

**MNsure**  
***Health Industry***  
***Advisory Committee (HIAC)***

# **MNsure Board Reporting Metrics**

*The Health Insurance Advisory Committee (HIAC) was established by the MNsure Board under authority of Minn. Stat. § 62V.04, subd. 13(a).*

*The HIAC “will provide appropriate and relevant advice and counsel on MNsure’s duties and operations and other related issues for the benefit of the Board.”*

**October 30, 2017**

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### ***HIAC Members***

**Jonathan Watson** is the committee chair. He resides in the Twin Cities and is public policy director at the Minnesota Association of Community Health Centers.

**Ghita Worcester** is the committee vice chair. She resides in the Twin Cities and is the senior vice president for public affairs and the chief marketing officer at UCare.

**Kenneth Bence** resides in the Twin Cities and brings over 25 years of experience working in public and community health in Minnesota.

**Kyle Bozentko** resides in the Twin Cities and is the executive director of the Jefferson Center.

**David Dziuk** resides in the Twin Cities and is senior vice president and chief financial officer at HealthPartners, Inc.

**Forrest Flint** resides in the Twin Cities and is vice president of strategy and innovation at Delta Dental of Minnesota.

**Carl Floren** resides in the Twin Cities and is a retired software professional.

**Thomas Hoffman** resides in the Twin Cities and is a General Manager for Prime Therapeutics, a pharmacy benefit manager for Blue Cross Blue Shield Minnesota and other health plans across the country.

**Hillary Hume** resides in the Twin Cities and is a clinical operations director with KEPRO.

**Harlan Johnson** resides in Greater Minnesota and is an insurance broker at Harlan V. Johnson Agency, Inc. He is a small business owner and an employer. Harlan serves on the board of directors for the Minnesota Association of Health Underwriters.

**Andy McCoy** resides in the Twin Cities and is the vice president of revenue management for Fairview Health Services.

**Heidi Michaels Mathson** resides in the Twin Cities and is a health insurance broker at Dyste Williams.

**Daniel Miesle** resides in rural Minnesota and works as a health care facility consultant.

**Reuben Moore** resides in Greater Minnesota and is the vice chair of global solutions at Mayo Clinic.

**Chris Rofidal** resides in the Twin Cities and is a market access director for Pierre Fabre Pharmaceuticals.

**Charles Sawyer** resides in the Twin Cities and is a chiropractor as well as senior vice president at Northwestern Health Sciences University.

**Bette Zerwas** resides in rural Minnesota and is the government payer program specialist at North Memorial Health.

## ***Executive Summary***

The HIAC discussed MNSure reporting metrics for the “Customer Service Dashboard” at its September 28<sup>th</sup> meeting. The HIAC finalized this recommendation at the October 30, 2017 meeting. The recommendation consists of three areas to give the MNSure Board greater insight into the performance of MNSure for both consumers and assisters.

### **#1 - Modifications of Existing Metrics**

The MNSure HIAC recommends that ***MNSure modify the existing metrics on the “Customer Service” Dashboard.***

- The **AVERAGE SPEED OF ANSWER** should be modified from the existing benchmark of “5 minutes or less” to “30 seconds or less.”
- The modified **AVERAGE SPEED OF ANSWER** should be benchmarked against a goal 80%; and
- The **CALLS ABANDONED WHILE IN QUEUE** should be benchmarked against a goal of 5%<sup>1</sup>.

### **#2 – Additional Metrics**

The MNSure Health Industry Advisory Committee (HIAC) recommends that ***MNSure add the following metrics to the “Customer Service” Dashboard:***

- First call resolution percent with a goal of 90%
- Total Call Time
- Overall “cost-per-call”
- Time from beginning of Interactive Voice Response (IVR) to “live person” with a GOAL of 120 seconds
- Percent of Calls that “Drop” during IVR
- Percent of Calls that “Drop” Post-IVR, Pre-Live Person (During “Hold Time”)
- Total Time in IVR

The MNSure HIAC recommends ***that MNSure metrics should be reported separately for Consumers and Assisters.*** Currently, the reported metrics combine these two groups.

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<sup>1</sup> Corporate Standards of a URAC Accredited UM/CM/DM national medical management organization.

### #3 – Other Recommendations

The MNSure HIAC *recommends that MNSure report metrics on a weekly basis during open enrollment periods.*

The MNSure HIAC *recommends that MNSure compare all the above metrics to a year-to-date average.*

The HIAC vote was unanimous with 15 of the 15 HIAC members present voting to support the recommendations.

### **Issue Statement**

The MNSure Board receives information related to MNSure’s customer service through a dashboard presented at each Board meeting. The “Customer Service Dashboard” provides insight to the performance of MNSure’s call center.

The information can identify areas for improvement (“gaps”), refining the metrics and adding metrics will give the MNSure Board greater insight as to the customer service performance of MNSure. With this insight, the MNSure Board and staff can determine if there are technical components that need to be improved, improved internal processes, or additional staffing needs.

### **Background**

As part of every MNSure Board meeting, a “Customer Service Dashboard” presents the eight-specific metrics for a set period (typically the previous month prior to the MNSure Board meeting). The metrics are summarized on Table 1.

**Table 1 | MNSure Reporting Metrics, Customer Service Dashboard**

<b>Area</b>	<b>Metrics</b>
Contact Center	1. Call Volume 2. Service Level (% of calls answered in 5 minutes or less) 3. Average Speed of Answer 4. Calls Abandoned while in the Queue
Top Contact Center Inquires	5. All Callers 6. Assister Resource Center (ARC)
Trend (From Beginning of Open Enrollment)	7. Call Volume 8. Service Level

The HIAC evaluated the customer service metrics publicly available for the 16 state-based marketplaces (SBM). The purpose of this evaluation is to assess what metrics are reported in other states that MNSure does not report.

Below are various customer services dashboards from California, Colorado and Washington.

**California**<sup>2</sup>

## SERVICE CENTER PERFORMANCE UPDATE\*

### September 2017 Call Statistics

	Calls to IVR	Calls Offered to SCR	Abandoned %	Calls Handled	ASA	AHT	Service Level %
<b>Totals</b>	260,563	146,711	2.13%	136,440	0:00:21	0:16:22	83.33%

*Does not include outbound, SHOP, or internal consults*

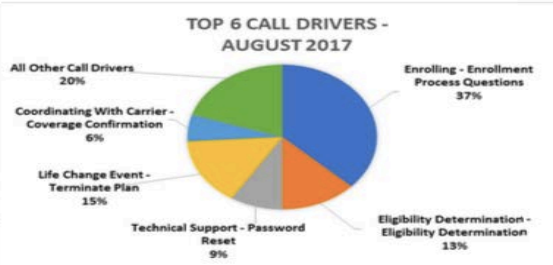
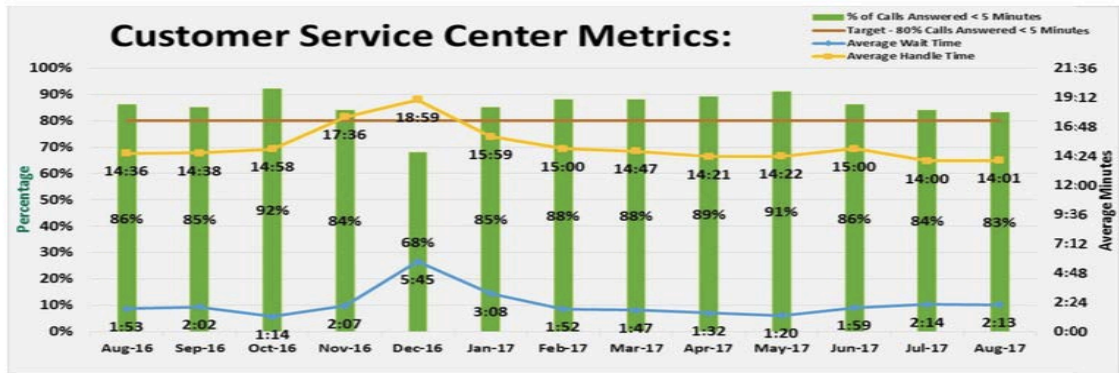
Top 5 Call Dispositions
1. Individual · Current Customer · Application/Case Status · Inquiry/Assistance
2. Individual · New Enrollment · Inquiry/Assistance — New Enrollment
3. Individual · Current Customer · Disenrollment/Termination · Requesting to be Terminated
4. Individual · Medi-Cal · Provided County/Contact Number Information
5. Individual · Medi-Cal · Medi-Cal/Enrollment Inquiries

*\*Performance metrics are measured monthly.*



<sup>2</sup> Covered California, October 5, 2017 Board Meeting, Executive Director’s Report, [http://board.coveredca.com/meetings/2017/10-05/PPT-Board\\_ED\\_Report-Oct\\_2017-7.pdf](http://board.coveredca.com/meetings/2017/10-05/PPT-Board_ED_Report-Oct_2017-7.pdf)

**Colorado<sup>3</sup>**



**Washington<sup>4</sup>**

## Customer Service

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Metric	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17
Volume of Calls Received	79,560	65,299	65,046	63,936	60,092	65,973
Average Wait Time for Calls (min:sec)	2:49	3:48	1:48	1:39	2:11	2:17
Calls Meeting Service Level (Target - 80%)	88.72%	81.06%	91.08%	93.16%	82.09%	82.41%
Abandonment Rate	1.18%	2.40%	0.78%	0.72%	1.57%	1.47%
Interactions:						
• QHP	20%	10%	9%	8%	8%	9%
• WAH	47%	28%	27%	29%	29%	27%
• Both	33%	62%	65%	62%	63%	64%

### Carrier Reconciliation

Month	Received	Resolved
Mar-17	1,728	742
Apr-17	1,137	740
May-17	1,285	1,119
Jun-17	1,463	1,302
Jul-17	1,574	1,177
Aug-17	1,112	977

### Customer Complaints - OIC / WAHBE Corporate Website

Month	OIC Received	WAHBE Received	OIC/WAHBE Closed	OIC/WAHBE Open
Mar-17	18	40	32	68
Apr-17	22	40	36	85
May-17	9	24	46	28
Jun-17	4	17	26	28
Jul-17	9	17	16	17
Aug-17	12	12	16	34

### Aug-2017 Customer Service Key Issues

Source	1	2	3
Corporate Website - Customer Complaints	Other	Enrollment	Payment/ Invoice
OIC - Customer Complaints	Enrollment	Payment/ Invoice	Eligibility/ Tax Credit
Corporate Website - Search*	Report Change	Sign In	Income

\*Of the 2,150 (2% of total visitors) who use the search function on the corporate website - key terms being searched.

<sup>3</sup> Connect for Health Colorado, Marketplace Dashboard, August, 2017, <https://www.dropbox.com/s/iygbv1e5utxjvxv/Screenshot%202017-10-05%2013.55.43.png?dl=0>

<sup>4</sup> Washington healthplanfinder, Executive Dashboard, September 2017, [https://www.wahbexchange.org/wp-content/uploads/2017/09/HBE\\_EB\\_Executive-Dashboard\\_170915-1.pdf](https://www.wahbexchange.org/wp-content/uploads/2017/09/HBE_EB_Executive-Dashboard_170915-1.pdf)

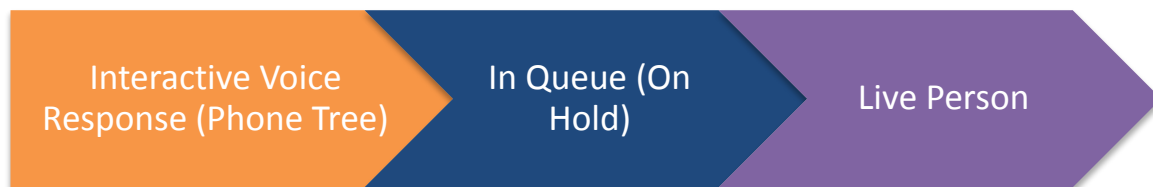
A summary of the common data elements for each state’s Customer Service Dashboard and MNSure’s reporting elements are on Table 2.

**Table 2 | Comparison of Customer Service Dashboard Metrics**

	Volume	% Abandoned	Avg. Speed of Answer	Avg. Hold Time	Service Level Measure	Average Handle Time
CA	✓	✓	✓		✓	✓
CO				✓	✓	✓
WA	✓	✓		✓	✓	
MN	✓	✓	✓		✓	

Based on a review of the publicly-available information in three other state-based marketplaces, it appears that MNSure is providing comparable data elements.

Customers and assister encounter three basic stages of phone contact with MNSure. They are summarized below:



**Key Definitions**

**Average Speed of Answer** – Amount of time that elapses between the final selection on the Interactive Voice Response (IVR) and conversation with MNSure staff persons begins.

**Calls Abandonment** – Consumer or Assister hangs up at any point during the process.



**Interactive Voice Response (IVR)** – Also known as a “phone tree,” where Consumer or Assister indicates through phone key pad what sort of assistance they are seeking.

**First Call Resolution Rate** – Percent of calls whereby the Consumer’s or Assister’s reason for calling MNSure has been resolved. (Consumer or Assister would answer affirmatively that MNSure staff “has resolved all the caller’s issues today.”)

**Total Call Time** – Length of the call measured from when the caller makes final selection on IVR to hanging up.

### **Discussion of “Industry Standards” and Goals**

This HIAC recommendation is a preliminary step in terms of improving MNSure’s overall performance for consumers and assisters. The recommendations contain performance goals or benchmarks that are “industry standards” in customer service areas of the health care marketplace. To the extent possible, these recommendations reference “Medicare Call Center Standards.”

The HIAC recognizes that the complexity of MNSure’s operations does not lend itself to a valid comparison versus customer service metrics in the marketplace. For example, MNSure consumers utilize Advanced Premium Tax Credits (APTC), whereas individuals purchasing “off-exchange” are likely to have incomes in excess of APTC eligibility.

Nonetheless, the HIAC recommends that MNSure strive to meet certain performance benchmarks in order to enroll as many consumers through the exchange as possible.

This recommendation does not, however, assess the cost of improving MNSure’s consumer/assister experience. Clearly, a move toward industry standards will need certain information technology and staff investments. The HIAC encourages MNSure to evaluate these metrics and with this information, invest in key areas of MNSure’s consumer/assister assistance.

## **Options**

The HIAC developed a list of metrics for the MNsure Customer Dashboard. The metrics can be divided into three categories: 1] modifications of existing metrics (including benchmarking to “industry standards;” and 2] addition of new metrics.

### **Modifications of Existing Metrics**

Current Measure	Additional Measures
Average Speed of Answer	1. Benchmark measure of an average speed of answer of 30 seconds or less. Goal is to achieve 80%.
Calls Abandoned while in Queue	2. Benchmark measure against industry standard of 5%

### **New Metrics**

3. First call resolution percent (with a goal of 90%)
4. Total Call Time
5. Overall “cost-per-call”
6. Time from beginning of IVR to “live person”
7. Percent of Calls that “Drop” during IVR
8. Percent of Calls that “Drop” Post-IVR, Pre-Live Person (During “Hold Time”)
9. Total Time in IVR

In addition to modifications to existing metrics and establishing new metrics, the HIAC considered two additional options:

10. Reporting the metrics on a weekly basis during open enrollment;
11. Providing a separate report on the above metrics for both consumers and assisters; and
12. Comparing all metrics against year-to-date averages.

## ***Recommendation***

- **The HIAC recommends to the MNsure Board that the Customer Service Dashboard: 1] modify existing metrics to compare to existing industry standards; 2] create additional metrics; and 3] provide separate reports on all metrics for consumers and assisters.**
- **The HIAC recommends maintaining the existing metrics that are reported to the Board such as Top Inquiries, Call Volume and Service Level trends.**

The following table provides an example of the proposed MNsure Dashboard.

Time Period Week of November 1-8		Consumer Service	Year To Date Avg.	Assister Service	Year to Date Avg.
<b>CALL VOLUME</b>		XX,XXX	XX,XXX	XX,XXX	XX,XXX
<b>AVERAGE SPEED OF ANSWER (Post Interactive Voice Response)</b>					
	Time	H:MM:SS	H:MM:SS	H:MM:SS	H:MM:SS
	Percent of Calls Answered in 30 seconds or less (GOAL: 80%)	XX.X%	XX.X%	XX.X%	XX.X%
<b>CALLS ABANDONED WHILE IN QUEUE</b>					
	Percent Abandoned	XX.X%	XX.X%	XX.X%	XX.X%
	Compared to Industry Standard of 5%	-XX.X%	-XX.X%	+XX.X%	+XX.X%
<b>FIRST CALL RESOLUTION</b>					
	Percent (GOAL: 90%)	XX.X%	XX.X%	XX.X%	XX.X%
<b>TOTAL CALL TIME (Post IVR to Hang Up)</b>					
	Time	H:MM:SS	H:MM:SS	H:MM:SS	H:MM:SS
<b>OVERALL COST-PER-CALL</b>					
	Cost	\$X.XX / call	\$X.XX / call	\$X.XX / call	\$X.XX / call
<b>INTERACTIVE VOICE RESPONSE (IVR) METRICS</b>					
	Beginning of IVR to "live" person (GOAL: 120 Seconds)	MM:SS	MM:SS	MM:SS	MM:SS
	Percent Drop Out During IVR	XX.X%	XX.X%	XX.X%	XX.X%
	Percent Drop Out Post-IVR, Pre-Live Person ("In Queue")	XX.X%	XX.X%	XX.XX%	XX.XX%
	Time in IVR	H:MM:SS	H:MM:SS	H:MM:SS	H:MM:SS
	Time Post-IVR, Pre-Live Person ("In Queue")	H:MM:SS	H:MM:SS	H:MM:SS	H:MM:SS

- **HIAC Members voting for the recommendations (15):** Jonathan Watson (Chair), Ghita Worcester (Vice-Chair), Kenneth Bence, David Dzuik, Forrest Flint, Carl Floren, Thomas Hoffman, Hillary Hume, Harlan Johnson, Andy McCoy, Heidi Michaels Mathson, Daniel Miesle, Reuben Moore, Chris Rofidal, Bette Zerwas
- **HIAC Members Not Present (2):** Kyle Bozentko, Chuck Sawyer