



GENERATING **HEALTHCARE** IMPACT

A leading healthcare organization enhances customer experience and cuts costs by reimagining contact center operations



Client

A leading US-based integrated pharmacy benefits manager (PBM)

Industry

Healthcare

Business need addressed

- Customer service operations supporting the Medicare Part D (Med D) program was operating below mandated service levels
- Low customer satisfaction and threat of compliance failure affected revenues and increased the risk of liability costs
- Declining employee productivity resulted in cost escalations and affected margins

Genpact solution

Implementation of a defect free measurement system, improved analytics and reporting through better data management, and proactive decision making helped the payer transform their Med D contact center operations.

Business impact

- \$4.2 million in business impact annually, of which \$2 million is cost savings
- 43% reduction in call volumes and 18% reduction in average time needed to handle calls
- Better capacity planning enabled improved performance management and tracking, and proactive staffing and scheduling of call center employees

As the healthcare industry transitions towards consumer-centric models, improving convenience, service quality, and patient experience is critical to growth and success. Many healthcare organizations struggle with legacy processes and systems that fail to adapt to the empowered consumer, health reform imperatives, and a competitive marketplace, and are in need of urgent transformation. A leading PBM enabled such a transformation by reimagining customer service processes with technology and advanced analytics, driving improved efficiency, service performance and capacity planning.

Business challenge

This PBM's call center operations supporting its plans covering Medicare Part D prescription drug program (Med D)¹ benefits was under performing, and customer satisfaction was being compromised. Utilizing over 300 resources, the call center processes prior coverage authorizations, quantity limits, step therapy, non-formulary exceptions, and appeals for customers. Service levels of the center were much lower than the 85% SLA stipulated by the Centers for Medicare & Medicaid Services (CMS). Moreover, individual productivity of call center staff was suffering, as Average Handle Time (AHT) had risen by 30% over the prior six months. There was a lack of visibility into performance management metrics and no disciplined volume forecasting for staffing and scheduling, leading to reactive resource allocation. This increased the risk of unsuccessful CMS audits and dissatisfied consumers switching over to competitors' plans, threatening revenue and profits.

Service levels of the Med D call center were lower than stipulated levels. AHT had risen by 30% over the prior six months. Lack of visibility into performance management and inaccurate volume forecasting for staffing and scheduling resulted in reactive resource allocation

Genpact solution

Applying a domain and process lens to inform robust data management practices helped the company filter and organize relevant data from multiple sources that it had struggled to tap earlier. Advanced analytics helped generate insights for driving the following key interventions:

Increased self service

Analysis of call patterns and segmented customer behavior revealed a high percentage of calls for simple queries and tasks which could easily be handled by an automated self-service capability. User friendly phone and web menu options, combined with modified call process flows, ensured a high degree of query resolutions and call closures at the Interactive Voice Response (IVR) stage, thereby reducing operator handling time for calls.

Domain and process led data management practices, and advanced analytics helped the PBM increase self service and IVR options, improve skill based call routing, performance management and reporting, and standardize call cycle times

¹ Medicare Part D (Med D) is a critical United States federal government program to subsidize the costs of prescription drugs and prescription drug insurance premiums for Medicare beneficiaries.

Reduced call volumes

Improved upfront triaging of callers and membership, as well as standardizing of call flows, routed calls to self-service or alternative IVR and eliminated unnecessary operator calls.

Targeted skill-based call routing

Predictive analytics and capacity planning allowed effective, skill-based routing of calls to the most appropriate resource with the right level of knowledge for resolution.

Improved service levels

Standardizing the classification of call center agent activities and better reporting freed up nearly 50% of the supervisor capacity to help coach and mentor agents, significantly improving service level delivery. A comprehensive performance management model was developed that improved overall reporting and also included visual management reporting. Teams were able to monitor, quickly identify, and urgently rectify critical target areas for performance improvement.

Decreased touches and cycle times

Volume forecasts modeled from historical operating patterns allowed teams to establish realistic call handle times and shrinkage targets, thereby standardizing call cycle times and touches.

Genpact impact

Genpact's effective approach to contact center optimization, leveraging advanced analytics for greater operational insights, continuous learning, and greatly improved execution practices, enabled this PBM to realize \$4.2 million in positive business impact annually, with \$2 million in costs savings. By eliminating unnecessary calls and increasing self-service, call volumes were reduced by 43%.

With improved knowledge sharing and skills-based call routing, AHT was reduced by 18%. The company was able to establish more robust operational metrics, tracking, and reporting. Through a more reliable performance management and capacity planning model, the organization was able to instill greater discipline in fine-tuning service performance, and in staffing and scheduling to meet customer demands.

About Genpact

Genpact (NYSE: G) stands for “**generating business impact.**” We are a global leader in digitally-powered business process management and services. Our **Lean DigitalSM** approach and patented Smart Enterprise ProcessesSM framework reimagine our clients’ operating models end-to-end, including the middle and back offices - to deliver growth, efficiency, and business agility. First as a part of GE and later as an independent company, we have been passionately serving strategic client relationships including approximately one-fifth of the Fortune Global 500, and have grown to over 70,000 people. The resulting domain expertise and experience running complex operations are unique and help us drive choices across technology, analytics, and organizational design.

For additional information, contact, healthcare.solutions@genpact.com and visit www.genpact.com/home/industries/healthcare-payer

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