

# CUSTOMER SERVICE CASE STUDY



SENSENTIA

How many  
physical therapy  
visits?

Is my son covered  
for glasses?

VOB 74178?

How much will I  
pay for an MRI?

Do I need an auth  
for a wheelchair?

**50+%**

of all calls  
require researching benefits

Our Benefit Access AI  
supports health insurance call centers  
to answer benefit inquiries with:

**ACCURATE RESULTS.  
IN REAL TIME.  
ACROSS MULTIPLE CHANNELS.**

Using Artificial  
Intelligence to  
Improve the Member  
Experience.

Sensentia unlocks  
and simplifies  
access to healthcare  
information.

## CHALLENGE



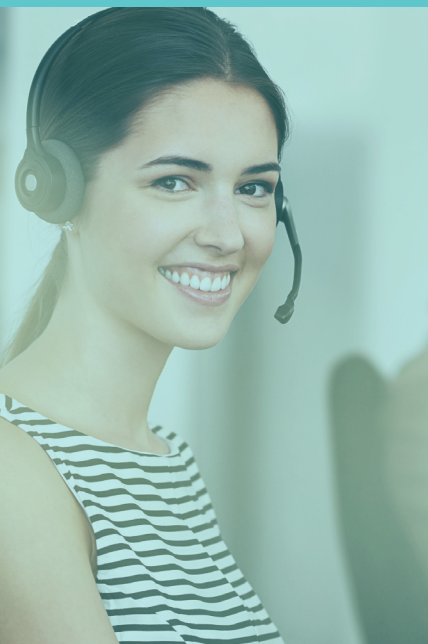
With 25% of all calls from members being benefit-related inquiries, this inefficiency translates to a significant amount of time and resources.

Every benefit inquiry through the customer service representative (CSR) is both time and labor intensive. The member may not receive complete, accurate information.

The challenges for a CSR include:

- 01 Understanding which service the caller is asking about.** If the service is described by a CPT code, the CSR needs to look up the description of the code.
- 02 Identifying the applicable benefit relating to the service.** For example, an MRI may be found within the Advanced Imaging benefit. A wheelchair may be covered by a DME, Home Care or Hospice benefit. For pharmacy products, this means finding the correct benefit tier in the formulary.
- 03 Manually searching for all of the benefit details.** This often includes sifting through the benefit hierarchy, across multiple systems, or even through the dense printed policy.
- 04 Understanding the full benefit picture.** Each CSR must be able to assemble and communicate the entire benefit "picture" which is difficult if the benefit is not described in a consistent manner or is spread across multiple systems.
- 05 Communicating the benefit in a compliant manner** even when the benefit information is not presented as such.
- 06 Significant and ongoing training required** to become a proficient Customer Service Representative.

## SOLUTION



**One system for all benefits. Instant answers with pristine accuracy.**

Sensentia's Benefit Access AI is an automated reasoning approach to AI. Instead of using a big-data, machine-learning approach, we model the knowledge in the source material we need using natural language processing. The proprietary knowledge models we create can then answer inquiries for which we hold the answer.

The CSR simply enters the service using natural language, clinical terminology, abbreviations, acronyms, or CPT codes.

Sensentia finds all of the benefits related to the service and presents the information in an easy to digest form that is ready to be read back to the caller.

### Key features:

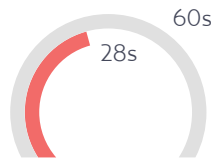
- › Multi-lingual system with language selection capability for every inquiry.
- › Simplified system reduces CSR training time and onboarding.
- › Benefit information is extracted from the PDF version of the Evidence of Coverage (EOC) documents to reduce startup costs.
- › Cloud hosted and integrated with our client's call center desktop through an API.
- › Fully HIPAA compliant without any PII or PHI requirement at this time.

## RESULTS

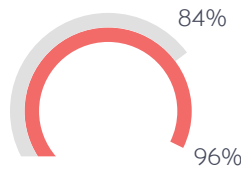
Sensentia's Benefit Access AI was deployed in the call centers of a Fortune 100 Health Insurance client in 2016. To measure the efficacy of the product, a range of studies were conducted across a variety of plans offered by the company (including ACA, small and large group, Medicare and Medicaid).

At the conclusion of these studies, Sensentia achieved the following results:

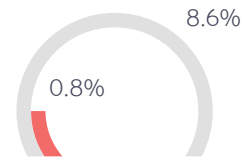
- › Cut benefit research time by 52%.
- › Eliminated escalations of benefit inquiries from 8.6% to 0.8%.
- › Improved accuracy of benefit information from 84% to 96%.
- › Raised answer consistency from 80% to 89%.
- › Overall satisfaction rating of 96% from CSRs.



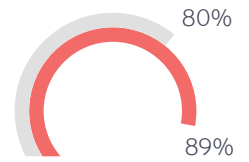
Research Time  
CUT BY 52%



Accuracy  
ROSE TO 96%



OE Escalations  
ELIMINATED



Consistency between CSRs  
ROSE TO 89%

Our client observed the following significant improvements:

- › Average Handle Time (AHT) was improved due to the reduction in the time it took for CSRs to research the benefits.
- › First Call Resolution (FCR) rates were improved by eliminating escalations, and improving accuracy and consistency.
- › Redirection rates were reduced. The CSRs could handle calls from a broader geographic area and different plan types as the benefit information was presented in a consistent manner.
- › Training Requirements were reduced due to the simplicity of the system. New CSRs saw the best improvements.
- › Quality Scores were improved overall.

## WHAT'S NEXT?

The possibilities are endless. Our tool is multifunctional.

Our Benefit Access AI system can be repurposed in other tools for our clients:

- › Self-service tools to answer questions directly from Members & Providers.
- › Ability to use across various technology channels such as web, mobile, IVR, chat, SMS, email, voice, etc.
- › Comparison tools for sales agents or in health care exchanges.

We look forward to simplifying your healthcare.

## CUSTOMER SERVICE CASE STUDY

### Feedback from our customers:

"Sensentia is an awesome tool. It will reduce Average Handle Time, Errors, Hold Time and elevate our First Call Resolutions and the level of confidence instilled by each CSR in our members."

"Wow! This is AWESOME! I'm not going back to the floor without it. Sign me up!"

"We have seen a lot of systems that were meant to help us but none of them took into consideration the whole picture. We have to meet our numbers. This is the first system I like."

