7 p.m. or a combined three hours on Saturday or Sunday
3. Having a claims electronic data interchange (EDI) submission rate > 90 percent
4. Achieving ER utilization better than health plan average
5. Reaching a HEDIS Adolescent Well-Care Visits measure rate higher than the 50<sup>th</sup> percentile
6. Attaining a HEDIS Controlling High Blood Pressure measure rate higher than the 50<sup>th</sup> percentile
7. Having a HEDIS Comprehensive Diabetes Care – HbA1c Control measure rate higher than the 50<sup>th</sup> percentile – patients with an HbA1c level ≤ 8.9 percent
8. Achieving a HEDIS Well-Child Visits in the First 15 Months of Life measure rate higher than the 50<sup>th</sup> percentile – six or more visits
9. Reaching a HEDIS Well-Child Visits in the Third, Fourth, Fifth and Sixth Years of Life measure rate higher than the 50<sup>th</sup> percentile
10. Having a HEDIS Medication Management for People With Asthma measure rate higher than the 50<sup>th</sup> percentile for members ages 5-64 – patients on medication for 75 percent of their treatment period

\* *Minimum panel size is 250 UnitedHealthcare Community Plan members.*

**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/re-assignment
- PIN number for expedited service when calling Provider Services or Utilization Management
- Waiver of prior authorization requirements for some services – see below for exceptions
- Care management bonus of \$2 per member based on member panel size as of Dec. 31, 2018



**Waiver of prior authorization requirements does not include:**

- Admissions to hospitals or skilled nursing and rehab facilities
- Durable medical equipment (DME) more than \$500
- Non-covered benefits
- Non-formulary drugs and medications that require prior authorization
- Private duty/shift care nursing services
- Services from care providers who aren't in our network
- Skilled nursing visits
- These medical injectable J codes and CPT codes:
  - J0585, J0586, J0587, J0588, J0800, J1459, J1557, J1559, J1561, J1566, J1568, J1569, J1572, J1599, J1725, 90283, 90284

**Thank You!**

We look forward to your participation in the Quality Rewards Program. If you'd like to learn more, please contact Provider Relations at [uhc-pa-providerrelations@uhc.com](mailto:uhc-pa-providerrelations@uhc.com).

