

## UHING STANDARDS COMMITTEE Transparency Administration Performance Standard Version 1.2

This Standard is compatible with state requirements set forth in the Utah Code Annotated 31A-22-613.5.

**Purpose:** To establish performance measures that report the average telephone answer time and claim turnaround time. Information derived from the Data will be shared as public record for display on the Health Insurance Exchange (Avenue H) and on the Utah Insurance Department's websites (insurance.utah.gov and healthrates.utah.gov).

**Applicability**<sup>1</sup>: This standard applies to all health benefit plans issued or renewed on or after January 1, 2015 or otherwise defined by Utah Administrative Insurance Rule R590-271 *Data Reporting for Consumer Quality Comparison rule* can be found at (ADD LINK ONCE MADE AVAILABLE BY UID).

### Definitions:

**Average Telephone Answer Time:** The average number of seconds a customer must wait (starting at the Incoming Call Begin Point) before a representative answers an incoming telephone call.

**Claim:** An invoice or bill submitted to a payer for one or more medical services.

**Claims Paid:** Claims reported in a Remittance Advice.

**Customer:** Any individual, provider or member, who calls for customer service assistance.

**Incoming Call Begin Point:** The point in time when the final menu prompt has been selected and the caller is waiting to speak to a representative.

**Measurement Periods:** Quarterly and Annually.

**Percent of Claims Paid in 15 days:** The percentage of claims paid within 15 days.

**Percent of Claims Paid in 30 days:** The percentage of claims paid within 30 days.

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<sup>1</sup> This standard or rule may not apply to ERISA governed plans or self-insured plans as defined by the Utah Insurance Department rule, please consult with your legal department and the Utah Insurance Department for applicability.

**SFTP:** Secure File Transfer Protocol

**Details:** This standard includes the following:

- The format in which a payer will provide the data to UHIN will be in a report form. The Transparency Denial Standard Reporting Worksheet is available at:  
[http://www.uhin.org/system/files/documents/Transparency%20Standards%20Reporting%20Worksheet%2020110125%20%20approved\\_0.xls](http://www.uhin.org/system/files/documents/Transparency%20Standards%20Reporting%20Worksheet%2020110125%20%20approved_0.xls)
- Performance Measures Submitted:
  - **Average Telephone Reporting Time**
    - Total wait time divided by total customer calls (refer to customer definition)
      - Reporting Periods: Annually
  - **Count of Claims Paid within 15 Calendar Days**
    - Total count of claims within the reporting period that were paid within 15 days
      - This is measured from the date the claim is received to the date the claim is paid (check date)
      - Reporting Periods: Annually
  - **Count of Claims Paid within 30 Calendar Days**
    - Total count of claims within the Reporting period that were paid within 30 days
      - This is measured from the date the claim is received to the date the claim is paid (check date)
      - Reporting Periods: Annually
  - **Total Count of Claims Paid**
    - Total count claims paid within the reporting period
      - Reporting Periods: Annually
- Reporting timelines and submission times:
  - Each insurer shall submit reports no later than April 1<sup>st</sup> for the preceding calendar year.
  - Annual results can be calculated by combining the four previous quarter's results.

## Implementation Considerations

### General:

- This information will be used by the public to compare Health Insurers and Health Benefit Plans.
- All data is reported at the company level for Utah business.
- The data submission will be sent through UHIN to be received by the Department of Insurance
- This Standard becomes effective upon the adoption of the Standard into the Utah Insurance Department Administrative rule R590-xxxx

• **Senders:**

- Senders should contact UHIN to set up a submission connection. For connectivity questions or concerns contact the UHIN Helpdesk at 1-877-693-3071 (toll free) or 801-466-7705 Option 9.
- Senders should contact Utah Insurance Department for questions and concerns regarding reporting acceptance, to Jordan Tolman at [jmtolman@utah.gov](mailto:jmtolman@utah.gov), or (801)538-3861.

• **Receiver:**

- The State of Utah Department of Insurance is responsible for maintaining and receiving data for the Utah Health Exchange.

	Original	V1.2	V1.3	V1.4
<b>ORIGINATION DATE</b>	01/2010	9/16/2014		
<b>APPROVAL DATE</b>	5/18/2011	5/6/2015		
<b>EFFECTIVE DATE</b>	6/18/2011	6/6/2015		

\* A = Amendment