



## Digital Business

# AI at Your Service: Modernizing the Payer Contact Center

Here's how AI will enhance the consumer experience across health plan contact center touchpoints.

## Executive Summary

Digitally adept companies, such as Amazon and Uber, are elevating consumer demands for convenient, personalized and intelligent experiences. Artificial intelligence (AI) and its related technologies — analytics, intelligent process automation (IPA), machine learning (ML) and natural language processing (NLP) — are the engines driving these experiences. AI has become critically important for players in the healthcare sector, as it helps increase business value through contact center operations by converting data into meaningful insights that enhance consumer interactions.

At a foundational level, AI streamlines processes, freeing contact center associates to focus on higher value consumer interactions. As AI matures, it will transform consumer experiences by delivering real-time insights that enable payers to anticipate and proactively resolve consumer issues.

Whether through a software bot that makes simple yes/no rules-based decisions or an algorithm that sifts through data patterns to find at-risk members, AI first creates, then continuously layers, details and insights onto portraits of health plan members. As a member profile grows richer

over time, AI tools draw on details such as health status, claims history, shifting demographics and so on to recommend actions and forecast member-specific needs. Equipped with these insights, payers can respond quickly and appropriately to changing member needs, build brand loyalty and expand payer revenue channels.

Today, AI tools enable payers to quickly and cost-effectively deploy new capabilities and create a foundation for modern member experiences. Payers that leverage AI in their contact centers can gain an early lead in differentiating their services and building sustainable, value generating, lifetime member relationships.

In this white paper, we will help payers understand the benefits and opportunities as they embark on their AI journey by addressing:

- How is AI essential for attracting and retaining members?
- How can AI enable better and more actionable insights with higher precision?
- Where should payers start and how can they accelerate their AI transformation journeys?



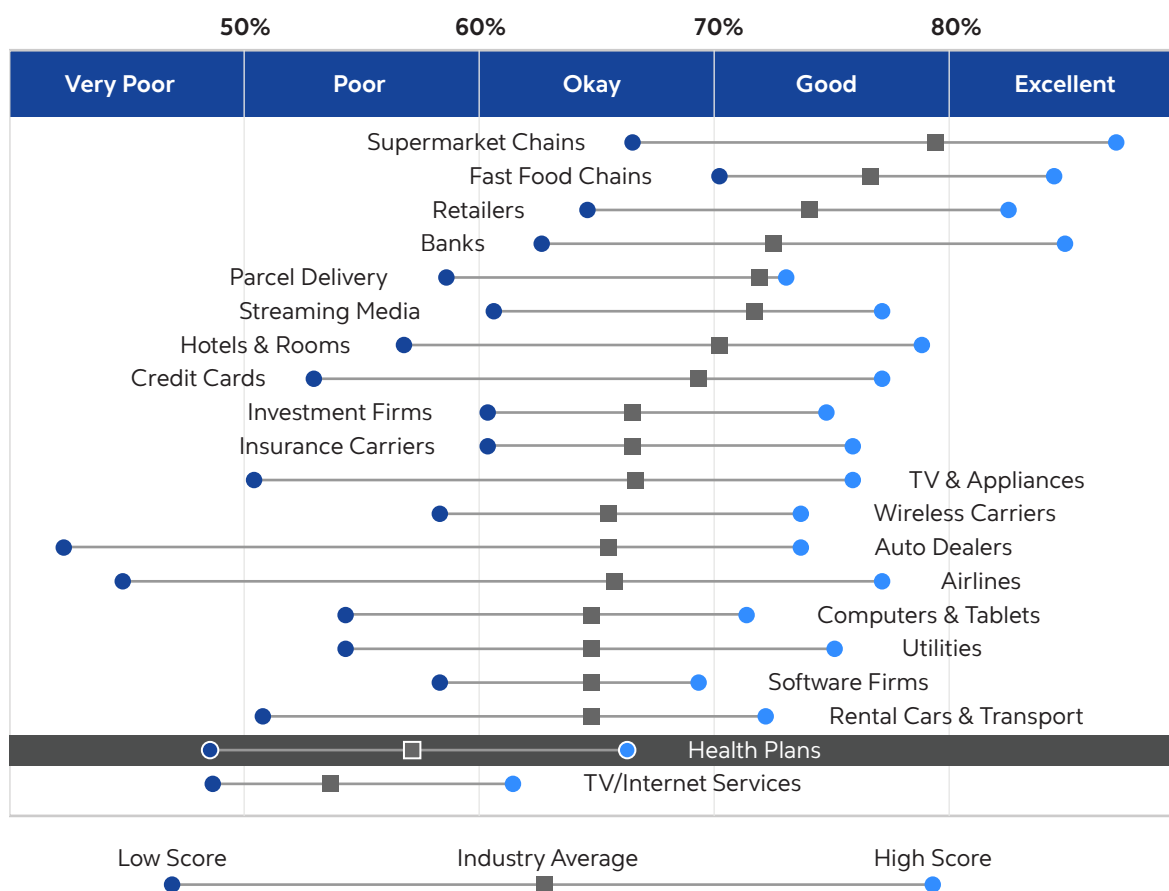
## AI: Essential to delivering modern member experiences

Members rate their health plan service experiences as “okay” at best (see Figure 1).<sup>1</sup> Further, a third of plan members say they will switch health plans after a bad service experience.<sup>2</sup> With a member’s lifetime value estimated at \$1.4 million, bad experiences can result in significant losses.<sup>3</sup>

Based on our observations, many payers have increased their investments in digital tools and contact center technologies, but have yet to realize the desired improvements. It’s likely that these payers have not fully analyzed their member journeys and considered their expectations when designing tools or they have not invested sufficient resources in member digital-tool adoption campaigns.<sup>4</sup>

### Healthcare is lagging...

2018 Temkin Experience Ratings (TxR), Range of Industry Scores



Base: 10,000 U.S. Consumers

Source: Temkin Group Q1 2018 Consumer Benchmark Survey

Figure 1

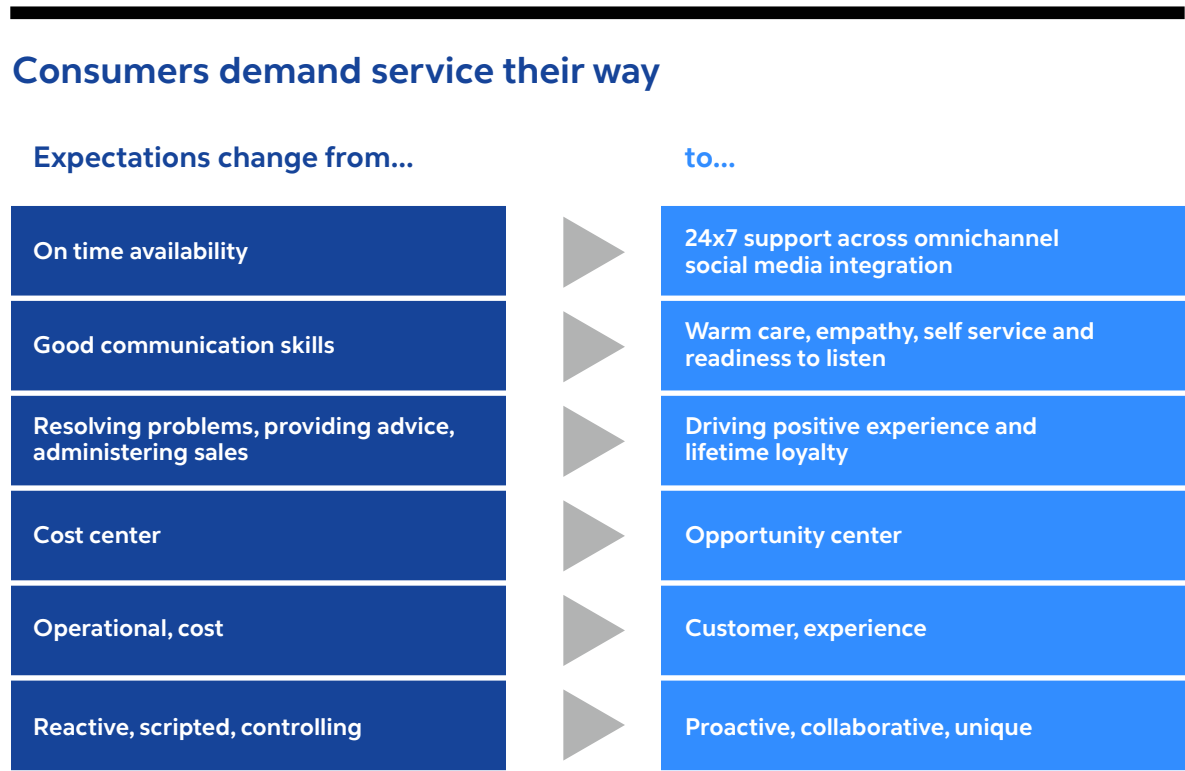


Evolving consumer needs and preferences require payers to reimagine their relationship with members. It's no longer "business as usual." Understanding a member's claim history, medications and other details alone is not enough. Payers must think further ahead into their member's journey and identify areas where they can proactively help manage care needs and lead a healthy lifestyle (see Figure 2).

AI tools are essential to meet these new and ever-expanding member expectations. Only AI can help keep pace with and make sense of the petabytes of data generated through member interactions, wearable devices and other inputs. As AI tools create

insights, payers can use these insights to improve consumer experiences and transform the contact center into a profit center. Let's look at a few other industries that are embracing the power of AI in their contact centers to generate profitable growth:

- The online retailer Asos used a chatbot to interact with customers and make appointments for fashion makeovers. As a result, appointments rose 11%, order volume via chat increased by 300% and return on spend grew 250% while the company reached 3.5 times more prospective customers.<sup>5</sup>



Today's health plan members demand more personalized, "warm" experiences that reflect their unique needs and situations. Delivering these experiences requires payers to rethink the contact center, equipping it to become an opportunity center that drives member loyalty and enhances their lifetime value.

Figure 2

- Amazon uses deep learning to personalize recommendations at nearly every step of its customers' journeys on category, product and checkout pages. About 70% of Amazon's screen real estate supports recommendations, which drive a third of its revenue.<sup>6</sup>
- At CenturyLink, an AI-driven assistant handles about 30,000 customer emails monthly and analyzes responses to identify important leads to route to appropriate departments. With 99% of emails correctly processed, company sales representatives have more time to focus on and follow up with high-value cases.<sup>7</sup>

Across healthcare, more companies are adopting AI, especially in areas that improve the overall consumer experience:

- Pager, a digitally native company, uses ML to analyze clinical and claims data to discover gaps in a patient's treatment, make recommendations and help patients schedule appointments.<sup>8</sup>
- ZakiPoint Health automates the task of displaying relevant healthcare data to members via a dashboard that improves engagement and healthy behavior adoption to better support cost containment.<sup>9</sup>

- Several large payers such as Aetna analyze the emotional sentiment of call center conversations using NLP. Sentiment analysis helps them understand the caller's intent to help improve the customer experience and agent training.<sup>10</sup>
- Anthem is partnering with health research firm doc.ai to explore how AI can be used to predict when people will experience allergies or allergy patterns.<sup>11</sup>
- Aetna, in collaboration with Apple, launched a new health app to provide users with personalized health goals. Aetna's new Attain app allows Apple Watch users to track daily activity levels, receive recommended healthy actions, improve nutrition and aid sleep habits.<sup>12</sup>

Within healthcare's compliance boundaries, AI use in contact centers offers extensive opportunities. Vitally, payers must understand that their AI end game should aim to create comprehensive, insight-filled member portraits. Without this objective, payers may deploy AI apps that do not necessarily contribute to a long-term ROI strategy. Understanding the current limits and future capabilities of AI and how to best leverage it will help payers quickly deploy AI with purpose and direction to enhance the member experience and develop sustainable new revenue streams.

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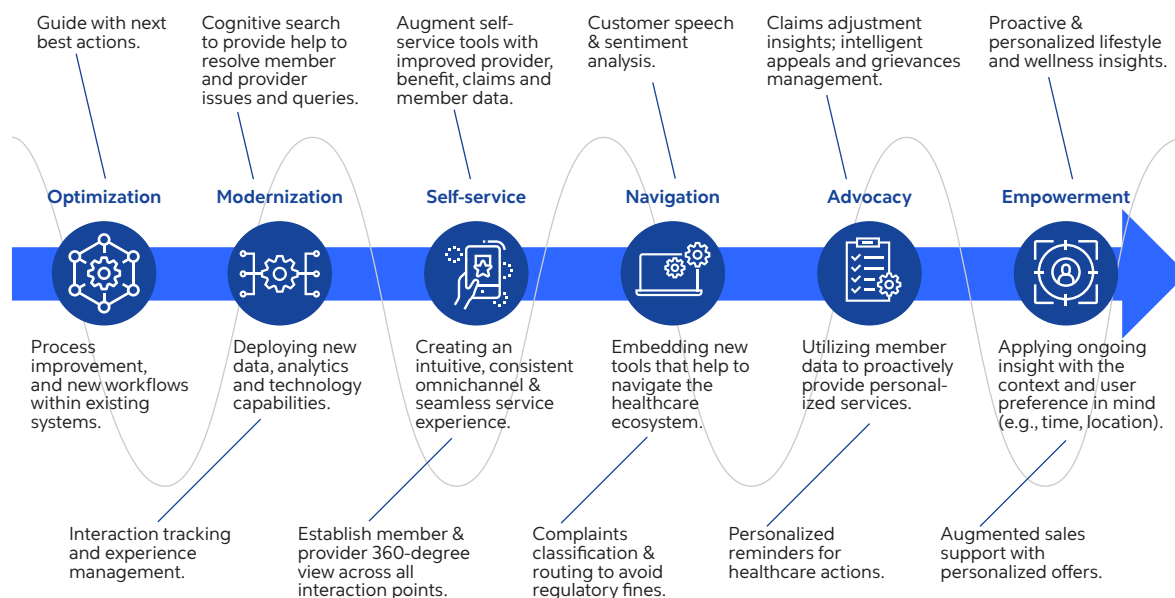
## The AI maturity continuum: Building a hyper-personalized ‘member portrait’

AI technologies transcend a range of capabilities across the maturity continuum, from software bots that make simple decisions to highly sophisticated algorithms that proactively identify and address emerging issues (see Figure 3). Member data is captured at every point along this continuum, which feeds a comprehensive member portrait. Member-specific data may include details related to claims and health history, clinical insights, provider notes, communications channel preferences, financial details, sentiments during different interactions, medication adherence, and responses to different plan and wellness offerings. This data should be assigned to appropriate member portrait categories.

AI technologies leverage these data points to augment and support human agents during interactions with members and, in many cases, can initiate member engagements proactively based on the data-driven insights.

Most organizations start their AI journey by automating rote processes and creating rules engines that streamline and optimize contact center workflows and processes. These efforts may include deploying virtual assistants that can execute simple tasks such as pulling up benefits for website visitors; rules to automate call routing; and interactive voice response (IVR) systems that leverage NLP. As AI technology matures, cognitive search tools will help

### The AI capabilities maturity continuum



AI tools at all maturity levels can enable payers to build in-depth member portraits. AI-based systems continually draw on and add layers to these portraits to help contact-center agents deliver personalized services.

Figure 3



AI should continuously analyze new data as it's added to the member portrait. Further, AI augmented with ML algorithms can learn member preferences, at both individual and aggregate levels.

members resolve queries themselves. Payers should focus on programs that enable greater customer self-service. For such, it's essential to capture and understand every detail in the member's portrait and use the right tools and channels based on unique member situations. As an example, a member who inquires about a provider address or benefit detail for an annual checkup can be directed to self-service tools, but a member requiring details for a close family member's critical care related to a recent surgery should gain immediate access to a contact center agent to receive warm, empathetic care.

AI should continuously analyze new data as it's added to the member portrait. Further, AI augmented with ML algorithms can learn member preferences, at both individual and aggregate levels. This capacity enables the system to predict member needs, such as applying self-service options for a simple inquiry or providing detailed advice about plan options, health choices and general wellness.

AI tools also can predict member adherence and acceptance to outreach and care management programs and, thereby, recommend optimal engagement tactics and channels, and identify members who might require proactive interventions.

Additionally, AI-based sentiment analysis can predict a member's temperament and prepare an appropriate response, such as immediately connecting a member who has a chronic condition to a live agent. AI can also recognize when a member's lifestyle or circumstances change and recommend plans and services that meet emerging needs.

Here's one common scenario that demonstrates how AI-based tools support member needs: A plan member's son is turning 26 and soon will no longer be covered under his parent's policy. At the least mature end of the AI spectrum, a software bot could automatically send an email to the parents to note the coming change in their premium. A more advanced bot might push promotional material to the son via his preferred channel. At the highest maturity level, an AI-based solution would identify the son as a potential prospect before he ages out and ensure there is a focused marketing effort to have him continue with the health plan after age-out. Mature AI capabilities can ensure the target member receives the right type of plan recommendations that leverage the right interaction channel based on their unique member portrait developed over time.

## AI use cases for payers

Most payers have vast stores of member data. By applying AI tools to these resources and creating member portraits, payers can glean insights that help them operate more efficiently and improve member experiences (see Figure 4).

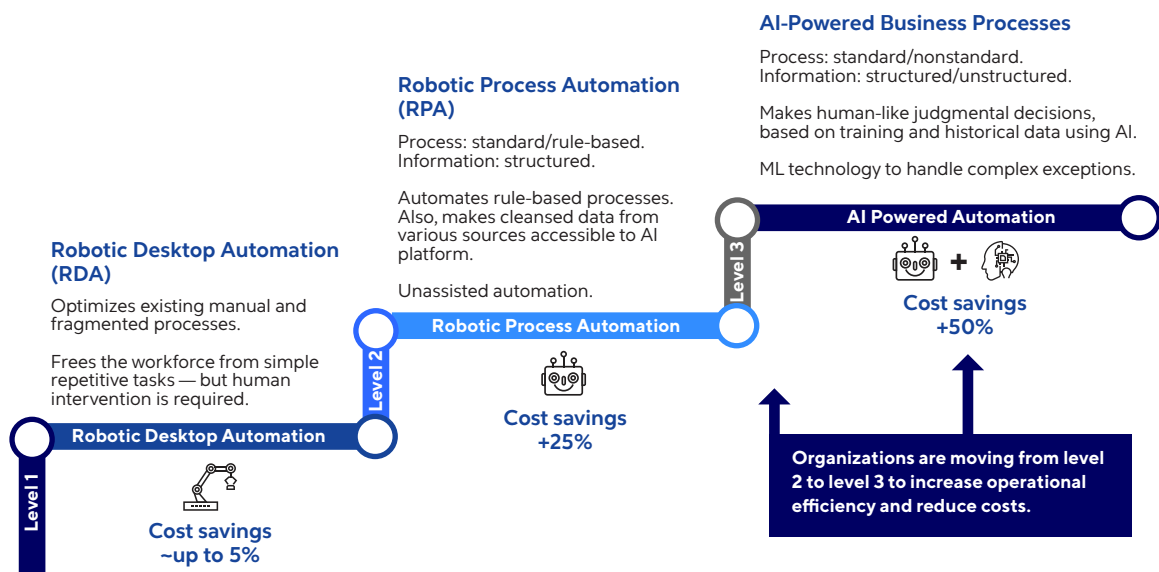
To begin, payers may use existing member data to create a baseline member portrait and continuously add additional insights from incoming streams of data for the same member. Gradually, a robust member portrait will emerge.

Continual additions of data help enhance the portrait with increased precision and personalization. Deep insights about individual members can be derived by analyzing member portraits. By identifying common patterns across individual member portraits, payers can isolate critical high-priority issues for quick wins.

Here are a few examples of potential AI-enabled service enhancements around the member portrait:

- I **Member self-service options:** Develop and show personalized content based on history and context. Improve and customize search functionality – e.g., focus on content aligned with the member's context and portrait.
- I **Agent augmentation:** Enhance the experience by using AI to provide the agent with a complete member portrait along with their contextual information. For example, AI can help agents proactively call the member or predict the reason for a call based on the time of year, call location, past medication needs, family medication history, recent claims or individual preferences.

## Service experience can be transformed with AI



Payers can deliver compelling member experiences while achieving significant cost savings by augmenting customer service representatives and business processes with more mature AI capabilities.

Figure 4





- I Member advocate:** AI supports member needs and helps proactively identify problem areas, challenges and opportunities, and ensures the payer responds in a manner that delights the member. For example, using the member's history, the system can identify additional tests needed as part of their annual check-up, schedule additional specialist appointments, and auto-generate and approve pre-authorizations for tests if needed.

Payers may also develop innovative new member services built on the AI-driven contact center capabilities. Health plan members told us they are willing to share digital data from their wearables and home monitoring devices with payers in return for customized advice and incentives.<sup>13</sup> AI could use that data to glean more insights about community and population health issues as well as develop personalized analyses for members.

Payers should be mindful that as AI matures and becomes more proactive, they will need to ensure their AI-based tools are responsible and ethical (see Quick Take, page 11).

## Getting started

For our clients, we advise a “10-10-10” approach to guide the adoption of AI capabilities in contact centers:

### 10 Days

- I** Define what AI means to the organization with respect to contact center enhancements.
  - > AI is not a technology play. While AI technology is an enabler, its implementation must be business driven. Successful implementation in the contact center requires process redesign championed by business leaders.
  - > Get leadership buy-in and support of the AI value propositions, which should include projected cost reductions through operational and experience improvements.
- I** Identify and plan a minimum viable product or proof of concept.
  - > Identify and assess AI opportunities across applications, infrastructure and security operations to define the target state. Specific AI examples include AI-powered IVR, automated routing and automated agent guidance. Promote overall contact center efficiency and effectiveness by having agents focus on delivering warm, empathetic care that results in a truly differentiated member experience.
  - > Analyze functional and technical requirements to attain a best-fit approach for the AI-powered layer.
  - > Assess AI algorithms to ensure automation and learnings align with business goals.

**10 Weeks**

- I Implement a minimum viable product.
  - > Establish an agile team comprising business and technical resources.
  - > Design and develop the minimum viable product.
  - > Garner feedback from the user community and optimize the AI algorithm.
  - > Fine-tune the overall implementation approach and roadmap based on the lessons learned.
  - > Leverage the lessons learned to inform the overall AI strategy.
- I Define an enterprise-wide contact center AI strategy.
  - > Consider adopting an AI-first mindset, which requires using AI to solve business problems wherever applicable and possible.
  - > Move from piecemeal AI-oriented efforts to a mainstream, dedicated and executive-sponsored effort to drive AI.
  - > Define a strategy that will address business challenges. Identify capabilities needed to develop in-depth member portraits that can improve the member experience.
- I Define a high-level two to three year roadmap for contact-center-focused AI capabilities.
  - > Quantify automation and AI benefits, develop a roadmap and calculate high-level ROI. Socialize with and obtain buy-in from business stakeholders.

**10 Months**

- I Develop a comprehensive operating model to operationalize AI.
  - > Analyze the impact of AI capabilities across people, processes and technologies.
  - > Establish an AI center of excellence to drive AI best practices across the organization and establish governance standards, noting that most large organizations must accommodate some level of customization.
  - > Conduct skills assessment within the current workforce and retrain, hire or source the right skills.
  - > Design the right incentives to drive AI adoption across the organization.
- I Continue to implement the AI capabilities that have the most member and business impact, and continuously incorporate the learnings from new use-case implementations into the overall strategy.

# Quick Take

## Ensuring Strong Ethics for Effective Contact Center AI

According to our recent multi-industry AI study, only about half of the respondents said their companies have policies and procedures in place to identify and address ethical considerations in their AI applications.<sup>14</sup>

Healthcare executives must be part of this group of early ethics adopters because so many AI-based decisions will affect what and how care is delivered. Ethical policies, procedures and governance programs are critical to successful AI applications, and should be a chief concern across the healthcare industry. Members, patients and payer employees should be served through AI that is responsible and ethical. For example, an AI agent that suggests a new service for a member who just received bad health news should be sensitive to the member's status. Although the AI might present the offer as a logical response to a change in health status, the member might find the communication or offer manipulative or intrusive. Payers need to think through these scenarios as part of a broad AI ethics and responsibility strategy that incorporates the following:

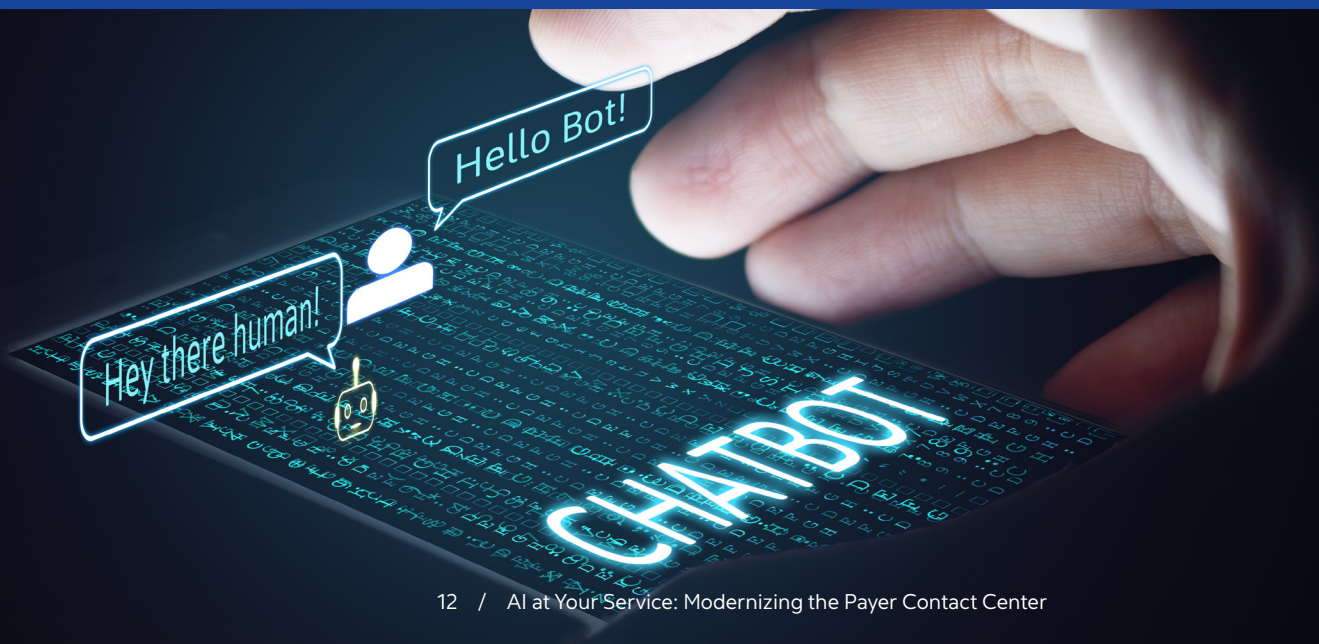
- I **Governance:** AI's effective use requires ongoing input, support and review throughout the payer organization. With governance mechanisms in place, payers should be prepared to cease or reconfigure an AI initiative that's showing unwanted results.
  - > A chief AI ethicist: As part of a strong governance program, this role would be responsible for the actions and outcomes of decisions made with or augmented by AI.
- I **Control for bias in AI:** Businesses must understand the typical types of bias that can creep into AI system design and ongoing operations without proper controls.<sup>15</sup> First, there's bias that stems from the data used to train the system. If the data is biased or used out of context, the resulting outcomes also will be biased. Organizations must also account for unconscious bias by employees who create the AI systems. Humans tend to reflect their own experiences and beliefs, so teams lacking diverse perspectives may create a biased program. Finally, bias can be propagated by self-learning AI systems that

# Quick Take

work with biased data or come to conclusions based on biased data or processes. It is very important to have a rigorous quality assurance program that addresses these biases and removes them through iterations.

- I **Transparency:** As AI-based solutions learn, it often becomes increasingly unclear how the algorithms within them are evolving, so that they are likened to a “black box.” Members and providers are unlikely to accept AI-based decisions if payers can’t explain how the AI agent arrived at them. Payers should work closely with their service providers to ensure visibility into how its algorithms work.<sup>16</sup> It is also important to model these algorithms with high volumes of data in test environments, and continuously monitor the results and modify the algorithms as needed over time.
- I **A plan for unintended consequences:** When designing AI systems, organizations must recognize that people likely will behave differently if they know they’re interacting with an AI system. For example, a member unlikely to berate a human customer service agent might otherwise scream at a chatbot. A few might do so to game the system.<sup>17</sup>

Another reason why payers and their service providers must build AI applications on a strong ethical foundation: As AI systems proliferate, they will be taught by other AI systems. If unchecked, an unethical AI system will propagate its biases and other issues, negating any positive impact. Ultimately, humans are responsible for controlling the behavior of their AI systems and ensuring they achieve desired and ethical outcomes that are consistent with the payer’s values and member priorities.





## Endnotes

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| ■ Aman Preet, Senior Consultant                | ■ Ishita Malhi, Business Analyst   |
| ■ Harsh Kulkarni, Business Analyst             |                                    |

## About the authors

### Nikhil Sarathi

Consulting Partner and Global Lead for Consumerism, Cognizant Consulting

Nikhil Sarathi is an Assistant Vice President within Cognizant Consulting's Healthcare Practice. He has over 18 years of experience in healthcare and technology, and has a strong track record of success in consumer-centric strategies, next-generation capabilities identification and implementation, leading large digital transformation programs and evaluating partnership models for healthcare organizations. Nikhil specializes in the areas of strategy development and execution, platform strategies, next-gen technologies, digital transformation, process improvements and consumer engagement. He can be reached at [Nikhil.Sarathi@cognizant.com](mailto:Nikhil.Sarathi@cognizant.com) | [www.linkedin.com/in/nikhilsarathi/](https://www.linkedin.com/in/nikhilsarathi/).

### Shashi Shrimali

Director of Healthcare Consulting, and Front Office Transformation Service Line Leader, Cognizant Consulting

Shashi Shrimali is a Health Plan Front Office Transformation Service Line Leader within Cognizant Consulting's Healthcare Practice. He has over 15 years of experience in management consulting, IT strategy, digital transformation and operating model design across industries with a primary focus on healthcare. Shashi focuses on helping health plans design overall constituent experience, define and mobilize product/sales/marketing/service strategy and drive both internal and external adoption. In addition, he has led core administration modernization programs across nationals, Blues and regional plans. Shashi can be reached at [Shashi.Shrimali@cognizant.com](mailto:Shashi.Shrimali@cognizant.com) | [www.linkedin.com/in/shashishrimali/](https://www.linkedin.com/in/shashishrimali/).

### Sridhar Kondaveeti

Assistant Vice President and Sr. Client Partner, Cognizant Healthcare

Sridhar Kondaveeti (Konda) is a seasoned market leader in Cognizant's Healthcare Practice, leading the overall relationships for some of Cognizant's largest healthcare customers. With over a couple of decades of experience in the U.S. healthcare industry, Konda has deep expertise serving both commercial and government plans. He advised many of the healthcare market leaders on their strategic and transformative initiatives to achieve greater levels of efficiency and adapt to industry challenges by leveraging next-generation processes, platforms and digital technologies. Konda is a Fellow of the Academy for Healthcare Management, is an Emerging Partner from Harvard Business Publishing and holds a bachelor of technology degree from Nagarjuna University. He can be reached at [Konda@cognizant.com](mailto:Konda@cognizant.com) | [www.linkedin.com/in/sridharkondaveeti](https://www.linkedin.com/in/sridharkondaveeti).

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## About Digital Business

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### World Headquarters

500 Frank W. Burr Blvd.  
Teaneck, NJ 07666 USA  
Phone: +1 201 801 0233  
Fax: +1 201 801 0243  
Toll Free: +1 888 937 3277

### European Headquarters

1 Kingdom Street  
Paddington Central  
London W2 6BD England  
Phone: +44 (0) 20 7297 7600  
Fax: +44 (0) 20 7121 0102

### India Operations Headquarters

#5/535 Old Mahabalipuram Road  
Okkiyam Pettai, Thoraipakkam  
Chennai, 600 096 India  
Phone: +91 (0) 44 4209 6000  
Fax: +91 (0) 44 4209 6060

### APAC Headquarters

1 Changi Business Park Crescent,  
Plaza 8@CBP # 07-04/05/06,  
Tower A, Singapore 486025  
Phone: + 65 6812 4051  
Fax: + 65 6324 4051