Tiered Benefit Plans
UnitedHealth Premium® Designation Program

Certain tiered benefit plans offer lower copay and coinsurance when members choose Tier 1 care providers who have the Premium Care Physician designation for quality and cost efficiency.
How to Determine Eligibility and Copay Amounts for Tiered Benefit Plan Members

Step one: Verify whether the member has a tiered benefit plan

“UnitedHealth Premium” or “Tiered Benefits” will be listed on the front of the member’s ID card. Be sure to take note of the member’s plan name (e.g., UnitedHealthcare Choice, Navigate, NexusACO) because you’ll need it later.
**Step two: Determine the member’s copay**

Copay amounts are listed on the front of the member’s ID card. In the following example, the copay for an office visit with a Tier 1 care provider is $35 and a Tier 1 specialist office visit is $70.

**Step three: Determine your tiered status**

- Sign in to UnitedHealthcareOnline.com.
- Go to the eligibilityLink app on Link and enter the required information.

- Click on **Are you a Tier 1 Provider?**

- Select the member’s plan from the list then click on **Go To Provider Directory.**

If you have questions, call 1-877-UHC-3210.
- The search results will list your tier status

- Return to the eligibilityLink app. Select your network status from the dropdown list. This will generate a benefits overview.
Important notes about the UnitedHealth Premium®
Designation Program

The information from the Premium physician designation 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. The quality and/or cost efficiency designation of a physician does not guarantee the quality of health care services members will receive from a doctor and does not guarantee the outcome of any health care services members will receive. Likewise, the fact that a physician may not be designated by this program 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 designation, members have access to all physicians in the UnitedHealthcare network, as further described under the member’s benefit plan.

The assessment result “Not Enough Data to Assess” 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 designation program, which includes only health plan claims associated with specific program measures and relevant to the physician’s designated 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 fact in selecting 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 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 from as many sources as possible 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 Tiered Benefit Plans document is subject to change.


Doc#: PCA-1-006682-05312017_06082017

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