HealthLINQ by MPX

Taming the Chaos:

Creating a Better Framework for Enrollment Communications

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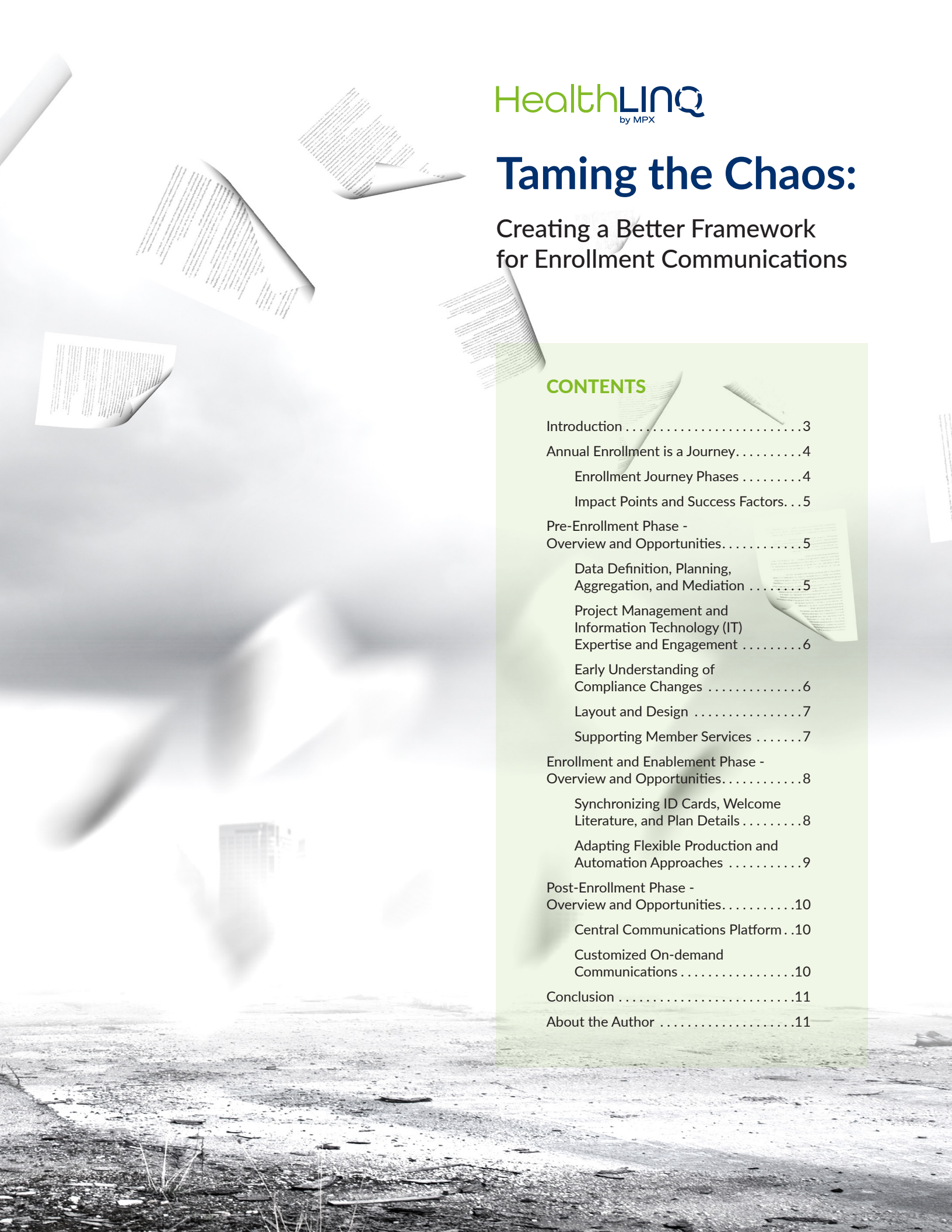

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Introduction

Health plans are facing dramatic change driven by market innovations, shifting consumer expectations, diverse and changing federal and state-level regulations, and disruptive technology advancements to name a few. What has not changed for many organizations, however, is the complexity of the annual member enrollment process.

For most health plans, member enrollment and ancillary activities represent an annualized cycle of planned chaos. This oxymoron has become such a common practice that many organizations freeze their other operational activities from November to Mid-January just so they can fully concentrate on the anticipated intensity and chaos of enrollment-related activities, including the massive uptick in member correspondence. This two and a half month freeze unnecessarily gives well functioning competitors effectively a 20% head start each year on addressing other important initiatives.

Thankfully, there are multiple steps health plans can take to tame the chaos. Before exploring specific improvement opportunities, it's critical to understand where the process of member enrollment begins and ends.

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Annual Enrollment is a Journey

In order to really get to the root causes of why member enrollment communications are typically chaotic, it's critical to understand the set of activities that occur before, during and after the actual member enrollment process. Each of these stages of the annual enrollment process contain critical inter-related activities that will help define whether the enrollment and related communications will proceed smoothly or with periods of chaos for members and staff.

Each enrollment phase offers a "Moment of Truth" for a health plan where they can positively impact the overall enrollment journey, member satisfaction, operational costs, production costs, staff stress and overall culture, and even market positioning and growth.

Enrollment Journey Phases

1

PRE-ENROLLMENT PHASE

COMMUNICATIONS FOCUS: Plan materials, enrollment guides, renewal and enrollment letters, disclosures and regulated communications, premium statements/invoices

This phase encompasses all of the activities that precede member communications for the upcoming plan year as well as producing and distributing the actual materials.

2

ENROLLMENT & ENABLEMENT PHASE

COMMUNICATIONS FOCUS: Welcome materials, ID cards, plan materials

This phase includes member onboarding materials and helping members understand their benefits and how to use them.

3

POST-ENROLLMENT PHASE

COMMUNICATIONS FOCUS: Follow-up calls and inquiries, ongoing member interactions, notifications, one-off communications

This phase continues throughout the plan year to ensure members are supported, inquiries are quickly responded to, notifications are sent, and other critical communications are timely and accurate.

Impact Points and Success Factors

Throughout the enrollment journey there are key impact points which represent a significant opportunity to ensure enrollment communications will proceed smoothly. In addition, there are success factors, discrete micro-targeted focus areas, that organizations can address to ensure a successful journey. As each phase of the enrollment journey is explored in more depth, impact points or success factors will be highlighted.

1 Pre-Enrollment Phase - Overview and Opportunities

To prepare members for renewal or new enrollment, health plans have to orchestrate a number of activities with business, operational, Information Technology, compliance and regulatory teams, as well as with external vendors.

Plan definitions, operations and provider changes, compliance, regulatory, logo, and marketing updates all need to be finalized and come together to successfully design, create, test/validate, and implement communications to members. Timelines for when these materials must be distributed are usually strictly controlled so it is critical that organizations develop and manage to a plan to ensure deadlines are met.

There are multiple impact points for organizations to consider during the pre-enrollment phase that can have immediate positive outcomes.

Data Definition, Planning, Aggregation, and Mediation

Properly defining and managing data, especially plan and eligibility data, is critical to ensuring enrollment communications are accurate and produced in a timely manner. However, plan data and eligibility data often exist in multiple internal or vendor systems. Aggregating and mediating the data comprehensively and cohesively will make or break most enrollment communications programs. Fortunately, advancements in enterprise data management provide organizations with additional options that were not available just a few years ago. Vendor partners also provide opportunities to tame this complexity.

SUCCESS FACTORS

- ***Data Accuracy Across Disparate Datasets***
- ***Defining a Clear Source of Truth Through Aggregation and Clear Rules***

Project Management and Information Technology (IT) Expertise and Engagement

Orchestrating multiple internal business and operational teams in tight coordination with IT delivery teams and external vendors is a cornerstone activity to any successful enrollment communications program. Understanding the art, and science, of when to engage IT teams will help limit iterative development cycles and increase the likelihood of timely and error free delivery of member communications.

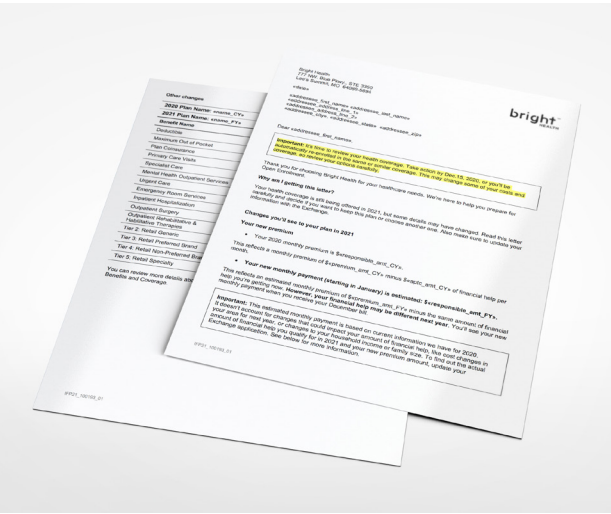
Organizations need to ensure project teams are constructed with a knowledgeable hands-on project manager (PM) who can drive complex planning activities. Without a strong PM, organizations should ensure there is a resource on the project team who can stand in as the solution lead to help navigate the unpredictable complexities that will inevitably arise.

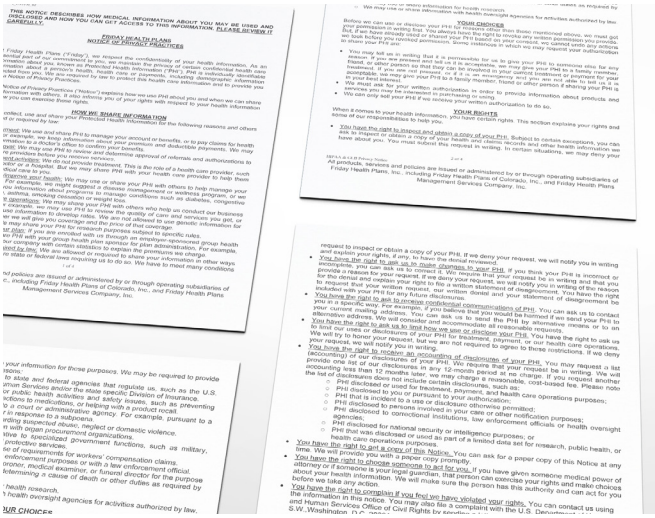
SUCCESS FACTORS

- ***Properly Timed Engagement of IT Expertise***
- ***Work Breakdown Structure, Expectations & Schedule***
- ***Dedicated Solution Thought Leadership***

Early Understanding of Compliance Changes

Compliance impacts all aspects of enrollment correspondence, including production and mail dates, as well as letter versions, data and formats. Health plans must carefully model each letter according to both federal and unique state-by-state requirements. Technology and fulfillment partners have a critical role in ensuring formats and content are compliant, and that production is reliable to avoid penalties.





SUCCESS FACTORS:

- ***Early Identification of Compliance Requirements***
- ***Sufficient Oversight Ensuring Formats and Content are Compliant***

Layout and Design

Enrollment and renewal correspondence blends utility and brand. Thoughtful document design, mindful of clarity and member ease, will guide members to the information they need and reduce member service calls. Brand consistency extends across multiple letter versions through color, logos, and fonts to help communicate critical plan details, upcoming changes and calls for action.

SUCCESS FACTORS:

- ***Document Design Ensuring Critical Information & Required Actions Are Highlighted***
- ***Brand Consistency***

Supporting Member Services

Well designed and timely communications will minimize member outreach to service centers. However, even with the best designed materials delivered at the right time, some members will still reach out to member services with enrollment related questions. It's critical that member service representatives have easy and immediate access to any correspondence to the members with whom they are speaking. Representatives should have the ability to reprint and resend documents as needed, as well as easily create and send custom follow up correspondence as warranted.

SUCCESS FACTORS:

- ***Full and Timely Access to All Member Communications***
- ***Ability to Reprint, Resend, and to Easily Create New Communications***

2 Enrollment and Enablement Phase - Overview and Opportunities

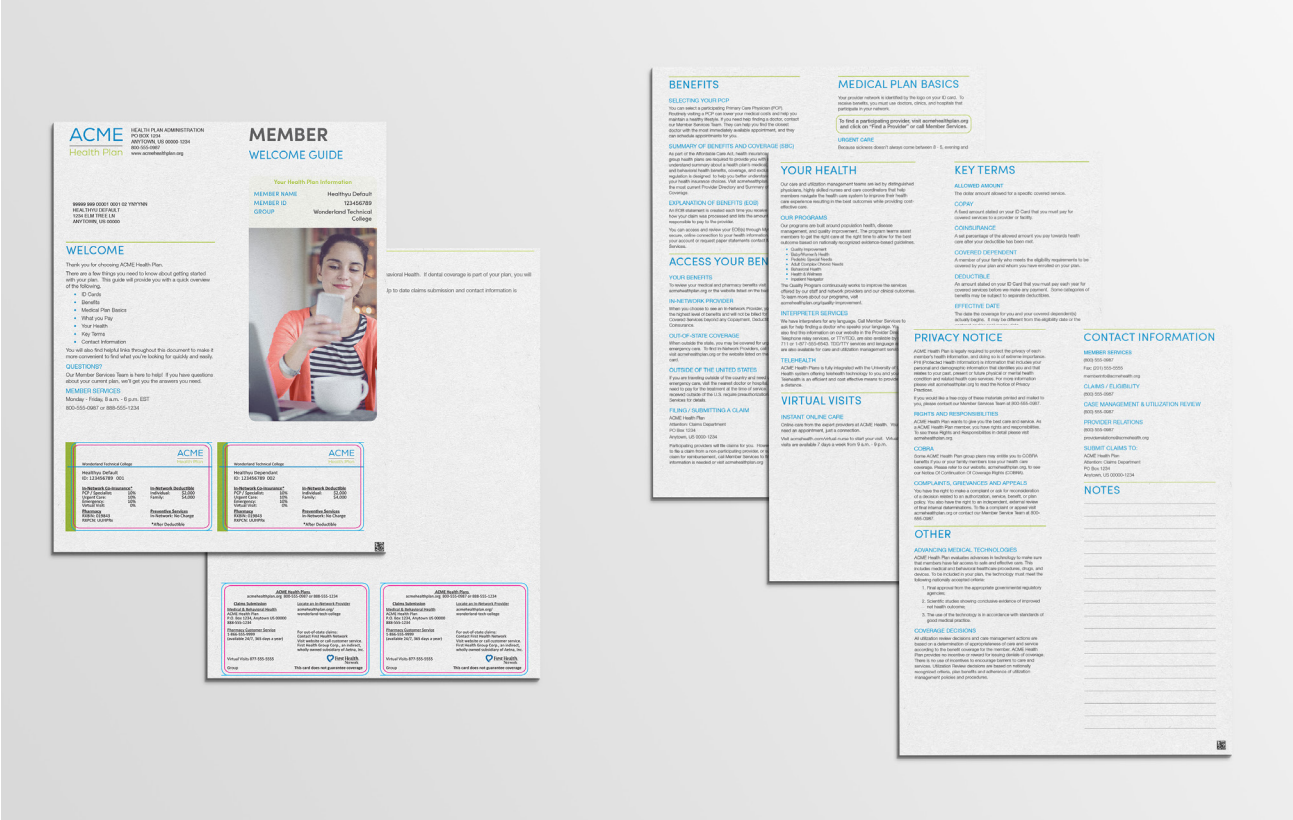
Once members have completed their enrollment process (which may include invoicing and collecting premium payments) all activities to finish the member's onboarding need to occur. Health plans usually distribute a large amount of critical materials to members including welcome kits, plan guides, benefit overviews, ID cards, and more.

The design and timely delivery of those critical communications can have enormous impact on member satisfaction and whether or not members will reach out to member services. The design of the communication packages will also have a significant impact on overall material production and postage costs.

Health plans can realize significant improvements through the enrollment and enablement phase of activities by addressing these key impact points:

Synchronizing ID Cards, Welcome Literature, and Plan Details

Combining ID cards, welcome literature and plan details into one data and technology driven package is a powerful way to improve member experience, reduce or eliminate needless member service phone calls, reduce significant expense by eliminating excessive mailings, and tame unnecessary complexity with the well-synchronized production and arrival of these critical enrollment materials.



Adapting Flexible Production and Automation Approaches

Recent advancements in print and paper technology, as well as advancements in automated collation of pre-printed and print-on-demand materials, allow organizations to remain flexible until late in their provider negotiations, design, and production schedules. Benefits include:

- Supporting provider negotiations and plan detail finalization right up until ID cards are to be distributed
- Allowing on-demand printing of both the front and back of ID cards affords critical last minute changes, and easy reprints for inevitable member loss necessitating replacements
- Plan and member data often come from multiple sources, requiring data integration expertise and programming flexibility
- Multiple versions with multiple plans, multiple brands, and multiple compliance jurisdictions can all be tamed by the right infrastructure and the right technology

VENDOR CONSOLIDATION

Oftentimes health plans rely on multiple vendors to support different aspects of their member communications programs. Consolidating those vendors into a smaller number, or potentially even one partner, could remove tremendous complexity, oversight and cost from member communications programs.

Getting enrollment information to members accurately and timely, and in a format they can easily consume is critical. By thoughtfully considering how materials can be combined organizations can yield significant savings. By consolidating multiple vendors, the savings can be exponentially greater.

3 Post-Enrollment Phase - Overview and Opportunities

Once members are successfully enrolled, enabled, and on-boarded they will, at times, require support. Plan updates, notifications, and other one-off communications and responses to member inquiries are critical to continued member and compliance satisfaction. Member service representatives should be equipped and empowered to readily answer member inquiries. Access to all member communications is step one. Step two is having highly effective tools and templates that are compliance-approved to facilitate accurate and timely follow-up to daily member inquiries.

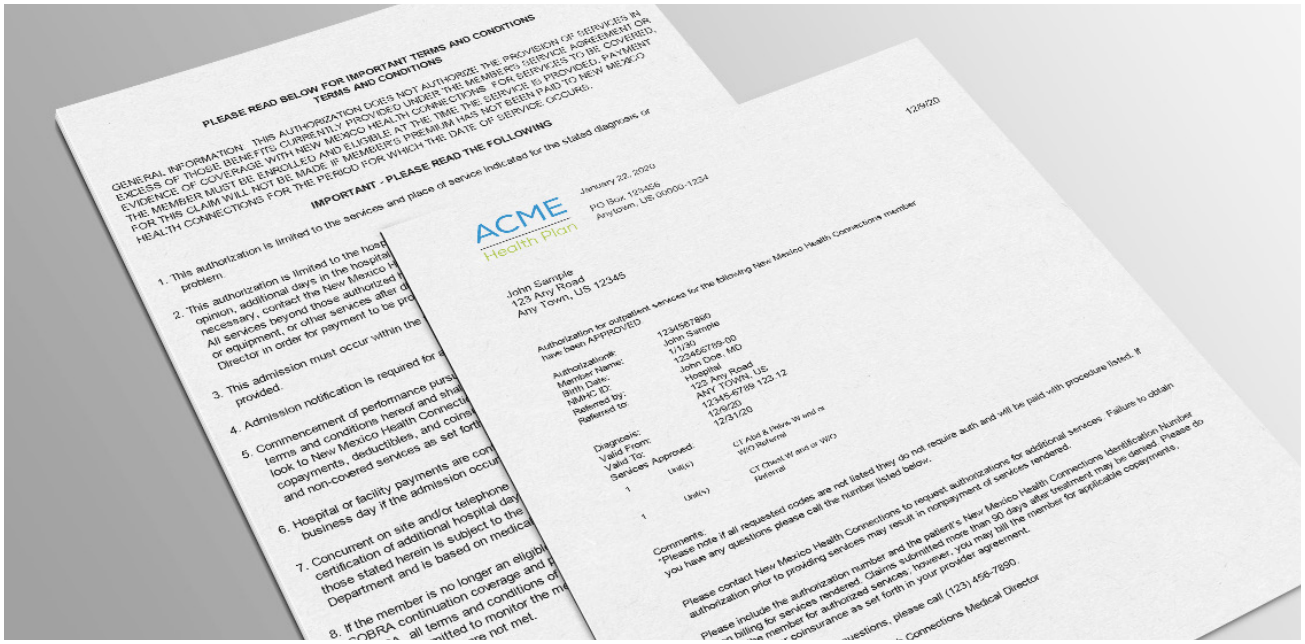
Health plans can begin to achieve all their post-enrollment phase goals by addressing these impact points:

Central Communications Platform

Health plans should have a comprehensive platform with 24/7/365 on demand access to all member correspondence, both inbound and outbound, and both print and digital to facilitate the prompt and accurate responses that members absolutely now expect from service teams.

Customized On-demand Communications

Health plans should use correspondence and collateral tools that are designed for efficient personalized follow up for each one-to-one interaction. The best tools will address and remove the complexity of compliance, messaging, branding and logistical challenges associated with ad hoc correspondence. Tools should also utilize templates and drop-down menus that balance content and branding controls with variable messaging, along with compliance and regulation related flexibility. Lastly tools should allow for distribution by email, or printed and mailed daily via a centralized correspondence hub.



Conclusion

Member enrollment communications are often chaotic. However, with the proper focus across all three phases of the enrollment journey and their key impact points, health plans can tame the chaos and turn enrollment communications and the traditional November to January operational paralysis into a competitive advantage. Health plans do not need to tackle this daunting task on their own. By selecting partners with the proper experience and leadership, health plans can immediately begin their journey and start reaping the benefits for members, staff, and market share.

About the Author

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Customer success is how Tim measures success. Through listening, collaboration, and problem solving, Tim works with clients to ensure operational efficiencies while simultaneously elevating day-to-day customer experiences and communications.