

Internal Audit Review of Group Health Insurance Program (GHIP) Performance Standards

Item 6 – Group Insurance Board

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Informational item only

- No Board action required.

Background

- Quarterly reports are submitted by the health plans for performance standards metrics that cover the following:
 - Claim Processing
 - Customer Service
 - Enrollment File and ID Card Generation
- Health plans attest to compliance with reporting and terms of the program agreement with each report

OIA Review

- OSHP requested the OIA review
- Review period: January 2022 – March 2023
- Review areas:

Reporting to GIB

- Verified accuracy of GIB summary reports

Penalties and Waivers

- Ensured a penalty was assessed, or a waiver was granted and approved by OSHP Leadership when a performance measure was not met

Validation of Health Plan Reports

- Recalculated the performance standards using the health plans' data to validate the results submitted

Reporting to GIB and Penalties/Waivers Results

Findings

- **Reporting to GIB**
 - Errors found in all but one quarterly report
- **Penalties and Waivers**
 - All penalties were assessed or waived appropriately

Suggestion

- Perform a secondary review of the GIB quarterly summary report of the Performance Standards to verify that the performance standards reported by the health plans are accurately included in the GIB report

Validate Health Plan Reports

Review Results

Findings

- 10 out of 11 health plans provided their report data
- Found methodology differences between health plans
- No recalculation exceptions in 3 out of 10 health plans reviewed
- One penalty assessed as a result of OIA review

Suggestion

- Periodic review of the performance standards submitted by the health plans
- Review the performance standards and update the wording to define or clarify how the performance standards should be calculated
- Additional Consideration – add a penalty for supporting documentation not provided timely or accurately



Questions?

Thank you



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