



2025 Quality Rewards program

UnitedHealthcare Community Plan of Pennsylvania

Quality Rewards program overview

We created the Quality Rewards program to:

- **Recognize health care professionals** for offering quality service to UnitedHealthcare Community Plan members
- **Help our members get the right care, at the right time** and the right place
- **Reward excellence with cash incentives***
- **Address member care opportunities** based on HEDIS® measures tied to access to care, doctor/patient communication, children's health and diabetes monitoring/treatment
- **Help improve access** for our members by rewarding health care professionals for accepting new patients and decreasing inpatient admissions

The Quality Rewards program is available to eligible:

- Primary care providers (PCPs)
- Federally Qualified Health Centers (FQHCs) with dental practices
- Accountable care organizations (ACOs) and Patient-Centered Medical Homes (PCMHs)
- OB-GYN/nurse-midwife practices
- Pediatric home health agencies

The program has different requirements and benchmarks based on care provider and/or organization type.

*Incentive bonuses will be paid to network UnitedHealthcare Community Plan health care professionals who are in good standing as of Dec. 31, 2025.

PCP quality benchmarks

Structured data incentive

Eligible PCPs:

- Continuity of care documents (CCDs) and flat files monthly or an agreed upon cadence by the health plan
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

Note: All HEDIS measure target rates are subject to change when NCQA Quality Compass data is released in 2025.

Well-Child Visits in the First 15 Months of Life (6 or more visits)

Eligible pediatricians and family practice health care professionals:

- Have at least 10 UnitedHealthcare Community Plan members who are assigned to their tax ID number (TIN) and included in their HEDIS denominator for the 2025 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

Well-Child Visits (ages 3–21)

Eligible pediatricians and family practice health care professionals:

- Have at least 20 children who are UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2025 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

Controlling High Blood Pressure (ages 18–85)

Eligible health care professionals:

- Have at least 10 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2025 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

HEDIS measure	Goal	Incentive reward*
Glycemic Status Assessment for Patients with Diabetes	Monthly files	\$1,000
Controlling Blood Pressure (CBP)	Monthly files	\$1,000

* Annual bonus based on being active as of Dec. 31, 2025.

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	60% or more	10	\$20 per member
75th	65% or more	10	\$50 per member

* Target rate subject to change when NCQA Quality Compass data is released in 2025.

** Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2025.

HEDIS® percentile	HEDIS measure target rate	Minimum number of eligible plan members	Incentive reward**
50th	52% or more	20	\$10 per member
75th	58% or more	20	\$20 per member

* Target rate subject to change when NCQA Quality Compass data is released in 2025.

** Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2025.

HEDIS percentile	HEDIS measure target rate	Minimum number of eligible plan members	Incentive reward**
50th	64% or more	10	\$10 per member
75th	69% or more	10	\$40 per member

* Target rate subject to change when NCQA Quality Compass data is released in 2025.

** Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2025.

FQHCs with dental practices quality benchmark

Oral Evaluation, Dental Services (OED) (members ages 2–20)

Eligibility: FQHCs with dental practices in their primary care offices

To determine the OED incentive amount for each eligible FQHC:

- We'll use data from Jan. 1 to Dec. 31, 2024, as a baseline for the number of OEDs for members ages 2 to 20
- We'll compare the baseline result with the number of OEDs during the same time frame in 2024

The minimum panel size is 75 UnitedHealthcare Community Plan members as of Dec. 31, 2025.

Incentive opportunities

Oral Evaluation, Dental Services (OED)

Opportunity 1: \$5,000 bonus for reaching HEDIS 50th percentile

Opportunity 2: \$10,000 bonus for reaching HEDIS 75th percentile

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

Pediatric shift nursing quality benchmark

Eligibility: Home health agencies with more than 5 patients receiving shift care nursing.* Home health agencies will earn \$275 per member per month for each patient with a shift care nursing case.

* Must maintain less than 5% missed shifts quarterly.

ACOs and PCMHs with shared savings agreements quality benchmark

Reducing potentially preventable readmissions

Eligibility: ACOs and PCMHs with shared savings agreements and high-volume health care professionals. We're offering this incentive to ACO and PCMH health care professionals because they have access to our population registry.

Incentive opportunities

ACO and PCMH providers who achieve a reduction of at least 10% in the readmission rate from 2024 to 2025 will receive a \$5,000 incentive.

The minimum panel size is 3,000 UnitedHealthcare Community Plan members as of Dec. 31, 2025.



OB-GYN/nurse-midwife practice quality benchmarks

Prenatal care in the first trimester
Eligibility: OB-GYNs/nurse-midwives participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

Incentive opportunities

Opportunity 1: Receive \$15 for each completed Obstetrical (OB) Needs Assessment form sent within 5 days of a member's first OB visit.

Opportunity 2: Earn \$40* for forms sent electronically using the OB cloud application.

* The \$40 payment amount for electronic form submission is in place of the \$15 for paper submission. You can earn one incentive or the other for each plan member – not both.

Postpartum care

Eligible OB-GYNs/nurse-midwives:

- Have at least 10 patients who are UnitedHealthcare Community Plan members and assigned to their TIN or are seen by the practice
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

Incentive opportunities

Opportunity 1: Receive \$50 per OB patient when the 50th percentile (80%)* of members reach the measure goal.

Opportunity 2: Receive \$200 per OB patient when the 75th percentile (83%)** of plan members reach the measure goal.

* Target rate subject to change when NCQA Quality Compass data is released in 2025.

** Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2025.

Glycemic Status Assessment for Patients with Diabetes > 9%

Eligible health care professionals:

- Have at least 10 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2025 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

To get credit for this measure, use CPT® II codes on claim's date of service.

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	33% or less*	10	\$25 per member
75th	30% or less*	10	\$75 per member

* Target rate subject to change when NCQA Quality Compass data is released in 2025.

** Annual bonus based on HEDIS denominator as of Dec. 31, 2025.

Note: Inverse measure means lower result value is better.

Note: You do not need to send us test results if they were processed through Quest and Labcorp.



Asthma Medication Ratio (ages 5–64)

Eligible health care professionals:

- Have at least 10 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2025 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	66% or less*	10	\$25 per member
75th	72% or more	10	\$75 per member

* Target rate subject to change when NCQA Quality Compass data is released in 2025.

** Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2025.

Blood Lead Level Screening for Children

Eligible pediatrician and family practice health care professionals:

- Have at least 15 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2025 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

HEDIS percentile	HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
50th	64% or less*	10	\$5 per member
75th	71% or more	15	\$25 per member

* Target rate subject to change when NCQA Quality Compass data is released in 2025.

** Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2025.

Developmental Screening in the First 3 Years of Life

Eligible pediatrician and family practice health care professionals:

- Have at least 15 UnitedHealthcare Community Plan members assigned to their TIN and in their HEDIS denominator for the 2025 measurement year
- Are participating with UnitedHealthcare Community Plan as of Dec. 31, 2025

To get credit for this measure, use CPT code 96110 on the claim's date of service

HEDIS measure target rate*	Minimum number of eligible plan members	Incentive reward**
At least 64% compliance rate	15	\$25 per member

* Target rate subject to change when NCQA Quality Compass data is released in 2025.

** Annual bonus based on members in the denominator for this HEDIS measure as of Dec. 31, 2025.



Incentive programs for the following health equity measures:

- Prenatal Care in the First Trimester
- Postpartum Care
- Well-Child Visits in the First 15 Months of Life
- Controlling High Blood Pressure
- Glycemic Status Assessment for Patients with Diabetes
 - > 9%: HbA1c Poor Control (> 9.0%)

Health equity measure goal

We'll use the measure rate results of the African-American and Caucasian populations and will calculate a percentage difference in overall measure performance. Those groups with a 5% or less disparity in performance difference will receive \$500 per measure. (Minimum of 50 members for each denominator, containing a minimum of 10 African-American members in that denominator.)



Care opportunity closure incentives

Earn additional incentives for addressing the following care opportunities based on the claim data or medical record documentation we receive.

- **Postpartum care** – \$75 per chart received
- **Blood lead level screening for children** – \$75 per chart received
- **Glycemic Status Assessment for Patients with Diabetes**
 - For any lab result charts we receive, you get \$25. If that result is 9% or less, you get an additional \$25 for a total of \$50. When the initial lab result received is 9.1% or higher, and the member is retested and we receive that lab result from the health care professional, another \$25 will be awarded.

In mid-2025, we'll send you a list of members who may need these care opportunities addressed. We'll make payments quarterly once you submit appropriate documentation showing members' care opportunities are closed.



Incentive payment schedule

PCP incentive

- We'll send the incentive payment(s) for meeting quality benchmarks during a calendar year by the second quarter of the following year
 - For example, we'll send payments when you reach quality benchmarks in 2025 by the second quarter of 2026
- We'll send the payments for care opportunity closures periodically during a calendar year based on the timing of our care opportunity list mailings



Incentive payment schedule (cont.)

OB-GYN/nurse-midwife incentive

- We'll send the incentive payment(s) for paper and electronic OB Assessment forms quarterly, within 120 days from the end of a quarter
- We'll pay all other incentives semi-annually by Dec. 31, 2025, and June 30, 2026

Note: The Quality Rewards program runs by calendar year and is funded by the Pennsylvania Department of Human Services. Financial bonuses under the program won't exceed 24.99% of the total potential annual payments we make to PCPs.

Preferred Provider overview

Earn Preferred Provider status by meeting 8 of 10 requirements. The minimum panel size is 200 UnitedHealthcare Community Plan members.

Preferred Provider status requirements

Accepting new plan members

Offer extended office hours, including 2 weeknights until 7 p.m. or a combined 3 hours on Saturday or Sunday

Have a claims Electronic Data Interchange (EDI) submission rate greater than 90%

Developmental screening compliance of 64% or higher

HEDIS Well-Child Visit (ages 3-21) rate higher than the 50th percentile

HEDIS Controlling High Blood Pressure measure rate higher than the 50th percentile

Glycemic Status Assessment for Patients with Diabetes > 9% – HbA1c level rate better than the 50th percentile

HEDIS Well-Child Visits in the First 15 Months of Life measure rate higher than the 50th percentile – members had 6 or more visits

HEDIS Asthma Medication Ratio rate higher than the 50th percentile

HEDIS Blood Lead Level Screening rate higher than the 50th percentile

Preferred Provider status means:

- Recognition of Preferred Provider designation in the UnitedHealthcare Community Plan care provider directory
- First preference for member auto-assignment/reassignment
- PIN number for expedited service when calling Provider Services or utilization management
- Care management bonus of \$1.50 per member based on member panel size as of Dec. 31, 2025
- Waiver of prior authorization requirements for some services

Waiver of prior authorization requirements doesn't include:

- Admissions to hospitals or skilled nursing and rehab facilities
- Durable medical equipment (DME) more than \$500
- Dental benefits
- Non-covered benefits
- Non-formulary drugs and medications that require prior authorization
- Home health aide
- Enteral nutrition
- Services from out-of-network health care professionals
- Skilled nursing visits and private duty/shift care nursing services
- Specific medical injectable J codes and CPT codes found on the UnitedHealthcare Community Plan Prior Authorization Pennsylvania Medicaid list located at UHCprovider.com/PAcommunityplan > Prior Authorization and Notification



Questions?

For chat options and contact information, visit UHCprovider.com/contactus. For more information, go to UHCprovider.com/PAcommunityplan > Quality Rewards Program.

Any incentive payments received as a result of P4P outcomes must be disbursed in alignment with regulatory requirements outlined as follows: Of the incentive payment amount, the PH-MCO shall require that no less than 80% of the incentive payment be disbursed to the individuals whose services contributed to the achievement of outcomes incented by the Provider P4P requirement(s), and that no more than 20% of those funds may be used by the Provider at the TIN level for general administrative purposes.

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