

GaiN with ChaNge



MEMBER EXPERIENCE MANAGEMENT SOLUTION

REMAINING RELEVANT IN THE NEW PARADIGM

Healthcare Plans are creating new business models to support the new market opportunity and will need to acquire or develop capabilities for interacting with their customers combined with market and operational analytic capabilities to ensure the needs of their customers are met, therefore, retaining them.

KEY IMPERATIVES

- Medical cost management will be a top priority & this will be achieved by investing in analytics to perform population health analysis to review member's health behavior and provide customized programs using the online / mobile channels to promote healthier lifestyles
- Create an integrated front-end sales system that appeals to today's demanding consumer. Currently, payers primarily use the direct sales force to service large clients. They will now need to invest in online channels to attract and manage new individual customers. This will require building capabilities like the ability to offer quotes and issue policies instantly
- Payers will also have to compete successfully in the new health insurance exchanges and will need systems that can present their products, services, and prices in a differentiated manner on these exchanges
- Success in the retail market will require payers to develop new marketing analytics as well – most critical being, the ability to calculate the likely lifetime value of a customer. A lifetime-value view – a key to effective CRM – will give payers new capabilities for identifying, targeting, capturing, and retaining attractive consumers
- Achieving a lifetime-value view of consumers will require the payers to develop a single aggregated integrated view of their members and to identify all transactions associated with them. Additionally, payers will need to manage the enrolment and data management from multiple sources
- In the new environment, payers must be able to create new products – swiftly and flexibly– that are fine-tuned to the evolving marketplace

A typical payer today has a complex array of IT applications—often a patchwork of legacy and customized programs with hard wired interconnections. Payers have traditionally built products from the ground up and in many instances they have not taken advantage of more modular and current approach to application management. These disconnects become more challenging hurdles in an era where efficiency and cost management are top priorities.

Furthermore, in the emerging healthcare marketplace, the first customer touch point will be the platform for an increasingly strategic relationship that enables downstream collaboration to improve health and manage care through effective prevention programs.

HCL's Member Experience Management Solution framework helps Payers to maintain business growth and increase customer satisfaction by improving the customer experience across all interactions and touch points.

MEMBER EXPERIENCE MANAGEMENT SOLUTION FROM HCL

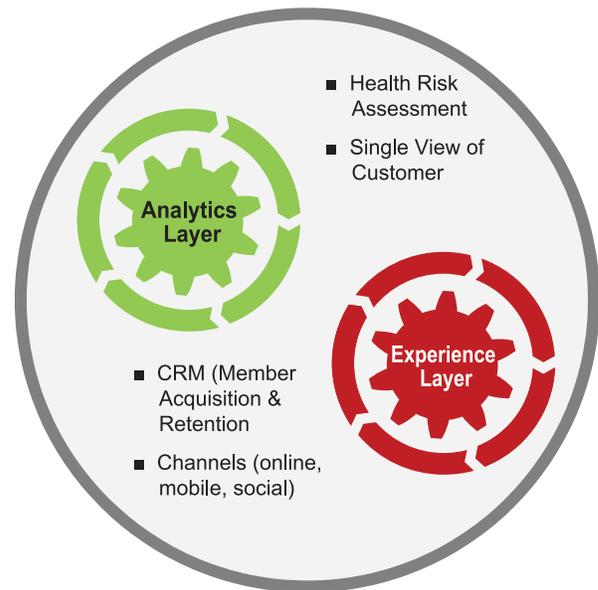
HCL has created a comprehensive analytics driven framework to help health plans offer a differentiated experience to their existing and prospective customer base. The closed loop framework consists of an analytics module to analyze the customer's data and a CRM and Campaign Management module to enable actions based on the output of the analytics module.

Analytics to improve health

The analytics module is the backbone of the MEM framework. It consists of the Health Risk Assessment (HRA) and the Single View of Customer (SVOC).

The biggest impact on the healthcare costs are due to the rise in the number of patients with chronic illnesses and an early warning system can help the healthcare community to initiate preventive actions which will eventually result in reduced healthcare spending. The Health Risk Assessment (HRA) module is invoked for a person during his initial enrolment or during the subsequent renewal to identify any risks to the member's health and to initiate appropriate care management actions. The module utilizes the members input (for new and existing members) along with his claim data (for existing members) and local demographic data to ascertain the risk of the individual developing any chronic conditions.

The Single View of Customer (SVoC) aggregates data across multiple sources (including but not limited to claims, demographics, care management, service requests) to provide the individual's HUC Value which is an analytical derivative of the member demographic and health profile (H), medical service utilization (U), and total out of pocket cost incurred by the member (C). This information can be used to derive valuable customer insight –for e.g. whether the member is susceptible to a catastrophic health event, whether the member is subscribed to the appropriate plan, whether any specific care plans need to be initiated. This enables decision making across all levels in the payer organization and ensures that the appropriate information can be delivered in a timely fashion to the customer through the appropriate communication channels.



Enablers - Digital Mail Room, Computer Telephony Interface, Integration Adaptors (to be written on blue band)

Right Information, Right Member, Right Time

The actions from the analytics modules are delivered through the Member Experience Layer of the MEM Framework which consists of a CRM suite including a Need Analyzer and a Member Feedback System.

The CRM Suite utilizes the output from the SVoC module to ensure that the right messages are transmitted to the prospect / member during the various stages of enrollment / reenrollment. The CRM module also incorporates a need analyzer to aid the enrolment / renewal processes and assist the member / prospect to make educated decisions about their health. The Member feedback system (either internal existing survey systems or external third party 'Voice of Customer' solutions) will then serve as a gateway to improve the service levels and thus continuously improve and achieve high levels of member experience.

The information is delivered using a multi-channel approach enabling a health plan to utilize the appropriate channels to communicate with their customer base and create a personalized service experience. The multichannel approach

is also augmented by a self-service portals suite consisting of front-ending applications i.e. the Prospect and Member Portals through which a prospect/member “experiences” the highly streamlined enrolment process.

Enabling the Communication

The Enabler Layer provides services that augment the solution by streamlining the interfacing points between the member and the health plan. The enablers include a Digital Mail Room Integration

which provides an end-to-end document management service to the plan and Computer Telephony Interface module providing advanced calling and chatting options. All this information is linked using the Customer Experience Dashboard and Transformation Experience processes to measure the customer’s interaction and satisfaction levels. Additionally, the layer also provides Adapters which allow easy internal/ external integration of the solution to the technical landscape in any health plan.

HCL MEM SOLUTION DIFFERENTIATORS

- SVoC analytics to devise focused interactions, Targeted Campaigns and Care Management Programs to high value subscribers/ customers to reduce churn and improve health
- Scalable and viable model for BI platforms with statistical model to identify and predict member switchover triggers
- Analytics driven CRM module to create focused campaigns based on member attributes and switch over triggers with an integrated feedback loop
- Capability to direct members to “Best Value Plan” taking into account the product and network design through Plan Comparison & Recommendation
- Ability to monitor business metrics data relationship with an integrated Member Experience Dashboard
- Analytics and CRM also aid in improving the Star ratings of a Health Plan’s Medicare advantage programs. Analytics help identifying specific domain areas for improvement at each member level based on member history and existing touch points. CRM assists in executing the actions to improve the touch points, improving the Medicare Star rating of the Plan in turn
- Consistent Customer Experience across multiple channels
- Adaptable and Extensible with existing payer systems

For more information please visit: <http://www.hcltech.com/lifescience-healthcare/payers> or email: contact.lsh@hcl.com



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