Customer Service Center Updates

Juli Baker Chief Technology Officer

California Health Benefit Exchange Board Meeting February 26, 2013



Agenda

- 1. Customer Service Principles for the Consumer Experience
- 2. Service Center Assessment and Transfer Principles
- 3. General Operating Parameters
- Stakeholder Input and Clarifications from January 31st Webinar
- 5. Changes to Protocols Under Consideration
 - 1. Protocol 1D: Interagency Agreements Necessary for Service Center Warm Handoff to Counties
 - County Readiness Timeline
 - 2. Protocol 1E: Warm Handoff



Customer Service Center Principles for the Consumer Experience

- 1. Provide a first-class consumer experience
- 2. Accessible, user-friendly web-site and forms that are easy to use/navigate
- 3. Culturally and linguistically appropriate communication channels
- 4. Protect customer privacy and security of their data
- 5. Demonstrate public services at their best
- 6. One touch and done
- 7. Provide clear, accurate, responsive information tailored to the consumers needs



Service Center Assessment and Transfer Principles

- 1. Conduct assessment, eligibility review and enrollment in a seamless manner for all consumers
- 2. Transfer consumers who are potentially MAGI Medi-Cal and non-MAGI Medi-Cal eligible to their County/Consortium as quickly and seamlessly as possible, after the minimal amount of inquiry and/or data collection
- 3. Maximize the accuracy of each call and enrollment handled by the Service Center in order to have the fewest possible Exchange eligible individuals referred to Counties, and the fewest possible MAGI Medi-Cal individuals served by Service Center
- 4. Minimize the duplication of work and effort
- 5. Continuous improvement of protocols based on metrics to determine timeliness, accuracy and precision of referrals and service
- 6. The Exchange, the Department of Health Care Services (DHCS), and other State partners will meet the obligations for which they are responsible under the Affordable Care Act, other federal and state eligibility requirements and state law.



General Operating Parameters

- 1. CalHEERS will determine eligibility and facilitate plan enrollment for consumers (Medi-Cal and Exchange)
- 2. Counties handle walk-in customers, including Exchange and County programs
- 3. Drive to completion of enrollment from any point of entry into the system
- 4. Minimize "bouncing" the customer back an forth use one warm handoff at most
- 5. Ongoing cases handled at the "agency of record" (e.g., Medi-Cal handled by counties; Exchange by Central Service Center)



Stakeholder Input from January 31st Webinar

- Held Service Center Update Webinar Over 287 participants
- Comments during and after the webinar:
 - Provide protocols for paper applications, in-person service by counties and on-line applications via SAWS
 - Enter all information provided by callers to the Service Center, including that given during any "quick sort process," into CALHEERS
 - Establish as a protocol that the same performance standards will be applied equally to all callers, regardless of impairment or language spoken and regardless of whether their call is handled by the Service Center or a county or consortium of counties.
 - Ensure consistency of service standards between Counties and Covered California
 - "Consumer test" the words on the "Smart Calculator" for the phone based Quick Sort process
 - o Define "Warm Handoff"
 - Develop methods to track County readiness and measure performance in taking warm handoffs



Clarify Factors Based on Stakeholder Input

Definition of "Service Level" Expectations

 The Customer Service Center Service Level - such as the percentage of calls answered within a certain amount of time (e.g., 30 seconds) - will be developed in a consultative process in the coming months, involving Counties, Union Representatives, Service Center workers, and other stakeholders. The same Service Levels will apply to Covered CA's Service Center and in the Counties, across all calls that are transferred to the Counties by Covered CA. The Service Level will be included in agreements with Counties. Monitoring will be continuous.

Definition of "Warm Handoff"

 A "warm hand-off" means that the transferring representative at the Service Center stays on the line with the customer and introduces him or her to the County representative. This applies to all callers, including Limited English Proficient (LEP) and hearing or visually impaired callers.



Note: Covered California is working with the Administration and Counties to determine the extent to which transfers from the Quick Sort would be "warm" versus placed in queue for County workers - refer to Protocol 1D)

Protocols Under Consideration

Protocol

- 1. Quick Sort Process for Workload Management
 - 1.A : Quick Sort Process for Workload Management
 - 1.B: "Quick Sort" Sample
 - 1.C: Transfer Protocols for Exchange Delegation to Counties
 - 1.D: Interagency Agreements Necessary for Service Center Warm Handoffs to Counties
 - 1.E: Warm Handoff Protocol
 - 1.F: Full Assessment and Data Transfer
- 2. Multi-Program Families
- 3. Completing Paper Applications with Missing Information
- 4. Completing Applications Needing Further Verifications
- 5. Process to Serve Limited English Proficient Consumers
- 6. Process to Serve Hearing Impaired Customers



Note: Protocols 1-A-D; and 2-6 are the same as posted on January 17th, 2013 and presented on January 31st.

Protocol 1.D: Interagency Agreements Necessary for Service Center Warm Handoffs to Counties

Demonstrated operational readiness prior to launch

- 1. Functioning and tested phone system and IT Infrastructure
 - a. Working with County/Consortia to develop the technology, including the testing plan
- 2. Staffing capacity to meet anticipated demand
 - a. CWDA working with Administration and Covered California to determine the number of staff needed to meet capacity at County call centers for warm handoffs
- 3. Completed staff training
 - a. Counties/CWDA are developing training with Administration/Covered California and will report completion progress

Develop Memo of Understanding (MOU) with Counties/Consortia

- 1. Covered California with Department of Health Care Services (DHCS)
- 2. Covered California with DHCS and Consortia participating in Warm Handoff

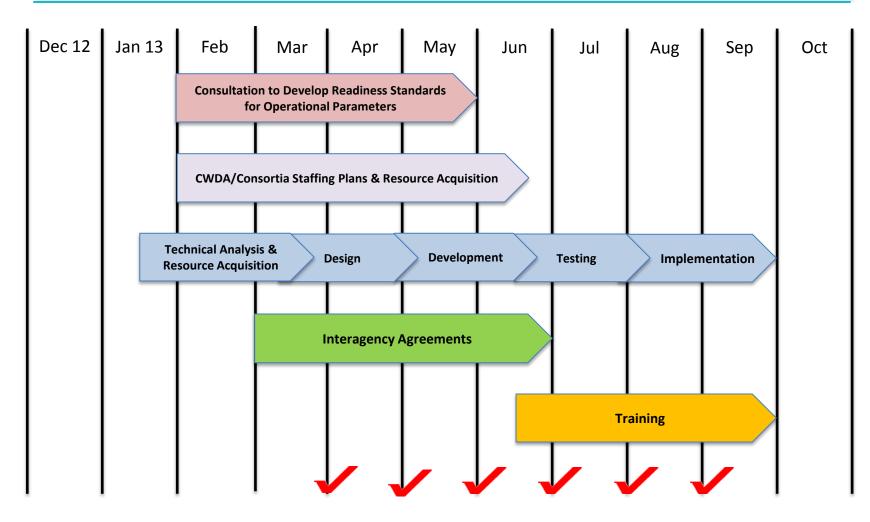
Operational parameters to be included in Agreements

- 1. Answer calls within same Service Level as Covered California (e.g., 80% within 30 seconds)
- 2. Calls sorted to the county will be tracked for reporting to Covered California as to disposition of the call (abandoned, determined eligible, enrolled, etc.)
- 3. Calls sorted to the Counties are handled by County Workers trained to do eligibility and enrollment of both Medi-Cal and Covered California eligible individuals.

Development of terms of Covered California/County operational parameters shall be determined by Covered California and the Department of Health Care Services after engaging in a consultation process with Counties, unions representing service workers, and other stakeholders.



County Readiness Timeline



Note: At each checkpoint we monitor progress, with continuous monitoring once agreements are in place



Protocol 1.E: Warm Handoff Protocol

The Service Center Representative (SCR) determines that a Caller should be transferred to a County based on results of Quick Sort. SCRs will have a series of protocols to use, depending on the dynamic nature of the daily, weekly, and monthly call volumes.

Metrics on call response times will be dynamically analyzed, providing continuous management of the SCR responses.

Protocol Steps	Response
Warm Handoff	When Quick Sort indicates, the SCR transfers the customer and remains on the line with customer (e.g., 30 seconds) to speak in person to a County representative (i.e., Warm Transfer).
OR Transfer using the Covered CA Protocols	 The SCR transfers the customer who will have the following types of options*: Caller waits for County response (with regular messages on wait time and other options). Examples: a. Provide the contact number for a call-back from the County b. Provide the County phone number and note when call volumes are likely to be lower c. Apply on line, as a self-service (directing clients to the web) or to find a local Certified Assister
Performance Review	Continue this review process in collaboration with the Administration and Counties, to determine efficacy of process. For instance, if one Consortia or County is not meeting standards, arrange for another Consortia to handle calls until performance is met.

Notes: Additional assessment is needed to determine system capabilities.

*Options are under discussion in collaboration with the Administration and Counties.

SLA of 30 seconds may be adjusted over time to match any changes in Exchange Service Center standards

