

2023 Stars Brief

Improving Member Experience Measurements through Healthcare Engagement

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By now health plans have digested their new Center for Medicare and Medicaid (CMS) Star Ratings and started adjusting to the new normal. With pandemic-era regulatory adjustments sunsetted, and member experience measurements weighing more on Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey scores, focusing on healthcare engagement is ever more important.

Healthcare consumerism is taking on increased importance to meet the changing expectations of customers today.

So how can plans work to adapt to these changing needs?

By focusing on continuous process improvement for their healthcare engagement strategies. And by starting today.

Nurturing healthcare engagement is not an overnight solution. It requires a steady, consistent approach. The good news is, by focusing on improving the member experience, plans can improve their consumer sentiment measurements and, in turn, future CAHPS scores.

Here are five ways plans can improve their member experience moving forward through optimized healthcare engagement.

Think Through the Full Healthcare Consumer Journey

Member engagement doesn't just begin when care is needed. It starts well before the time when someone breaks an ankle during a soccer game, reaches an age for new preventive treatments or gets diagnosed with high blood pressure. The full consumer journey is made up of a number of individual **service journeys**, large and small, throughout the span of the member-plan relationship.

To better understand the member experience, plans should look at the overall member journey in two ways:

- The high-level consumer journey experience, starting from the moment a member enrolls in a plan;
- All the small interactions they have within that overall relationship—which can be considered service journeys.

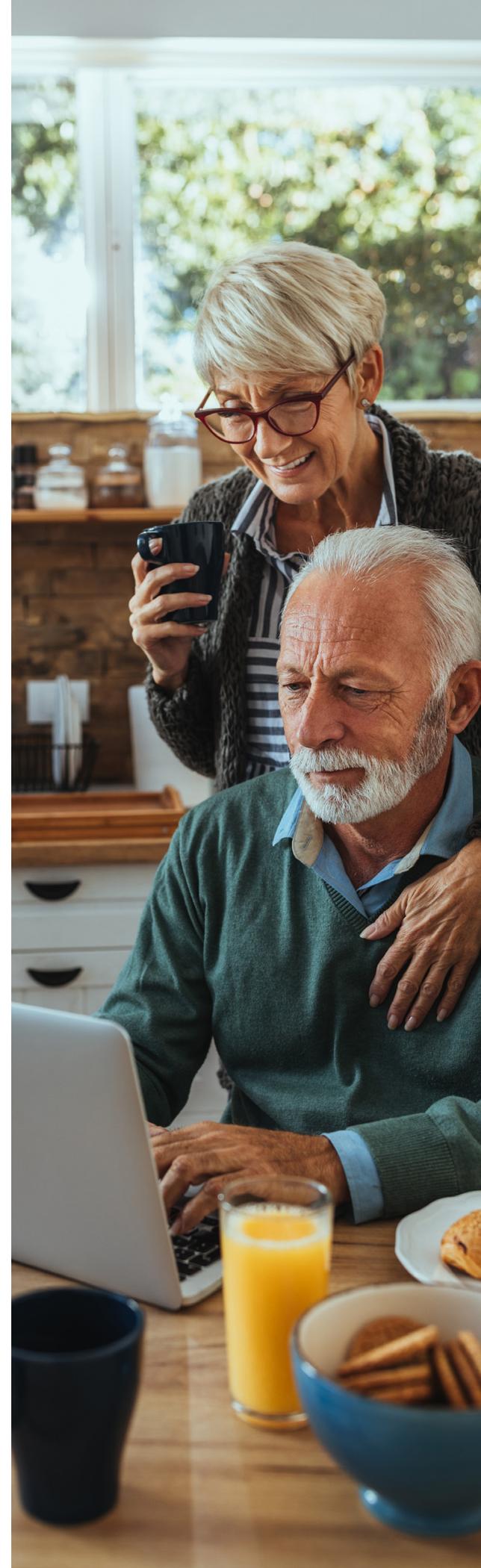
A service journey is a time when a member has a specific need – for example, when they have a question about how to find an in-network specialist or need to schedule a prescription refill.

These individual service journeys can create a cumulative effect on member satisfaction levels with a plan or provider. Service journeys occur across channels and use cases.

“Anytime they pick up a phone or interact with a website or use their health insurance, that’s a service journey,” says Pamela Cone, Senior Consultant, Business Solutions at Carenet Health.

For members, the experiences they have during these service journeys all add up to create their overall satisfaction level with plans and providers.

In each of these moments, plans have an opportunity to make an impression on their members.



For plans to develop a well-rounded view of the member experience, “understanding the broad scope and then those smaller interactions as (members) use the health plan is going to be critical,” Cone says.

To get the best view of the overall member experience and identify opportunities for improvement, it’s important to understand pre-and post-service journey interactions, too.

- What happened before the member contacted the health plan?
- What happened after they ended the interaction?
- What roadblocks still exist that impact their access to care?

For plans to be mindful of their future CAHPS survey results and Stars scores, the work they do in ensuring members are following the recommended steps to care should also be prioritized.

“Make sure to close the loop in communication,” Cone says. “That’s critical. You’re going to have to understand what some of the hurdles may be, what some of the abrasions may be and challenges are--and how effective you are in helping them get to an end result,” she says.

CX Analytics Are Key to Measure But Elusive to Map Quality customer experience helps people feel heard and appreciated, minimizes friction and improves efficiency. Its impact on healthcare can be reflected in Star ratings and on CAHPS surveys, which makes understanding and measuring metrics even more important going forward.

“It’s going to be crucial to use customer experience analytics,” says Cone.

There are **several core customer metrics** worth keeping tabs on to give plans an understanding of how they’re tracking. Net Promoter Scores (NPS), Customer Health Scores (CHS), Customer Satisfaction Scores (CSAT) and Customer Churn Rate (CCR) are all worthy barometers to watch.

Smart performance measuring will require looking at the entirety of the customer’s journey.

In the latest Star ratings, the data revealed that Medicare Advantage (MA) plans struggled with member experience, complaints and customer service domains. It’s fair then to speculate that MA healthcare consumers are demanding more convenience, increased access to health information, and more support for navigation and guidance.

Performance results indicate that members may feel those demands aren’t being met, Cone says.

It’s also worth mulling what the **plans that saw increases in their latest Star ratings** did right: membership experience with health plans and drug plans, and drug plan customer service. One challenge for plans? Customer experience is often impacted by variables outside of their immediate control, including providers and networks. “(Plans are) dependent upon a lot of things outside of the health plan, but then they’re measured on member experience,” says Mark Urested, Carenet Vice President of Sales.

Even though there are specific ways in which CMS is measuring satisfaction, he believes member experience is something plans need to incorporate into all of their solutioning.

One key way that plans can think about customer experience is by keeping in mind the full picture of the service journey. A customer experience is not a one-time thing.



The future of customer service is white-gloved and personal. **And it's already here.**

In a world with **increased expectations around customer service**, adopting a concierge mindset can help health plans deliver the experience their members want and expect.

“We’re seeing that more and more,” Cone says. As plans look to cultivate the best possible experiences, they’ll mention “concierge-like services, advocacy-like services,” she says.

Just as the pandemic sped **up technical transformations in the U.S. healthcare industry**, changing demographics and expectations will require an increased focus on engagement to provide the experience consumers want.

To help deliver this level of white-glove treatment, it’s key for plans to think through each member’s specific use case and take the steps needed to ensure barriers are removed.

How can a plan help a member’s experience go more smoothly, based on the care they need? For example, a member needing a colonoscopy will need to have two visits. They might need help with transportation to or from their appointments. Maybe they need reassurances about how to prepare for the procedure or instructions on following up.

A personalized approach that includes taking time to understand and respond to a member’s specific need can help ensure greater overall access to care.

Proactive outreach is a key action that plans can take to help their members achieve their desired care results. No two members have the same situation, but an increased level of focus on their specific needs can have a universal appeal.

Take Member Feedback on Board

As key as it is to take a white glove approach with your members, so too is taking their critical feedback to heart.

“It’s not just doing some of those proactive outreaches to close a particular gap,” Cone says. “It’s also being proactive with those that you may determine as detractors. Maybe you have members that have already voiced concerns about various services.”

“It’s important to capture those moments to understand what to address,” she says.

This holistic approach helps “not just to close a gap, but to funnel back crucial bits and pieces of information that may result in a dissatisfying CAHPS score.”

“Reach out to those potential detractors to really understand what their experience is and cultivate new experiences for them,” Cone says.

Feedback can provide a gift—the opportunity to course-correct going forward. By providing quality, thoughtful customer service and by getting ahead of a negative member experience, plans have an opportunity to turn potential detractors into champions.

Digital Meets Personal

So what about digital transformation? New technologies offer plenty of promise and can deliver some striking results.

To get the most from emerging tools and technologies, though, organizations should think about ways to use technology in collaboration with humans to improve the efficiencies of both.

Humans and technology are more impactful when used together.

While it’s not uncommon for organizations in any industry to seek out new technical tools to try and solve problems, the shiny new thing isn’t a guaranteed cure-all by itself.

“The reality is you still need some smart people, and you still need person-to-person contact,” Ureste says. The digital experience still requires some curation to help members get the most from their experiences.

Here’s another area where proactive healthcare engagement can help improve the customer experience. Example: a member isn’t sure how to use a digital tool or download an app. Situations like this create healthcare engagement opportunities that can help members strengthen their access to care.

Much of the efficacy of a digital tool depends on the person behind the scenes who is taking in that information, Cone says, and what they do with it. How does the human use the information they’ve received? How are these digital tools calibrated?

Understanding the origination point of the digital touch and the frequency of communications will also be crucial to understanding the impact of digital tools on the member experience, Cone says.

Cone also stresses the importance of understanding who is receiving the information so you can personalize the communication.

Touches like these make an impact and can go a long way toward enhancing a member's experience with an organization.

Finally, it's key to consider age gaps with digital adoption. In the U.S., **a full 25% of adults 65 and up still don't access the internet.**

While plenty of people are comfortable working with digital tools on service journeys, it pays to remember that for some audiences, a phone call is still the most efficient method of communication.

No Quick Fixes

When it comes to boosting Star ratings, one thing that plans should keep top of mind: it's not a quick fix.

"Stars is not something that you do in the fourth quarter or the second quarter," Mark says. "You're doing it all year round, or you're not doing it."

You can't just flick a switch to boost your Star ratings. Healthcare engagement requires a sophisticated, long-term solution.

The good news?

Through diligent effort, a focus on continual process improvement, and steady, proactive member engagement, achieving this solution is possible.

"There are things you can do every day to improve your scores," Ureste says. "Start working and just never stop."



About Carenet Health

Carenet Health is the industry's premier provider of healthcare engagement, clinical support, telehealth and advocacy solutions. Our engagement specialists, care coordinators, registered nurses and other healthcare professionals support more than 86 million healthcare consumers on behalf of 250+ of the nation's most consumer-centric health plans, providers, health systems and healthcare service organizations. We work closely with our clients to drive the impact they need—from supporting growth to delivering an exceptional healthcare experience.

Learn more

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