

Platinum Designation – Frequently Asked Questions

1) **Why have we changed ACE 3.0 to the Platinum Designation?**

Our facility evaluation methods continue to evolve in response to changing trends within the industry, as well as provider and customer feedback. We will continue to evaluate facility performance in four different condition categories, but we are now separating the analysis of levels of care, within each of those condition categories. Platinum recognition will be at the individual program level for each facility for those programs that qualify. Any facility program that meets at least 4 out of 5 metric benchmarks will receive the Platinum Designation, and will enjoy a streamlined UM experience.

2) **What feedback have you addressed with the evolution to Platinum Designation?**

Our evaluation of facility-based programs continues to move towards a more specific, granular comparison, making comparisons of patients to other similar patient groups more accurate. In addition, this change will provide benchmarks that are based upon similar patient groups by LOC, Condition Category, and Line of Business. In this way, facilities will be able to establish clear targets to work towards in pursuit of Platinum status.

3) **What are the condition categories being evaluated for Platinum Designation?**

- General Mental health (GMH)
- Substance Use Alcohol
- Substance Use Other
- Eating disorder

In addition, admissions will be evaluated separately for Inpatient (IP), Residential (RES) and Partial Hospital levels of care within each condition category.

4) **Can one facility be considered Platinum for one program and not another?**

Evaluations are program-specific, so yes, a facility can qualify for evaluation for multiple programs and may be recognized as Platinum for one program and not for others. An example of this would be a facility that is Platinum for their IP GMH program, but not for their GMH Partial Hospital program.

5) **Why are you measuring levels of care separately?**

We evaluate levels of care to ensure more accurate comparisons of performance across programs, as well as analyze levels of care separately within each condition category.

6) **What are the Platinum Designation qualifications or criteria for being evaluated?**

To qualify for evaluation, a facility program must be in-network and must meet the minimum requirement for volume of eligible admissions to a specific program. For all GMH, SUD Alcohol and SUD Other programs, the facility must have a minimum of 20 eligible admissions within the calendar year for at least of one of two product groups: Commercial and/or Public Sector. So for example, if your inpatient GMH program had 14 Public Sector admissions and 12 commercial admissions, it would not qualify because neither program met the minimum of 20 admissions. In order to qualify for evaluation one or both product groups would need to have recorded at least 20 admissions for the preceding twelve months.

7) **What are the evaluation metrics?**

Programs are evaluated using one readmission rate, two Follow-Up from discharge rates, an outlier Length of Stay (LOS) rate, and an Episode Cost Rate. The LOS and Episode Cost metrics to provide programs with a percentage of admissions that are outliers for each metric. We will compare program results to similar types of admissions in order to account for differences in patient acuity.

8) **How does the Platinum recognition work?**

Each eligible program within a facility is designated as either Platinum or not Platinum based upon the evaluation results. Any program that meets benchmarks for at least 4 out of 5 metrics is recognized as Platinum. Facilities not meeting at least 4 of 5 benchmarks are designated not Platinum.

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9) **Can you explain your data model?**

Platinum Designation evaluates program performance on 5 key metrics, and any program that meets at least 4 out of 5 metric benchmarks is designated as Platinum. A facility program must meet or exceed the benchmark for the Readmission and Follow-Up metric which are based on national median results for admissions in the same condition category, level of care, and line of business. For ALOS and episode cost measures, a facility program must have less than 50% of its cases be outliers for LOS or cost, when compared to similar patient cohorts.

10) **How are your Platinum benchmarks established?**

Benchmarks for the Readmission and Follow-Up from discharge rates are based on national medians for each condition category, level of care, and product group. The outlier LOS and outlier episode cost metrics have associated norming cohort benchmarks that are based on the median result for each cohort by condition category, region, product, primary diagnosis and age range.

11) **What as the provider is in it for me?**

The Platinum Designation recognizes great effort but, more importantly, allows Optum to reward outstanding performance. Some of the perks of being recognized as a Platinum provider include:

- Streamlined clinical review
- Public recognition within our online provider directories, such as [liveandworkwell.com](https://www.liveandworkwell.com)

12) **Who can I contact if I have questions?**

Please visit the [Platinum Designation webpage on Provider Express](#). You can also find this page by clicking on “Platinum Recognition” under the Quick Links menu. You may also email questions to aceplatinum@optum.com.