

[ *CAQH at One Year* ]

Improving the Health Care Experience for More Than  
100 Million Americans and Their Doctors



CAQH

The Coalition for Affordable Quality Healthcare

– 2001 –

# Health plans pledge reform

By Charles O'Connell  
Los Angeles Times

Health plans serving 150 million Americans pledged yesterday to make it easier for patients to choose doctors, go to the emergency room and understand the rules and benefits to which they are entitled.

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# Health Plans Propose Ways to Improve Access

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## PARTICIPATING HEALTH PLANS

Blue Cross of California  
Blue Cross of New Jersey  
Blue Cross of North Carolina  
Blue Cross of Oklahoma  
Blue Cross of South Carolina  
Blue Cross of Tennessee  
Blue Cross of Texas  
Blue Cross of Virginia  
Blue Cross of Washington  
Blue Cross of West Virginia

Blue Cross of Michigan  
Blue Cross of Missouri  
Blue Cross of Nebraska  
Blue Cross of Nevada  
Blue Cross of New York  
Blue Cross of North Dakota  
Blue Cross of Oregon  
Blue Cross of Pennsylvania  
Blue Cross of Rhode Island  
Blue Cross of South Dakota  
Blue Cross of Utah  
Blue Cross of Vermont  
Blue Cross of Wisconsin  
Blue Cross of Wyoming

# Health Plans Promise Reforms

## CAQH KEY INITIATIVES

IMPROVE ACCESS TO QUALITY HEALTH CARE COVERAGE.

WORK WITH DOCTORS TO HELP THEM IMPROVE HEALTH CARE QUALITY.

MAKE ADMINISTRATION AND INFORMATION EASIER FOR DOCTORS AND CONSUMERS.

## HEALTH CARE

# Coalition of Health Firms Unveils Plan to Reduce Hassle Factor

By Barbara L. Demaree

Health firms serving 150 million Americans pledged yesterday to make it easier for patients to choose doctors, go to the emergency room and understand the rules and benefits to which they are entitled.

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## Patient Friendly

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## Access to Quality Care

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## Simple Administration

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## Work with Physicians

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# HMOs vow to simplify procedures

Move may avoid legislation

By Charles O'Connell

Los Angeles Times

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February 7, 2001

Dear Reader:

Welcome to a progress report on the Coalition for Affordable Quality Healthcare's first year of work to improve the health care experience for American consumers and their doctors.

Over the past year, 24 of the nation's largest health plans have joined together to strengthen the American health care system for the more than 100 million Americans we serve. Although we operate in a highly competitive environment, our member plans have heard common concerns about processes and systems that we all share.

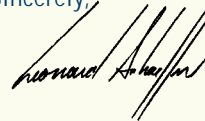
CAQH members undertook this effort recognizing that we play an important role in the health care system. We cover needed health care services for our members while trying to keep premiums affordable. When we do this well, we add significant value to the system. Over the last decade, we helped keep premiums affordable, increasing access to health care for millions, but we lost the trust of many Americans along the way. Therefore, the participating plans committed to work together and with others in the medical community to address issues where collective action could make life simpler and easier for consumers and their doctors.

Knowing that actions speak louder than words, we committed to taking specific actions to improve systems that affect consumers and to working collaboratively with America's doctors. In our efforts, we have consulted with many in the health community, including doctors, health advocates, health associations and others—to share and act upon many ideas for making the health care experience better.

Our substantial progress is reported in these pages. We're especially pleased to be working with the Centers for Disease Control and Prevention to tackle the growing threat of antibiotic resistance. We think we are uniquely positioned to work with physicians to help get the word out to millions of Americans about the safe and effective use of antibiotics.

We've come a long way—and we have more work to do. We thank the many individuals who have shared their time and expertise, making this much progress possible. This includes physicians, other health care providers, health advocates, consumers, and many others. CAQH is proud to report tangible results this year—and we remain committed to working together over the long term in order to improve the health care experience for Americans and their doctors.

Sincerely,



Leonard D. Schaeffer, Chairman  
Coalition for Affordable Quality Healthcare



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[ *CAQH at One Year* ]

"CAQH IS COMMITTED TO IMPROVING THE HEALTH CARE EXPERIENCE FOR AMERICAN CONSUMERS AND THEIR DOCTORS. IT IS OUR HOPE THAT HEALTH PROFESSIONALS WILL CONTINUE TO COLLABORATE WITH US IN THESE EFFORTS – ASSURING ACCESS TO QUALITY COVERAGE, SHARING KNOWLEDGE TO IMPROVE CARE AND MAKING ADMINISTRATION EASIER. THOSE ARE VALUES WE ALL SHARE."

*Leonard Schaeffer  
Chairman & CEO, WellPoint Health Networks Inc.*

## EXECUTIVE SUMMARY

For the past year, the chief executive officers of 24 of America's largest health plans, along with two principal health plan associations, have been working to bring real and important improvements to the way we assure access to quality health care. Together, we are known as the Coalition for Affordable Quality Healthcare and we serve more than 100 million Americans. (Please see page 16 for a complete listing of participating companies.)

This report summarizes the first year of activity in CAQH's cooperative effort to improve health care coverage, service, and quality for American consumers and their doctors.

Each of the companies participating in the coalition pledged to support and implement a series of achievable, concrete action steps designed to strengthen the nation's health care system. These actions were agreed to by all CEOs on July 12, 2000 and announced to the public and the news media on July 18, 2000. We are now implementing the first phase of these action steps:

**IMPROVING ACCESS TO QUALITY HEALTH CARE COVERAGE.** That means we are assuring that all managed health insurance products offered by our plans now provide access to obstetricians/gynecologists and pediatricians, coverage for emergency care, and external review systems by independent medical professionals, among other benefits. (see pages 4-5)

**WORKING WITH DOCTORS AND OTHER HEALTH ADVOCATES TO HELP THEM IMPROVE HEALTH CARE QUALITY.** Eighty quality initiatives have been identified and one large-scale initiative has been launched, in which we are partnering with the Centers for Disease Control and Prevention in an unprecedented national effort to address the growing threat of microbial resistance to antibiotics. (see pages 6-9 and insert)

**MAKING ADMINISTRATION AND INFORMATION EASIER FOR DOCTORS AND CONSUMERS.** During its research phase, CAQH spoke with more than 100 doctors and health professionals to identify ways to simplify processes and improve information. These include a substantial reduction in paperwork for physicians and making sure consumers have easy access to information through our Web sites. (see pages 10-13)

CAQH's formation and its work represent long-term commitments to help improve the quality of health care in America. It is CAQH's hope that health professionals will continue to collaborate with us in these efforts – assuring access to quality coverage, sharing knowledge to help improve health care quality, and making administration easier. Those are values we all share.

"THE MEMBERS OF THE COALITION ARE FOCUSED ON THE NEED TO CONTINUALLY IMPROVE THE QUALITY OF THE HEALTH CARE EXPERIENCE. WHAT WE KNEW WHEN WE STARTED – AND WHAT WE'VE HAD REINFORCED THROUGH ALL OF OUR DELIBERATIONS – IS THAT WE MUST WORK TOGETHER, AND WITH THE REST OF THE HEALTH CARE COMMUNITY, TO BE SUCCESSFUL."

*H. Edward Hanway  
Chairman & CEO, CIGNA Corporation*

## IMPROVING ACCESS TO QUALITY COVERAGE

### *All Plans Meet Service and Care Pledges*

As one part of a coalition-wide effort to support quality health care coverage, CAQH members pledged in July 2000 to assure consumer access to a range of care and services.

**FOR ALL MANAGED HEALTH INSURANCE PRODUCTS WE OFFER, ALL PARTICIPATING CAQH PLANS ARE:**

**Assuring direct access to obstetrical/gynecological services for women and pediatricians as primary providers for children.**

Women and children have special health care needs and we want to make sure those needs are met by participating plans.



**Assuring coverage for a condition that a reasonable person would consider an emergency.** CAQH plans want to encourage people to seek out necessary medical care if they think they're experiencing a medical emergency.

**Facilitating a timely independent external review when there is a question about the necessity of tests or treatment.** CAQH members want consumers to get the right care at the right time – with independent practitioners making a final determination when differences of medical opinion arise. CAQH plans will also assure that the conclusions of independent review are binding on the plan.

Encouraging doctors participating in our plans to discuss all appropriate treatment options, their costs and expected outcomes with their patients because participating plans strongly support communication between doctors and their patients.

Supporting a competitive marketplace by assuring that all plans provide a full range of choices for customers with different levels of coverage and costs to meet their needs.

Finally, as a coalition, we know many share our commitment to expanding access to affordable, quality health care coverage. We look forward to working with the entire community – small and large employers, physician groups, public leaders, and others – to help continue to expand Americans’ access to quality coverage.

ALL PLANS MEET SERVICE AND CARE PLEDGES  
FOR ALL MANAGED HEALTH INSURANCE  
PRODUCTS WE OFFER

SERVICE AND CARE PLEDGES	100%
Access to OB/GYNs and Pediatricians	✓
Assuring ER Coverage	✓
Timely Independent Review	✓
Encouraging Open Communication	✓
Providing Choices	✓



"WE BELIEVE THAT MANY EFFECTIVE QUALITY AND CARE MANAGEMENT PROGRAMS ARE ALREADY MAKING A REAL AND LASTING DIFFERENCE FOR MILLIONS OF AMERICANS. THESE ARE PROGRAMS THAT SHOULD INSPIRE REPLICATION ACROSS THE NATION, AND WE ARE WORKING TO COLLECT AND SHARE THESE EFFORTS."

*Thomas Snead, Jr.  
Chairman & CEO, Trigon Healthcare, Inc.*

## WORKING WITH DOCTORS TO HELP IMPROVE CARE QUALITY

*Sharing Knowledge of Quality Health Care Practices,  
Partnering to Strengthen Public Health*

Ensuring that American consumers have access to quality health care is CAQH's top priority. A report on medical errors issued last year by the Institute of Medicine highlighted the need for increased attention to quality of care and patient safety, and CAQH is pleased to join others in the health care community in focusing on this issue.



In the six months since we announced our efforts, medical directors and other professionals at CAQH member companies have undertaken two key efforts to identify programs and techniques that have the goal of improving medical care in communities across America:

**Beginning to share information on quality health care practices and health care trends among our companies and with medical professionals, and**

**Partnering with other health care professionals to help educate Americans about healthy behaviors and treatments in order to measure improvement and share the results.**



CAQH has begun looking for ways to share useful information about local initiatives so they might be replicated elsewhere. We have compiled a database of 80 quality health care practice programs that have been undertaken by our member companies. The health plans are now developing the capacity to share important information about these programs with physicians, specialty societies and national health organizations—all in an effort to support evidence-based practices that will benefit American consumers and their physicians.

## Sharing Information on Quality Health Care Practices

Behind the scenes, with little fanfare, hundreds of innovative and collaborative initiatives are under way in communities around the country—all designed with the goal of improving American health. These programs are funded through CAQH member plans and are conducted in collaboration with physicians around the country.



## QUALITY HEALTH CARE PRACTICES

As part of their effort to help improve the quality of care, CAQH health plans and insurers are developing ways to share information about local programs that are designed to help keep people healthier. Eighty health and wellness programs have been identified. Here are just a few of the projects available for replication by plans in local communities:

**SUPPORTING HEALTHIER BABIES:** Health plans and insurers nationwide are working to improve the health and wellness of newborn babies. One prenatal care program, at *WellPoint Health Networks* in California, focuses on increasing prenatal services for traditionally underserved communities. Culturally and linguistically appropriate education is included for each trimester, as well as access to classes on childbirth, breastfeeding, and newborn health care. A trained nurse case manager coordinates services and works with other community resources to support and foster the good health of new mothers and their babies.

**KICKING THE HABIT:** Based on national smoking cessation guidelines, and in collaboration with Partnership for a Tobacco Free Maine and the Maine Medical Association, *Anthem Blue Cross and Blue Shield* has helped reduce smoking rates among its members by almost 50 percent. The corporate-wide program includes direct communication with members and physicians, enlisting employers in education campaigns, and active community support of efforts to reduce public smoking.

**STRONGER BONES, HEALTHIER LIVES:** Based on the Ohio Quality Improvement Guidelines, *Humana* has launched a campaign to prevent osteoporosis, a debilitating disease that can lead to brittle bones and fragile lifestyles in older years. Humana's efforts include annual birthday cards with a reminder for preventive screenings, outreach to all health practitioners, and "Boning UP – 4 Steps to Stop Osteoporosis," an educational effort for members.



"RESISTANCE TO ANTIBIOTIC DRUGS IS A GROWING THREAT TO THE PUBLIC'S HEALTH. IT WILL TAKE EVERYONE WORKING TOGETHER TO REVERSE THIS TROUBLING TREND. CAQH MEMBER COMPANIES WILL BE WORKING WITH THE CDC AND AMERICA'S DOCTORS TO EDUCATE CONSUMERS ABOUT THE PROPER USE OF THESE POWERFUL – AND VITAL – MEDICINES."

*Cheryl Scott  
President & CEO, Group Health Cooperative of Puget Sound*



Since our last report, CAQH has reviewed 80 initiatives identified through the CAQH quality health care practices database. The coalition chose, as its first step, two practices that we believe are promising, and will initiate efforts to replicate them in multiple locations across the country.

## Partnering with Other Health Care Professionals

Providing access to quality health care requires a collaborative effort. There are many meaningful and important roles to play in today's complex health system.

CAQH knows its member plans are just one partner in the health care system – and we are reaching out to others to exchange information and begin programs that have the goal of improving health habits and behaviors. We know it will take hard work by everyone in health care to achieve real improvement.



"AS A PHYSICIAN, I KNOW IT IS ESSENTIAL THAT WE WORK TOGETHER WITH THOSE WHO PROVIDE CARE – AMERICA'S DOCTORS. REDUCING THE VERY REAL RISK OF ANTIBIOTIC RESISTANCE IS A POWERFUL EXAMPLE OF PROGRESS WE CAN MAKE TOGETHER TO IMPROVE THE QUALITY AND SAFETY OF PATIENT CARE."

*John W. Rowe, M.D.  
President & CEO, Aetna Inc.*

CAQH is working with the nation's premier health educator – the U.S. Centers for Disease Control and Prevention – to focus on the growing health crisis in antibiotic resistance (see insert to learn more). We are using our unique ability to reach over 100 million Americans and their doctors to help get the word out to patients about the risks posed by antibiotic resistance, one of America's most pressing public health problems.

Our next program will focus on cardiovascular disease, the nation's number one killer. Nearly one million Americans die each year from cardiovascular-related diseases. We are currently reaching out to doctors, health advocacy organizations, and other potential partners to develop programs through which we can address cardiovascular disease effectively.

Subsequent collaborative efforts will be selected based on additional input from physicians and other health care practitioners. The lessons learned from these initiatives can be shared throughout the CAQH member organizations and communities, with the goal of achieving overall improvements in quality of care and patient safety.



## MICROBIAL RESISTANCE TO ANTIBIOTICS: CAQH Tackles Major Public Health Threat



Antibiotic resistance has been called one of the world's most pressing public health problems. That's why CAQH is partnering with one of America's most trusted health advocates to help address this growing health threat.

Because we provide health care coverage for more than 100 million Americans, we are in a unique position to help get the word out about antibiotic resistance. CAQH will be working with the U.S. Centers for Disease Control and Prevention and America's doctors to do just that: *educate more Americans about the risks of resistance and what they can do to make a difference.*

The problem is that some bacteria that cause diseases like pneumonia, as well as common food-borne bacteria like salmonella and even e. coli, are becoming "resistant" to the drugs we now have to treat them. In other words, the drugs don't work as well to stop or kill the bacteria. The result is that more and more Americans may develop diseases that were once easily curable but are now harder—or even impossible—to treat with current medicine.

It doesn't have to be this way. Education and proper prescription are the keys to preventing drug resistance and preserving the power of these vital medicines.

In the coming months, CAQH will launch a national education campaign to raise awareness about the danger of antibiotic resistance and what Americans can do to prevent it. We're also planning to launch intensive pilot projects where we will work with local physicians and public health agencies to build programs that can reduce

# CAQH

The Coalition for Affordable Quality Healthcare

the threat. We'll report on our findings with the expectation that they will help expand programs nationwide.

As U.S. Surgeon General Dr. David Satcher has stated, "One approach to preventing the spread of drug resistance is developing and disseminating practical public health messages to the medical community and the public.... Prudent use of antibiotics is the key to decreasing, or even reversing, the spread of resistance."

#### ANTIBIOTIC RESISTANCE – THE FACTS

- Approximately 110 million courses of antibiotics and other antimicrobials are prescribed every year; more than 40% of these are unnecessary prescriptions for viral infections, including 17 million for the common cold. (Agency for Healthcare Research and Quality, June 2000)
- Antimicrobial resistance among six common bacteria in hospitals adds approximately \$661 million per year in unnecessary hospital costs. (Office of Technology Assessment, 1995). The total U.S. cost of treating antimicrobial-resistant infections may be as high as \$5 billion annually. (Institute of Medicine, 1998)
- "For some pathogens, we have reached the point where there are virtually no available drugs left to treat them." (Dr. David Satcher, CDC, February, 1999)

#### WHAT YOU CAN DO

Widespread use of antibiotics promotes the spread of antibiotic resistance. Smart use of antibiotics is the key to decreasing, or even reversing, the spread of resistance.

#### Tips on preventing the spread of antibiotic resistance:

- Antimicrobial drugs meant to treat bacterial infections should not be taken for viral infections such as colds, coughs, or the flu.
- If your physician determines that you do not have a bacterial infection, seek ways other than antibiotics to relieve your symptoms. Realize the harm in insisting that your doctor prescribe an antibiotic.
- Take medication exactly as your doctor prescribes it. Take the antibiotic until it is gone, even if you are feeling better. Do not save the medication to treat yourself or others later.

*– Prevention tips from the U.S. Centers for Disease Control and Prevention*

"HEALTH CARE, ALONG WITH THE LAW AND EDUCATION, IS STILL LIVING IN A PRE-DIGITAL WORLD. ELIMINATING THE COMPLEX MOSAIC OF DIFFERENT STANDARDS AT THE HEALTH PLAN LEVEL IS ONE WAY WE CAN PAVE THE WAY FOR HEALTH CARE TO MOVE INTO THE INFORMATION AGE."

*Jay Gellert  
President & CEO, Health Net, Inc.*



## Doctor Credentialing: a single source, a single application

One of the most time consuming tasks for doctors and their offices is "credentialing," which is one of the ways that health plans evaluate the qualifications and experience of physicians. While credentialing is an important part of how health plans help assure that consumers have access to quality health professionals, most health plans currently make separate requests to physicians for information about education, board certification, and other important factors.

CAQH is launching efforts that will ultimately process credentialing information through one source for all our plans, allowing physicians to eliminate or greatly reduce redundant filings for multiple plans. (See sidebar to learn more.)

## ADMINISTRATIVE SIMPLIFICATION

*Easier Credentialing, Standard Information Will Provide Paperwork Relief*

Making good use of valuable time – for doctors and consumers – is one of CAQH's major goals. We are making considerable progress in our efforts to improve processes that help consumers get the information they want and that help doctors focus on their "real" job of caring for patients. And, in the past few months, CAQH companies have met with physicians from some of America's largest medical organizations, presenting our efforts and asking for feedback on our work.

The challenges of adopting standard systems and implementation plans for 24 companies while meeting regulatory and compliance requirements are significant. But after working with physicians, office managers, technical specialists, and software teams, real progress has been made.



## MAKING PHYSICIAN CREDENTIALING EASIER

### SPENDING MORE TIME WITH PATIENTS – LESS ON PAPERWORK

**CAQH health plans know access to quality care requires access to quality doctors.** "Credentialing" – reviewing a practitioner's qualifications and work history, and regularly checking that doctors' credentials are up-to-date – is one crucial way health plans evaluate the qualifications and experience of physicians who treat our members. We make those evaluations based on information provided by doctors themselves and, to help protect consumers, we also verify that information from official, primary sources such as state licensing boards and medical specialty boards.

While credentialing is an important component of assuring quality care, each physician in each participating plan currently undergoes the cumbersome process of credentialing and recredentialing separately for almost every health plan in which he or she participates. Multiplying that by the fact that the average physician has 10-20 health plan contracts, we realized doctors were spending a lot of time on potentially unnecessary paperwork, instead of doing what they want to do – spend time with patients.

With the current credentialing efforts underway in CAQH, future credentialing will be simpler. While each plan will retain its own standards for evaluating the information, **all CAQH plans will base our quality evaluations on the same information, gathered by one central source, to reduce physician paperwork.**

The benefits of this streamlined credentialing system are many:

- Physicians complete only one application and then update data on a set schedule to one source
- Data is consistent nationwide and is always available and up to date
- Application data can be used by physicians for non-CAQH entities

CAQH has also incorporated accreditation and regulatory credentialing standards in its work, including those from the National Committee on Quality Assurance, which surveys and accredits 60 percent of all managed care organizations.

We hope to continue to work with physicians to identify additional ways we can help them do what they've been trained to do and want to do: spend time caring for patients, not doing paperwork.



## Moving to provide a "one-stop shop" for drug-coverage information

CAQH wants to make systems and processes easier for doctors and patients. One of the first steps CAQH can take in this effort is to develop a common database of health plan formularies – the list of prescription drugs that CAQH plans cover.

When we spoke with doctors and their office administrators, we heard that an integrated approach with electronic prescription capabilities, clinical data related to drugs, and access to individual patient formulary coverage would be the best tool for physicians as well as patients. This work is also consistent with a request from the American College of Physicians, American Society of Internal Medicine, which listed formulary standardization as one of its top priorities.



Our efforts through the first phase of CAQH activities have focused on surveying the scope and variety of plan formularies, choosing a database vendor, and designing the database. Confidentiality will be a key consideration as we add capabilities to the formulary database in our second phase of work.

## Making it easier for consumers to get important health plan information

CAQH plans are harnessing the power of online services to make health plan information easier to get.

It seems simple, but translating the jargon that the health care community uses every day really helps in understanding information. Therefore, we have developed a glossary of common terms which define, for instance, what a "PCP" is and what coverage for "durable medical equipment" means. This glossary will be available on all of our Web sites by the end of this year.



Additionally, we will work to evolve to standard terms for all companies wherever possible so that there is more continuity and simplicity when a consumer changes plans.

Throughout this year, we will be working to assure that all health plan Web sites enable our members to get benefit information and make changes online, including requesting primary care physician changes (if appropriate for their product offerings), requesting additional ID cards, downloading claim forms, and sending customer service inquiries via e-mail – all time and paper savers. As we begin these changes we will actively solicit input from consumers, regulators and employer groups, all of whom are key in creating the most useful benefit information and interactive capabilities.

## Providing members with consumer-friendly, consistent health care provider directories on our Web sites

Consumers want and need more, not less, information to select a health care professional for themselves or their loved ones. That's why we have made sure all participating plans will have consumer-friendly and searchable directories on their Web sites by December of this year. The directories will provide consumers with information such as a physician's education, specialty, board certification status, and hospital affiliations, and whether or not the physician is accepting new patients.

Although a few health plans already have online provider directories, these directories often have widely varying information. CAQH has set standard data elements for each of its members so that all the directories will hold the same information. In the future, we hope to link these health plan provider databases to the credentialing database in order to assure that consumer and doctor information is current and accurate.



"CAQH MEMBERS KNOW OUR EFFORT IS A LONG-TERM COMMITMENT TO IMPROVING THE HEALTH CARE EXPERIENCE. WE LOOK FORWARD TO CONTINUING TO WORK WITH MANY IN THE HEALTH CARE COMMUNITY – PHYSICIANS, EMPLOYERS, CONSUMERS, AND PUBLIC LEADERS – AND TO SHARING THE RESULTS OF OUR WORK WITH THE NATION."

*William T. McCallum*

*President & CEO, Great-West Life and Annuity Insurance Company*

## NEXT STEPS

**The Coalition for Affordable Quality Healthcare will continue to expand on these efforts to improve the health care experience for consumers and their doctors.** And we will continue to communicate with the American public and its physicians about ways we can partner in these efforts.

### FOR PHYSICIANS,

CAQH will be moving into the second phase of our administrative simplification efforts. We will expand our outreach effort to gather additional input on new directions and initiatives we can undertake to help improve doctors' work environment.

### FOR CONSUMERS,

CAQH's work to simplify and standardize consumer information will continue, and we will expand our online services and Web-based information sources to improve the way we communicate with our members.

### FOR ALL AMERICANS,

CAQH will continue working with doctors to help improve quality health care, beginning with our partnership with the Centers for Disease Control & Prevention. Our next step includes beginning specific pilot programs in cities targeted for on-the-ground education efforts as well as the identification of additional quality improvement programs we can initiate and then launch.

As we said in July of 2000, we know that actions speak louder than words. We have just begun implementing our action steps and reaching out to the health care community, and we know that we have further to go to regain the trust of the American public. But we are committed—collectively and individually—to continuing our efforts to improve the health care experience for consumers and their physicians, ultimately helping to strengthen the American health care system.

**Thank you for joining us.**



**CAQH**

Improving the Health Care  
Experience for American  
Consumers and Their Doctors



*We Are . . .*

## MEMBERSHIP



### EXECUTIVE COMMITTEE

#### CHAIRMAN

**WellPoint Health Networks Inc.** Leonard D. Schaeffer, *Chairman & Chief Executive Officer*

VICE-CHAIRMAN, CHIEF FINANCIAL OFFICER & CHAIRMAN, ACCESS COMMITTEE

**CIGNA** H. Edward Hanway, *Chairman & Chief Executive Officer*

CHAIRMAN, ADMINISTRATIVE SIMPLIFICATION COMMITTEE

**Health Net, Inc.** Jay Gellert, *President & Chief Executive Officer*

CO-CHAIRMAN, QUALITY OF CARE AND PATIENT SAFETY COMMITTEE

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