

CAQH Index

Health Plans: Get Involved as a Data Contributor

The CAQH Index tracks and reports progress by the U.S. healthcare industry to adopt electronic transactions for several routine business interactions between healthcare providers and health insurance plans. The Index also estimates the potential savings this transition could deliver.

Health plans can advance the effort by contributing data. CAQH is currently seeking health plans willing to support development of the 2016 Index.

Health plans that contribute data receive customized benchmark reports. CAQH prepares and delivers a detailed analysis of organizational performance alongside national results to each data contributor.

Health plan participation is an essential component of the Index. Data contributions from health plans – counts of transactions by modality and per-transaction costs – support CAQH estimates of adoption levels and savings opportunities, as well as year-over-year measures of progress. Combined with data collected from healthcare providers, CAQH aggregates the total volume of transactions across the healthcare system to develop estimates of nationwide costs and potential savings.

Every data contribution enriches the overall quality of the Index dataset.

With richer data, CAQH can deliver increasingly useful insights, more precise measures of progress, and more accurate estimates of cost savings.

All health plans, regardless of adoption status, are encouraged to participate. Any health plan that can submit data according to guidelines set out in the [Reporting Standards and Data Submission Guide](#) may participate in this unprecedented annual data collection effort.

Transactions Studied

The 2016 CAQH Index is studying the following transactions:

- Claim Submission
- Eligibility and Benefit Verification
- Prior Authorization/Referrals
- Claim Status Inquiries
- Claim Payment
- Claim Remittance Advice/Receiving and Posting Payments
- Attachments: Claim and Prior Authorization Related
- Coordination of Benefit Claims
- Enrollment and Disenrollment
- Premium Payment

The 2015 CAQH Index

Health plans representing 118 million enrollees – almost 45 percent of the privately insured U.S. population – submitted data to CAQH for analysis. These submissions accounted for more than 4 billion administrative transactions that took place in 2014.

Findings indicate the industry as a whole could save more than \$8 billion annually by expanding the use of fully automated electronic transactions for six transactions alone.

For more information, visit the [CAQH Index](#) online.

LEARN MORE ABOUT PARTICIPATION – On-Demand Webinar

Two health plans that participated in previous CAQH Index reports share their experiences and offer helpful insights to any health plan considering participation in the 2016 Index. <https://www.youtube.com/watch?v=AmVFMXG35yo>

Why Contribute Data?

Help your organization understand:

- How does our progress to adopt electronic transactions compare to that of similar organizations?
- Are we managing the transition to electronic transactions effectively, to maximize cost savings and efficiency gains?
- How should we prioritize investments in programs to accelerate our adoption of electronic transactions?

Help the industry understand:

- How is industry use of electronic administrative transactions progressing year-over-year?
- Which electronic transactions deliver the most cost savings?
- What are the barriers to adoption, and what are industry leaders doing to transcend these barriers?

How it Works

Health plans work directly with CAQH to contribute only necessary data through a streamlined process. CAQH provides a data collection tool to facilitate submission of transaction counts and cost-per-transaction data. The tool contains data fields and suggests methods for calculating the numbers of transactions and per-transaction costs for both electronic and manual transactions. The activities required of each data contributor vary according to the accessibility of requested data, but generally require a time commitment ranging from 8 to 36 hours:

- **Designate a point of contact.** We recommend that data contributors choose someone to coordinate the data collection. CAQH will send the data collection tool to this individual and communicate with this person to connect with others in the organization as needed. Depending on the structure of the organization and its IT systems, multiple points of contact in specific departments may be needed, such as in the claims department or provider support units.
- **Conduct internal data collection.** Few health plans collect data on the time and resources spent on administrative transactions. The CAQH data collection tool provides suggested methods for collecting and calculating the per-transaction costs by transaction type for both electronic and manual transactions.
- **Submit data to CAQH.** Once data is submitted, CAQH will review it for completeness and consistency with data reported by other contributors. CAQH is available to address questions about how to collect the requested data, measure transaction volume, and calculate per-transaction costs.
- **Participate in a brief interview.** Following review of the completed data collection tool, a CAQH researcher will schedule a teleconference with the organization's designated point(s) of contact to review the data submitted and any important underlying assumptions or limitations.
- **Receive customized benchmarking information.** When the data collection process is complete, participating health plans will receive a customized benchmark report illustrating how the organization's results compare with the national average and ranges of response.

Confidentiality

No data from individual health plans will be disclosed – only aggregated, de-identified data are published in the Index report. Individual company data will be kept confidential, according to the [Reporting Standards and Data Submission Guide](#).

To learn more, contact [Raynard Washington](#), Senior Manager, Research & Measurement at rwashington@caqh.org.