

SHERLOCK BENCHMARKS

Larger Edition



Volume II
Operational Metrics

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SHERLOCK BENCHMARKS

Larger Edition - 2024

Volume II: Operational Metrics



SHERLOCK COMPANY

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Tab 2. Operational Metrics Overview

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Tab 3. Sales and Marketing

Includes analyses related to those functions of Rating and Underwriting, Marketing, Sales, Commissions (external) and Advertising and Promotion.

Tab 4. Provider Network Management and Services

Provider Network Management and Services includes analyses of activities such as Provider Relations Services (the initial point of contact (telephonic and written) for provider inquiries), Provider Contracting (including Provider Configuration), and Other Provider Network Management and Services (including the maintenance of the provider network, orientation, on-going education, and in-services with new and existing providers).

Tab 5. Enrollment / Membership / Billing

This section analyzes Enrollment / Membership / Billing. Enrollment is the processing of installation, recording and maintenance of the relationship between the plan and its members. Membership is the recording of and changes in demographic information. Billing is the process and the execution of the submission of invoices.

Tab 6. Customer Services

This section analyzes Customer Services. Customer Services responds to, processes, resolves or provides information for transactions or inquiries of customers based on eligibility, contract language, benefit interpretation, medical management activities, regulatory interpretation, claims process accuracy and historical member communications used to provide and authorize service or payment.

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Tab 10. Risk Adjustment

This section includes metrics relating to Risk Adjustment. Risk Adjustment is the analysis of clinical data in order to match government compensation with the risk factors of members. This includes adjustment for the “three Rs”: permanent risk adjustment, transitional reinsurance and transitional risk corridors.

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Tab 2

Summary of Operational Metrics

This section summarizes analyses of key functional areas. If a quantifiable output is identifiable, per member per month (PMPM) costs are segmented into factors of primary demand, productivity, unit cost, cost per FTE and staffing ratios. In all cases of these functional areas, PMPM costs are segmented into staffing ratios and costs per FTE, which are divided into labor and non-labor components.

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Sales and Marketing

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Tab 4

Provider Network Management and Services

Provider Network Management & Services responds to inquiries from providers, contracts with providers for care delivered to members, is the liaison for provider appeals (whose coordinating responsibility resets with customer services), credentials providers for eligibility for contracts, issues report cards to provider and audits and validates provider activity.

Metric	Page	Definition	Calculation
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Provider Relations Service Metrics:

This sub-function responds to inquiries from providers.

Provider Relations Services Cost Summary

Per Member

Manual Inquiries

	Manual Inquiries per Member.....	85
x	Members per FTE.....	85
=	Manual Inquiries per FTE per Year.....	85
x	Provider Relations Services Cost per Manual Inquiry.....	85
=	Provider Relations Services Cost per FTE.....	85
x	FTEs per 10,000 Members.....	85
=	Provider Relations Services Costs PMPM.....	85

Total Inquiries

	Total Inquiries per Member.....	85
x	Members per FTE.....	85
=	Total Inquiries per FTE per Year.....	85
x	Provider Relations Services Cost per Total Inquiry.....	85
=	Provider Relations Services Cost per FTE.....	85
x	FTEs per 10,000 Members.....	85
=	Provider Relations Services Costs PMPM.....	85

Per Provider

Manual Inquiries

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Provider Network Management and Services

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This sub-function recruits and credentials providers such as physicians and hospitals.

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Enrollment / Membership / Billing processes group and membership transactions, processes invoices and maintains population demographics.

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= Costs per FTE.....	111		
x FTEs per 10,000 Members.....	111		
= Costs per Member per Month.....	111		
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x Members per FTE.....	111		
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= Costs per FTE.....	111		
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Enrollment / Membership / Billing

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= Costs per FTE.....	127		
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= Costs per Member per Month.....	127		
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+ Customer Services Total Staffing Costs per Total FTE.....	127		
= Customer Services Total Costs per Total FTE.....	127		
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= Customer Services Cost per Member per Month.....	127		
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=	149		
x	149		
=	149		
x	149		
=	149		
<u>Total Claims</u>			
x	149		
=	149		
x	149		
=	149		
x	149		
=	149		
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	149		
+	149		
=	149		
x	149		
=	149		
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Tab 8
Information Systems

Metric	Page	Definition	Calculation
Information Systems Cost Summary			
Total FTEs per IS FTE.....	181		
x IS Costs per Total FTE.....	181		
= IS Costs per IS FTE.....	181		
x IS FTEs per 10,000 Members.....	181		
= Cost per Member per Month.....	181		
Effect of IS Allocated by Supported Functional Area			
IS After Allocation as a Percent of Total IS.....	181		
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= IS Costs PMPM, After Allocation.....	181		
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11 (d) Security Administration and Enforcement.....	185	
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Tab 9

Corporate Services Cluster

The Corporate Services Cluster is comprised of the functions of Finance and Accounting, Actuarial, Corporate Executive and Governance and the Corporate Services function. The Corporate Services function includes subfunctions like Facilities, Mailroom, Legal and Human Resources. This tab includes metrics of these subfunctions plus those of Finance and Accounting.

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Corporate Services Cluster

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=		Total Usable Square Feet per Total FTEs.....	197
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			197
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=	199		
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Tab 10

Risk Adjustment

Risk Adjustment is the analysis of clinical data in order to match government compensation with the risk factors of members. This includes adjustment for the “three Rs”: permanent risk adjustment, transitional reinsurance and transitional risk corridors.

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Risk Adjustment

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