

SHERLOCK BENCHMARKS

Medicaid Edition



Volume II
Operational Metrics

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SHERLOCK BENCHMARKS

Medicaid Edition - 2022

Volume II: Operational Metrics



SHERLOCK COMPANY

November 2022

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Tab 2. Operational Metrics Overview

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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, Provider Audit / Billing Validation 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

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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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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.....	81
x	Members per FTE.....	81
=	Manual Inquiries per FTE per Year.....	81
x	Provider Relations Services Cost per Manual Inquiry.....	81
=	Provider Relations Services Cost per FTE.....	81
x	FTEs per 10,000 Members.....	81
=	Provider Relations Services Costs PMPM.....	81

Total Inquiries

	Total Inquiries per Member.....	81
x	Members per FTE.....	81
=	Total Inquiries per FTE per Year.....	81
x	Provider Relations Services Cost per Total Inquiry.....	81
=	Provider Relations Services Cost per FTE.....	81
x	FTEs per 10,000 Members.....	81
=	Provider Relations Services Costs PMPM.....	81

Per Provider

Manual Inquiries

	Manual Inquiries per Provider.....	82
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=	Manual Inquiries per FTE per Year.....	82
x	Provider Relations Services Cost per Manual Inquiry.....	82
=	Provider Relations Services Cost per FTE.....	82
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=	Provider Relations Services Costs per Provider per Year.....	82

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Provider Network Management and Services

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Total Provider Inquiries	94		
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Provider Network Management and Services

Provider Contracting Metrics:

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

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= Providers per Contracting FTE.....	100		
x Provider Contracting Cost per Provider.....	100		
= Provider Contracting Cost per Contracting FTE.....	100		
x Contracting FTE per 10,000 Members.....	100		
= Provider Contracting Costs PMPM.....	100		
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+ Provider Contracting Total Staffing Costs per Total FTE.....	100		
= Provider Contracting Total Costs per Total FTE.....	100		
x Provider Contracting Total FTEs per 10,000 Members.....	100		
= Provider Contracting Cost per Member per Month.....	100		
Percent of Provider Contracting Costs that are Staffing.....	100		
Percent of Provider Contracting Costs that are Non-Labor.....	100		
Percent of Provider Contracting Costs that are Outsourced.....	100		
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This sub-function recruits and credentials providers such as physicians and hospitals.

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Enrollment / Membership / Billing

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Customer Services

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Suspended Claims per Member.....	179		
x Members per FTE.....	179		
= Suspended Claims Processed per FTE per Year.....	179		
x Cost per Suspended Claim.....	179		
= Costs per FTE.....	179		
x FTEs Per 10,000 Members.....	179		
= Costs per Member Per Month.....	179		
<u>Total Claims</u>			
x Claims Processed Per Member.....	179		
= Members Per FTE.....	179		
x Claims Processed Per FTE Per Year.....	179		
= Cost per Claims Processed.....	179		
x Costs Per FTE.....	179		
= FTEs Per 10,000 Members.....	179		
Costs Per Member Per Month.....	179		
<u>Staffing vs. Non-Labor</u>			
Claims Processing Total Non-Labor Cost per Total FTE.....	179		
+ Claims Processing Staffing Costs per Total FTE.....	179		
= Claims Processing Total Costs per Total FTE.....	179		
x Claims Processing Total FTEs per 10,000 Members.....	179		
= Claims Processing Cost per Member per Month.....	179		
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Claim and Encounter Capture and Adjudication

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(c) Consultants.....	221		
(d) Hardware Depreciation and Maintenance.....	221		
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Information Systems

Metric	Page	Definition	Calculation
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(c) Consultants.....	221		
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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, Legal and Human Resources. This tab includes metrics of those subfunctions.

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Corporate Services Cluster

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Corporate Services Cluster

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= Human Resources Costs per Human Resources FTE.....	244		
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Corporate Services Cluster

Metric	Page	Definition	Calculation
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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.

Metric	Page	Definition	Calculation
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Risk Adjustment

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