

**UNIQUE COLLABORATION BY 12 OF THE NATION'S TOP INSURERS WILL STREAMLINE
AND IMPROVE ACCURACY OF COORDINATION OF BENEFITS PROCESS**

Washington, D.C. – March 4, 2013 –CAQH[®] announced today a major new initiative designed to reduce costs and improve the accuracy of coordination of benefits processes. This initiative will enable health plans and providers to “get it right the first time,” and more efficiently manage benefits for patients with policies from more than one insurer. CAQH research suggests that administrative efficiencies associated with benefits coordination could, over time, save consumers, providers, health plans and others more than \$800M per year.

The coordination of benefits process determines primary and secondary coverage for patients who are insured by more than one policy. Confusion over insurance status can occur with patients who have lost or changed jobs or have multiple sources of coverage. This initiative will create a single source of timely and accurate coverage status, enabling providers to properly bill insurers and improve claims processes.

“This initiative is part of our ongoing commitment to reduce costs and make administrative processes work better across the healthcare system,” said Robin Thomashauer, Executive Director of CAQH. “We are working with the leadership of our member organizations to develop a solution that offers a more reliable, more transparent way to simplify the coordination of benefits process.”

Each of the CAQH member plans has committed to adopt the coordination of benefits solution when it is launched later this year. These health plans include Aetna; AultCare; Blue Cross Blue Shield of Michigan; Blue Cross and Blue Shield of North Carolina; BlueCross BlueShield of Tennessee; CareFirst BlueCross BlueShield; Cigna; Health Net, Inc.; Horizon Healthcare Services, Inc.; Kaiser Permanente; UnitedHealth Group; and WellPoint, Inc., on behalf of its affiliated health plans. Together these organizations cover more than 165 million lives.

“By building and investing in technology that simplifies the claims process, and deploying it in partnership with care providers, we are collectively committing to reducing unnecessary administrative costs and improving the patient experience,” stated David Wichmann, Executive Vice President and Chief Financial Officer, UnitedHealth Group, President, UnitedHealth Group Operations and Technology and chair of the CAQH Board.

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New Collaboration/2

This industry collaboration is the latest in an ongoing effort by CAQH to reduce administrative costs and streamline healthcare administration. For example, the CAQH Universal Provider Datasource (UPD®) is used by more than one million providers to share credentialing and other professional information with close to 700 health plans, hospitals and other related organizations. In addition, CAQH recently launched an electronic funds transfer (EFT) enrollment tool to help providers sign up to receive electronic payments from multiple health plans. Both of these initiatives are available to providers at no charge.

More information about the initiative will be available on the CAQH website at www.caqh.org.

About CAQH

CAQH serves as a catalyst for industry collaboration on initiatives that simplify healthcare administration for health plans and providers, resulting in a better care experience for patients and caregivers. CAQH solutions help promote quality interactions between plans, providers and other stakeholders; reduce costs and frustrations associated with healthcare administration; facilitate administrative healthcare information exchange; and encourage administrative and clinical data integration. Visit www.caqh.org for more information. Follow us on Twitter at [@caqh](https://twitter.com/caqh).

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