United Healthcare

Peer Specialty: Obstetrics and gynecology
Quality of Care

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Condition/procedure	Measure	Compliance criteria	Measure type	Attribution method	Source
Breast Cancer - Part I	Breast cancer patient(s) without evidence of metastases that had an annual mammogram	Patient had an annual mammogram	Guideline Concordance: Chronic Disease	Patient	Synopsis
Breast Cancer Screening	Patient(s) 50-74 years that had a screening mammogram in last 27 reported months	Patient had a screening mammogram	Guideline Concordance: Preventive Care	Patient	Contact Partnership for Quality Measurement
Cautery of Cervix	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure within 180 days after the assessed procedure	Patient did not have a redo procedure within 180 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure between 181 to 365 days after the assessed procedure	Patient did not have a redo procedure within 181 and 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Cervical Cancer Screening	Women that had appropriate screening for cervical cancer	Patient had screening for cervical cancer	Guideline Concordance: Preventive Care	Patient	Contact Partnership for Quality Measurement
Cesarean Section, Delivery Only	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
Cesarean Section, Global	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
Child and Adolescent Well Child Visits	Patient(s) 12-17 years that had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner in the last 12 reported months	Patient had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner in the last 12 reported months	Guideline Concordance: Preventive Care	Patient	Contact National Committee for Quality Assurance
	Patient(s) 18-21 years that had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner in the last 12 reported months	Patient had at least one comprehensive well-care visit with a PCP or an OB/GYN practitioner in the last 12 reported months	Guideline Concordance: Preventive Care	Patient	Contact National Committee for Quality Assurance
Chlamydia Screening	Patient(s) 16-20 years that had a chlamydia screening test in last 12 reported months	Patient had a chlamydia screening test	Guideline Concordance: Preventive Care	Patient	Contact National Committee for Quality Assurance

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Condition/procedure	Measure	Compliance criteria	Measure type	Attribution method	Source
Chlamydia Screening	Patient(s) 21-24 years that had a chlamydia screening test in last 12 reported months	Patient had a chlamydia screening test	Guideline Concordance: Preventive Care	Patient	Contact National Committee for Quality Assurance
Concurrent Use of Opioids and Benzodiazepines	Patient(s) did not have concurrent use of prescription opioids and benzodiazepines	Patient did not have prescription opioid and benzodiazepine medications concurrently dispensed	Safety	Prescribing	Contact Partnership for Quality Measurement
Conization of Cervix	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure within 180 days after the assessed procedure	Patient did not have a redo procedure within 180 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure between 181 to 365 days after the assessed procedure	Patient did not have a redo procedure within 181 and 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Depression	Patient(s) with major depression who start an antidepressant medication that remained on treatment for at least 12 weeks (effective acute phase treatment)	Patient with major depression who started an antidepressant medication and remained on treatment for at least 12 weeks (effective acute phase treatment)	Guideline Concordance: Chronic Disease	Patient	Contact Partnership for Quality Measurement
	Patient(s) with major depression who start an antidepressant medication that remained on treatment for at least 6 months (effective continuation phase treatment)	Patient with major depression who started an antidepressant medication and remained on treatment for at least 6 months (effective continuation phase treatment)	Guideline Concordance: Chronic Disease	Patient	Contact Partnership for Quality Measurement
Episiotomy	Women that did not have an episiotomy	Patient did not have an episiotomy	Low Value Care	Rendering	Synopsis
Excision of Ovary/Ovarian Duct	Patient(s) without post-procedure complications within 30 days of the assessed procedure (Note: evaluation for single-side and bilateral procedures is performed separately)	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without advanced imaging (e.g., CT, MRI) within 365 days after the assessed procedure (Note: evaluation for single-side and bilateral procedures is performed separately)	Patient did not have a restudy procedure within 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Excision of Uterine Myoma, Large Tumor Bulk	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis

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Condition/procedure	Measure	Compliance criteria	Measure type	Attribution method	Source
Excision of Uterine Myoma, Large Tumor Bulk	Patient(s) without redo procedure within 180 days after the assessed procedure	Patient did not have a redo procedure within 180 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure between 181 to 365 days after the assessed procedure	Patient did not have a redo procedure within 181 and 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without advanced imaging (e.g., CT, MRI) within 365 days after the assessed procedure	Patient did not have a restudy procedure within 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Excision of Uterine Myoma, Moderate Tumor Bulk	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure within 180 days after the assessed procedure	Patient did not have a redo procedure within 180 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure between 181 to 365 days after the assessed procedure	Patient did not have a redo procedure within 181 and 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without advanced imaging (e.g., CT, MRI) within 365 days after the assessed procedure	Patient did not have a restudy procedure within 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Head Imaging for Uncomplicated Headache	Patient(s) with uncomplicated headache that did not have imaging studies	Patient with uncomplicated headache did not have imaging studies	Low Value Care	Rendering	Synopsis
Hysterectomy, with Added Repair	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
Hysterectomy, without Added Repair	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
Hysteroscopy with Treatment, with Foreign Body Introduction or Removal	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure within 180 days after the assessed procedure	Patient did not have a redo procedure within 180 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure between 181 to 365 days after the assessed procedure	Patient did not have a redo procedure within 181 and 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Hysteroscopy with Treatment, with Treatment of Uterine Pathology	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis

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Condition/procedure	Measure	Compliance criteria	Measure type	Attribution method	Source
Hysteroscopy with Treatment, with Treatment of Uterine Pathology	Patient(s) without redo procedure within 180 days after the assessed procedure	Patient did not have a redo procedure within 180 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure between 181 to 365 days after the assessed procedure	Patient did not have a redo procedure within 181 and 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Immunizations for Adolescents	Patient(s) 13 years old at the end of the report period that had three HPV vaccinations at least 14 days apart, or two HPV vaccinations at least 146 days apart between their 9th and 13th birthdays	Patient had three HPV vaccinations at least 14 days apart or two HPV vaccinations at least 146 days apart between the 9th and 13th birthdays	Guideline Concordance: Preventive Care	Patient	Contact Partnership for Quality Measurement
Medication Safety Monitoring	Older adult patients who had an accidental fall or hip fracture who did not use an antiepileptic, nonbenzodiazepine hypnotic, SSRI, SNRI, antipsychotic, benzodiazepine, or tricyclic antidepressant after the incident	Patient with an accidental fall or hip fracture did not have an antiepileptic, nonbenzodiazepine hypnotic, SSRI, SNRI, antipsychotic, benzodiazepine, or tricyclic antidepressant medication dispensed after the incident	Safety	Prescribing	Contact Partnership for Quality Measurement
	Older adult patients with chronic kidney disease who did not use a Cox-2 selective or nonaspirin NSAID after the earliest record of chronic kidney disease	Patient with chronic kidney disease did not have a Cox-2 selective or nonaspirin non-steroidal anti-inflammatory drug (NSAID) dispensed after the earliest record of chronic kidney disease	Safety	Prescribing	Contact Partnership for Quality Measurement
	Older adult patients with dementia who did not use an antipsychotic, benzodiazepine, tricyclic antidepressant, nonbenzodiazepine hypnotic or anticholinergic agent after the earliest record of dementia	Patient with dementia did not have an antipsychotic, benzodiazepine, tricyclic antidepressant, nonbenzodiazepine hypnotic or anticholinergic agent dispensed after the earliest record of dementia	Safety	Prescribing	Contact Partnership for Quality Measurement
Migraine Headache	Patient(s) compliant with prescribed antiepileptics for migraine prophylaxis (minimum compliance 80%)	Patient was 80% or more compliant with prescribed antiepileptic medication for migraine prophylaxis	Guideline Concordance: Chronic Disease	Patient	Synopsis
	Patient(s) compliant with prescribed beta-blocker-containing medication for migraine prophylaxis (minimum compliance 80%)	Patient was 80% or more compliant with prescribed beta-blocker-containing medication for migraine prophylaxis	Guideline Concordance: Chronic Disease	Patient	Synopsis
MRI Lumbar Spine for Low Back Pain	Patient(s) with a lumbar spine MRI and low back pain diagnosis on the imaging claim that have claims-based evidence of antecedent conservative therapy	Patient with a lumbar spine MRI and low back pain diagnosis had antecedent conservative therapy	Low Value Care	Ordering	Contact Centers for Medicare & Medicaid Services

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Condition/procedure	Measure	Compliance criteria	Measure type	Attribution method	Source
Osteoporosis Management	Patient(s) compliant with prescribed oral bisphosphonate (minimum compliance 80%)	Patient was 80% or more compliant with prescribed oral bisphosphonate medication	Guideline Concordance: Chronic Disease	Patient	Synopsis
	Women 67-85 years who were treated or tested for osteoporosis within six months of a fracture	Patient was treated or tested for osteoporosis within six months of a fracture	Guideline Concordance: Chronic Disease	Patient	Contact Partnership for Quality Measurement
Pregnancy Management	Pregnant women less than 25 years of age that had gonorrhea screening	Pregnant patient had gonorrhea screening	Guideline Concordance: Pregnancy Management	Rendering	Synopsis
	Pregnant women that had hepatitis B surface antigen (HBsAg) testing	Pregnant patient had a Hepatitis B surface antigen (HBsAg) test	Guideline Concordance: Pregnancy Management	Rendering	Synopsis
	Pregnant women that had Hepatitis C antibody testing	Pregnant patient had Hepatitis C antibody testing	Guideline Concordance: Pregnancy Management	Rendering	Synopsis
Prenatal and Postpartum Care	Women that received a prenatal visit (excluding bundled prenatal services)	Patient received a prenatal visit (excluding bundled prenatal services)	Guideline Concordance: Pregnancy Management	Patient	Contact National Committee for Quality Assurance
	Women that received postpartum care (excluding bundled postpartum services)	Patient received postpartum care (excluding bundled postpartum services)	Guideline Concordance: Pregnancy Management	Patient	Contact National Committee for Quality Assurance
Removal of Ovary/Ovarian Duct, Malignancy Not Specified	Patient(s) without post-procedure complications within 30 days of the assessed procedure (Note: evaluation for single-side and bilateral procedures is performed separately)	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without advanced imaging (e.g., CT, MRI) within 365 days after the assessed procedure (Note: evaluation for single-side and bilateral procedures is performed separately)	Patient did not have a restudy procedure within 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Risk of Continued Opioid Use	Patient(s) age 18-64 years who were opioid-naive and were not prescribed access to opioid medication for 15 or more days during the first 30 days following first opioid treatment initiation	Patient did not have opioid medication for 15 or more days during the first 30 days following initial opioid treatment	Safety	Prescribing	Contact National Committee for Quality Assurance

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Condition/procedure	Measure	Compliance criteria	Measure type	Attribution method	Source
Risk of Continued Opioid Use	Patient(s) age 65 years and older who were opioid-naive and were not prescribed access to opioid medication for 15 or more days during the first 30 days following first opioid treatment initiation	Patient did not have opioid medication for 15 or more days during the first 30 days following initial opioid treatment	Safety	Prescribing	Contact National Committee for Quality Assurance
	Patient(s) age 18-64 years who were opioid-naive and were not prescribed access to opioid medication for 31 or more days during the first 62 days following first opioid treatment initiation	Patient did not have opioid medication for 31 or more days during the first 62 days following initial opioid treatment	Safety	Prescribing	Contact National Committee for Quality Assurance
	Patient(s) age 65 years and older who were opioid-naive and were not prescribed access to opioid medication for 31 or more days during the first 62 days following first opioid treatment initiation	Patient did not have opioid medication for 31 or more days during the first 62 days following initial opioid treatment	Safety	Prescribing	Contact National Committee for Quality Assurance
Stress Incontinence Repair	Patient(s) without post-procedure complications within 30 days of the assessed procedure	Patient did not have a complication related to the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure within 180 days after the assessed procedure	Patient did not have a redo procedure within 180 days after the assessed procedure	Outcomes	Rendering	Synopsis
	Patient(s) without redo procedure between 181 to 365 days after the assessed procedure	Patient did not have a redo procedure within 181 and 365 days after the assessed procedure	Outcomes	Rendering	Synopsis
Use of Contrast Material in CT	Patient(s) with an abdomen CT test performed that did not have "combined studies" (with and without contrast material)	Patient did not have an abdomen CT test using combined studies (with and without contrast material)	Low Value Care	Ordering	Contact Centers for Medicare & Medicaid Services
Use of High-Risk Medications in Older Adults	Patients 67 years and older who did not receive two or more of the same high-risk medications except for appropriate diagnosis in the last 12 reported months	Patient did not have two or more of the same high-risk medications except for the appropriate diagnosis dispensed	Safety	Prescribing	Contact Partnership for Quality Measurement
	Patients 67 years and older who did not receive two or more of the same high-risk medications from the same drug class in the last 12 reported months	Patient did not have two or more of the same high-risk medications from the same drug class dispensed	Safety	Prescribing	Contact Partnership for Quality Measurement
Use of Opioid Medications	Patient(s) 18 years or older without an average morphine milligram equivalent (MME) >= 90mg/day during the treatment period	Patient did not have an average morphine equivalent dose >= 90 mg/day	Safety	Prescribing	Contact National Committee for Quality Assurance

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Condition/procedure	Measure	Compliance criteria	Measure type	Attribution method	Source
Use of Opioids from Multiple Providers	Patient(s) 18 years or older that did not fill opioid prescriptions from four or more different prescribers	Patient did not have opioid medications from four or more different prescribers dispensed	Safety	Prescribing	Contact National Committee for Quality Assurance
Vaginal Delivery	Patient(s) with a vaginal delivery and instrumentation used that did not have third or fourth degree obstetric trauma	Patient with vaginal delivery and instrumentation used did not have third or fourth degree obstetric trauma	Outcomes	Rendering	Contact Agency for Healthcare Research and Quality
	Patient(s) with a vaginal delivery and no instrumentation used that did not have third or fourth degree obstetric trauma	Patient with vaginal delivery and no instrumentation used did not have third or fourth degree obstetric trauma	Outcomes	Rendering	Contact Agency for Healthcare Research and Quality

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.