



Claims Metrics 2025

1. Carrier Profile

* 1. Please provide your contact information

Name

Company

Email Address

2. Which type of Dental benefit products did your company offer in 2021? (Check all that apply)

☐

DHMO

☐

Medicare Advantage

☐

DPPO

☐

Medicaid

☐

Dental Indemnity

☐

Hybrid (mixed) product [A Hybrid products includes design elements of multiple product types within a single product. i.e, a DHMO plan that covers all preventive care with a Discount plan to cover all other treatment)

Other (please specify)



Claims Metrics 2025

2. Claims Metrics

For the purposes of this section: **Claims Paid**, **Finalized Claim**, or **claims finalized** refers to claims that have reached the point where a claim is authorized to be paid.

3. Please provide the following:

Total number of claims received in 2024?

Total number of claims paid in 2024?

Total dollar amount of claims paid in 2024?

4. What was the average number of claims paid per member in 2024?

5. What was the average number of procedures per claim paid per member in 2024?

6. What percent of members had no claims in 2024?

7. As a percentage of ALL claims, for 2024 what percentage were received via:

HIPAA 837D Batch

HIPAA 837D real-time

Direct Data Entry into a web portal

Other Electronic system

Non-electronic means (i.e. Paper)

Fax

8. Please describe your organization's target for finalizing claims. If possible please express in percent completed within business days or calendar days. For example, "95% finalized within 15 business days."

9. What was your company's success rate for claims finalized within 5 business days/7 calendar days? Please express as a percentage of all claims.

Electronic Claims Received

Paper Claims Received

All Claims Received

10. What was your company's success rate for claims finalized within 10 business days/14 calendar days? Please express as a percentage of all claims.

Electronic Claims Received

Paper Claims Received

All Claims Received

11. What percent of claims were denied within 5 business days/7 calendar days? Please express as a percentage of all claims.

Electronic Claims

Paper Claims

All Claims

12. What percent of claims were denied within 10 business days/14 calendar days? Please express as a percentage of all claims.

Electronic Claims Received

Paper Claims Received

All Claims Received

13. What percent of claims were pended for additional information within 5 business days/7 calendar days? Please express as a percentage of all claims.

Electronic Claims

Paper Claims

All Claims

14. What percent of claims were pended for additional information within 10 business days/14 calendar days? Please express as a percentage of all claims.

Electronic Claims Received

Paper Claims Received

All Claims Received

15. Assuming a 'clean' claim situation (no special processing/review needed), approximately how much longer would the adjudication process take on paper instead of through EDI?

☐ No difference

☐ 11-20 days longer

☐ 1-5 days longer

☐ 21 days or longer

☐ 6-10 days longer

Claims Metrics 2025

3. Claims Accuracy

16. What was your company's target success rate for CLAIMS PAYMENT ACCURACY? Dental Claims Payment Accuracy measures whether claims are paid correctly: the right amount, to the right provider, for the right procedures, under the right rules.

Electronic Claims Received

Paper Claims Received

All Claims Received

17. What was your company's actual success rate for CLAIMS PAYMENT ACCURACY?

Electronic Claims Received

Paper Claims Received

All Claims Received

18. What was your company's target success rate for CLAIMS PROCEDURAL ACCURACY? Dental Claims Procedural Accuracy measures whether the procedures submitted on a claim are coded and documented correctly ensuring the treatment provided matches what's claimed and follows the payer policies.

Electronic Claims Received

Paper Claims Received

All Claims Received

19. What was your company's actual success rate for CLAIMS PROCEDURAL ACCURACY?

Electronic Claims Received

Paper Claims Received

All Claims Received

20. What was your company’s target success rate for CLAIMS FINANCIAL ACCURACY?
Dental Claims Financial Accuracy measures how correctly the financial aspects of a dental claim are calculated and applied; ensuring that dollar amounts of payments, adjustments, patient responsibilities are computed according to the plan rules, fee schedules and contracts.

Electronic Claims Received	<input type="text"/>
Paper Claims Received	<input type="text"/>
All Claims Received	<input type="text"/>

21. What was your company’s actual success rate for CLAIMS FINANCIAL ACCURACY?

Electronic Claims Received	<input type="text"/>
Paper Claims Received	<input type="text"/>
All Claims Received	<input type="text"/>

Claims Metrics 2025

4. Coordination of Benefits

22. What percentage of claims ...

required clinical claims attachments to process a claim?

involved Coordination of Benefits (COB) as a primary payor?

involved Coordination of Benefits (COB) as a secondary payor?

23. When receiving a secondary 837D claim, do you accept the information submitted (COB information on the 837D and/or an Attachment Control Number for the EOB) as sufficient to process the claim?

☐ Yes

☐ No

☐ Don't Know



Claims Metrics 2025

5. Explanation of Benefits

24. Does your company allow providers to opt-in to receiving electronic EOBs (eEOB) instead of paper?

- ☐ Yes
- ☐ No
- ☐ Don't Know

25. As a percent of networked providers, what was the rate of adoption of eEOB...

... in 2023?

... in 2024?

Claims Metrics 2025

6. Auto-Adjudication

26. For the following questions:

Automatic Adjudication or Auto-Adjudication refers to all electronic, OCR and manual entry claims received into a payer's Claims Processing System, which are systematically processed to a finalized status without MANUAL intervention and/or SUSPENSION exceptions.

Of the electronic claims received, what percentage were automatically adjudicated?

Of the OCR (scanned) claims received, what percentage were automatically adjudicated?

Of the paper claims keyed into your processing system, what percentage were automatically adjudicated?

27. Does your auto-adjudication percentage include pre-determination claims?

☐ Yes

☐ No

Claims Metrics 2025

7. Real-Time Adjudication

28. Which of the following RTA capabilities does your company employ?

- | | |
|---|--|
| <input type="checkbox"/> A single claim may be submitted by a provider to a payer. | <input type="checkbox"/> The payer responds to the provider advising of patient responsibility |
| <input type="checkbox"/> The payer systematically adjudicates the claim to its final disposition. | <input type="checkbox"/> The payer responds to the provider advising of adjustments and explanations. |
| <input type="checkbox"/> The payer responds to the provider advising of Denial reason(s) | <input type="checkbox"/> The whole process is completed in a single communications session that is established and remains open and active until the adjudicated transaction is received by the entity initiating the communication session. |
| <input type="checkbox"/> The payer responds to the provider advising of pretermination. | |
| <input type="checkbox"/> The payer responds to the provider advising of amount to be paid | <input type="checkbox"/> All of the above |
| | <input type="checkbox"/> None of the above |

Claims Metrics 2025

8. Real Time Adjudication (cont.)

29. Does your company plan to implement RTA for any of the following by the end of 2026?

- ☐ A single claim may be submitted by a provider to a payer.
- ☐ The payer systematically adjudicates the claim to its final disposition.
- ☐ The payer responds to the provider advising of Denial reason(s)
- ☐ The payer responds to the provider advising of pretermination.
- ☐ The payer responds to the provider advising of amount to be paid
- ☐ The payer responds to the provider advising of patient responsibility
- ☐ The payer responds to the provider advising of adjustments and explanations.
- ☐ The whole process is completed in a single communications session that is established and remains open and active until the adjudicated transaction is received by the entity initiating the communication session.
- ☐ None of the Above

Claims Metrics 2025

9. Real-Time Adjudication (cont.)

30. For accepted predeterminations via real-time transmission, what was the most common response transmitted to providers?

- ☐ Received
- ☐ Denied
- ☐ Need more information
- ☐ Other (please specify)

- ☐ Do not Accept Predeterminations via Real-Time transmission

31. What was your company's target percent for predeterminations processed in 2024?

% of Electronic Claims Received

% of Paper Claims Received

% of ALL Claims Received

32. What was your company's actual percent for predeterminations processed in 2024?

% of Electronic Claims Received

% of Paper Claims Received

% of ALL Claims Received

33. Does your company use RTA for claim adjustment?

- ☐ Yes
- ☐ No



Claims Metrics 2025

10. Real-Time Adjudication (cont.)

34. What percentage of ALL claims in 2024 used RTA for claim adjustment?

Claims Metrics 2025

11. Artificial Intelligence

35. For which tasks does your company currently use Artificial Intelligence tools?

- ☐ X-Ray/Radiograph review
- ☐ Periodontal diagnosis and treatment plan review
- ☐ Claims Processing
- ☐ All of the Above
- ☐ Other (please specify)

- ☐ Not currently using AI tools.

Claims Metrics 2025

12. Artificial Intelligence (cont.)

36. Are you planning to implement AI for any of the following by the end of the next year?

- ☐ X-Ray/Radiograph review
- ☐ Periodontal diagnosis and treatment plan review
- ☐ Claims Processing
- ☐ [Insert text from Other]
- ☐ Other (please specify)

Claims Metrics 2025

13. Electronic Data Interchange (EDI)

37. Does your company trade Benefit & Eligibility transactions (HIPAA 270/271)...

- | | |
|---|--|
| <input type="checkbox"/> Directly from provider | <input type="checkbox"/> Via real-time |
| <input type="checkbox"/> Through a claims clearinghouse | <input type="checkbox"/> Via web portal |
| <input type="checkbox"/> Via batch | <input type="checkbox"/> Do not trade Benefit & Eligibility transactions (HIPAA 270/271) |
| <input type="checkbox"/> Other (please specify) | |

38. Does your company trade Patient Information Transaction Set (HIPAA 275)?

- | | |
|---|---|
| <input type="checkbox"/> Directly from provider | <input type="checkbox"/> Via real-time |
| <input type="checkbox"/> Through a claims clearinghouse | <input type="checkbox"/> Via web portal |
| <input type="checkbox"/> Via batch | |
| <input type="checkbox"/> Other (please specify) | |

- ☐ Do not trade Patient Information Transaction Set (HIPAA 275)

39. Does your company trade Claims Status Inquiry and Response (HIPAA 276/277)...

- | | |
|---|--|
| <input type="checkbox"/> Directly from provider | <input type="checkbox"/> Via real-time |
| <input type="checkbox"/> Through a claims clearinghouse | <input type="checkbox"/> Via web portal |
| <input type="checkbox"/> Via batch | <input type="checkbox"/> Do not trade Claims Status Inquiry and Response (HIPAA 276/277) |
| <input type="checkbox"/> Other (please specify) | |

40. Does your company trade Electronic Remittance Advice (ERA) transactions (HIPAA 835)...

- | | |
|---|---|
| <input type="checkbox"/> Directly from provider | <input type="checkbox"/> Via real-time |
| <input type="checkbox"/> Through a claims clearinghouse | <input type="checkbox"/> Via web portal |
| <input type="checkbox"/> Via batch | <input type="checkbox"/> Do not trade Electronic Remittance Advice (ERA) transactions (HIPAA 835) |

☐ Other (please specify)

41. Upon a provider implementing ERA, does your company suppress the print/mail of paper EOBs?

- ☐ Yes
- ☐ No

42. What percent of adjudicated EOB transactions are returned via 835?
Please enter a whole number, no decimals or ranges.

43. What percent of providers are accepting 835 transactions?
Please enter a whole number, no decimals or ranges.

44. Do you provide adjudicated EOB transactions via 835 regardless of provider enrollment?

- ☐ Yes
- ☐ No



Claims Metrics 2025

14. Payments

45. What percentage (please use whole numbers only) of your company's payments in 2024 to providers were...

Paper checks

Electronic funds transfer (EFT) - Includes Email/virtual checks, wire transfers, direct deposit, ACH disbursements

Virtual credit cards

All other

46. Is your company planning to offer Alternative Provider Payment Options (payments other than EFT/ACH or paper checks) by the end of 2026?

☐ Yes

☐ No

☐ Other (please specify)

Claims Metrics 2025

15. Performance Guarantees

47. Does your company offer performance guarantees on any of these metrics? (Check all that apply)

☐ Claims payment accuracy

☐ Turnaround time for claim payment

☐ Claims financial accuracy

☐ Member satisfaction rate

☐ Claims procedural accuracy

☐ Other (please describe)

☐ Do not offer guarantees on metrics



Claims Metrics 2025

16. Payment Guarantees (cont.)

48. What is the minimum group size for which your company will offer performance guarantees? Please answer in terms of subscribers (employees).



Claims Metrics 2025

17.

Other Comments

49. Please share any comments you wish to share on the state of Dental EDI submission rates and ideas to increase industry EDI adoption.