

How AI Technology Creates a Modern Member Experience and Boosts Star Ratings

Presented By:

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OUR MISSION

Our mission is to provide a community for like-minded professionals to come together for networking, education, and industry collaboration to stay ahead and advance their careers.

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THREE COMMUNITIES



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ASK YOUR QUESTIONS IN OUR DISCUSSION BOARD

Today's agenda

- The challenges of member engagement today
- Connecting data to gain a 360-view of your members is key to CMS Star Ratings success
- Understanding AI and how it can improve member experiences

The challenges of member engagement today



Sara Kloch

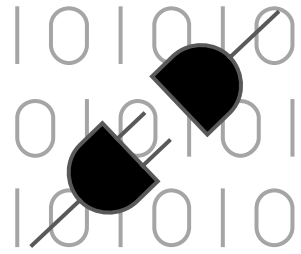
*Senior Product Marketing
Manager*

Nuance

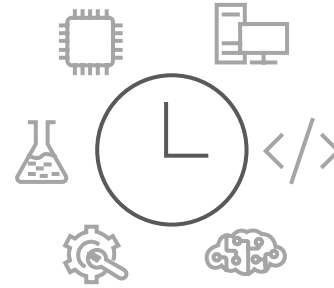
The member experience gap



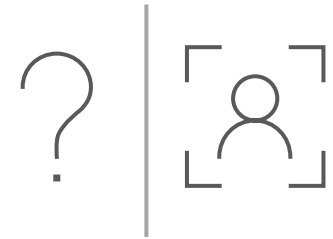
Experiences are fragmented



Data is being collected, but not connected

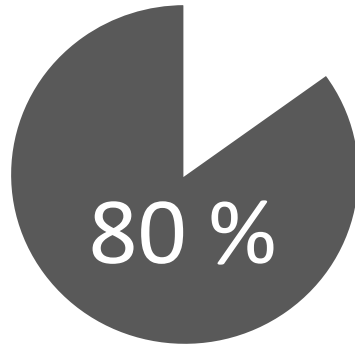


AI is time and resource intensive



Privacy and personalization paradox

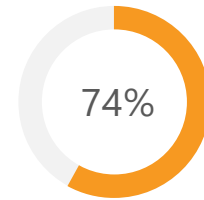
Harder than ever to meet member expectations



Customer expectations continue to increase

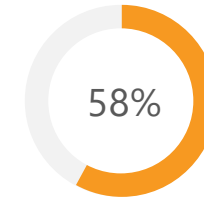
80% of consumers are more inclined to purchase from a company that provides tailored experiences¹

¹ Forbes, [50 Stats Showing The Power of Personalization](#), 2020



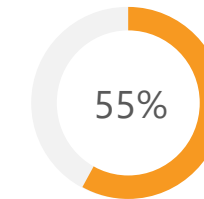
Technology has been added piecemeal

74% of contact center agents are using four or more applications during a typical interaction



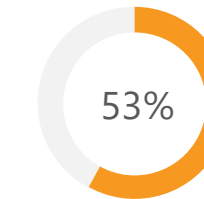
The cost of getting it wrong has never been higher

58% of customers will sever a relationship with a business due to poor customer service



Workforce has gone virtual

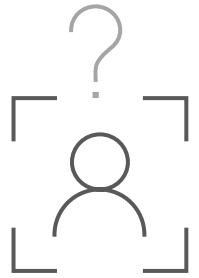
55% of contact centers do not have the collaboration tools necessary to help resolve customer questions



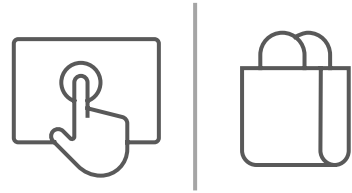
Issues that reach human agents are more complex

53% of contact centers do not have proper visibility of information to help agents understand the customer context

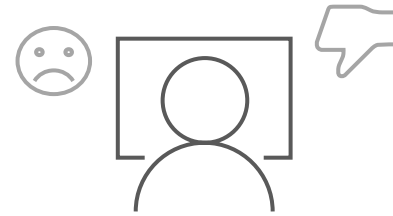
Member experience remains disjointed



Health Plans need to know their members in an **actionable way**



Digital and physical experiences are **disconnected**

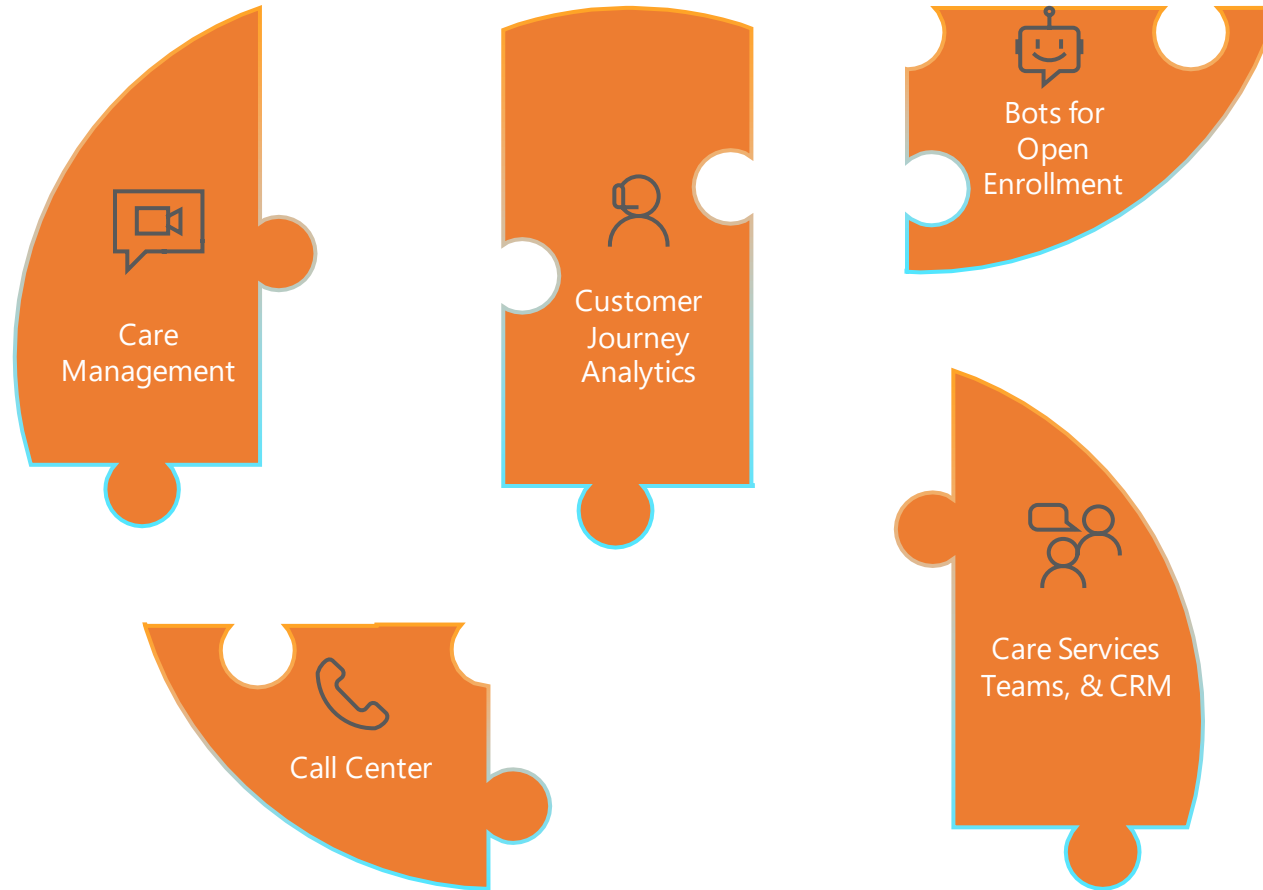


Inability to engage in **moments that matter**



Multiple departments are creating **siloed experiences**

Fragmented contact center experience makes expectations difficult to meet



How AI can modernize member engagement

Fine tuned intelligence for conversational experiences



Conversational AI

Voice and digital virtual assistants.



Agent AI

AI driven help and support.



Security AI

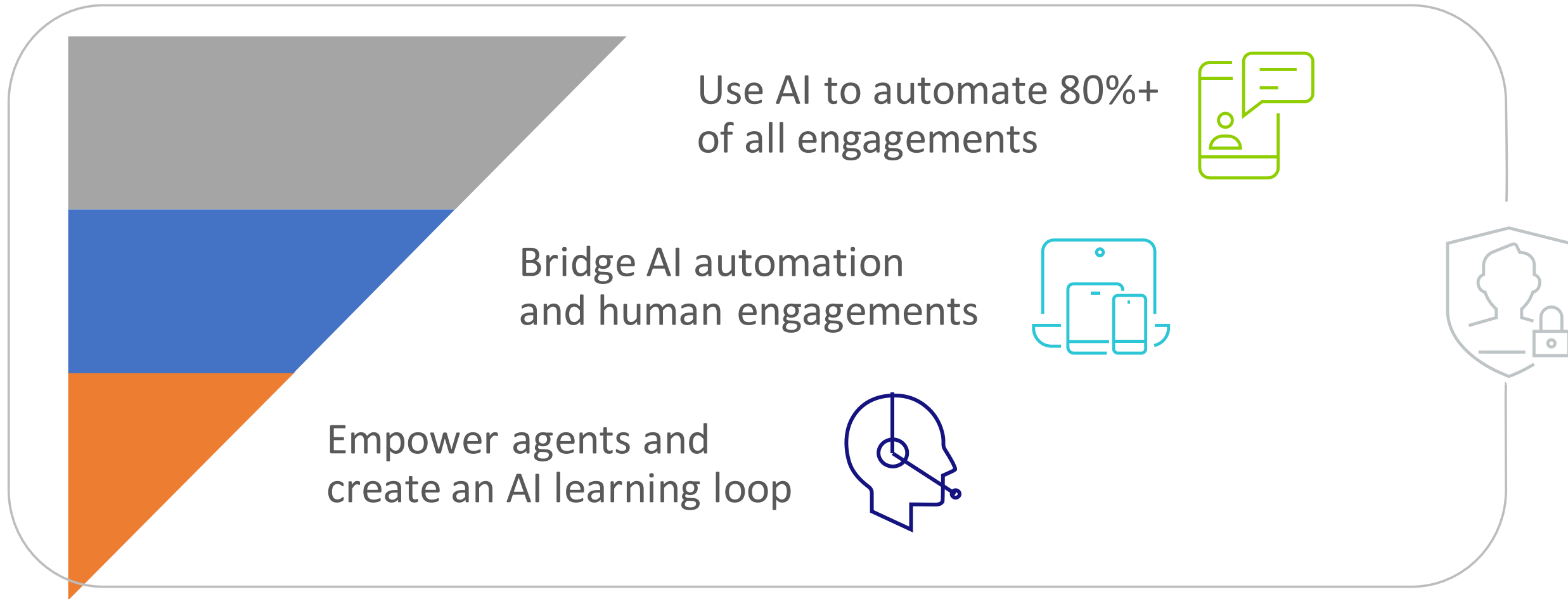
Multimodal biometrics and fraud prevention.



Analytics AI

Understand and optimize channel and agent performance.

The best outcomes rely on an integrated AI-first approach



Connecting data to gain a 360-view of your members is key to CMS Star Ratings success



Amy Berk MSN, RN

Director, Population Health

Microsoft

Star ratings now have greater emphasis on member experience

In May 2020, CMS revised the Star Ratings system to put a greater weight on the results of the CAHPS survey. In **2023**, the consumer experience now comprises **57%** of overall star ratings

Staying healthy:

Member access to preventive services that keep them healthy, including physical examinations, vaccinations and preventive screenings.

Chronic condition management:

Care coordination and how frequently members received services for long-term health conditions.

Member experience:

Overall member satisfaction with the health plan and member service team.

Member complaints:

How frequently members complain, left the plan, or whether members had issues getting needed services.

Customer service:

Quality of care services, processing of appeals and new enrollments in a timely manner.

Why Stars matters...

- Bonus payments and rebates are tied to the number of stars achieved. These ratings are extremely important to MAOs because of the amount of money on the line.
- Under a provision of the Affordable Care Act (ACA), Star Ratings began to be used to adjust payments to MAOs beginning in 2012. There are two parts that comprise the rewards:
 - Direct bonus payments to the plan operator
 - Rebates which must be returned to the beneficiary in the form of additional or enhanced benefits, such as reduced premiums or expanded coverage
- Bonus payments are paid per enrollee and are calculated as a share of the MA benchmarks, which vary by county, and thus bonus payments vary by county. Bonuses for 4-star plans or higher are 5 percent of the area's benchmark for each member. Double bonuses are awarded in certain counties with demographic factors that indicate a complex population of beneficiaries. In the 2020 Star Ratings, 52% of MA contracts scored between 4 to 5 stars.



Challenge: CMS Stars ratings changes

- Medicare uses a quality “stars” in the form of a scale rating between 1 and 5 stars (with half- star increments permitted to allow for more variation). There are a total of 33 quality measures.
- Priority Focus on Member Experience, Access & Outcomes.
- Often, Medicare recipients depend on star ratings as a key factor in selection of a Medicare Advantage plan in their market.
- A small improvement by a half-star could mean the difference between dominating a regional market or losing significant ground to a competitor with a higher-quality plan.
- Approximately 51% of Medicare Advantage (MA) plans offering drug coverage will have a star rating of four or more in 2023, a sharp drop compared to 68% of plans with such a rating or higher for 2022. (Fierce Healthcare, 10/22)
- CMS has already announced that premiums for MA plans will drop by nearly 8% for 2023.



Digital transformation improves Stars

Omni-Channel Member & Provider Engagement

Virtual Member Assessments

Member 360 Profile

Predictive AI to Close Gaps in Care

Text for Analytics: Member Surveys

Automate Stars workflows

IVR / Health Bots for Member Outreach & Engagement

Data & Analytics to Improve Accuracy and Timeliness of Measurement & Calculation

Star Ratings impact across five categories

- **Outcomes:** What are the improvements in Medicare plans beneficiaries' physical health?
- **Intermediate outcomes:** What actions have health care plans taken to assist in improving their beneficiaries' health statuses?
- **Patient experience:** What do beneficiaries think about the care they receive?
- **Access:** What processes and issues can prevent a beneficiary from receiving care?
- **Processes:** What health care services plans provide beneficiaries to assist with maintaining, monitoring, and improving their health

Why improvement is imperative

Improving plan Star Ratings—or failing to rise to the level of their market competitors—has multi-billion-dollar implications

Impact of Star Ratings: Bonus and Rebate

Star Rating	Bonus	Rebate
★★★★↓ & higher	5% (10% in double bonus counties)	70%
★★★★	5% (10% in double bonus counties)	65%
★★★↓	0%	65%
★★★ & lower	0%	50%
New Contract or low enrollment	3.5% (7% in double bonus counties)	65%

Source: Gorman Health Group, LLC

*Below 3 stars possible loss of CMS contract if 3 year trend.

Future Stars considerations...



VALUE-BASED CARE



E-CQMS



SDOH / HEALTH EQUITY

Improving Stars requires a four-pillar approach



MEMBER
ENGAGEMENT



PROVIDER
ENGAGEMENT

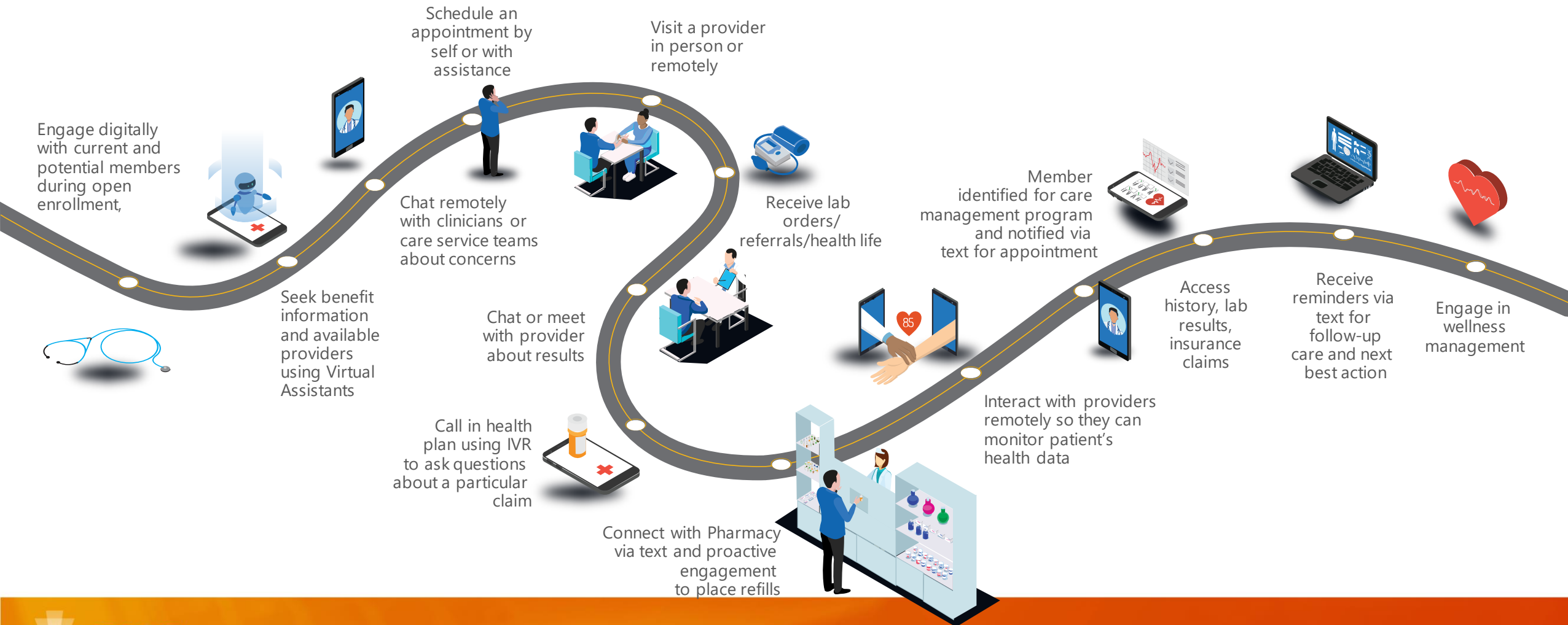


CLOSING GAPS IN
CARE



MEASUREMENT &
CALCULATION

Improving Stars starts with enhanced member and provider engagement



Provisions to close gaps in care starts with...

Capture maximum data by automatically retrieving as many relevant EHRs as possible.

FHIR

Use NLP to accelerate quality reviews and gap closures. Couple this with automated provider outreach to resolve care gaps.

NLP

Identify HEDIS gap closure opportunities down to the individual member level.

AI

Improve member care by using pattern-based analytics to improve quality initiatives, track results, and predict and avoid adverse member care outcomes.

Power BI

Improve member compliance with treatment plans that use AI to monitor member plan adherence and assess treatment effectiveness.

AI

...And ends with a strategy incorporating analytics to improve measurement and calculations

Where are they weak and why?

Phase 1: Discovery

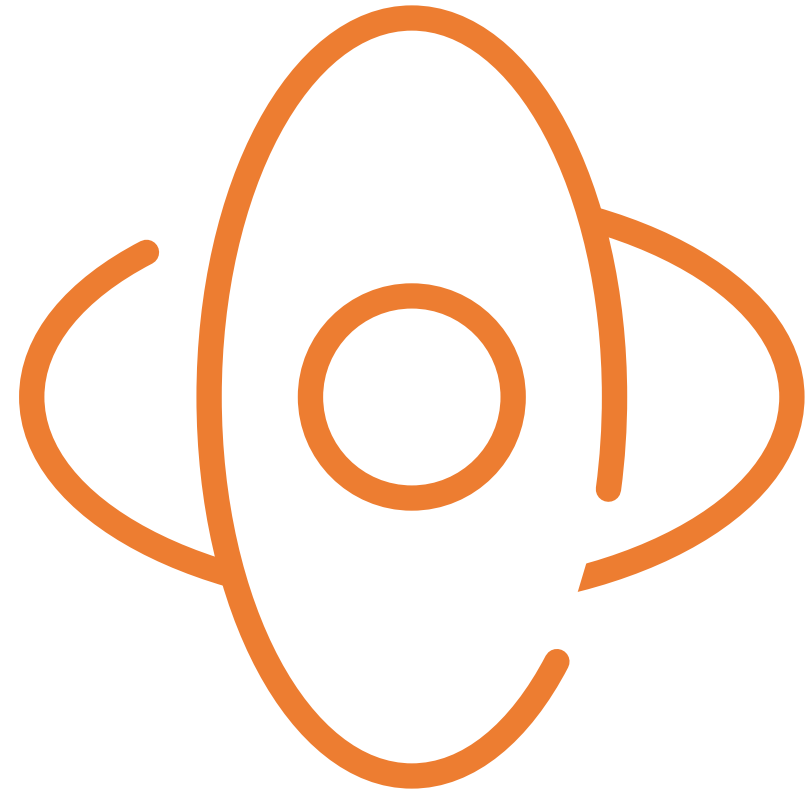
Analytics will identify the areas where a company is experiencing the greatest negative impact on Stars ratings, based on a detailed assessment of current measurement techniques.

Phase 2: Analytics: Strategy and Evaluation of Highest ROI

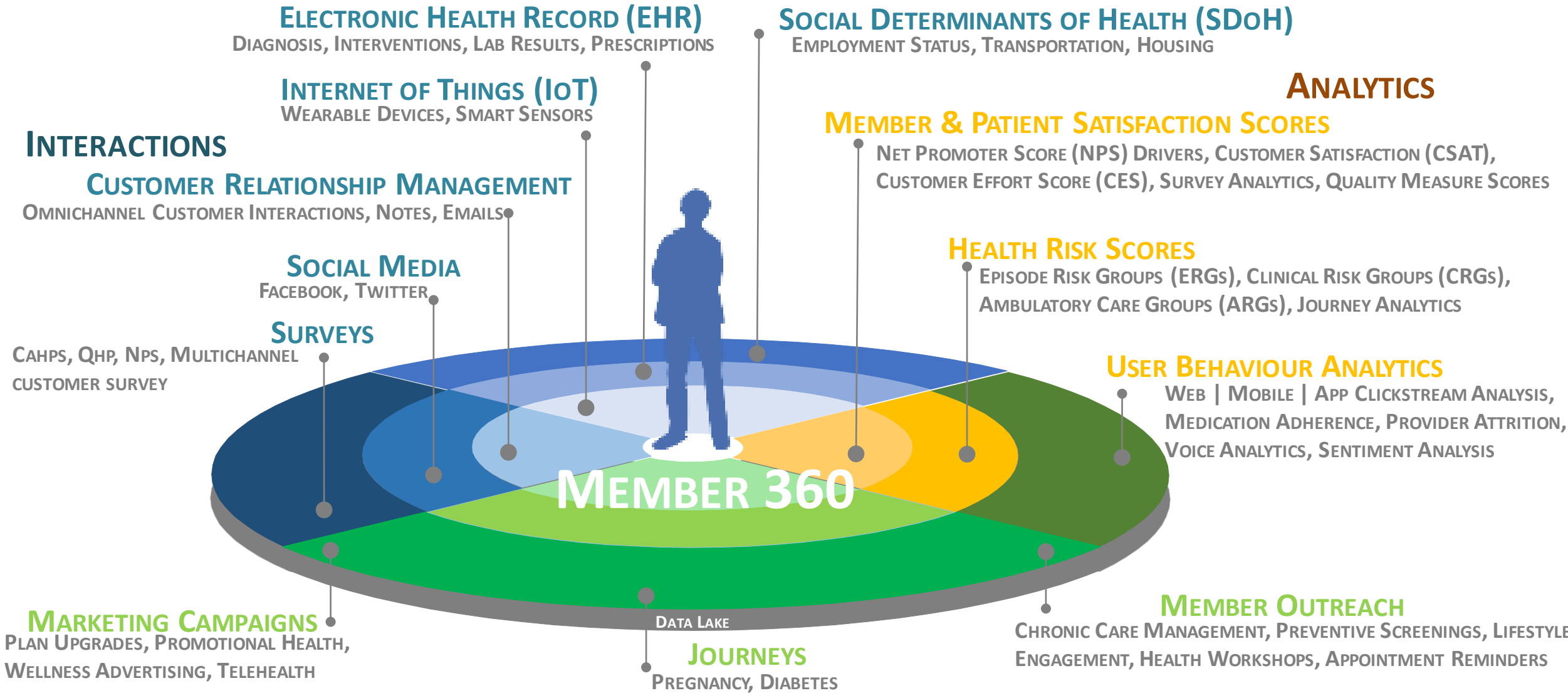
Analytics and machine learning will develop models to suggest the most significant probability and highest ROI (best likelihood for Stars increase) for targeted improvement spend.

Phase 3: Performance evaluation

Based on previous models and the suggested 2020 revision of CMS evaluation measurements, Analytics and Power BI will deliver a comprehensive strategy and constant calibration for measurement.

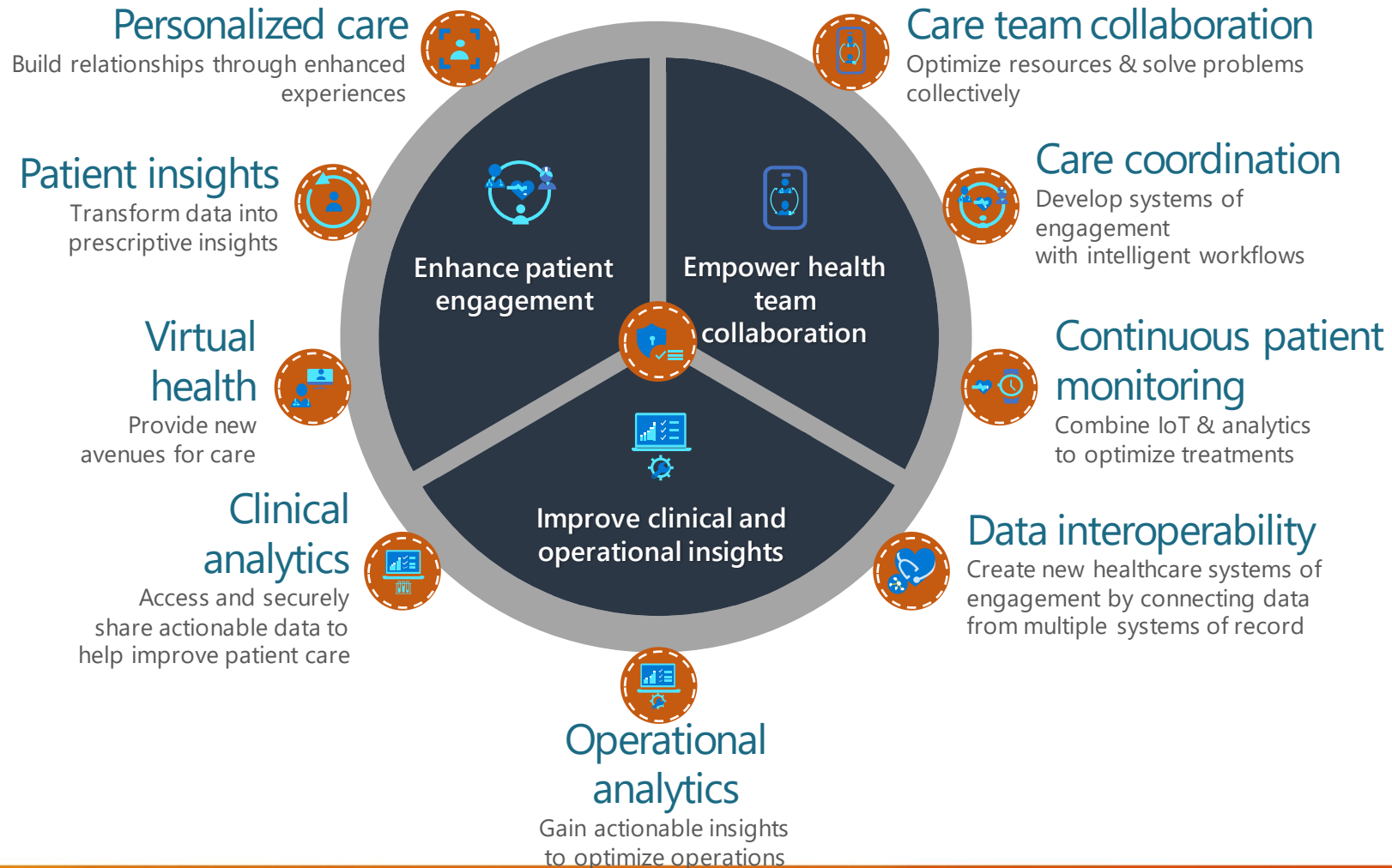


MEMBER PROFILE AND CONTEXT

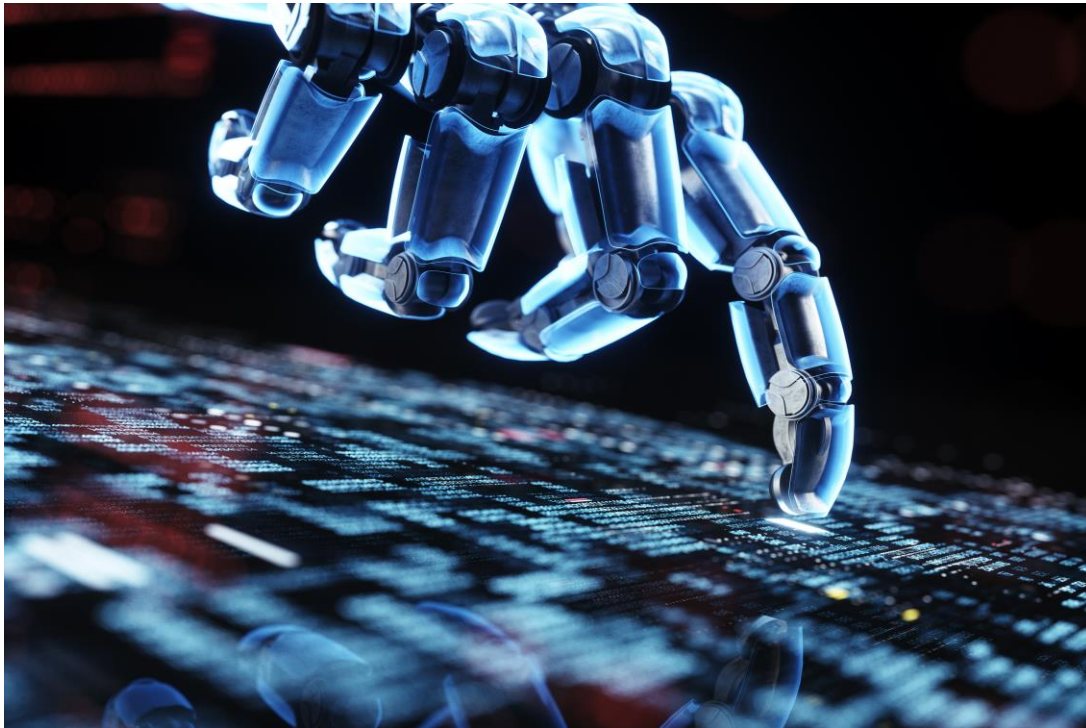


MULTICHANNEL MEMBER & PATIENT ENGAGEMENT

Employing cloud can help improve Stars



Understanding AI and how it can improve member experiences

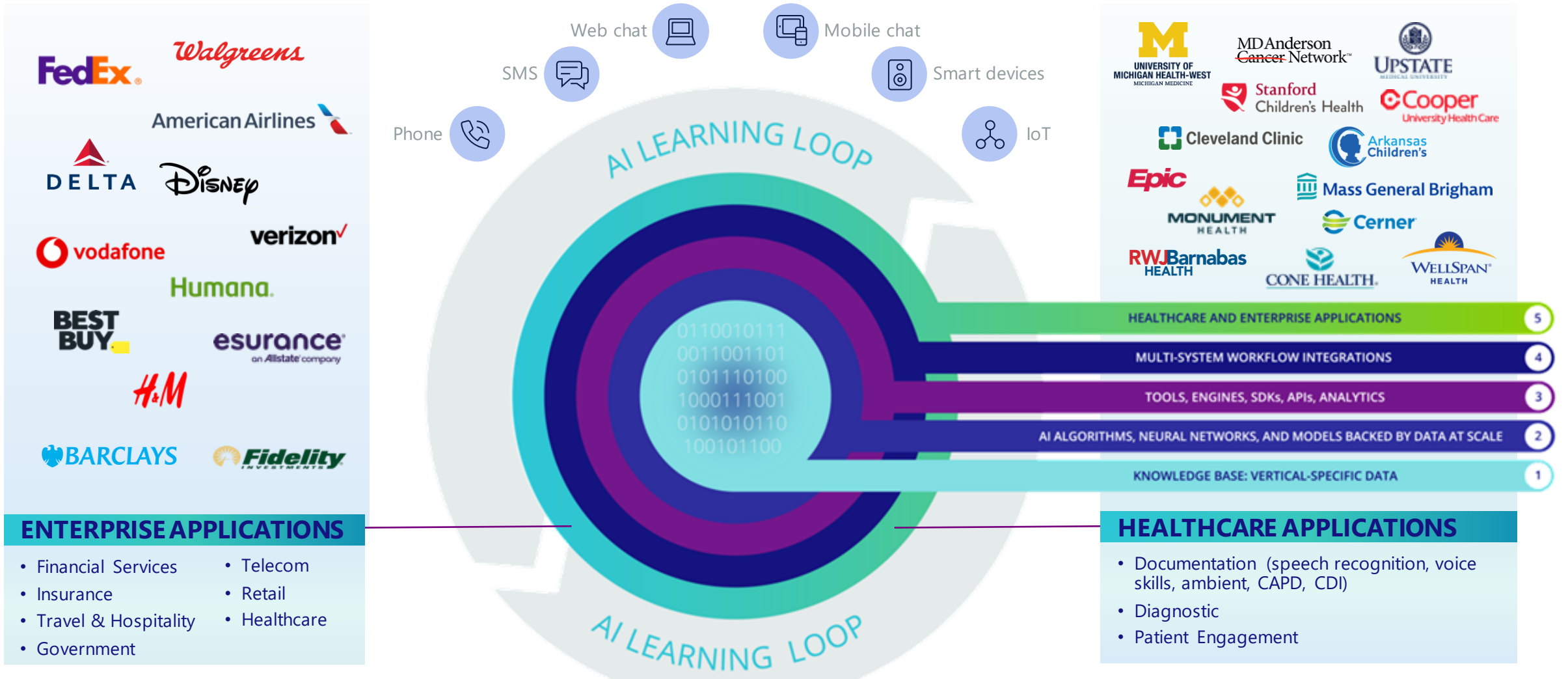


Sara Kloch

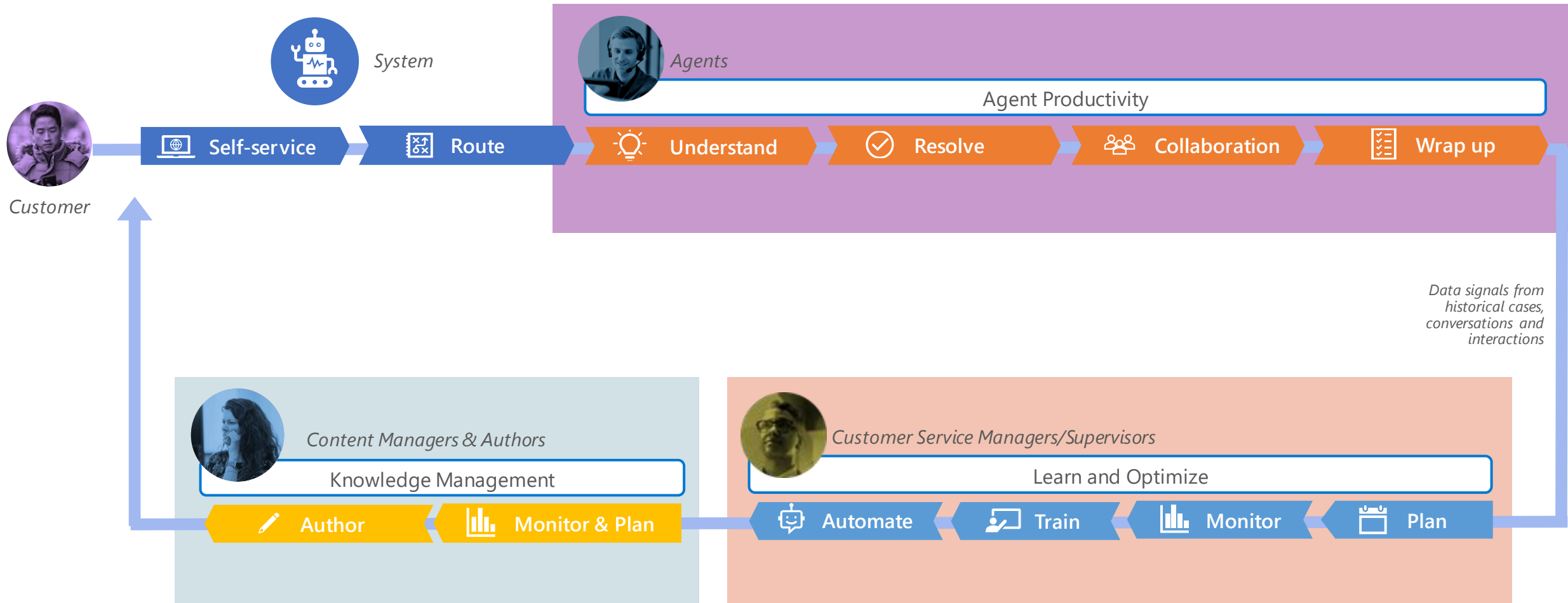
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Nuance

Nuance AI platform for intelligent engagement



AI infused across the entire member journey



Benefits of AI on your member experience

Accurately understand your members needs and resolve issues effectively

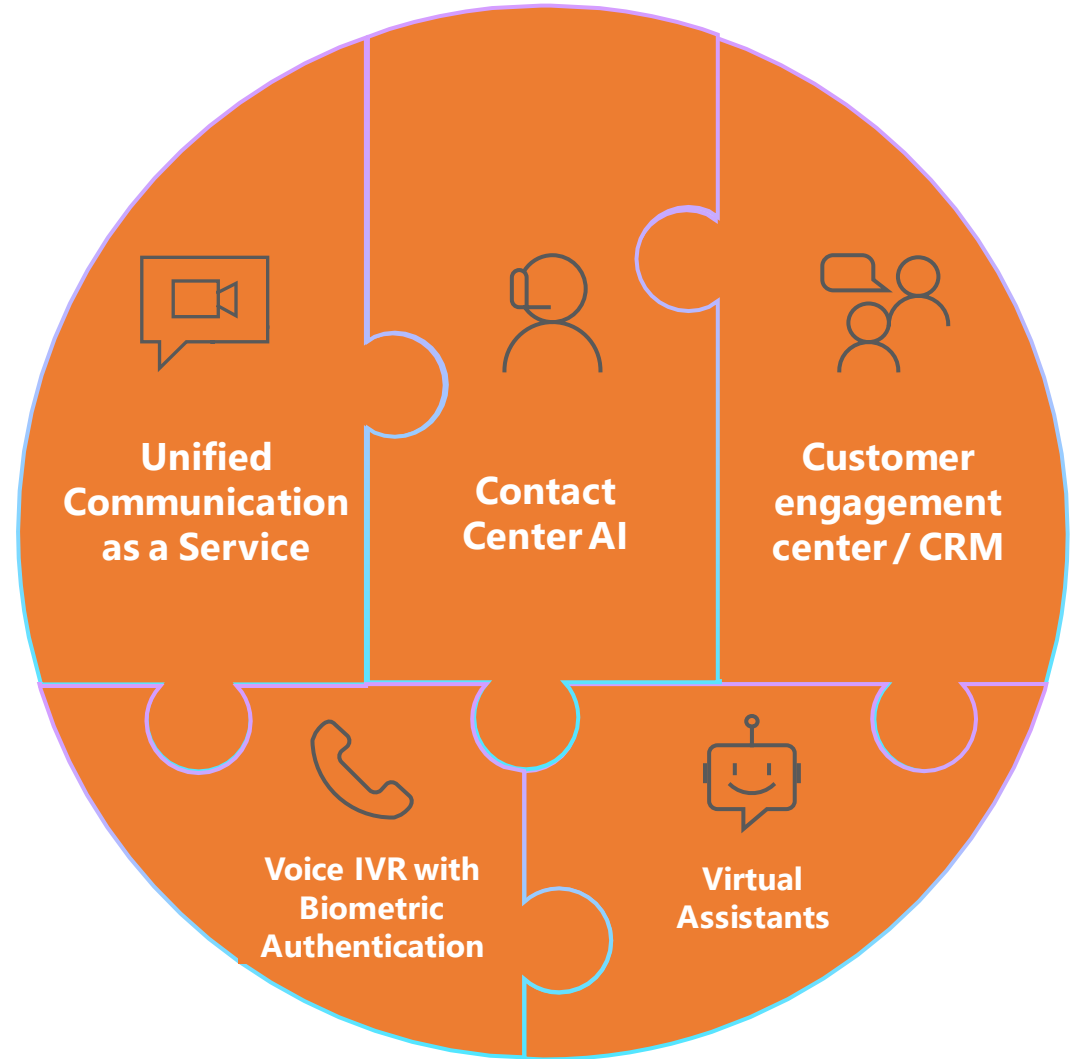
Personalizes your member's journey

Empower your care teams with fast, effective support

Proactively engage with your members, with next best recommendations

With AI and a 360-view of your members you can create a frictionless member experiences

Paving the way for contact center transformation with Cloud and AI technology



Questions?

Visit Nuance at Booth #404 at the RISE Medicare Marketing Sales Summit

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THANK YOU



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