Attachment A

# Group Health Insurance Program

2024 Health Plan Performance Report



May 12, 2025

Prepared for the Group Insurance Board, May 21, 2025

# I. Overview

The Department of Employee Trust Funds (ETF), with direction from the Group Insurance Board (Board), administers the State of Wisconsin Group Health Insurance Program (GHIP) created under <u>Chapter 40 of the Wisconsin Statutes</u>. The Board contracted with one Medicare Advantage vendor and ten health plan providers to offer GHIP coverage for plan year 2024 to employees and retirees of state agencies, University of Wisconsin System, University of Wisconsin Hospitals & Clinics Authority, and participating local government employees. ETF manages the contracted health plans on behalf of the Board.

This is the sixth annual *Health Plan Performance Report* to the Board. Comparisons and trends to plan year 2023 performance are included in this report where pertinent.

The measures in this report were developed by ETF staff to reflect national best practices and are reviewed annually for continuation, modification, or retirement. Health plans submit performance metrics on a quarterly basis, using an ETF-provided reporting template. The performance report is accompanied by a quarterly vendor performance certification that attests all required performance standards were administered and completed in adherence with contractually stipulated terms and conditions.

Health plan performance reports are reviewed for performance standard compliance on a quarterly basis. Each performance standard has a related penalty, which is typically \$5,000 dollars for each percentage point for which a standard is not met in each quarter. Applicable penalties are also assessed on a quarterly basis. Penalties may be waived in certain circumstances when ETF staff determine it is warranted.

The Medicare Advantage vendor for plan year 2024 is UnitedHealthcare.

The ten health plan providers contracted for plan year 2024 were:

- 1. Aspirus Health Plan (Aspirus)
- 2. Dean Health Plan, Inc. (Dean)
- 3. Group Health Cooperative of Eau Claire (GHC of Eau Claire)
- 4. Group Health Cooperative of South Central Wisconsin (GHC of SCW)
- 5. HealthPartners Insurance Company, Inc. (HealthPartners)
- 6. Medical Associates Health Plans of Wisconsin (Medical Associates)
- 7. MercyCare Insurance Company (MercyCare)
- 8. Network Health Plan (Network)
- 9. Security Health Plan (Security)
- 10. Quartz Health Benefit Plans Corporation d/b/a Quartz (Quartz)

# II. Annual Average Health Plan Performance Summary by Measure

The average health plan performance for plan year 2024 exceeded the performance target for all six key measures.

Table 1A provides an overview of annual average performance by key measure. The difference between the performance target and the actual annual average performance is noted for each measurement in the column titled 2024 Average Variance.

Throughout this report, measures that exceeded the performance target are noted in green, while measures that failed to meet the performance target are noted in red.

Performance Measure	Performance Target	2024 Average Performance	2024 Average Variance	Report Detail Page
A. Claims Processing				
1) Processing Accuracy	97%	99.4%	2.4%	Page 4
2) Claims Processing Time	95% processed within 30 days	99.0%	4.0%	Page 6
B. Customer Service				
1) Call Answer Timeliness	80% ≤ 30 seconds	90.6%	10.6% 🔺	Page 7
2) Call Abandonment Rate	< 3% of calls abandoned	0.8%	-2.2% 🔻	Page 9
3) Open Call Resolution Turn- Around Time	90% resolved within 2 days	97.2%	7.2% 🔺	Page 11
4) Electronic Written Inquiry Response	98% response within 2 days	99.7%	1.7%	Page 12

 Table 1A: Annual Average Health Plan Performance Summary by Measure

Table 1B provides a comparison of average annual performance between plan years 2023 and 2024. The difference in average annual performance is noted for each measurement in the column titled Plan Year Variance. While two measures are lower than in 2023, these reductions are minor in nature and do not indicate a loss of performance on an individual level. The plans continue to meet and exceed performance measures as a whole.

Table 1B: 2023 vs. 2024 Average Health Plan Performance Summary by Measure

Performance Measure	Performance Target	2023 Average Performance	2024 Average Performance	Plan Year Variance
A. Claims Processing				
1) Processing Accuracy	97%	99.4%	99.4%	0.0%
2) Claims Processing Time	95% processed within 30 days	99.2%	99.0%	-0.2% 🔻

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Table 1B: 2023 vs. 2024 Average Health Plan Performance Summar	vh	v Mageura i	(Cont)
Table 1D. 2023 VS. 2024 Average fiearth Fiant enformatice Summar	Y N	y measure	

Performance Measure	Performance Target	2023 Average Performance	2024 Average Performance	Plan Year Variance
B. Customer Service				
1) Call Answer Timeliness	80% ≤ 30 seconds	88.8%	90.6%	1.8% 🔺
2) Call Abandonment Rate	< 3% of calls abandoned	1.1%	0.8%	-0.3% 🔻
3) Open Call Resolution Turn- Around Time	90% resolved within 2 days	97.4%	97.2%	-0.2% 🔻
4) Electronic Written Inquiry Response	98% response within 2 days	99.7%	99.7%	0.0%

# III. Claims Processing

#### 1) Processing Accuracy

Accurate claims processing prevents numerous potential negative impacts for program participants, such as account posting errors and incorrect patient statements, and helps health plans to prevent financial losses and payment delays.

#### Measurement Description

- At least 97% level of processing accuracy
- Processing accuracy means all claims processed correctly in every respect, financial and technical (e.g., coding, procedural, system, payment, etc.), divided by total claims processed
- Key Findings:
  - All 11 participating health plans met or exceeded the annual performance target for this measure throughout 2024

### Table 2A: Processing Accuracy: Annual Average Health Plan Performance

Performance Measure	Performance Target	2024 Average Performance	2024 Average Variance
Processing Accuracy	97%	99.4%	2.4% 🔺

The annual average health plan performance for processing accuracy decreased by 0.8% from 2023 to 2024. This is the sixth year in a row that annual average performance has exceeded the performance target.

#### Table 2B: Processing Accuracy: Quarterly Performance by Health Plan

Health Plan	Q1	Q2	Q3	Q4	2024 Average Performance	2024 Average Target Variance
Aspirus	97.6%	98.4%	98.5%	99.0%	98.4%	1.4% 🔺
Dean	100%	100%	100%	100%	100%	3.0% 🔺
GHC of Eau Claire	99.6%	97.1%	97.7%	98.9%	98.3%	1.3% 🔺
GHC of SCW	98.7%	98.3%	98.3%	97.3%	98.2%	1.2% 🔺

Health Plan	Q1	Q2	Q3	Q4	2024 Average Performance	2024 Average Target Variance
HealthPartners	99.9%	100%	99.8%	100%	99.9%	2.9% 🔺
Medical Associates	99.6%	99.5%	99.6%	99.4%	99.5%	2.5% 🔺
MercyCare	99.9%	99.9%	100%	100%	100%	3.0%
Network	99.7%	99.1%	99.7%	99.8%	99.6%	2.6% 🔺
Quartz	99.6%	99.6%	99.5%	99.6%	99.6%	2.6%
Security	100%	99.9%	100%	100%	100%	3.0%
UnitedHealthcare	100%	99.4%	100%	99.3%	99.7%	2.7% 🔺

Table 2C provides a comparison of average annual performance for processing accuracy between plan years 2023 and 2024. The difference in average annual performance is noted in the column titled Plan Year Variance.

- Four health plans improved their average annual performance for this measure in 2024: GHC of SCW, MercyCare, Security Health Plan and United Healthcare.
- Five health plans had a slight decrease in average annual performance for this measure in 2024 but still exceeded the average annual performance target of 97%: Aspirus, GHC of Eau Claire, Medical Associates, Quartz, and Network Health.
- Two health plans maintained the same annual performance average as the previous year but still exceeded the average annual performance target of 97%: Dean and HealthPartners.

Health Plan	2023 Average Performance	2024 Average Performance	Plan Year Variance
Aspirus	99.3%	98.4%	-0.9% 🔻
Dean	100%	100%	0.0%
GHC of Eau Claire	99.9%	98.3%	-1.6% 🔻
GHC of SCW	97.8%	98.2%	0.4% 🔺
HealthPartners	99.9%	99.9%	0.0%
Medical Associates	99.6%	99.5%	-0.1% 🔻
MercyCare	99.6%	100%	0.4%
Network	99.7%	99.6%	-0.1% 🔻
Quartz	99.7%	99.6%	-0.1% 🔻
Security	99.0%	100%	1.0% 🔺
UnitedHealthcare	99.2%	99.7%	0.5% 🔺

#### Table 2C: Processing Accuracy: 2023 vs. 2024 Annual Average Performance by Health Plan

### 2) Claims Processing Time

Claims processing time is an important factor in containing program costs and improving participant satisfaction. Prompt claims processing provides members with timely billing statements, which is especially important for participants with a higher amount of shared costs.

#### • Measurement Description:

 At least 95% of claims received must be processed within 30 business days of receipt of all necessary information, except for those claims which the health benefit program is the secondary payer.

### • Key Findings:

- All 11 participating health plans exceeded the annual performance target for this measure in 2024.
- All 11 health plans also met or exceeded the quarterly performance target in every quarter of 2024.

#### Table 3A: Claims Processing Time: Annual Average Health Plan Performance

Performance Measure	Performance Target	2024 Average Performance	2024 Average Variance
Claims Processing Time	95% processed within 30 days	99.0%	4.0% 🔺

The annual average health plan performance for claims processing time decreased by 0.2% from 2023 to 2024. This is the sixth year in a row that annual average performance has exceeded the performance target.

#### Table 3B: Claims Processing Time: Quarterly Performance by Health Plan

Health Plan	Q1	Q2	Q3	Q4	2024 Average Performance	Performance Target Variance
Aspirus	99.1%	99.9%	99.9%	99.8%	99.7%	4.7%
Dean	99.6%	95.1%	100%	98.1%	98.2%	3.2% 🔺
GHC of Eau Claire	96.9%	95.5%	98.4%	95.1%	96.5%	1.5% 🔺
GHC of SCW	96.7%	97.3%	97.3%	98.0%	97.3%	2.3% 🔺
HealthPartners	99.9%	100%	100%	100%	100%	5.0% 🔺
Medical Associates	97.8%	98.5%	99.4%	99.7%	98.9%	3.9% 🔺
MercyCare	98.4%	99.4%	99.6%	99.9%	99.3%	4.3%
Network	99.9%	99.6%	99.8%	99.9%	99.8%	4.8%
Quartz	99.9%	100%	100%	100%	100%	5.0% 🔺
Security	100%	100%	100%	100%	100%	5.0% 🔺
UnitedHealthcare	99.6%	99.6%	99.6%	99.9%	99.7%	4.7% 🔺

Table 3C provides a comparison of average annual performance for claims processing time between plan years 2023 and 2024. The difference in average annual performance is noted in the column titled Plan Year Variance.

- Two health plans improved their average annual performance for this measure in 2024: Health Partners, and Quartz.
- Seven health plans had a decrease in average annual performance for this measure in 2024 but still exceeded the average annual performance target of 95% of claims processed within 30 days: Aspirus, Dean, GHC of Eau Claire, GHC of SCW, Medical Associates, MercyCare, and Network.
- Two health plans maintained the same annual performance average as the previous year but still exceeded the average annual performance target of 95%: Security, and United Health Care.

Health Plan	2023 Average Performance	2024 Average Performance	Plan Year Variance
Aspirus	99.8%	99.7%	-0.1% 🔻
Dean	98.5%	98.2%	-0.3% 🔻
GHC of Eau Claire	97.9%	96.5%	-1.4% 🔻
GHC of SCW	97.7%	97.3%	-0.4% 🔻
HealthPartners	99.1%	100%	0.9% 🔺
Medical Associates	99.5%	98.9%	-0.6% 🔻
MercyCare	99.4%	99.3%	-0.1% 🔻
Network	100%	99.8%	-0.2% 🔻
Quartz	99.8%	100%	0.2%
Security	100%	100%	0.0%
UnitedHealthcare	99.7%	99.7%	0.0%

#### Table 3C: Claims Processing Time: 2023 vs. 2024 Annual Average Performance by Health Plan

## **IV.** Customer Service

### 1) Call Answer Timeliness

The ability for a participant to connect with a live customer service representative in a short period of time is important for customer satisfaction and improves the likelihood of timely and accurate issue resolution.

- Measurement Description:
  - At least 80% of calls received by the organization's customer service (during operating hours) during the measurement period were answered by a live voice within 30 seconds.

### • Key Findings:

- 10 participating health plans exceeded the annual performance target for this measure in 2024.
- One health plan failed to meet the annual performance target for this measure in 2024: MercyCare.
- MercyCare also failed to meet the quarterly performance target every quarter in 2024.

Table 4A: Call Answer Timeliness	· Annual Avorado Hoa	Ith Plan Porformanco
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Performance Measure	Performance Target	2024 Average Performance	2024 Average Variance
Call Answer Timeliness	80% ≤ 30 seconds	90.6%	10.6% 🔺

The annual average health plan performance for call answer timeliness increased by 1.8% from 2023 to 2024. This is the sixth year in a row that annual average performance has exceeded the performance target.

Table 4B: Call Answer Timeliness: Quarterly Performance by Health Plan

Health Plan	Q1	Q2	Q3	Q4	2024 Average Performance	Performance Target Variance
Aspirus	88.8%	90.6%	93.8%	89.5%	90.7%	10.7% 🔺
Dean	96.8%	99.3%	98.0%	92.0%	96.5%	16.5% 🔺
GHC of Eau Claire	100%	100%	100%	90.2%	97.6%	17.6% 🔺
GHC of SCW	81.0%	83.3%	83.3%	81.0%	82.2%	2.2% 🔺
HealthPartners	89.6%	95.2%	95.7%	92.2%	93.2%	13.2% 🔺
Medical Associates	87.5%	88.6%	91.9%	93.0%	90.3%	10.3% 🔺
MercyCare	75.5%	70.1%	75.9%	75.5%	74.3%	-5.8% 🔻
Network	92.6%	93.4%	89.2%	89.7%	91.2%	11.2% 🔺
Quartz	91.0%	90.9%	94.5%	93.8%	92.6%	12.6% 🔺
Security	85.4%	95.0%	100%	94.4%	93.7%	13.7% 🔺
UnitedHealthcare	97.5%	99.4%	95.2%	86.2%	94.6%	14.6% 🔺

Table 4C provides a comparison of average annual performance for claims processing time between plan years 2023 and 2024. The difference in average annual performance is noted in the column titled Annual Variance.

- Seven health plans improved their average annual performance for this measure in 2024 Aspirus, Dean, HealthPartners, Medical Associates, Quartz, Security, and United Health Care.
- Four health plans had a decrease in average annual average performance for this measure in 2024 but still exceeded the average annual performance target of 80% of calls answered in 30 seconds or less: GHC of Eau Claire, GHC of SCW, MercyCare, and Network.

#### Table 4C: Call Answer Timeliness: 2023 vs. 2024 Annual Average Performance by Health Plan

Health Plan	2023 Average Performance	2024 Average Performance	Plan Year Variance
Aspirus	86.9%	90.7%	3.8% 🔺
Dean	94.3%	96.5%	2.2% 🔺
GHC of Eau Claire	99.0%	97.6%	-1.4% 🔻

Health Plan	2023 Average Performance	2024 Average Performance	Plan Year Variance
GHC of SCW	84.7%	82.2%	-2.5% 🔻
HealthPartners	85.4%	93.2%	7.8%
Medical Associates	86.7%	90.3%	3.6% 🔺
MercyCare	86.0%	74.3%	-11.7% 🔻
Network	94.9%	91.2%	-3.7% ▼
Quartz	86.5%	92.6%	6.1%
Security	78.6%	93.7%	15.1% 🛦
UnitedHealthcare	94.3%	94.6%	0.3%

#### 2) Call Abandonment Rate

Call abandonment rates have a direct relation to the amount of time a participant must wait to speak with a customer service representative. Lower call abandonment rates typically indicate short waiting times and increased customer satisfaction.

#### • Measurement Description:

• Less than 3% of calls abandoned, measured by the number of total calls that are not answered by customer service (caller hangs up before answer) divided by the number of total calls received.

#### • Key Findings:

- All 11 participating health plans met or exceeded the annual performance target for this measure in 2024.
- The health plans demonstrated an ability to meet or exceed the performance target on a regular basis throughout the plan year.

#### Table 5A: Call Abandonment Rate: Annual Average Health Plan Performance

Performance Measure	Performance Target	2024 Average Performance	2024 Average Variance
Call Abandonment Rate	< 3% of calls abandoned	0.8%	-2.2% 🔻

The annual average health plan performance for call abandonment rate increased by 0.3% from 2023 to 2024. This is the sixth plan year in which annual average performance met or exceeded the annual performance target.

Health Plan		Q2			2024 Average	Performance
	Q1	QZ	Q3	Q4	Performance	Target Variance
Aspirus	1.4%	0.9%	1.7%	0.2%	1.1%	-2.0% 🔻
Dean	0.2%	0.1%	0.3%	0.3%	0.2%	-2.8% ▼
GHC of Eau Claire	0.0%	0.3%	1.0%	1.1%	0.6%	-2.4% 🔻
GHC of SCW	2.0%	2.7%	3.0%	3.0%	2.7%	-0.3% 🔻
HealthPartners	0.3%	0.0%	0.0%	0.0%	0.1%	-2.9% 🔻
Medical Associates	1.4%	1.2%	1.6%	1.2%	1.4%	-1.7% 🔻
MercyCare	2.0%	1.3%	1.0%	0.7%	1.3%	-1.8% 🔻
Network	0.4%	0.5%	1.0%	0.8%	0.7%	-2.3% 🔻
Quartz	0.5%	0.5%	0.5%	0.4%	0.5%	-2.5% 🔻
Security	0.7%	0.0%	0.0%	0.7%	0.4%	-2.7% 🔻
UnitedHealthcare	0.4%	0.2%	0.6%	1.1%	0.6%	-2.4% <b>V</b>

### Table 5B: Call Abandonment Rate: Quarterly Performance by Health Plan

Table 5C provides a comparison of annual average performance for call abandonment rates between plan years 2023 and 2024. The difference in average annual performance is noted in the column titled Annual Variance.

- Eight health plans improved their average annual performance for this measure in 2024: Aspirus, Dean, HealthPartners, Medical Associates, MercyCare, Quartz, Security, and UnitedHealthcare.
- Three health plans had a decrease in average annual performance for this measure in 2024 but still met the average annual performance target of 3% or less: GHC of Eau Claire, GHC of SCW, and Network.

Table SC. Call Aballuolillent Rate. 2023 VS. 2024 Alliual Average Performance by Health Plan							
Health Plan	2023 Average Performance	2024 Average Performance	Annual Variance				
Aspirus	1.7%	1.1%	-0.6% 🔻				
Dean	0.4%	0.2%	-0.2% 🔻				
GHC of Eau Claire	0.4%	0.6%	0.2% 🔻				
GHC of SCW	2.4%	2.7%	0.3% 🔻				
HealthPartners	0.2%	0.1%	-0.1% 🔻				
Medical Associates	1.6%	1.4%	-0.2% 🔻				
MercyCare	2.3%	1.3%	-1.0% 🔻				
Network	0.4%	0.7%	0.3% 🔻				
Quartz	0.7%	0.5%	-0.2% 🔻				
Security	1.8%	0.4%	-1.4% 🔻				
UnitedHealthcare	0.7%	0.6%	-0.1% 🔻				

### Table 5C: Call Abandonment Rate: 2023 vs. 2024 Annual Average Performance by Health Plan

#### 3) Open Call Resolution Turn-Around Time

Prompt open call resolution typically results in fewer repeat calls and improved customer satisfaction. It may also reflect the overall efficiency of a customer service team.

#### • Measurement Description:

- At least 90% of customer service calls that require follow-up or research will be resolved within two business days of initial call.
- Measured by the number of issues initiated by a call and resolved (completed without need for referral or follow-up action) within two business days, divided by the total number of issues initiated by the call.

#### • Key Findings:

- Medical Associates was granted a data reporting exemption due to system limitations.
  - A written summary of activity was submitted no issues were identified for 2024.
- The remaining 10 participating health plans all met or exceeded the annual performance target for this measure in 2024.
- The 10 measured health plans also met or exceeded the quarterly performance target in every quarter of 2024.

#### Table 6A: Open Call Resolution Turn-Around Time: Annual Average Health Plan Performance

Performance Measure	Performance Target	2024 Average Performance	2024 Average Variance
Open Call Resolution Turn-Around Time	90% resolved within 2 days	97.2%	7.2% 🔺

The annual average health plan performance for open call resolution turn-around time decreased by 0.2% from 2023 to 2024. This is the sixth year in a row that annual average performance has exceeded the performance target.

Health Plan	Q1	Q2	Q3	Q4	2024 Average Performance	Performance Target Variance
Aspirus	100%	99.0%	97.7%	100%	99.2%	9.2% 🔺
Dean	93.4%	91.2%	92.7%	93.1%	92.6%	2.6%
GHC of Eau Claire	98.7%	94.1%	93.5%	96.5%	95.7%	5.7% 🔺
GHC of SCW	98.7%	98.7%	98.3%	98.0%	98.4%	8.4%
HealthPartners	95.3%	95.7%	96.3%	96.0%	95.8%	5.8% 🔺
Medical Associates <sup>1</sup>	n/a	n/a	n/a	n/a	n/a	n/a
MercyCare	99.7%	99.7%	99.7%	100%	99.8%	9.8% 🔺
Network	98.4%	98.6%	98.4%	98.9%	98.6%	8.6% 🔺
Quartz	97.6%	97.7%	97.8%	97.7%	97.7%	7.7% 🔺

#### Table 6B: Open Call Resolution Turn-Around Time: Quarterly Performance by Health Plan

Health Plan	Q1	Q2	Q3	Q4	2024 Average Performance	Performance Target Variance
Security	96.4%	94.4%	94.6%	94.6%	95.0%	5.0% 🔺
UnitedHealthcare	99.4%	99.6%	99.7%	99.7%	99.6%	9.6% 🔺

1 Data reporting exemption granted due to system limitation; written summary of activity submitted as substitute

Table 6C provides a comparison of average annual performance for open call resolution turn-around time between plan years 2023 and 2024. The difference in average annual performance is noted in the column titled Annual Variance.

- Five health plans improved their average annual performance for this measure in 2024: GHC of SCW, MercyCare, Network, Quartz, and UnitedHealthcare.
- Five health plans had a decrease in average annual performance for this measure in 2024 but still exceeded the average annual performance target of 90% of open calls resolved within 2 days: Aspirus, Dean, GHC of Eau Claire, Health Partners, and Security.

*Table 6C: Open Call Resolution Turn-Around Time: 2023 vs. 2024 Annual Average Performance by Health Plan* 

Health Plan	2023 Average Performance	2024 Average Performance	Annual Variance
Aspirus	99.4%	99.2%	-0.2% 🔻
Dean	93.4%	92.6%	-0.8% 🔻
GHC of Eau Claire	99.3%	95.7%	-3.6% 🔻
GHC of SCW	96.9%	98.4%	1.5% 🔺
HealthPartners	96.4%	95.8%	-0.6% 🔻
Medical Associates <sup>1</sup>	n/a	n/a	n/a
MercyCare	98.6%	99.8%	1.2% 🔺
Network	98.1%	98.6%	0.5% 🔺
Quartz	97.4%	97.7%	0.3% 🔺
Security	96.1%	95.0%	-1.1% 🔻
UnitedHealthcare	99.0%	99.6%	0.6% 🔺

1 Data reporting exemption granted due to system limitation; written summary of activity submitted as substitute

#### 4) Electronic Written Inquiry Response

Prompt electronic written inquiry response times typically lower the number of contacts a participant has with a health plan to resolve a question and are likely to improve customer satisfaction.

#### • Measurement Description:

 $\circ~$  At least 98% of customer service issues submitted by email and website are responded to within two business days.

#### • Key Findings:

- All 11 participating health plans met or exceeded the annual performance target for this measure in 2024.
- All 11 health plans also met or exceeded the quarterly performance target in every quarter of 2024.

Table 7A: Electronic Written Inquiry Response: Annual Average Health Plan Performance

Performance Measure	Performance Target	2024 Average Performance	2024 Average Variance
Electronic Written Inquiry Response	98% response within 2 days	99.7%	0%

The annual average health plan performance for electronic written inquiry response time stayed the same from 2023 to 2024. This is the sixth plan year in which annual average performance has exceeded the performance target.

Table 7B: Electronic Written Inquiry Response: Quarterly Performance by Health

Health Plan	Q1	Q2	Q3	Q4	2024 Average Performance	Performance Target Variance
Aspirus	100%	100%	100%	99.3%	99.8%	1.8% 🔺
Dean	100%	100%	100%	100%	100%	2.0% 🔺
GHC of Eau Claire	100%	100%	100%	100%	100%	2.0% 🔺
GHC of SCW	98.0%	98.3%	98.0%	98.0%	98.1%	0.1%
HealthPartners	99.7%	100%	99.7%	99.7%	99.8%	1.8% 🔺
Medical Associates	100%	100%	100%	100%	100%	2.0% 🔺
MercyCare	100%	100%	95.8%	100%	99.0%	1.0% 🔺
Network	99.8%	100%	100%	99.8%	99.9%	1.9% 🔺
Quartz	100%	99.8%	100%	100%	100%	2.0% 🔺
Security	100%	100%	100%	100%	100%	2.0% 🔺
UnitedHealthcare	100%	100%	100%	100%	100%	2.0%

Table 7C provides a comparison of average annual performance for electronic inquiry response times between plan years 2023 and 2024. The difference in average annual performance is noted in the column titled Annual Variance.

- One health plan maintained a 100% annual performance average for the sixth year in a row: UnitedHealthcare.
- One health plan maintained a 100% annual performance average for the fifth year in row: GHC of Eau Claire.
- One health plan maintained a 100% annual performance average for the fourth year in a row: Medical Associates.
- Two health plans improved their average annual performance for this measure in 2024: Quartz and Security.

- Three health plans had a decrease in average annual performance for this measure in 2024 but still
  exceeded the average annual performance target of 98% of electronic written inquiries responded to
  within two days: Aspirus, MercyCare, and Network.
- Six health plans maintained the same annual performance average as the previous year: Dean, GHC of Eau Claire, GHC of SCW, HealthPartners, Medical Associates, and UnitedHealthcare.

 Table 7C: Electronic Written Inquiry Response: 2023 vs. 2024 Annual Average Performance by Health

 Plan

Health Plan	2023 Average Performance	2024 Average Performance	Annual Variance
Aspirus	100%	99.8%	-0.2% 🔻
Dean	100%	100%	0.0%
GHC of Eau Claire	100%	100%	0.0%
GHC of SCW	98.1%	98.1%	0.0%
HealthPartners	99.8%	99.8%	0.0%
Medical Associates	100%	100%	0.0%
MercyCare	100%	99.0%	-1.0% 🔻
Network	100%	99.9%	-0.1% 🔻
Quartz	99.8%	100%	0.2% 🔺
Security	99.8%	100%	0.2% 🔺
UnitedHealthcare	100%	100%	0.0%

# V. Additional Key Performance Measures

2) Enrollment

**Exceptions** 

**Discrepancies and** 

Table 8 provides an overview of additional key measures pertaining to enrollment and major system changes. These additional key measures are reported for each month on a quarterly basis. Overall, health plans met or exceeded the additional key performance measurement requirements.

Performance Measure	Measurement Description	Performance Target	2024 Averag Performand
A. Enrollment			
1) Enrollment File	The health plan must accept an enrollment file update on a daily basis and accurately process the enrollment file additions, changes, and deletions within 2 business days of the file receipt.		100%

The health plan must resolve all enrollment

discrepancies (any difference of values between

ETF's database and the health plan's database)

as identified within 1 business day of notification by ETF or identification by the health plan. The health plan must correct the differences on

the exception report within 5 business days of

notification by the department.

Table 8A: Additional Key Performance Measures: Annual Average Health Plan Performance

Database = 1 day of

notification

Exception report =

within 5 days of

notification

9

100%

100%

Performance Measure	Measurement Description	Performance Target	2024 Average Performance
3) Identification (ID) Cards	The health plan shall issue ID cards within 5 business days of the generation date of the enrollment file containing the addition or enrollment change, except during the It's Your Choice Open Enrollment Period.	Issue ID cards within 5 days	100%
B. Deliverables to the De	partment		
1) Approval of Communications	The health plan shall submit all communication materials specified by ETF for pre-approval prior to distribution to participants, potential participants, and employers. This includes written and electronic communications.	Submit all materials for review and approval, as needed	100%
C. Other		,	
2) Major System Changes and Conversions	The health plan shall verify and commit that during the length of the contract, it shall not undertake a major system change or conversion for, or related to, the system used to deliver services for the GHIP without specific prior written notice of a least 180 days.	Major system changes or conversions planned	None reported
		180 day written notice submitted	n/a

# VI. Penalty Overview

Health plans submit a performance report each quarter throughout the plan year. ETF staff review these performance reports and determine all potential applicable penalties on a quarterly basis. An applicable penalty is calculated by multiplying each percentage point for which a standard is not met each quarter by \$5,000. For example, if a health plan fails to meet a performance standard by two percentage points in a quarter, its total applicable penalty amount for the quarter would be \$10,000.

Tables 9A and 9B provide applicable penalty detail for plan years 2023 and 2024. These applicable penalty amounts do not reflect the actual penalty amounts assessed by ETF, nor do they include penalty waiver or penalty cap detail. The penalty cap prohibits the total assessed penalty amount from exceeding three percent of a health plan's total medical premium each quarter. Given that medical premium is determined by total health plan enrollment and may therefore lead to health plan identification, this report does not include individual plan penalty detail.

#### Table 9A: Annual Total Applicable Penalty Amounts

Performance Measure	2023 Total Applicable	2024 Total Applicable	Annual Variance
	Penalty Amount	Penalty Amount	Percent
Annual Total Potential Penalty Amount	\$42,300	\$28,800	-31.91% 🔻

As demonstrated throughout the report, overall health plan performance increased in 2024. This is reflected in the -31.91% increase in total applicable penalties from plan year 2023 to 2024.

#### Table 9B: Key Health Plan Performance Measures: 2023 vs. 2024 Total Applicable Penalty Amounts

Performance Measure	2023 Applicable Penalties	2024 Applicable Penalties	Annual Variance	Variance Percent
1) Claims Processing Accuracy	\$0	\$0	\$0	0%
2) Claims Processing Time	\$0	\$0	\$0	0%
3) Call Answer Timeliness	\$38,000	\$26,600	-\$11,400	-30% 🔻
4) Call Abandonment Rate	\$4,300	\$0	-\$4,300	-100% 🔻
5) Open Call Resolution Turn- Around Time	\$0	\$0	\$0	0%
6) Electronic Written Inquiry Response	\$0	\$2,200	\$2,200	
Total	\$42,300	\$28,800	-\$13,500	-31.91% 🔻