

Mastering Change in Benefits Administration: A Successful Partnership

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SIVIC SOLUTIONS GROUP
A SOLIX COMPANY

CASE STUDY

Executive Summary

The world of healthcare insurance and benefits management is constantly changing. That there will be more tumult ahead is a virtual certainty.

One solution for successfully mastering these challenges is found in a unique partnership between a major healthcare insurer and Solix Inc., a leading administrator of customer care and program administration in the public and private sectors. Over an eight-year period of time, this partnership expanded to encompass a broad range of services with members of commercial and Medicare plans, including operations, sales and marketing. The results range from high levels of customer satisfaction to greater efficiency at lower costs to the successful deployment of new customer service technologies. Together, the two organizations successfully managed all the complex changes required by the introduction of the Affordable Care Act.

99%

Throughout the relationship, quality metrics have remained high. A recent survey garnered a 99.5 percent customer satisfaction rating, while accuracy ratings are at 99 percent. Solix has never had a KPI under 90 percent, including measurements of tone with agents, satisfaction of member, accuracy of information, and accurate quoting of benefits.

The Situation

The insurer faced particular challenges with customer services during peak enrollment periods that meant ramping up, training, hiring and then re-deploying staff when these peak periods ended. The process of hiring, training and managing these resources was costly.

The insurer also handled multiple other complex customer interactions, such as introducing new members to their health plans, setting up meetings with prospective Medicare enrollees, and answering members' questions about plan coverage. Maintaining staff through the on-going peaks and valleys had become both an operational and a financial challenge.

The health plan realized that the addition of highly trained licensed agents, as well as automated solutions for outbound services, would help them grow revenue and retain their existing customer base in a highly competitive market. Being able to reduce agent training costs by implementing certification programs and state-approved, pre-licensing education courses would lower their operating costs. Increasing the volume of customer sales at first contact by highlighting plan options, discussing benefit information and making well-qualified recommendations would increase the number of sales. Medicare Part C and Part D members required assistance with their plans while meeting CMS requirements.

All this activity must be monitored to ensure quality and implement strong compliance controls to safeguard customer information, and to identify and mitigate fraud. All interactions must also be conducted to ensure consistent data integrity, from application intake to appointment scheduling.



“The world of healthcare insurance and benefits administration continues to evolve. Solix and our highly trained staff grow with the market, expanding services to accommodate the needs of any organization we work with”

The Solution

To find a better way to meet all these, the insurer entered into a partnership with Solix in 2009. As an experienced program administrator and customer service organization, Solix provided decades of experience in simplifying the management of complex customer interactions while maintaining high levels of customer satisfaction, reporting and compliance.

Solix maintains a highly trained workforce that is shared between multiple companies and public entities. These skilled workers constantly improve their knowledge through continual training and deployment. They are experts at compliance and reporting requirements, to ensure peace-of-mind that these important standards are always met.

By working with Solix, the insurer would have access to a ready-made pool of talent with more experience than they might source themselves, and who could be trained and operational in less than one-third the time of bringing on staff internally.

In addition to scalability, the Solix management team brought deep experience in program design and administration, operations management, and compliance. The insurer gained an expert team of consultants who could continuously improve quality, ensure standards were met or exceeded, and free internal staff to focus on important plan management issues.

The Implementation

In the first year of the relationship, Solix took on functions that included sending packets to new and existing members, scheduling Medicare educational meetings, providing customer service for Medicare Part C and Part D customers, and outbound educational calls for Medicare Part C new members. The insurer offered some 65 senior products at that time; the Solix group acquired and maintained the expertise to deal with all products and all questions.

The scope of new member education included how to access in-network physicians, information regarding mobile apps that could be used to obtain plan information and manage plan use, and the process for obtaining prescription drugs. Solix took customer service one step further by assisting members in completing their forms to expedite access to services, and also added personal contact information and updated databases to ensure data integrity.

Initially, if consumer questions addressed certain areas, it was necessary to bring in a licensed agent to respond. Both parties quickly realized that having Solix staff licensed as agents would lead to a more efficient solution. Hundreds of Solix team members achieved this licensure to be better equipped to handle the full range of questions. Solix also collaborated with the insurer to launch a customer service team specifically focused on a large account, to ensure personalized and account-specific service and advice to members.

With the advent of the Affordable Care Act, customer service and sales became even more complicated. The insurer now offered multiple plans through exchanges. The sales, enrollment and customer service responsibility for these plans became part of Solix' charge. Not only did these new products need to be sold and explained, but the audience was usually made up of individuals who had never before been exposed to an insurance plan. Concepts like deductibles and co-pays were new to them.

The Solix team not only developed the expertise to explain these complicated concepts, but they also collaborated with the insurer team to stay on top of constantly changing regulations and requirements to ensure compliance as the administration of the law was refined and modified.



Over the period of time the ACA has been in effect, insurers have entered and then left the market. The Solix team is the front line for the insurer to communicate to potential new members who are leaving another plan or whose insurer no longer participates in the exchange.

As the relationship matured further, the Solix team's latest role expanded to assist with individual, dental, small group and vision plan customer service, advising and applications. Additional account-specific care teams were established. An agentless dialer program was launched to include dialing about cancellations, non-payment, payment due, reinstatement, and small group renewal. Most recently, the Solix team took on customer service for the "under 65" business customer service on-exchange.

Results, ROI and Future Plans

During this long-term and ongoing engagement, Solix has consistently achieved or surpassed all service level objectives over the multi-year partnership. It has maintained an average customer satisfaction score of 97%, surpassing quality scoring requirements. The relationship has reduced costs and shortened turnaround time from a week to a few hours by implementing an agentless program for subscriber payment reminders. Leveraging technology through Solix Connect delivers successful Annual Enrollment and Annual Disenrollment campaigns every year.

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As the world of healthcare insurance and benefits administration continues to evolve, the relationships with the insurer and Solix continues to expand and to serve as a model for improving efficiency, accuracy, compliance and customer efficiency for health plans and other organizations with complex customer interactions.

To find out more about how Solix can help organizations like yours,

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