



Improving the Customer Experience in Health Plan Call Centers

USING **ARTIFICIAL INTELLIGENCE** TO
IMPROVE THE MEMBER EXPERIENCE.



40-60% OF **ALL CALLS** TO A PAYER
CALL CENTER ARE **BENEFIT-RELATED**

CHALLENGE

THE CHALLENGE FOR A CUSTOMER SERVICE REPRESENTATIVE (CSR)

1. UNDERSTAND

the service

2. IDENTIFY

the applicable
benefit

3. MANUALLY SEARCH

the benefit
details

4. UNDERSTAND

the benefit
details.

5. EXPLAIN

the benefit
details.

Customer Service Representatives and Customer Advocates have one of the most challenging and critical roles in the healthcare ecosystem.

CSRs often have the very first interaction with a member or provider in support of a member's health and well being. The care and treatment a member receives is often dependent on their plan coverage and benefits.

Yet Customer Service Representatives face incredibly complex systems as they're looking for answers. They may need to search in multiple places or navigate between various windows to support a member or provider's inquiry.

Imagine scanning through a document using the search function, trying to find an answer based on place of service – all while trying to keep a friendly demeanor on the phone with a caller.

SOLUTION

ONE SYSTEM FOR ALL BENEFITS.
INSTANT ANSWERS WITH PRISTINE ACCURACY.

A payer's Source of Truth documents hold the intelligence needed to answer benefit-related inquiries. Unfortunately, the information a CSR needs is often buried in unstructured text documents, ambiguous and rarely found in one single document.

That's where Sensentia can help.

LET'S LOOK AT THE CSR'S JOB:

STEP 1. Understand which service the caller is asking about. If the service is described by a CPT code, the CSR needs to look up the description of the code.

STEP 2. Identify the applicable benefit relating to the service. For example, an MRI may be found within the Advanced Imaging benefit. A wheelchair may be covered by a DME, Home Care, or Hospice benefit. For pharmacy products, this means finding the correct benefit tier in the formulary.

STEP 3. Manually search for all the benefit details. This often includes sifting through the benefit hierarchy, across multiple systems, or even through the dense printed policy.

STEP 4. Understand the full benefit picture. Each CSR must be able to assemble and communicate the entire benefit "picture," which is difficult if the benefit is not described in a consistent way or is spread across multiple systems.

Step 5. Communicate the benefit in a compliant manner, even when the benefit information is not presented as such.

Every benefit inquiry through a CSR is time and labor-intensive and the member may not receive complete, accurate information.

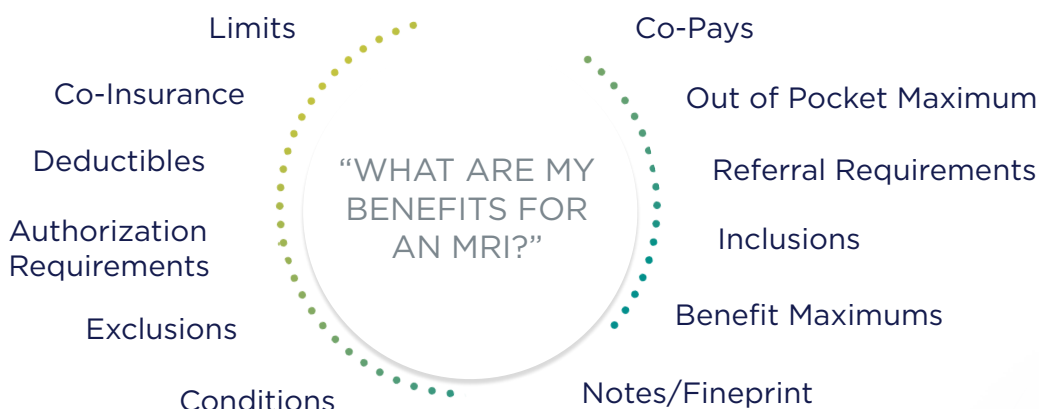
Using Artificial Intelligence, Sensentia models the knowledge from various source materials, making it easily accessible using natural language inquiry.

The CSR simply enters the service using clinical terminology, abbreviations, acronyms, CPT codes, or natural language.

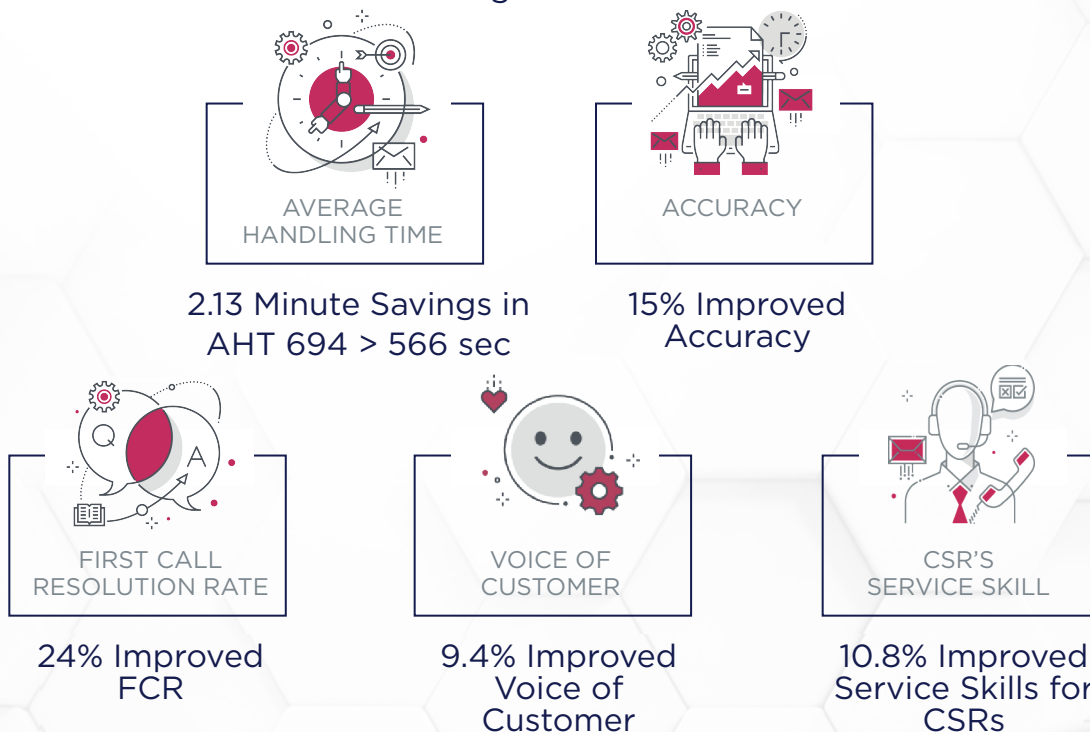
Sensentia finds all of the benefits related to the service and presents the information in an easy-to-digest form that can be accessed by the Call Center or through self-service.

HOW IT WORKS

Sensentia Delivers A One-Stop-Shop



Results measured from a deployment of Sensentia’s solution in call centers of a Fortune 100 Health Plan delivered strong results.



RESULTS

CLIENT RESULTS INCLUDED:

- **Improved Average Handle Time (AHT)**, due to the reduction in the time it took for CSRs to research the benefits.
- **Better First Call Resolution (FCR) rates.** The client eliminated escalations and improved accuracy and consistency.
- **Reduced redirection rates.** The CSRs handled calls from broader plan types and geographic areas because the benefit information was presented in a consistent way.
- **Decreased training requirements**, particularly among new CSRs, because of the simplicity of the system.
- **Improved overall quality scores.**

WHAT'S NEXT?

THE POSSIBILITIES ARE ENDLESS.

The possibilities are endless. Sensentia's API is multifunctional, and can integrate into the desktop CRM platform to bring comprehensive and accurate benefit solutions to the CSR experience.

SENSENTIA API ENABLES:

- Self-service tools to answer questions directly through member and provider portals.
- Using AI across various technology channels such as web, mobile, IVR, chat, SMS, email, voice.
- Plan comparison capability that supports telesales teams and eases the burden of supporting dual-eligible members who need to fully understand both Medicare and Medicaid coverage.

HERE'S SOME FEEDBACK FROM OUR CUSTOMERS. HAPPY CSRS = HAPPY MEMBERS.

"Sententia's API was one of the easiest and best documented we've worked with. We were able to build in weeks what's taken us a year and half."

"Wow! This is AWESOME! I'm not going back to the floor without it. Sign me up!"

"Sententia is an awesome tool. [I]t will reduce Average Handle Time, Errors, Hold Time and elevate our First Call Resolutions and the level of confidence instilled by each CSR in our members."