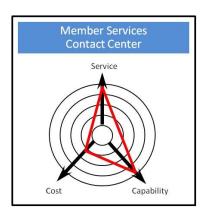


Rapid growth and a changing marketplace require advanced Member service operational processes and supporting technologies



Health Plans that are not able to support a more interactive relationship with customers will be less likely to attract and retain customers, maintain desired levels of customer satisfaction or interest customers in new products and services.



HEALTHCARE SERVICES³⁶⁰ PAYER Capture Your Investment in Exchanges

Member Engagement & Operational Excellence

Health Plans have spent tens of millions of dollars to participate in the exchange marketplace and Member Services contact centers have been making thousands of first impressions daily since January 1, 2014. New members with differing needs and motivations will drive increased & different demand for services.

Additionally, payer Membership profiles are shifting to reflect the increasingly individual and consumer oriented characteristics and away from a corporate, captive member sales and service model. And many Plans have neglected investments in customer care technologies.

Payer Member Services contact centers are **THE** front line in driving the engagement, satisfaction and retention behavior of all Members. It is common for Member Services organizations to have evolved into an environment where they provide customer service using multiple systems, non-linked databases, inconsistent processes, older technologies, and decentralized service centers. Many Health Plans may not believe that they can address member service demands with their current operations and systems. Also, with the rapid introduction of new technology, devices, tools and contact channels within the service industry, Member Services leaders do not know which systems, technology or strategy they should adopt or implement.

Characteristics of an Operational Excellence Member Services Organization

Best-in-class member services organizations share these characteristics:

- Consistently delivers a meaningful experience across all contact channels by managing work-flow to ensure proper resource allocation and contact tracking
- Actively monitors and maintains consistent service levels based on predefined performance metrics that are aligned with customer expectations and business value
- Integrates sophisticated CRM and CI technologies and systems to deliver a personalized customer experience and maximize operational efficiencies across all customer touch points
- Operates within an organizational model that optimizes physical, financial and staff assets
- Actively manages its workforce to attract, retain and develop the highest quality customer service employees
- Utilizes a continuous service improvement process that addresses all aspects of customer service to maintain service excellence

Implementing and maintaining such a Member Services organization can be extremely difficult. The appropriate balance must be established between three customer service elements: level of service, capability and cost. This is an ongoing challenge that can be successfully overcome with careful analysis, planning and investments — only then can customer service achieve the overall customer service goals.



HCS³⁶⁰ Payer helps a Plan's Member Services contact center:

- tactically plan for the increased demand and changing support needs
- strategically shift to a more consumer oriented service strategy
- optimize service operations and utilize best practices from consumer industries to engage, personalize and streamline Member interactions

The Provider Services

Center is a major stakeholder in these projects since they typically share infrastructure with Member Services Center.

LCI can work with **Provider Services** to help leverage benefits from process and/or equipment improvements.

HCS³⁶⁰ Payer projects can include Service Strategy Design, Package/Equipment Evaluation & Selection, as well as implementation project management.

About Lauro Consulting, Inc.

The mission of LCI is to be a leader in providing business and technology solutions to the customer service industry.

With a wide range of capabilities, LCI offers clients the solutions they need to improve their customers' service experience and improve operations.

LCI works closely with its clients to understand their needs and provides real world experience its clients.

LCI is vendor-independent, delivering solutions that best meet each client's unique customer service requirements.

LCI

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Transforming Your Member Services Contact Center

With our **HealthCare Services**³⁶⁰ **Payer** solution, LCI can assist you to rapidly transform your Member Services contact center function into an Operational Excellence Center.

HCS³⁶⁰ Payer capability ranges from discovery to implementation and LCI can participate at any stage of a client's Member engagement effort. LCI's capability includes:

- **Operational Readiness** Tactical preparation for increased service demand from exchanges and expanded Medicare Membership increases
- **Exchange Demographics** Capture and utilize voluntary demographic data on new ACA driven Members to focus outreach efforts and personalize interactions on this little understood Member segment
- **Member Engagement Management** Makes interacting with the payer easy. Understand and optimize a customer's journey when they attempt to interact with a plan's organizations, processes and infrastructure.
- Customer Intelligent Contact Center Operationalizes Customer Intelligence (CI) to personalize interaction handling treatments to improve the customer's experience. Utilizes CI to customize and personalize Member interactions early and often to improve Member intimacy, satisfaction and retention.
- **Customer Care Technology** Is a broad capability and includes technical execution of customer care technologies identified in roadmaps of advisory project phases. System integration and implementation are core to this component.

Phase Project Deliverables

Operational Readiness – A sense of urgency

- Business Process, Agent Training and High Level Technical Requirements
- Business and Technical Roadmap

Exchange Demographics - Know thy customer

- Focused on retention of exchange & expanded Medicaid channel Members
- Provide analytic data on new Members to begin personalizing relationships based on the Member's level of engagement and cost of care early in the Member lifecycle

Member Engagement Management – A Member's Point of View

- Current state enterprise customer experience key findings
- Voice of the Customer (VOC) program recommendations
- Future state contact center experience & enterprise experience

Online & social future state experience

Customer Intelligent Contact Center

- Messaging & interaction treatments based on individual customer needs
- Caller & need based Agent interaction scripting
- Interaction personalization early & often
- Technology roadmap

Customer Care Technology

- Executes on technology initiatives identified in advisory components of the offering (above)
- Extends customer intimacy with a 360 degree view of the customer and a rich set of data for each customer and interaction

For more information on how we can help your organization improve its Member Services contact center with **HealthCare Services**³⁶⁰, please contact: **Ike Mitchell** at **970-231-0098** or e-mail at <u>ike@ikemitchell.com</u> or **Michael V. Lauro** at **908-489-6348** or email at <u>mlauro@lauroconsulting.com</u>