

2013 U.S. HEALTHCARE EFFICIENCY INDEX REPORT

PERCENT OF TRANSACTIONS CONDUCTED ELECTRONICALLY

CLAIM
SUBMISSION

91%

ELIGIBILITY
VERIFICATION

81%

CLAIM STATUS
INQUIRY

72%

CLAIM
PAYMENT

56%

REMITTANCE
ADVICE

53%

PRIOR
AUTHORIZATION

15%

Potential industry-wide savings for electronic adoption of these six transactions = **\$8.2 Billion**

Health plans covering approximately 40% of all covered lives in the U.S. voluntarily contributed data in accordance with the *U.S. Healthcare Efficiency Index (Index) Reporting Standards and Data Submission Guide*.

BE PART OF THE PROCESS

The healthcare industry has made progress towards realizing significant administrative savings by replacing manual processes with electronic processes, but **there is still more to do**. To achieve a truly efficient healthcare delivery system, ALL stakeholders—providers, hospitals, payers, related business partners, employers, government agencies, and consumers—should:

- ▶ **Adopt electronic administrative transactions** and reduce wasteful manual and phone-based processes.
- ▶ **Benchmark progress using the online savings calculator** to estimate potential cost savings by transaction for individual organizations.
- ▶ **Contribute organizational data to the Index** and help ensure the analysis on administrative transactions is representative of the entire healthcare industry.

Participation is open to ANY organization

To find out more, go to caqh.org and be part of the solution to help make the healthcare system more cost effective, uniform, predictable, timely, accurate, and secure.

The U.S. Healthcare Efficiency Index provides a national reference point to track and measure the adoption of electronic administrative transactions across the healthcare industry. Moving forward the Index will refine current measures, examine opportunities to measure progress from the perspective of additional stakeholders, and expand the scope of its annual transaction data collection.

Data for the Index Report are for the full year 2012, and were compiled by CAQH, the Index Advisory Council and Milliman, Inc.