



What

Attribution calls for the **alignment of PTPs to accurate providers** responsible for a member's care.



When

PTPs are aligned on a **monthly** basis with an effective date of the first of the following month.



Who

Claims & internal sources are assessed for all PTPs based on recent activities in the last 36 months.



How

PHW utilizes the **prior 36 months of claims experience** to determine PCPs rosters that is vetted through an industry standard matching scenario algorithm.



Why

- Accurate Performance Assessments to drive strategic decisions
- Incentive Optimization
- Improved PTP and provider experience.



Next Steps

- Engage with assigned PTPs immediately, utilizing membership reports.
- Partner with PHW in gap closure activities.
- Relay feedback.



Please contact your dedicated Provider Relations representative with any questions phwproviderrelations@pahealthwellness.com.

Attribution Logic

- Historical 3-Year Lookback Period
- Milliman Cost Category
- E&M Procedure Code + T Code
 - a. 99212,99202,99213,99203,99214,99204,99215,99205
 - b. T1015
- Place of Service
 - a. Office Visit, FQHC, Independent Clinic, Off Campus OP Hosp, On Campus OP Hosp, Telehealth, Rural Health Clinic
- Primary Specialty
 - a. Primary Care Provider
 - b. Primary Care Provider + Specialist