

CASE STUDY

Health Insurance Company: Reporting on Member Complaints to meet Government Regulations



CLARABRIDGE

ABOUT

This health insurance company serves more than 125 million members worldwide, in more than 126 countries.



CHALLENGE

Government regulations made it mandatory to report on all Medicare member complaints. The company began by manually reading and analyzing all the complaints data. But the process was subjective, time consuming, and expensive. Any inaccuracies in their reporting would also lead to hefty government fines.



SOLUTION

The health insurance company uses Clarabridge to automatically analyze and report on all the complaints data, understand key drivers of member rating scores, and analyze key touchpoints in the member journey.



RESULT

They have made specific improvements to the member experience, and identified self-service opportunities that would decrease call volumes by 7.5%. With Clarabridge, they saved on hiring a planned extra 80 employees for manual data analysis, resulting in savings of approx. \$720,000 annually.

“After years of research, analysis, and gaining internal buy-in, Clarabridge was selected as the clear winner. Clarabridge helps us identify the “why” behind NPS.”

—VP of Enterprise Customer Experience Strategy

Clarabridge's customer experience management solution helps hundreds of the world's leading brands put customer feedback to work. Our SaaS solution is the most comprehensive offering for omni-source listening, accurate customer and text analytics, and real-time, guided action. The result: better customer experiences. For more information, visit www.clarabridge.com.

This health insurance company serves more than 125 million individuals worldwide. Through their businesses and a total workforce of more than 225,000 employees, they provide health insurance across the United States and in more than 125 other countries. This brand launched their customer experience program to provide a positive healthcare experience for all their customers. It also allows them to stand out within the healthcare insurance industry.

Manual Analysis of Member Complaints Data is Ineffective

Prior to Clarabridge, the company was using another software solution to primarily analyze structured data. Then laws were passed making it compulsory for healthcare insurance companies to report on all Medicare customer complaints. However, their system wasn't set up to analyze text-based customer complaints. The company instead manually read through, categorized, and reported on all complaints data.

This was a time consuming, subjective, and expensive process. They were even going to hire 80 additional part-time employees simply to manually read through the complaints data – an additional spend of approximately \$720,000 annually. The company needed a way to automate the process. In addition to high costs, any inaccuracies in categorization could lead to hefty government fines.

Clarabridge Provides Automatic Data Analysis and Wider Member Experience Improvements

Clarabridge was selected as the clear winner for customer experience analytics. Clarabridge offered the deepest NLP analysis, which provided accurate, trust-worthy data. The company also had a vision for analyzing more data sources beyond just customer complaints. Clarabridge was able to support this.

In addition to Medicare complaints reporting,

the CX team now uses Clarabridge to better understand the key drivers of Likelihood to Recommend scores. They also analyze the key touchpoints in the member journey. They then prioritize specific customer experience improvements based on customer feedback. Clarabridge is a key partner, helping the brand close the loop with their members and guiding key initiatives using customer insights.

Annual Savings of \$720,000 and Opportunities to Decrease Call Volumes by 7.5%

This brand has seen tangible benefits by continuously monitoring member feedback for emerging trends and key topics of conversation:

- Saw a sudden spike in customer complaints and call volumes. The team was able to trace it to a change in mailing processes. Customers who were signed up for direct payment deductions started getting notifications. Customers became confused as they thought they were suddenly being invoiced.

Through Clarabridge analysis, the brand understood the exact reason for customer frustration and was able to quickly resolve the issue.

- Discovered opportunities to increase self-service: The team noticed that a lot of members called into their call center when they needed to change their personal contact information. With this insight, they realized that getting members to change their address and update credit card information online could reduce call volumes by 7.5%.
- The CX team identified why specific call center locations had lower member satisfaction scores, and could use member data to provide additional coaching in specific areas.

