

# Transforming member engagement

A differentiated approach to  
improving quality and cost of care





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# Health insurers are in the midst of transformational change. Elevated consumer expectations, regulatory changes, new therapies, medical technology, and competitive forces have fundamentally changed the basis of competition for insurers.

Underlying profit models for insurers are now more dependent on proactively managing health, addressing quality and outcomes, creating a personalized consumer experience, and optimizing risk-adjusted revenue.

**It's time for health insurers to adapt their operations and migrate beyond transactional efficiency to operations that create intelligent connections between the member, provider, and insurer.**

# Moving beyond disengagement

Most health plans struggle to fully achieve the desired objectives of their clinical engagement programs, with member participation rates typically very low, programs costly to administer, and ROI subjective.

Clinical engagement programs are often operated within a functional silo—not as part of total “member engagement” framework. Outreach is usually retrospective and not personalized to members’ unique needs.

Plans frequently prioritize specific cohorts of members in engagement efforts (e.g. newly diagnosed diabetics; members with gaps in care; high ER utilizers; etc.). Unfortunately, these well-intended efforts have exacerbated problems in creating a seamless experience.

When communications are designed around members with the most significant healthcare needs, other members can be left confused if the message doesn’t apply to them.

The typical experience for a health plan member is fragmented across disparate touchpoints and includes many communications that aren’t relevant to them, resulting in high abrasion, excess costs, and low levels of engagement.

We knew there was a better way.

# Making a meaningful connection

Conduent is applying technology and process innovation to unlock the full potential of engaging members—producing lower costs, better quality, improved outcomes and an ideal experience.

We're helping plans reimagine and improve how they deliver disease management, utilization management and other clinical engagement programs. Building on decades of innovation across the healthcare landscape, we're bringing a differentiated approach that's positively impacting the quality and cost of care for healthcare consumers.



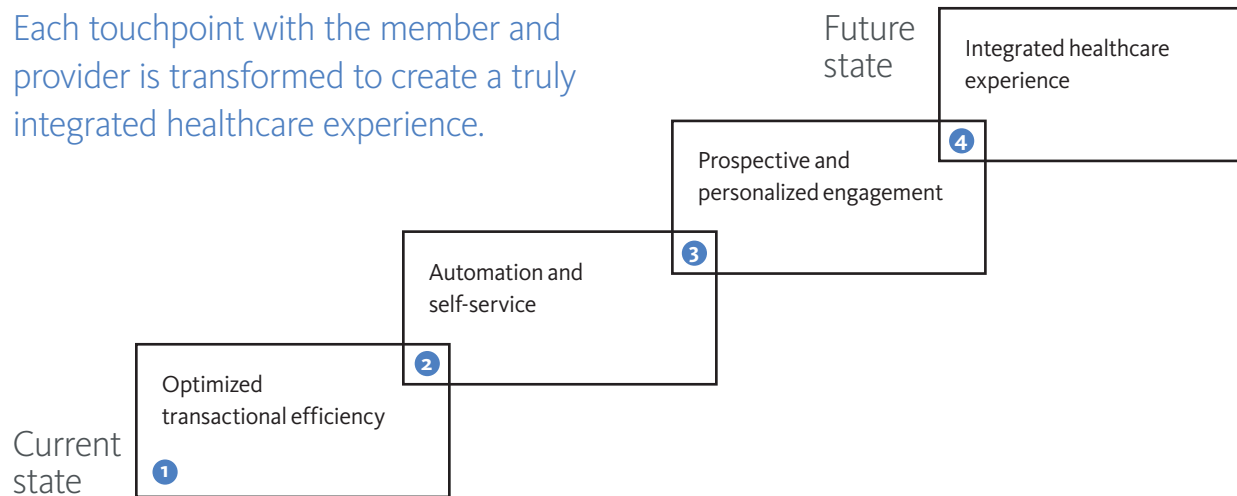
## Our differentiated approach is built on two fundamental principles:

**1) Know the member** – Applying innovative techniques, we're able to establish a detailed “whole person” profile of individual members. This includes not only a detailed health profile, but also preferences, motivations, barriers to care and other critical elements that ensure we can personally engage them.

**2) Prospectively and personally engage the member** – Most clinical engagement programs today are fragmented and reactive. Conduent draws on sophisticated analytics and rules engine decision-making to anticipate, personalize and resolve the healthcare event for the member. This includes optimizing when to engage the member, which channel to utilize, and what the dialogue should address.

# Our vision for transformation

Each touchpoint with the member and provider is transformed to create a truly integrated healthcare experience.



**Several core tenets guide our vision for transforming the consumer experience**  
(and the underlying health plan operating model):

- Bring intelligence to every touchpoint between the healthplan, the member, and the provider
- Prospectively anticipate, understand and resolve each member's healthcare needs
- Engage members in a personalized manner, reflecting their preferences and needs
- Automate and accelerate decisions
- Focus on addressing high-value/high-impact outcomes related to cost, quality, and experience
- Connect and coordinate actions across the healthplan's functional siloes

## Measures of value creation

- Health outcomes
- Healthcare costs
- PCP attribution
- In-network utilization
- Risk adjustment optimization
- HEDIS, STAR ratings
- Accelerated authorizations
- Closes care gaps
- Member application close rates
- Centralized provider scheduling
- Prospective customer care
- First call resolution
- Member and provider satisfaction
- Digital channel utilization
- Efficiency gains
- Cost/activity
- Traditional SLAs

One of the distinguishing features of all of these tenets is that they're relevant across the total consumer experience in healthcare—and they're key to re-imagining clinical programs.

# Turning the key to success

## Integrating clinical programs and optimized member engagement

Member engagement is now imperative for health plans to remain financially viable—whether to elevate quality scores, improve care coordination, close gaps in care, resolve authorizations, or migrate members to a new product.

The key to achieving this is for plans and their clinical programs to optimize member engagement and coordinate multiple integrated touchpoints with their members.



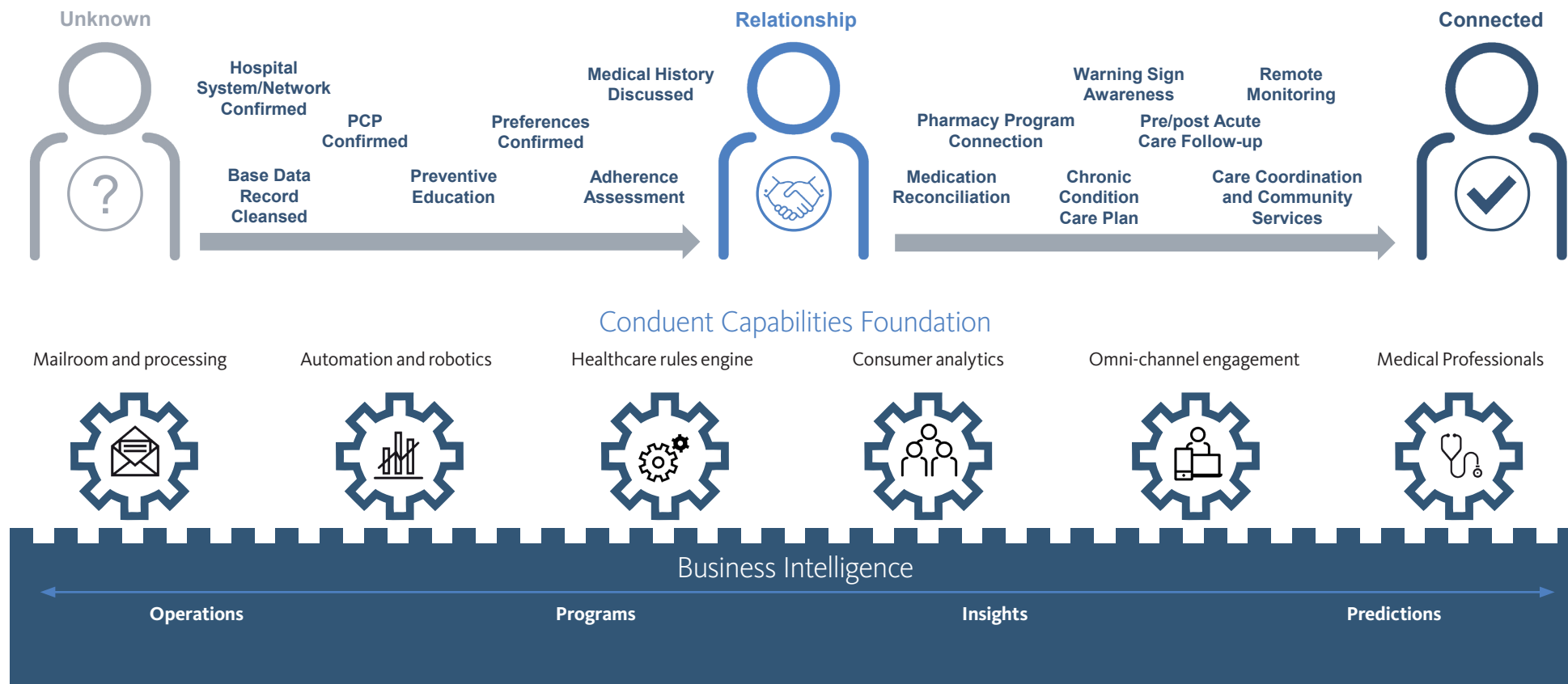
## Making a meaningful connection

We've been at the leading edge helping health plans prospectively engage their members in a personal, relevant and timely manner for more than two decades. Central to this approach is establishing a detailed and unique understanding of each member at the outset—creating a clinical, behavioral, and preference profile. Just as critical is identifying and removing any barriers to care.

Once a detailed profile is established, we help immediately connect members to their care team and to available programs within the health plan.

# Member engagement

A prospective, personal and navigated journey



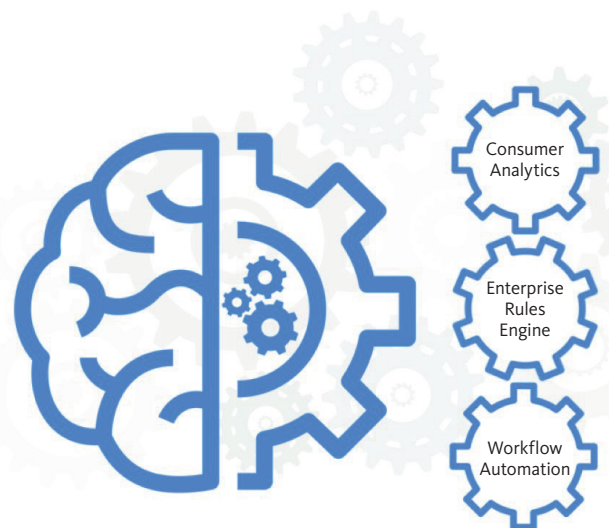
# Technology-driven

## MedGine

MedGine is our proprietary platform and member-engagement rules engine. It's the "brain" that brings consumer intelligence and automation into every touchpoint between the member and his or her health plan, and allows us to coordinate outreach to members across multiple channels.

This technology foundation allows us to complement health plans' existing capabilities – rather than duplicating efforts. Typically, we play an active role at multiple points across the member lifecycle.

The result is substantially higher engagement rates, increased member satisfaction, and measurable ROI.



- Key industry differentiator
- Analytics and rules engine
- Personalizes all touchpoints
- Automates workflow
- Coordinates all communication and information across all stakeholders
- Supports agent service, automation, and self-service platforms
- Omni-channel campaign management



# Fostering seamless engagement with modular solution components

Our comprehensive menu of member engagement capabilities is made up of modular solution components, which foster plans' ability to tailor services to complement their existing internal capabilities and expertise.



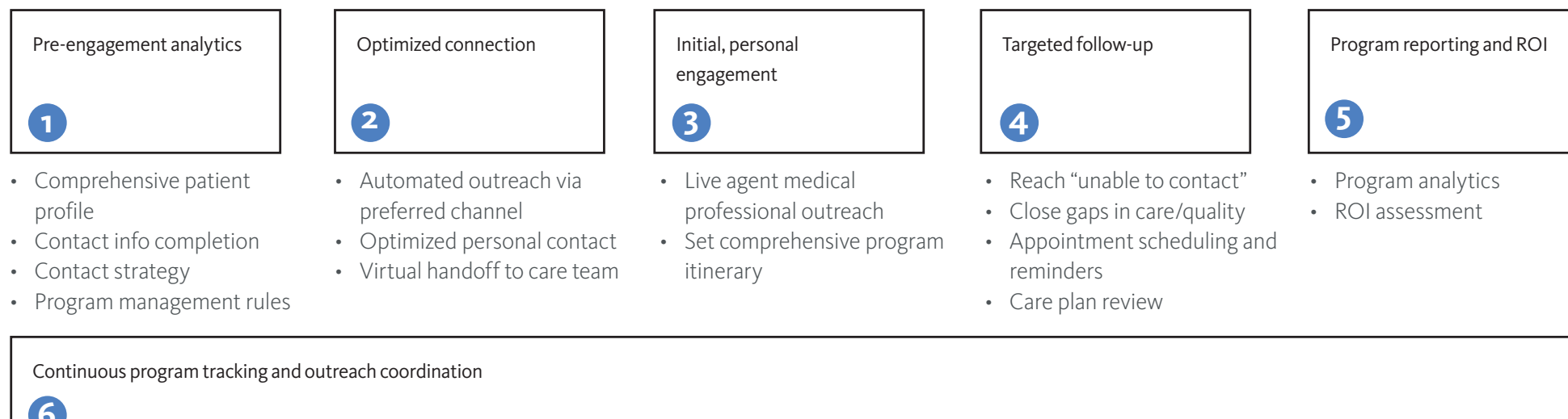
Our modular options help health plans create a more consistent end-to-end experience, as well as provide a balance of low-cost and high-touch capabilities.

On the whole, the flexibility and caliber of our modular solutions sets us apart in empowering health plans' ability to engage members across clinical programs.

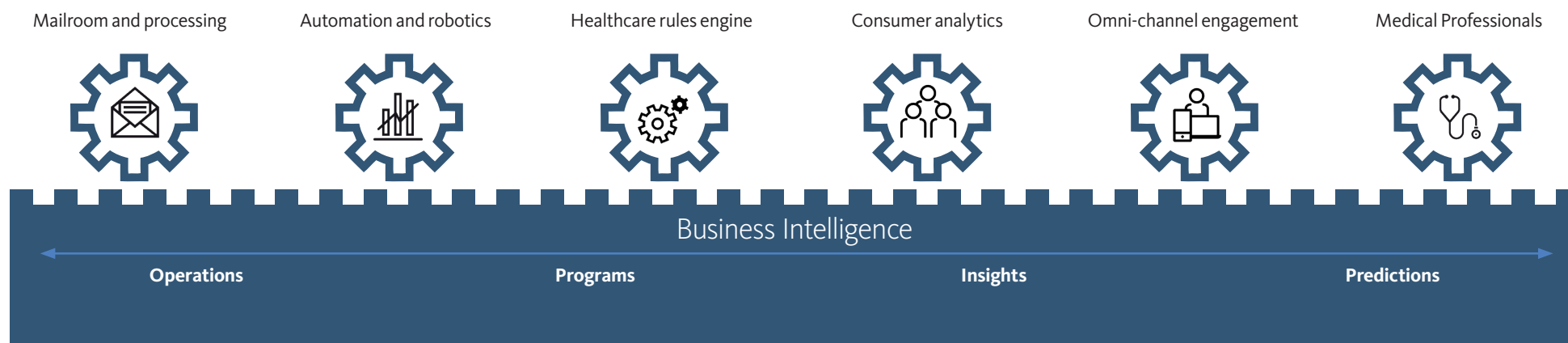
# Modular solution components

# Modular solution components

for customized integration of our services



## Conduent Capabilities Foundation



# Modular solution components: descriptions

As a client, you can select the components that will best complement your in-house activities and optimize the overall effectiveness of your member engagement programs.

## 1. Pre-engagement analytics

We offer a number of services that enable health plans to establish a profile of a member before any engagement program. These analytics and consumer profile tools allow plans to create segmentation profiles, risk stratify the population, establish behavior profiles, cleanse the base member record, and identify optimal contact information (including ideal phone number).

Pre-engagement analytics can create a prioritized engagement strategy and identify optimal modes for initial outreach (e.g. live agent, medical professional, mail, automated IVR, text, etc.)

In some cases, pre-engagement analytics can help increase member engagement rates by more than double. For example, for Medicaid MCO clients, our capabilities have increased completion rates for new member HRAs by four-fold.

## 2. Optimized member connection

Our proprietary platform (MedGine) determines the optimal time and mode of outreach to a member. It manages all aspects of outreach, can track member activity, and automatically update and prioritize outreach.

For example, MedGine can follow the activity of high-risk members with chronic health conditions. If that member fails to fill a maintenance medication in a timely fashion, MedGine can create a trigger to send a text message or outbound IVR call.

If the prescription is still unfilled after one week, MedGine can trigger an outbound call from a Conduent medical professional or the health plan's clinical team member. We can provide our proprietary inbound/outbound dialer capability to drive calls to the health plan's internal clinical engagement team.

In situations like this, MedGine helps to stratify and prioritize the members to target for outreach, identify ideal contact information, launch the call, and immediately transfer to health plan case managers. This capability enables case management teams to increase engagement rates and substantially increase the number of cases they can work.



# Modular solution components: descriptions

## 3. Initial, personal engagement

Initial outreach to a member is a critical factor in earning their trust and ensuring that members engage through future outreach. The initial outreach should also let the member know what to expect in the future from the health plan (e.g. type and frequency of outreach).

Conduent's comprehensive new member onboarding leverages our technology and medical professionals to create a comprehensive and personal healthcare itinerary for each member.

For many clients, we manage new member onboarding for all members – not just members in DM programs. We can automatically pull Rx history, complete a detailed health status interview, create risk stratification, and identify programs to engage the member. For other clients, we'll work side-by-side with internal teams that are also leading new-member outreach. Several clients will make the initial attempts and draw upon us as a second-pass vendor to reach the "unable to contact."

## 4. Targeted follow-up

Targeted engagement is conducted at several points over the course of the year. We can execute all modes of outreach (telephonic, automated IVR, text, email, paper, etc.) or address a single channel of communication. We can also tailor the content and timing to maximize engagement and minimize member abrasion.

## 5. Campaign reporting and ROI

We provide detailed reporting and analytics services for all of our member engagement programs. We can also assist clients in conducting longitudinal tracking of members to determine ROI and refine engagement strategy.

## 6. Continuous campaign tracking and outreach coordination

Conduent's MedGine rules engine tracks and coordinates all aspects of member engagement for a program. MedGine is readily configured to establish rules for managing member outreach.

*As a client, you can select the components you feel will best complement your in-house activities and optimize the overall effectiveness of your member engagement programs.*

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**Our Care Integration and Management Services** drive meaningful impact on engaging, connecting and motivating members. Health plans look to us to heighten the efficiency and effectiveness of their internal resources while also providing a timely and seamless experience for their members that reduces medical costs, improves the quality of care and achieves better outcomes.

## About Conduent

Conduent is the world's largest provider of diversified business services with leading capabilities in transaction processing, automation and analytics. The company's global workforce is dedicated to helping its large and diverse client base deliver quality services to the people they serve. These clients include a majority of the Fortune 100 companies and more than 500 government entities.

Conduent's differentiated offerings touch millions of lives every day, including two-thirds of all **insured patients** in the U.S. and nearly nine million people who travel through **toll systems** daily.

Whether it's digital payments, claims processing, benefit administration, automated tolling, customer care or distributed learning – Conduent manages and modernizes these interactions to create value for both its clients and their constituents.

Learn more at [www.conduent.com](http://www.conduent.com)