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## *Correspondence Memorandum*

**Date:** April 18, 2024

**To:** Group Insurance Board

**From:** Korbey White, Health Program Manager  
 Office of Strategic Health Policy

**Subject:** 2023 Health Plan Performance Standards Report

**This memo is for informational purposes only. No Board action is required.**

Attached is the *2023 Health Plan Performance Report*. The report provides performance outcomes for the one Medicare Advantage vendor and ten health plans contracted by the Group Insurance Board (Board) to provide Group Health Insurance Program (GHIP) coverage for plan year 2023.

Overall, health plans met or exceeded most measurement targets on a regular basis. One health plan failed to meet the metric target for the year 2023 for Call Answer Timeliness. Health plans also consistently submitted quarterly performance reports in a timely fashion and provided sufficient details in the event of a performance exception.

Average health plan performance exceeded the annual target for all six key performance measures:

- Processing Accuracy
- Claims Processing Time
- Call Answer Timeliness
- Call Abandonment Rate
- Open Call Resolution Turn-Around Time
- Electronic Written Inquiry Response

Table 1 provides a comparison of average annual performance between plan years 2022 and 2023. The difference in average annual performance is noted for each measurement in the column titled "Plan Year Variance." This table shows the increase in overall annual performance between plan years 2022 and 2023. Measures that improved upon 2022 average performance are noted in green. A red arrow implies that there was a decrease in that category from 2022 to 2023.

Reviewed and approved by Brian Stamm, Deputy Director, Office of Strategic Health Policy  
 Electronically Signed 05/10/2024

Board	Mtg Date	Item #
GIB	05.23.24	10E

**Table 1 – 2022 vs. 2023 Average Health Plan Performance Summary by Measure**

<b>Performance Measure</b>	<b>Performance Target</b>	<b>2022 Average Performance</b>	<b>2023 Average Performance</b>	<b>Plan Year Variance</b>
<b><i>A. Claims Processing</i></b>				
<b>1) Processing Accuracy</b>	97%	99.3%	99.4%	0.1%▲
<b>2) Claims Processing Time</b>	95% processed within 30 days	98.7%	99.2%	0.5%▲
<b><i>B. Customer Service</i></b>				
<b>1) Call Answer Timeliness</b>	80% ≤ 30 seconds	89.0%	88.8%	0.2%▼
<b>2) Call Abandonment Rate</b>	< 3% of calls abandoned	1.0%	1.1%	0.1%▲
<b>3) Open Call Resolution Turn-Around Time</b>	90% resolved within 2 days	97.4%	97.4%	0.0%▲
<b>4) Electronic Written Inquiry Response</b>	98% response within 2 days	99.5%	99.7%	0.2%▲

Additional performance and penalty assessment details are outlined in the report. Health plans are deidentified and listed in random order.

Staff will be available at the Board meeting to answer any questions.

Attachment A: [2023 Health Plan Performance Report](#)