

## Why HCL?

HCL is powered by more than 90,000 people in 31 countries. Our work is driven by highly experienced professionals who are drawn to our entrepreneurial environment and strong customer focus. We are passionate about helping our clients make changes that count. Our team has a record of successful engagements to show for it.

## More about HCL Technologies:

As a \$4.2 billion global company, HCL Technologies brings IT and engineering services expertise under one roof to solve complex business problems for its clients. Leveraging our extensive global infrastructure and network of offices in 26 countries, we provide holistic, multi-service delivery in such industries as financial services, manufacturing, consumer services, public services and healthcare.

HCL's healthcare practice is the fastest growing vertical, servicing global pharmaceutical & Life Sciences companies and leading national & regional health plans. Against the backdrop of Healthcare Reform and stringent Regulatory environment, HCL helps its clients navigate to success with targeted business technology solutions. For more information please visit: [www.hcltech.com/healthcare](http://www.hcltech.com/healthcare) or email: [healthcare@hcl.com](mailto:healthcare@hcl.com)

A micro-vertical strategy, built on strong domain expertise, ensures that no matter how complex a company's business problem is, we can offer a solution that is sustainable and innovation-driven.

That innovation is fuelled by Employees First, a unique management approach that unshackles the creative energies of our 84,319 plus employees, and puts this collective force to work in the service of customers' business problems.

By engaging HCL employees in a way that allows them to deliver business value – whether it involves enterprise application services, IT infrastructure management, custom application services, engineering and R&D services, business services or enterprise transformation services - we turn technology into a distinct competitive advantage for our customers.

*We call it the Employees First effect!*

## About Pega:

Pega systems revolutionizes how leading organizations optimize customer experience and automate operations. Our patented Build for Change® technology empowers business people to create and evolve their critical business systems. Pega systems is the recognized leader in **business process management** and is also ranked as a leader in **customer relationship management** software by leading industry analysts. For more information, please visit us at [www.pegacom](http://www.pegacom)



**Hello, I'm from HCL!** We work behind the scenes, helping our customers to shift paradigms and start revolutions. We use digital engineering to build superhuman capabilities. We make sure that the rate of progress far exceeds the price. And right now, 90,000 of us bright sparks are busy developing solutions for 500 customers in 31 countries across the world. **How can I help you?**

[www.hcltech.com](http://www.hcltech.com)



## Member Experience Management Catalog

## Solution Introduction

To succeed in the new paradigm, health plans need to develop new capabilities for interacting with their customers while simultaneously investing in additional analytical marketing capabilities.

The HCL Member Experience Management (MEM) solution suite provides the health plan with a comprehensive array of solution framework designed to provide a superior member experience to the existing and prospective members of the health plan, thus improving the customer acquisition and retention rates. It enables the health plan make a seamless transition to customer centric business model.

## Differentiators

The HCL MEM solution suite is designed to enable the health insurance industry to maintain business growth and increase customer satisfaction by:

- Offering a differentiated customer experience to, both, their existing and prospective customer base across all touch points
- Utilizing a multi-channel approach to enable health plans in utilizing the most appropriate channels to communicate with their customer base.
- Enhancing capabilities to make business decisions through the use of analytical models and reports
- Providing a ready made base framework which can be enhanced and customized for a health plan thus reducing the total cost of ownership (TCO) as compared to building a system from ground up

## Components

**Customer Relationship Management (CRM)** – The CRM module is a front-end powered by a business rules engine that provides the health plan with the flexibility to swiftly design, build and deploy products that are appealing to the individual member. The CRM incorporates following:

- The **Enrolment** Module facilitates health plan's ability to rapidly convert prospects to contracted members by capturing data from multiple sources, whether internal, external, electronic or paper
- **Member Maintenance** provides the health plan with feature rich capabilities to manage the member's life cycle and maintain the experience. Health Plans can make changes to details or add additional attributes to the member profile ensuring retention of members through improved customer experience during various member touch points with the Plan – via a Customer Service Representative, Online, mobile etc.
- The **Campaign Management** module assists with focused campaigns based on member attributes and retention/ switch over triggers with an integrated feedback loop that helps health plans to focus on high value subscribers / customers and assists in reducing churn and improve profitability
- The **Need Analyzer** functionality evaluates the customer's requirements and suggests the "best plan" based on customer input and True Insurance Value of the plan. The rules engine compares the out of pocket expenses in a hypothetical good year, average year and bad year in terms of medical expenses to available options and presents them to customer for review and selection

### Single View of Customer (SVoC)

The SVoC module provides the customer service team of the plan with a unique perspective of the member based on the individual's HUC Value which is an analytical derivative of the member health profile (H), medical service utilization (U), and total out of pocket cost incurred by the member (C). This information can provide valuable customer insight –for e.g. whether the member is subscribed to the appropriate plan, whether any specific care plans need to be initiated – enabling the CSR to provide superlative service to the member.

### Portals Suite

The portals suite consists of front-ending applications i.e. the **Customer (Prospect/ Member)** and **Broker/ Agent Portals**. The **Prospect Portal** caters to those interested to purchase a health plan and guides them through the enrolment process with important value adds like Plan



Comparison, Plan Recommendation, etc. The **Member Portal** allows the member to utilize and take advantage of various self-service options as well as a slew of important assessment and tracking tools. The **Broker/ Agent** Portals serve as a gateway to the Brokers/Agents to help prospects/ members and deliver effective service.

### Care Management

The solution suite integrates care management by providing traditional care management, complex case management, and utilization management with additional capabilities to support chronic/ disease management wellness programs and quality measurement benchmarks in compliance with HEDIS, NCQA, PQRI or ACOs. Tools like Health Risk Assessment and Business Engine are used to evaluate member's health situation and identify preventive measures, for retrospective, concurrent, perspective and predictive analysis, population management and condition registries. The member can be informed about interventions using the integrated Computer Telephony Integration (CTI), Document Management Facilities, Member Portals and Mobility.

### Customer Experience Dashboard

A dynamic user friendly graphical, configurable, real-time visual representation of key performance metrics use to track plan data that integrates with the **CRM, Single View of Customer (SVoC)** and **Voice of the Customer (VOC)** modules for seamless information transfer and access and enabling consistent customer experience across multiple channels. The dashboard will allow the business to make informed decisions with information at their finger tips saving time from creating and keeping track of a massive mix of reports. VOC is a business process management tool that allows HCL to help health plans define, articulate and pull into clear view expectations, preferences, likes, dislikes, needs and wants into a logical structure for prioritization and mitigation from multiple channels. Our consulting team will lead the requirements gathering, language mapping, service and/or product design strategy and set the stage for constant innovation based on customer input and market research.

## Service Offerings

**Consulting Services** - Member Centricity and Experience Assessment, Member Centric Design, Creation of Customer Journey Maps, Voice of Customer, Member Segments and Target Personas and Road map Definition

**Solution Implementation Services** - Implementation of Member Experience Management Solution components for Member Acquisition, Retention and Recapture designed per the Payer Road map

**Hosted vs. On-Premise Implementation Services** - Choice of implementation on a completely hosted model vs. an on-premise implementation evaluating key payer constraints and benefits

**Validation Services** - Support and validate Member Experience Management solution implementation through functional validation services, performance validations services, and improve time to market with automated validation services

**Information / Data Management** - Providing consulting services, tools, methodologies, application governance across multiple platforms and databases (consumer / member aggregation), work flows to enable the management of big data and drive towards best practices and better more strategic decision support.

**Business Intelligence** - Data integration across multiple enterprise platforms allows business operations to drive consistency and preserve information and focus reports on specific aspects of the data. Create a single view of customer by aggregating member data into one view creating a golden record using MDM or Enterprise Master Person Index (EMPI).

The business will have the ability to use self service capabilities and tools for easy analysis, presentation of data in plain view and in the needed format for all stakeholders thus helping in making better business decisions.

**Business Support Services** - Choice of voice and fulfillment services to extend "Business As Usual" support for Call Center, Correspondence, Care Management and Digital Mail Room services.

