

Health Share of Oregon CAHPS Improvement Story

“Strategies for Improving CAHPS Health Plan Survey Scores”

A Webcast Presented by the AHRQ CAHPS User Network

April 13, 2016

12:00 – 1:00 pm ET

Together
we are

health

share

Health Share of Oregon

Context

- Health Share of Oregon was created in 2012
- 240,000 enrolled, Portland tri-county region
- Largest Coordinated Care Organization (CCO) in Oregon
- Collection of 16 independent health plans covering physical, behavioral and dental services.

Goal of helping to align clinical and administrative practices toward triple aim for Medicaid members

Improvement in Customer Service Measure

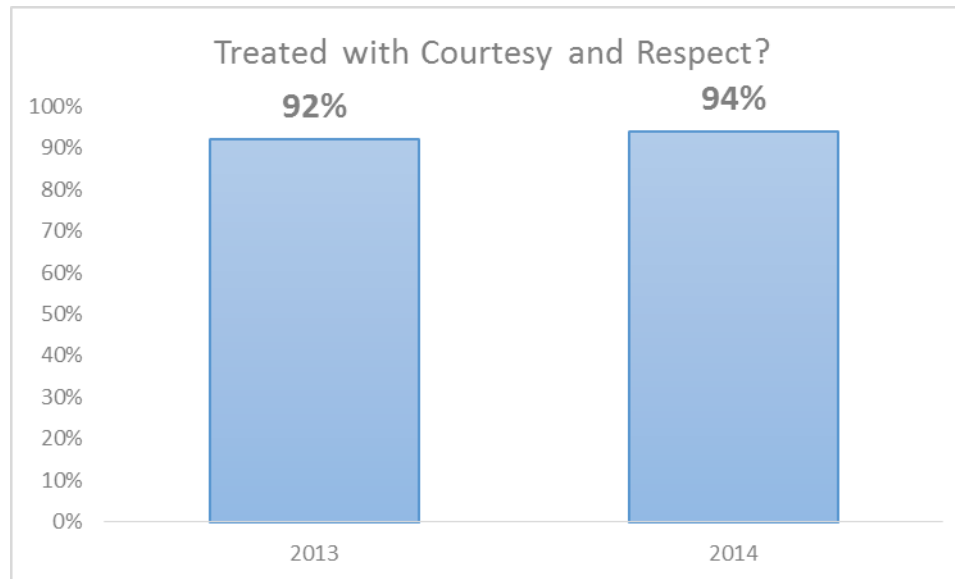
Composite:

“In the last 6 months, how often did your health plan’s customer service staff treat you with courtesy and respect?”

“In the last 6 months, how often did your health plan’s customer service give you the information or help you needed?”

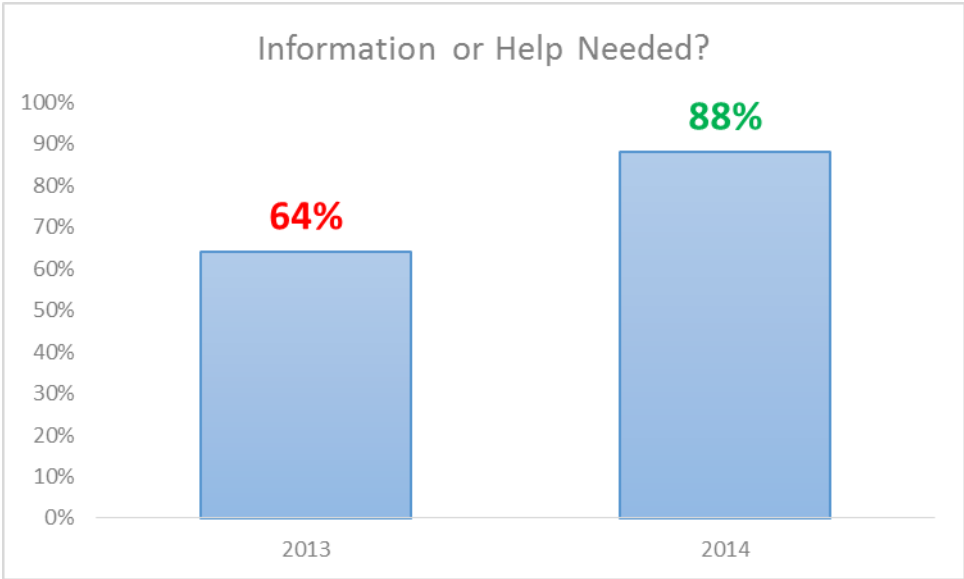
Improvement in Customer Service Measure

“In the last 6 months, how often did your health plan’s customer service staff treat you with courtesy and respect?” (Always + Usually)



Improvement in Customer Service Measure

“In the last 6 months, how often did your health plan’s customer service give you the information or help you needed?” (Always + Usually)



Our Customer Service Improvement Story

- 2012-2014: Customer Service provided by external vendor
- Complex, new and unfamiliar system for members *and* professionals (partner health plans, providers)
- 2014 Medicaid expansion: administrative backlog, incredible wait-times, members with high needs and insufficient answers—Breaking Point
- Benefit changes and additions—Medical Transport, Dental

All factors pointed toward need to improve customer service approach

Our Customer Service Improvement Story

- Customer Service taken “in house” July 1, 2014
- Team of 10 hired and trained
- Technology to put knowledge at their fingertips

Initial focus was on reducing complexity and challenge for members in chaotic time

Not everyone can build a new customer service team,
but these values can be applied anywhere

Reference: AHRQ Standards for Customer Service (from Improvement Guide)

Recommend focus on two components:

- 1) “Deep knowledge of what constitutes high quality service from the perspective of your members and patients”
- 2) “Service standards that clearly tell your staff what is expected of them in their interactions with members and patients”

<https://cahps.ahrq.gov/quality-improvement/improvement-guide/6-strategies-for-improving/customer-service/strategy6q-custservice-standards.html>

We hired a special group of customer service professionals—they understood what good service meant to members

Hiring to a Team Culture:

Medical background or experience is good, but empathy and connection skills are just as important

“Tell us about an unsuccessful telephone call. In retrospect how would you do it differently?”

- Looking for ability to identify this experience, be self-critical
- Ability to not be perfect

We hired a special group of customer service professionals—they understood what good service meant to members

- Passion for our community, membership
- The system is complex—we are here to make it easier to understand
- Tone of voice matters: trauma and poverty informed
- Personalize: get member's name and use it
- Anticipate that Medicaid members have many needs: “Is there anything else I can help you with?”
- Give members time to speak
- Empower the representative to solve problems *in the moment*: bring proposed *solutions* to supervisor

Develop a set of service standards and measures

Standards

- All transfers are “warm”, one-call resolution
- Coach members to ask specific questions when transferred so other systems will more easily understand and meet need quickly
- Have the information members need readily available: SharePoint library
- All voicemails returned daily, these take priority over paperwork
- Member navigator role for complex needs

Measures/Targets

- 80% of all calls answered within 30 seconds
- Less than 3% abandonment rate
- Currently 83% one-call resolution rate

Ideas and Lessons Learned

- Review performance measures with entire customer service team monthly
- Leadership buy-in: share performance with executive team
- Make performance visible: video board showing wait times, members on hold; allows for optimal coverage and team cohesion
- Celebrate team successes, team notes each person's best call volume and commend people who exceeded goals

Ideas and Lessons Learned

- Share company-wide stories of complex cases where navigation and customer service were essential
- Partner with Community Advisory Council to shape organizational values
- Ensure that entire organization knows how essential customer service team is to your members
- Encourage new staff “ride alongs”
- Focus on the linguistic and special healthcare needs of your membership
- Invest in cultural competence among staff

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