Leading Not-For-Profit Health Plan

Opportunity

For a leading not-for-profit health plan in New England, customer experience reigns supreme. Providing medical and dental coverage for members and providers for group plans, state and federal employees, and Medicare recipients, the organization is committed to delivering quality, affordable healthcare with an unparalleled member experience.

On the member side of its business, the health insurer's 500 customer service agents handle roughly 2.5 million interactions annually. This is done predominantly via phone, but also includes other channels such as live chat, social media, email, and fax.

Solution

Using Verint® Call Recording™, the health insurer records 100 percent of agent-customer phone interactions. Approximately 20 percent of these calls undergo call monitoring via Verint Quality Management™. In addition, the company captures agent screens using Verint Screen Capture™, enabling it to understand what agents are doing on their desktops during customer interactions.

To help it identify emotional and repeat callers, the health insurer deployed Verint Speech Analytics™. Part of a proactive program to elevate customer satisfaction, the company uses the software to uncover valuable insights into why customers are unable to have their issues resolved when first contacting a customer service agent.

The health insurer combines call recording and speech analytics data into a monthly report for executives. The report provides an overview of interactions handled, as well as adherence to key performance indicators (KPIs) like average handle time, repeat calls, transfer rates, call abandonment rates, and quality scores.

The KPIs provide the health plan with critical data to help it improve operational efficiency. Additionally, valuable voice of the customer insights help the organization understand and address specific issues with members and providers such as confusion arising from policy or network provider changes.

Benefits

Verint technology has enabled the health insurer to increase customer satisfaction and reduce costs in several ways.

Most notable is the organization's progress with repeat calls, which can increase average handle time threefold – from nine to 21 minutes –

VERINT®

Solutions

Verint® Call Recording™
Verint Screen Capture™
Verint Quality Management™
Verint Speech Analytics™

Industry

Health Insurance

Region

Americas

Results

- **Realized a 3% reduction in repeat calls, significantly lowering overall call volume and average handle time while elevating customer satisfaction.**

- **Enhanced training and, in turn, improved agent interactions with customers by leveraging insights from speech analytics.**

- **Improved root cause analysis of the impact of policy or network changes on call volume and customer satisfaction.**

and triple call volume. These calls also tend to be more emotional in nature and can negatively affect customer satisfaction, since the callers are unable to get their issues resolved the first time.

Since deploying Verint's software, the health insurer has reduced repeat calls by three percent or nearly 70,000 calls annually. In turn, call volume and average handle time have decreased while customer satisfaction has increased.

"Verint Speech Analytics provides us with insight into when repeat calls are occurring and how often they are occurring," says the senior manager of data & analytics at the leading not-for-profit health plan. "More important, the solution enables us to understand the circumstances prompting the repeat calls."

The health insurer reviews speech analytics data, as well as information from other sources such as customer satisfaction surveys, to understand the critical differences between the interactions of top and bottom performing agents. Subsequently, it creates training modules to coach agents on specific wording to use with different call types, enabling them to more quickly identify and satisfy member needs.

Verint Quality Management and Verint Speech Analytics also enable the health insurer to quickly identify daily trends and address developing situations. For example, the organization can immediately identify members in areas of natural disasters, enabling agents to provide proactive assistance during events, as well as advice on telehealth offerings or details on disaster-related financial relief programs.

Similarly, the health insurer has immediacy into the business impact of changes to benefits or the provider network, the senior manager explains. "Rather than having only imprecise, dated anecdotal evidence, Verint Speech Analytics arms us with near real-time data so we can easily correlate a spike in call volume to a specific issue."

Up next for the health insurer is fine-tuning its analytics-driven quality program, whereby it uses insights from speech analytics to identify areas where additional agent training can further enhance member experience. In addition, the organization plans to use speech analytics to offer voice of the customer insights related to group member satisfaction to its sales representatives to foster improved sales engagements ahead of open enrolment.

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