

Quality Programs Offered by Managed Care Companies (last updated Jan 2022)

	Program	Type	Designation for Network Member	Primary Care	Specialties	Minimum # of patients	Minimum Time in Network	Time period Evaluated	Resources	Reports	Contact Info.
Aetna	Aexcel Performance Network (2020 and 2021)	Rating System	Recognized in online Provider Search Tool by a blue star next to a physician's name, or a small gray Aexcel icon next to a physician's name on the Aetna Health app.	No, but part of the network	CD, CTS, GE, GS, N, NS, OBG, OR, OTO, PS, U, VS	Quality: 10 cases per measure of 30 cases across measures. Cost: 20 episodes of care over 3 years.	2 years	3 years *Rereview physician's performance at least every two years	About Aexcel Performance Network 2020 and 2021 Physician's Guide to Aexcel	NCQA's latest report on their compliance	1-888-MDAetna (1-888-632-3862) (TTY: 711)
	Medicare Advantage Quality Incentive Program (2022)	Incentive payment	N/A	Yes. Must not be currently participating in another Aetna value-based contract or program	No	50 attributed Aetna Medicare Advantage plan members.	N/A	1 year from the initial term date with automatic renewal of 1-year periods unless terminated by either party	2022 Aetna Medicare Advantage Quality Incentive Program Handbook	Reports found on DataLink Evoke360 (Email for access: AetnaDataLinkteam@Aetna.com).	AetnaMedicare Value Based Programs@Aetna.com
	Aetna Smart Compare Designation (2022)	Rating System	Recognized in online Aetna Health app and member website by Quality Care and Effective Care labels.	Yes	PCP: Family practice, internal medicine, pediatrics ORTHO: (support hip and knee conditions) OBGYN	PCP: Family practice, internal medicine, pediatrics ORTHO: (support hip and knee conditions) OBGYN	PCP: Volume: At least 25 attributed valid members for a patient population through 2019. Effectiveness: At least 20 valid non-outlier episodes are required for each population. Quality: At least five valid members in the denominator for a patient population per measure.	PCP: 4 years ORTHO: 4 years. Majority of their 2019 surgery spend at facilities are in-network with Aetna. OBGYN: 4 years.	PCP: 2 years ORTHO: 2 years OBGYN: 2 years	2022 Aetna Smart Compare Program	NCQA report on Aetna compliance

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BCBS	Performance Based Recognition (PBR)	Rating System	N/A	N/A	N/A	N/A	N/A	N/A	Quality Improvement Programs Department: 800-863-9798	N/A	BCBS TX Contact List
Cigna	Cigna Care Designation (2022)	Rating System	Cigna Online Provider Directory includes multiple levels of quality and cost recognition symbols (CCD Methodology Whitepaper 01.01.22)	FM, IM, PD	AI, CD, CT, CRS, D, OTO, END, GE, GS, HO, NEP, N, NS, OBG, OPH, ORS, PUD, RHU, U	Minimum volume of 30 complete episode treatment group occurrences. More requirements that can be found at CCD Methodology Whitepaper_01.01.22_Provider.	N/A	Annually. Note: Due to the potential disruption associated with COVID-19 in the 2020 data, the current 2021 CCD results will remain in effect through December 31, 2022	2022 Cigna Care Designation Program	N/A	Cigna Care Designation Contact #: 800.88Cigna (800.882.4462).
Humana	Value-based Care Payment Model (Medicare Advantage)	Shared Savings with a set capitation	N/A	N/A	N/A	N/A	N/A	N/A	VBC Payment Model Webpage	Value-based Care Report	Texas region representative: Giri Chilukuri, MD Email: Texas_MD@humana.com
	Episode-based Model (Medicare Advantage)	Risk Sharing option	N/A	No	Total Joint Replacement (hip and/or knee), maternity, spinal fusion (lumbar and/or cervical) and coronary artery bypass grafting	N/A	N/A	Multiyear program for all specialties	EBM webpage	Reporting package is provided to participants quarterly.	Texas region representative: Giri Chilukuri, MD Email: Texas_MD@humana.com

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United Healthcare	Premium Program (2021) (Version 14 Methodology)	Rating System	UH Online Provider Directory Designations: <ul style="list-style-type: none"> • Premium Care Physician • Quality Care Physician • Quality Not Evaluated • Does Not Meet Quality 	FM, IM, OBG, PD	A, CD, ENT, END, GI, GS, CRS, NEP, N, NS, OSS, PUD, RHU, U	Quality: 5 patients and 20 measures Cost Efficiency: 10 patients or 10 medical/surgical cases	N/A	Quality: Uses claims submitted and processed for dates of service between (Jan. 1, 2017, and Feb. 29, 2020.) Evaluation: The program evaluates physicians annually based on a comparison of current version and previous version evaluation results.	UH Premium Program Webpage	Physician Performance Based Compensation	UHC Premium Contact