

CREATING SUSTAINABLE MEMBER ENGAGEMENT IN HEALTH CARE INSURANCE MARKET WITH DATA ANALYTICS

A SCALABLE HEALTH WHITE PAPER



SCALABLE
HEALTH

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EXECUTIVE SUMMARY

Not that long ago, member experience was not even a consideration for healthcare insurance organizations. Customers have more options in the marketplace resulting in greater price sensitivity and less stickiness to plans and providers. In the ever-increasing competitive landscape of the global health insurance market, payers need to offer patients the services they want and need by moving to a value-based approach. In value-based models, payers strive to reduce claim times, resolve member inquiries efficiently, and automate to eliminate paperwork and unnecessary follow-up with care providers.

Value-based care is measured by health outcomes per dollar spent per member. In a competitive healthcare insurance marketplace, sustainable growth can only be achieved by understanding members and developing a platform for sustainable member engagement.

Member Experience (MX) is measured by the quality of the interaction between members and healthcare payers through every member touch points. Member journey mapping is the

cornerstone to achieving operational excellence needed for growth. A member journey map looks at more than a single transaction.

For a proactive end-to-end member experience, Big Data and real-time analytics can help in tracking, analyzing, and acting upon member and claims data, as well as managing phone, social media, and internet interactions to help members manage their health and wellness.

This whitepaper focuses on the development of a member experience framework to capture the member experience from initial marketing through to supporting patients after discharge to help payer companies meet increasing member expectations. Data-driven member engagement can be used as a competitive differentiator to encourage well-being and attract & retain current members.

Enriching member experience is the first step in creating better, more personalized engagements. Tailored member interactions will help healthcare insurance organizations stand out from the competition, create loyal and happy members, and redefine member engagement. Big data analytics might be the key to sustainable engagement initiatives in payer healthcare systems.

wellness
program
participation



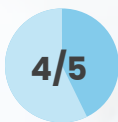
Received Recommended
Care for Chronic Conditions



Ease of
Information
Access



Member
Satisfaction
Score



3/5

Effectiveness of A/V
Communication

Received
Preventive Care



ASSESS THE CURRENT LEVELS OF MEMBER EXPERIENCE (MX)

Big data analytics is the key to sustainable engagement initiatives in payer healthcare systems. First, there is a need to get a unified understanding of member experience gaps and assess every member experience at every touch point between various departments. Member interactions happen on the phone, in emails, online, on social media, on blogs, in help forums, and in lots of other channels. Next step is to measure response and resolution time by channel.

Employee satisfaction also matters for those employees who are in direct contact with members. Finally, a reflective analysis of member retention is helpful to understand when and why members are leaving. Net Member Promoter Score (NMPS) can indicate the

likelihood of a member recommending the organization to other prospective members.

Health insurance companies that want to use member satisfaction as a way to improve retention need additional feedback and data to identify the factors that matter most to the members. Through this combined information, companies can then determine which investments enable them to meet their objectives, i.e. improving the member experience.

CREATE A MEMBER EXPERIENCE MAP TO IMPROVE MEMBER EXPERIENCE

Member Experience (MX) is the sum of all experiences a member has in a healthcare environment. This includes awareness, discovery, attraction, use, interaction, and advocacy.

Member experience is not just about member service; it also includes the operational moments when the payer is delivering

MEANING OF MEMBER EXPERIENCE (MX) MAP

The Member Experience map is a planned process of capturing and communicating complex member interactions. The activity of mapping builds knowledge and consent across the healthcare insurance industry and the map facilitates a seamless member experience.

COMMON ELEMENTS OF MEMBER EXPERIENCE (MX) MAPS

The Member Experience (MX) maps generally have three things in common. First, should include a series of activities or tasks, irrespective of the form it takes. It signifies what the member has been trying to achieve. Second, the map must contain touch points where the member interacts with the payers. Finally and most significantly, maps should include the emotional expressions or feelings of a member during each of these stages.

OUTLOOK OF MEMBER EXPERIENCE (MX) MAP

Member Experience maps are all over the place. No matter the shape, it should be pleasing to look at and easily understand how to operate it in a healthcare environment. Consulting the experience map will assist

services to members. The things that happen before and after this service interaction contribute to a bigger picture. Thus, a payer organization needs to focus on member experience to create sustainable member engagement in the healthcare insurance industry.

journey necessary to maintain a good relationship with the member.

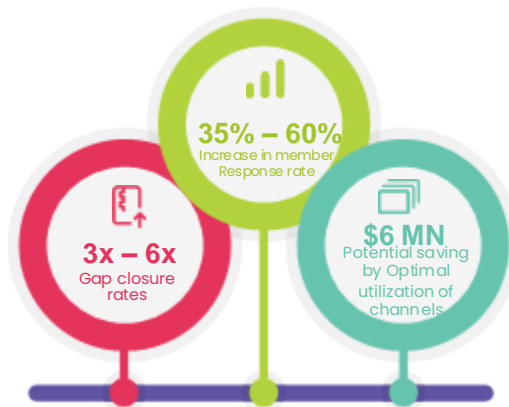
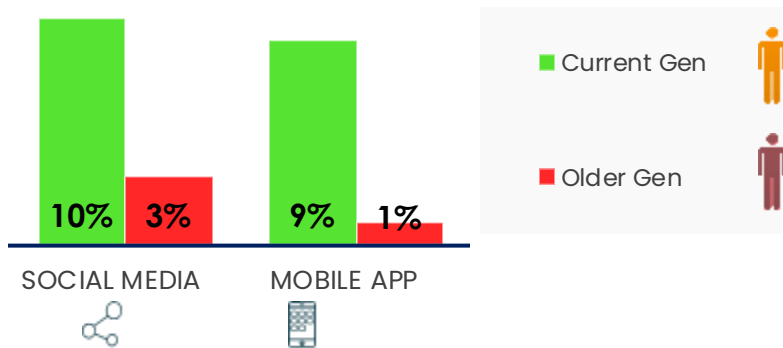
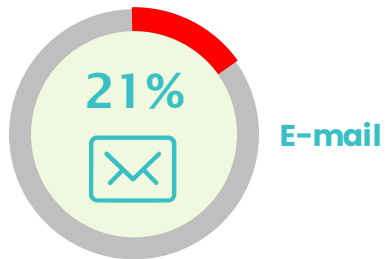
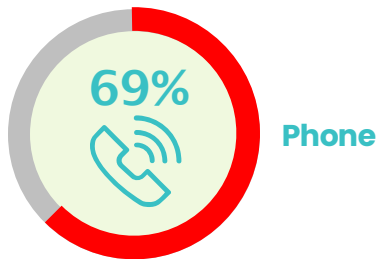
NEED OF MEMBER EXPERIENCE (MX) MAP

The intent of creating member experience maps needs to be very clear. Create a member experience map with the decisive goal of better understanding your members and improving their experience in some way. .

CREATING A MEMBER EXPERIENCE (MX) MAP

No two companies are alike. Similarly, no two member experience maps are the same. Each map must be personalized precisely to meet the needs of the member. No matter how related two companies are, they should never duplicate another company's member experience map and apply the same policies to the same effect. Using the insights derived from the member experience map, healthcare insurance companies can determine which stages of the member journey present the biggest challenges.

PREFERRED CHANNEL – MEMBER EXPERIENCE SURVEY – HEALTH INSURANCE, US 2015



Member Engagement Delivery Channel Management



1/3

Prefer postal mail to home



1/3

Prefer well - designed home

Tools & Information Member Find Most Helpful

61%



Health Plan
Decision Tools

56%



General Wellness
Information

54%



Cost Clarity
Tools



Members under age 30 are more likely to value general wellness information (63%) and cost clarity tools (60%)



Members over age 60 are more likely to value health plan decision tools (60%)

ADVANTAGE OF USING A MEMBER EXPERIENCE (MX) MAP IN HEALTHCARE INSURANCE INDUSTRY

For healthcare insurance organizations, not every factor regarding member experience is going to be predefined. There will always be some external factors, which cannot be controlled. Anticipating problems ahead of time and preparing a contingency plan can help to mitigate member dissatisfaction. For example, if there is a high probability of delay of a typical claims payment based on member eligibility status, it may be a good idea to communicate and apprise the affected member ahead of the time. It is important for payer companies to identify their most valued members and determine how they can enhance their experience.

Health insurance companies that want to use member satisfaction as a way to improve retention need additional feedback and data to identify the factors that matter most to the members. Through this combined information, companies can then determine which investments enable them to meet their objectives, i.e. improving the member experience.



MANAGE MEMBER EXPERIENCE (MX) USING KEY METRICS

Creating an efficient MX metric will not only define the measurement of member engagement but will also provide a platform to measure, review and identify metrics that drive decision making. The following are five characteristics of good MX metrics.

RELIABLE

Health insurance companies do not use identical core set of MX metrics to have diverse measurements for engagement and enrichment. Using reliable metrics helps to build a better experience, thus enabling more dynamic decisions.

POWERFUL

MX metrics are pointless unless they lead to action. Metrics must be appropriate enough to drive decisions.

INTEGRATED

Healthcare insurance companies must incorporate MX metrics into health insurance decisions.

FREQUENCY

Communication frequency produces many possible patterns in member behavior. The main goal of insurance companies is to identify the most relevant communication channel for members and monitor their behavior patterns for trends.

CONTINUOUS

Use the metrics as a stable device for continuous improvement throughout the member lifecycle — not just a static measurement of the member status.

IMPROVING MEMBER CENTRICITY USING BIG DATA

With the help of cutting-edge, data analytics techniques, healthcare payers can derive data-driven insights from various data sources such as email, sensors, web site, social media, mobile devices, call center, surveys etc. This will help them to identify key member concerns, create optimal strategies for each hospital's unique demographic base, and improve overall member experience level. Using analytics platform, healthcare payers can deliver an enhanced member experience across the entire journey by improving the experience for new and existing member, helping members manage their health, resolving member complaints and adapting to member's evolving needs.

TOP 5 TIPS FOR EFFECTIVE MEMBER ENGAGEMENT



01

Recognize member engagement as more than a Government mandate



Only 10% of healthcare organizations are engaging members to maintain well-being

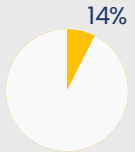
30%

of engagement strategies focus only on compliance and risk

02

Create a cohesive member engagement strategy

Only 14% of healthcare organizations have member engagement strategies with leadership oversight



70%

of healthcare execs claim their organizations have no member engagement strategy

04

Compare vendors, consider interoperability



There is no single type of HIT solution that can be called the member engagement technology. HIT's role as a 'support' means there is a wide variety of tools that providers are employing to fill the needs of an equally wide array of member engagement goals.



03

Avoid use of technology for technology's sake



of executives would consider investing in wearable in the future



One third of wearable owners stop using them within six months

05

Analyze, measure and adapt approach for continued success

Make sure the work is ultimately focused on improving the member engagement and increasing their satisfaction.

STEPS FOR IMPLEMENTING MEMBER ENGAGEMENT ANALYTICS

After selecting the specific problem that needs to be solved first, payer companies can implement the following steps for member engagement analytics:

- Selection of solution
- Definition and alignment of engagement model
- Analyze results and reply to members based on their engagement
- Measure the impact of member responses
- Develop the implementation processes

IMPORTANT FEATURES FOR SELECTING A MEMBER ENGAGEMENT ANALYTICS TOOL

Measuring member engagement is a continuous process and the initial determinants may evolve over time; so an adaptable engagement model is an important consideration.

- **Implement different ways of measuring engagement.**

For example, measuring just the length of a visit is not sufficient. It also may be important for payer companies to understand the nature and outcome of the visit.

- **Make sure the selected tools can retain and measure changes over time**

Maintaining historical information for comparative analysis is especially important. Tracking member behavior over time provides potential insights into changing behavioral patterns of members.

- **Keep member access points in mind when selecting a tool**

As previously mentioned, members may engage through a variety of channels. If there is the native mode or browser-based mobile application make sure analytics tool is agnostic to source and capable of capturing mobile data in a proper manner.

- **Make sure that the solution can incorporate healthcare metrics.**

Key healthcare metrics may be the underlying reason members have maintained contact with the healthcare insurance companies. This information along with various touch point data offers the payers a complete picture of member engagement.

- **Send real-time messages triggered from the analytics tool**

This is an effective feature since real-time messages in response to an action that the member just took have a real impact because they are both timely and targeted.

- **Security and Compliance**

Ensure the solution is compliant to various industry regulations such as HIPAA, HITEC, and PHI.

BIG DATA ANALYTICS TO CONNECT WITH MEMBERS

Combining real-time data, predictive analytics, and big data insights together with traditional BI provides the level of information required for effective interaction with modern healthcare insurance members.

Following are a few illustrations of analytics that payers can take advantage of:

MEMBER SENTIMENT ANALYSIS

Members are sharing their experiences about insurance benefits through social channels – Facebook, Twitter and other social media. These experiences shared through comments, blogs, tweets, and surveys can be captured to gain actionable insights on how to improve the quality of services.

ADVANCED ANALYTICS

Advanced analytics and data capturing tools can help to create a clear picture of members and enable payers to engage in meaningful ways with members. By analyzing member's conversations, they can derive actionable insights to help identify the most suitable plan for the member.

PREDICTIVE ANALYTICS

Advanced segmentation driven by predictive analytics helps to deliver customized messages to members.

MACHINE LEARNING

Machine learning offers insurance companies great opportunities in the areas of prediction and diagnosis of disease, thus setting a trend for the use of personalized medicine in healthcare. This advancement assists members in making quality-of-life decisions while supporting payers and policymakers in executing many treatment policies.

Predictive marketing platforms combine basic member demographic and engagement data with behavioral indications like email or website interactions to offer deeper insights into members' health. The first step to predicting how members will act uses a machine-learning algorithm called clustering analysis, which sorts members into highly distinct groups that have similar behavioral traits. It then recommends health plans for each group with the highest optimal care outcomes.

CALL CENTER ANALYSIS

Payer organizations are capturing information from call centers by recording member conversations. These call records deliver valuable information on member experiences using different metrics, member feedback and studying member behavior.

Using analytical solutions, payers can develop an inclusive member profile to increase health outcomes, enhance member satisfaction, and reduce the cost of care. This approach to member segmentation helps payers dynamically classify members most likely to contract a chronic disease, track a disease's advancement among members, detect members likely to not abide by medication or calculate members likely to make a preventable ER visit. It also helps payers to categorize members showing distributed care patterns or struggling to find an in-network doctor or if they need help navigating healthcare decisions. Addressing these key issues with the help of analytics will result in better member engagement through improved population health management.



Behavioral Tracking

Measure the true intent of a visitor, user, or account by linking click tracking with tracking of time spent, inactivity, scrolling, mouse movement, hovering and more



Segmentation

Get insights from current and historical session behaviour along with internal and external data sources to fragment visitors, users and accounts in real time



Directing

Provide custom made messages, content, and experiences based on real time subdivision anywhere in a page, app, or email



References

Present content and product references based on a member's preferences, social groups, browsing patterns, anywhere on the site

REAL-TIME MEMBER DATA ENHANCEMENT

Customer touch points are scattered across internal and external platforms, thus organizations need the ability to validate the authenticity of customer profiles created by big data. Mining various data sources allows organizations to verify crucial customer data inputs such as name, SSN and address. Services such as Customer View allows organizations to collect disparate data from a variety of customer touch points, such as mobile and social media interactions, to gain actionable insights to improve customer service and reduce the risk of fraud.

Currently, most organizations aren't able to capitalize on the deluge of customer data available. Our specialists can help you access hard-to-connect information and turn it into strategic business intelligence to share with your organization. We help clients link fragmented knowledge about a customer across systems of records, insights, and interactions, and offers the ability to add new context to existing customer profiles in order to uncover actionable insights.

Getting the right information to the right people at the right time!

Validation & Verification



Member information needs to be validated, checked for errors, standardized, and spot-checked

- ✓ Name
- ✓ Address
- ✓ Phone
- ✓ Email

Real-Time Enhancement



Based on the validated info, real-time data gives members insights at the point of contact for quick, effective decisions

- ✓ Demographic
- ✓ Behavioral
- ✓ Life Event
- ✓ Geographic

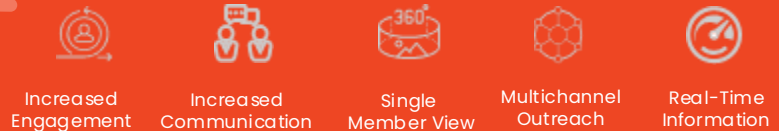
Engaged Member

Engagement delivers members a better experience and promotes creating healthy choices, while ensuring positive health quality improvements, and outcomes.



Real-Time Benefits

Real-time data, directly integrated into EHR or EMR, provides the ability to prioritize leads and extent benefits to member.



MEMBER ENGAGEMENT ARCHITECTURE

Being member-centric means putting members at the core of the healthcare process. Organizations must architect a platform to facilitate member engagement. A core architecture can support member engagement, operations, analytics, and scalable experiences regardless of what channel members choose to engage with their insurance companies. Using an agnostic platform will help to attract and manage members using data analytics. This format will help to maintain member experience across all channels and at the same time improve the way care is delivered in the healthcare environment. Capturing comprehensive, in-depth data drives an understanding of member behavior.

Interactive member engagement architecture empowers healthcare insurance companies to better

meet the needs of the members.

After selecting the specific problem that needs to be solved first, payer companies can implement the following steps for member engagement analytics:

- Combine online and offline data to reveal new insights
- Gain a clearer view of the member journey through various channels

Channels

Member Touch Points



Mobile



Email



Web Site



Letter



Telephonic/
Call Center



Post Card



Social
Media

LaunchPoint

Integrated Channel
Management
Engagement Strategy
Video
Mobile

Applications

Develop Membership

Make it easy to sign up members from their smartphone or tablet

Simplify Payments

Make digital payments for copays and benefits in just a few clicks

Personalize Messages

Motivate members to take action when it's needed

API

Member data management
Data access
Member sign-in
Contact center

Platform

Engagement Tools

Engagement Engine
Predictive
Real-Time

Integrated Platform Service

Contacts
Behavior pattern
Identity
Preference

Analytics

Sentiment Analysis
Advanced Analytics
Predictive analytics
Machine Learning
Call Center Analysis

Member Value Management
Measurement
Data integration
Data governance

CONCLUSION

Throughout the member lifecycle, health plans guide members to a deeper understanding of the healthcare system, so members can choose the providers, services, and other resources that offer the best possible effect on care outcomes. It is not about inventing channels as a reaction to member demand. Instead, most operational engagement programs arise from an alert, thoughtful answer to the requirements of a member.

Instead of looking at the past and reacting to issues as they arise, analytics uses all of the data available from different sources to predict how members are likely to reply. After the data is collected from internal, social, and regulatory sources, health insurance companies can begin arranging the data to determine where the most valuable information lies.

Analytics can help health insurance companies compete in a shifting healthcare landscape by providing insights to improve the healthcare experience for patients, families, and care teams.

Healthcare insurance organizations can reap multiple benefits from using analytics creating an atmosphere favorable to retain, acquire, and manage members. Providers must foster an analytics-driven culture that can minimize administrative costs required to develop strategic member acquisition plans from various sources such as EMRs, claims, and social and web data. Knowing and acting on the resulting data-driven insights are key to any healthcare insurance system's commitment to managing member experiences for retention, acquisition, and recapture.

About Scalable Health

Scalable Health is healthcare division of Scalable Systems focused on providing innovative products and solutions in healthcare and life sciences market.

www.scalablehealth.com

About Scalable Systems

Scalable Systems is a Data, Analytics & Digital Transformation Company focused on vertical specific innovative solutions. By providing next generation technology solutions and services, we help organizations to identify risks & opportunities, achieve sales and operational excellence to gain an innovative edge.

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