Technology Helps Consumers, Health Plans Navigate Medicare More Effectively

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More established and new Medicare members are using personal technology for convenience in their everyday lives. Health plans that embrace technology solutions can make the Medicare experience more streamlined for members and their sales agents, as well as boost member retention and Star Ratings. SmartBrief spoke with Grant Hoffman, executive vice president of ConnectureDRX, to find out more about how his company is helping to improve the Medicare experience for everyone involved.

What are some current trends in Medicare technology that health plans should be aware of to best serve their members?

Health plans are digitally engaging Medicare entrants and their existing retiree members with best-fit plan recommendations. Although plan switching may not have risen this past year, a growing percentage of seniors are doing research and shopping for plans online.

Our surveys indicate that age-ins and younger seniors are increasingly reporting more comfort with technology tools to help them navigate the Medicare landscape. The introduction of supplemental benefits under Medicare Advantage plans and the proliferation of special needs plans is driving more choice and complexity in the member decision support process.

We are also seeing an uptick in health plan investment in capabilities that improve drug price transparency, member experience and customer satisfaction. Health plans are using technology to boost Star Ratings and increase member retention. Health plans are also working to make their sales and distribution processes more efficient by leveraging digital networks that link them with their field marketing organizations and agency partners in a more cost-effective way.

What software solutions can health plans employ to help members find the best Medicare plan fit for them?

It is important to select member acquisition and engagement solutions that take into account personalized factors beyond the monthly premium.

Technology tools need to be sophisticated enough to account for member needs, such as interest in supplemental benefits and special need plan eligibility, and they need to be able to handle the prescription history and provider preferences of an individual.

A best-fit plan match involves cross-selling and recommending the right solution across the spectrum of commercial Medicare Advantage Prescription Drug and Medicare Supplement plans, and accurately calculating drug costs each time. This must be accomplished while keeping interactions with the member or prospect efficient, especially during the annual coverage election period, when trained specialists' time is at a premium. Plan- and formulary-aware drug coverage and price transparency tools are critical to implement as part of this effort — within and outside of the shopping, enrollment and retention process.

In addition to best-fit plan technology that helps consumers select an optimal plan, health plans need to replicate that same decision support technology and put it in the hands of their distribution teams. They need to provide software solutions that support omnichannel distribution, regardless of whether it is for a health plan's inside sales team, telesales, field agents or retail locations. The solutions need to be flexible and provide tools that their selling partners want to use. Health plans can also reduce paper enrollments, which are still a big part of Medicare distribution. Providing agents with tools such as text-to-enroll or scope-of-appointment that allow them greater efficiency can encourage digital adoption.

How do these solutions improve member experience and retention and help health plans boost their Star Ratings?

It's important for health plans to engage members who struggle in some areas that the Consumer Assessment of Healthcare Providers and Systems survey measures, because their perceptions of service and care and the member experience will be tied to Star Ratings more than ever.

We also know from our data and experience that a disconnect between an individual's prescription list

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and plan coverage spells trouble. ConnectureDRX's tools proactively identify opportunities for member cost savings and propose cheaper therapeutic alternatives down to the level of pharmacy location — all in the context of current plan or plans under consideration. We use actual costs based on health plans' formulary and pricing files specific to the plan.

Seniors disenroll rapidly or switch plans when they encounter a coverage issue, experience provider network disruption or struggle with growing out-of-pocket medical costs. ConnectureDRX also personalizes the retention process, making it easy for members to re-enroll by leveraging the data already developed during the initial customer acquisition and engagement process.

CMS regulations require drug pricing transparency in 2023. How can your solutions help health plans ensure regulatory compliance?

Earlier this year, the CMS published a final rule that includes providing a real-time benefit tool for drug price transparency to plan members and call center agents who assist them by Jan. 1, 2023. Today, ConnectureDRX provides a member Medicare DrugCompare product to health plans that call centers and members use to search formularies, find best pharmacy pricing and view lower-cost therapeutic alternatives. It is updated biweekly and specific to their plans. We are engaged with service partners to move from biweekly pricing to real-time pricing well ahead of the CMS deadline.

What types of data and analytics can help health plans develop member engagement strategies from acquisition through retention?

Nurturing leads and members is a multistep strategy leveraging a combination of digital and human touch points. A data-aware strategy allows health plans to segment outreach and execute it through an omnichannel platform. A best-fit plan analysis is a best practice for existing membership and new member enrollment. Age-in strategies are driven by a best-fit plan analysis as well, bridging the data gap between the under-65 group and retirees.
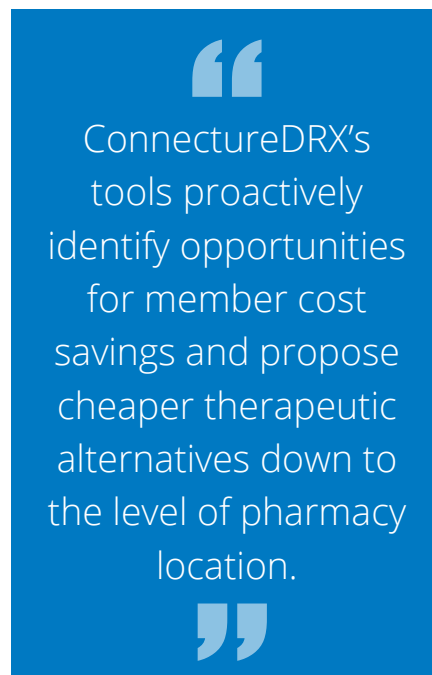
Member needs change, and the plan portfolio for a given year also changes. So, refreshing this analysis requires a common foundation that includes providers, member data, accurate drug information, drug pricing alternatives, and consumer shopping and enrollment preferences.

Health plans also continuously work to engage their members throughout the year to drive healthier outcomes. Part of this is leveraging members' prescription claims to identify potential cost-saving alternatives — not just generics, but therapeutic equivalents. This allows health plans to develop proactive member engagement campaigns to present potential savings and promote medication adherence.

ConnectureDRX is known as the Cadillac of Medicare shopping, quoting and enrollment. How else do you support your health plan customers, and why is this important?

While our core competency is shopping and enrollment, we have 20 years of experience providing drug transparency to Medicare and commercial members beyond initial plan enrollment. We understand the Medicare Marketing Guidelines and build solutions that respond to a changing regulatory environment. ConnectureDRX has the most accurate pricing data sourced directly from — and with the help of — health plans. We work with health plans to deliver a unique member experience for their customer base while bringing the economic benefits and expertise of a software as a service business. We offer an unparalleled distribution network, reducing the costs of third-party distribution through streamlined data integration and permission management.

We support health plan customers throughout their member journey. Our solutions go beyond initial acquisition and lead them to a more positive member experience, which results in higher member retention and better Star Ratings.

As a more tech-savvy population ages into Medicare and begins shopping for plans, how are health plans adapting to different consumer shopping preferences?

Seniors are increasingly using personal technology and applying those same preferences to Medicare plan shopping and drug research activities. Studies have shown that more Medicare consumers are researching plans on their own — and even enrolling without agent assistance.

These trends are also mirrored in the agent community, with increasing utilization of technology to engage seniors and help them with plan decisions. Health plans need to acknowledge this shift and ensure they have solutions to engage members and agents. These can include mobile-first solutions, text workflow for quoting and enrollments, and omnichannel outreach and support. ■

Grant Hoffman *is executive vice president of ConnectureDRX. He is a Medicare technology industry expert with extensive experience in drug pricing transparency, population health analytics and insurance SaaS platforms.*

ABOUT CONNECTUREDRX

ConnectureDRX offers the most widely adopted Medicare shopping, quoting and enrollment solution, providing millions of customers every year with a simple digital experience for finding their best-fit plans. With gold-standard drug pricing, ConnectureDRX arms customers with reliable and time-tested out-of-pocket estimates to support better decision-making. ConnectureDRX's multichannel automation serves customers, carriers, brokers and call centers navigating Medicare complexities, improving member satisfaction and retention.

ConnectureDRX has been delivering compliant solutions for 20 years. Supporting nine of the 10 U.S. health insurance carriers, 55 national and regional FMOs and more than 5,600 plans on our platform, ConnectureDRX processed nearly 1 million Medicare enrollment applications in the past year. Our regular consumer market surveys from nearly 20,000 respondents affords unique insights on consumer shopping and enrollment behavior, driving innovation in research and development.

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