

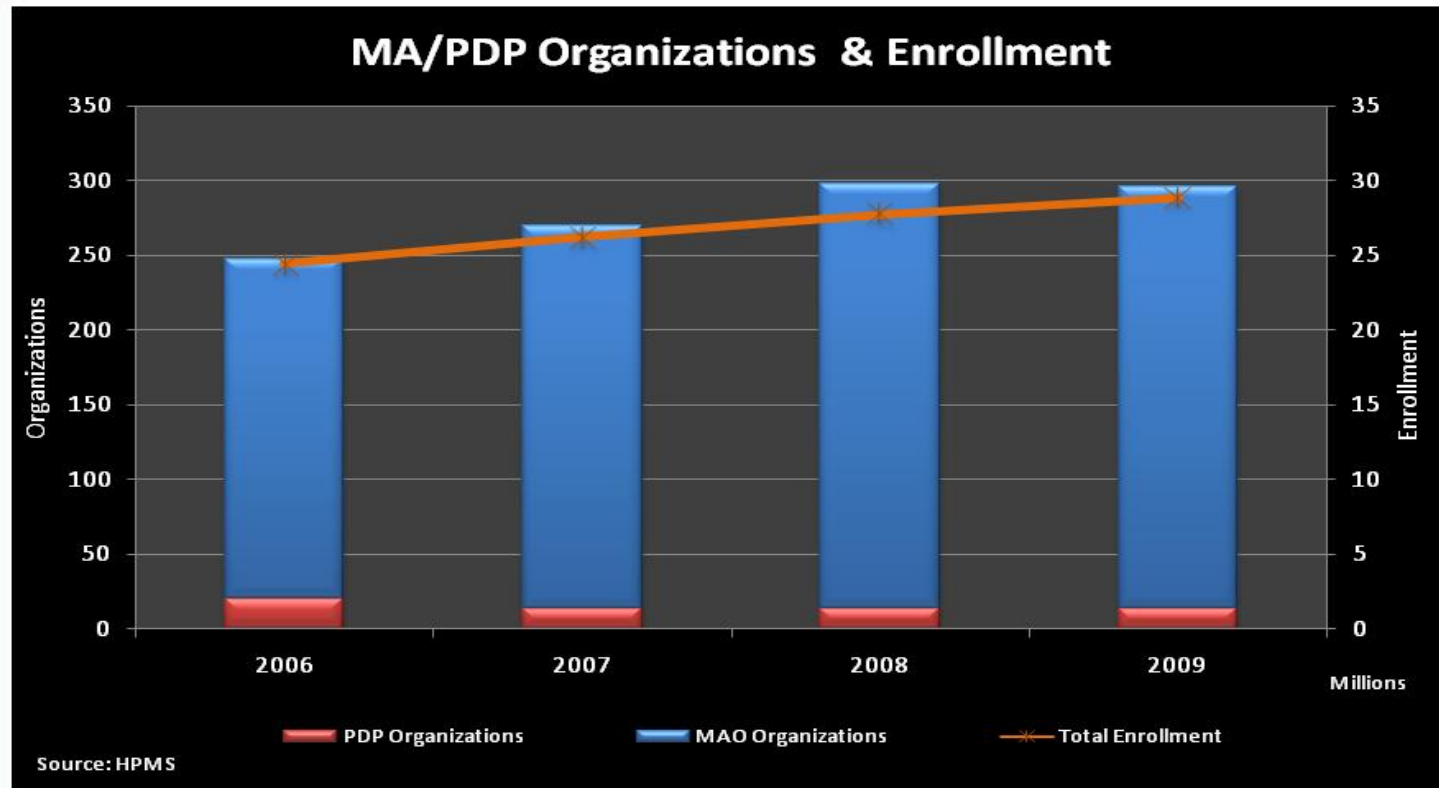
Customer Service and Casework Version 2.0

Tri-Regional Compliance Conference – Dallas, TX

Paul R. Collura, Technical Advisor
Consortium for Medicare Health Plans Operations
19 May 2010

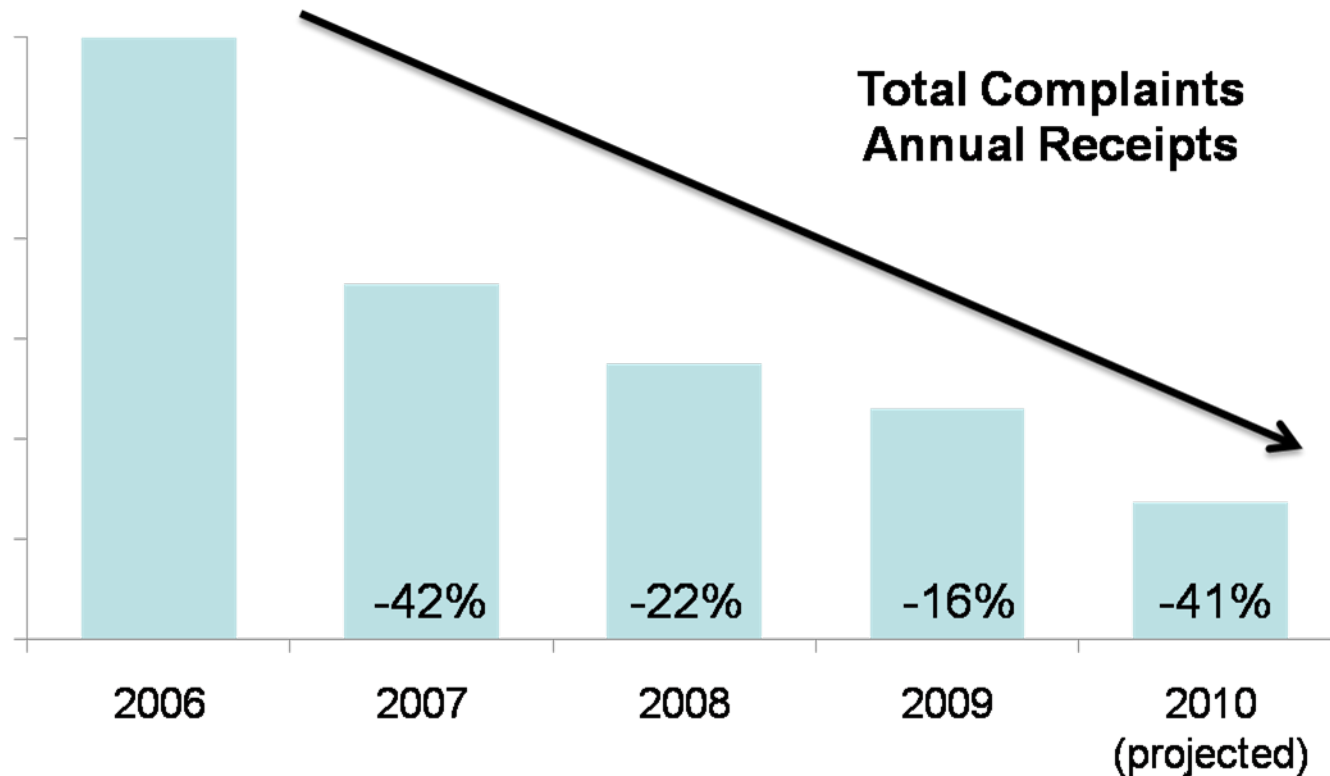
Evolution of Casework

Plan and Enrollment Growth



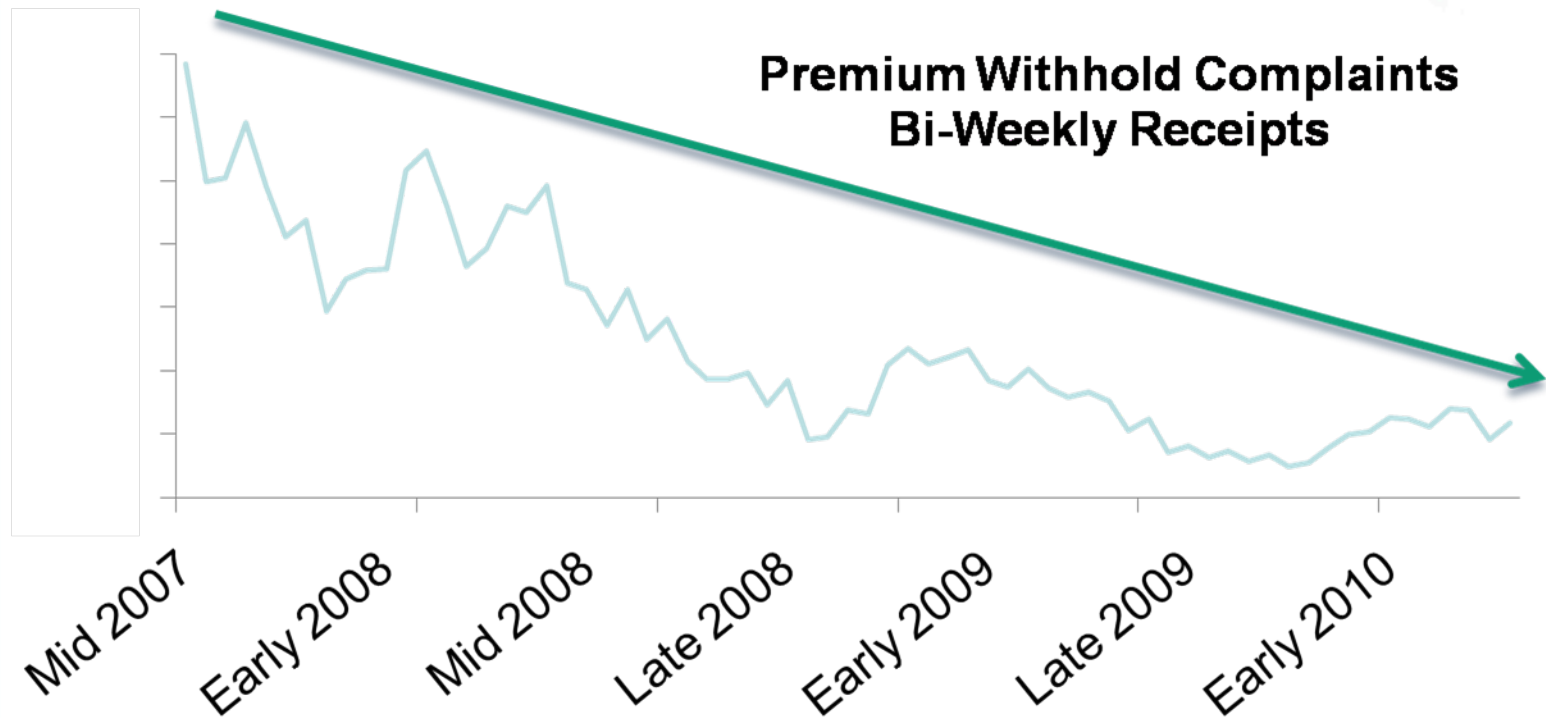
Evolution of Casework

Where have we been?



Evolution of Casework

Where have we been?



Evolution of Casework

Reasons for the decline

Enhanced Complaints Tracking Module (CTM)

- **2006** -- Limited CTM Functionality
 - No HICNs, No plan request capability and No plan closure of complaints
- **2010** -- Robust CTM Functionality
 - RPC indicators, improved extract capability, sorting and reports, viewing of all marketing complaints, and easier, quick identification of repeat complainants

Evolution of Casework

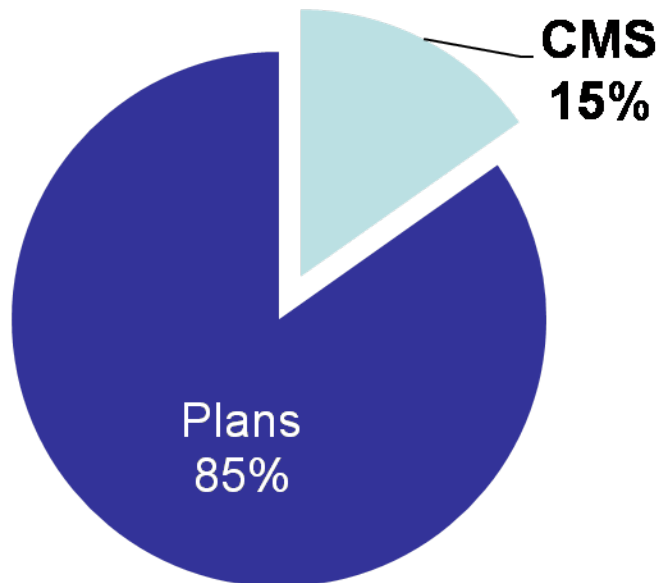
Reasons for the decline

- Increased beneficiary and partner familiarity and experience with the MA and Part D programs
 - Understanding election periods
- Systems improvements (i.e. premium withhold) and reconciliations
- 1-800 MEDICARE enhancements
- Fewer marketing misrepresentation allegations
- Improved Plan customer service and CTM resolution times

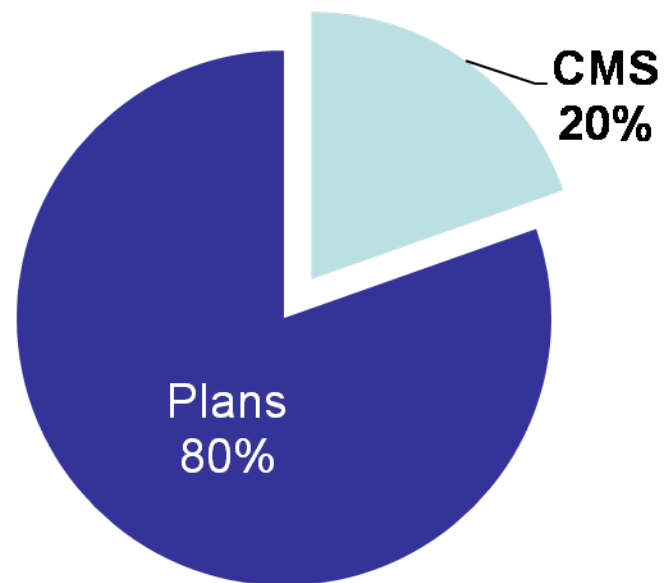
Current Casework Climate

Who is resolving the complaints?

2009 Complaints



Jan –Apr 2010 Complaints



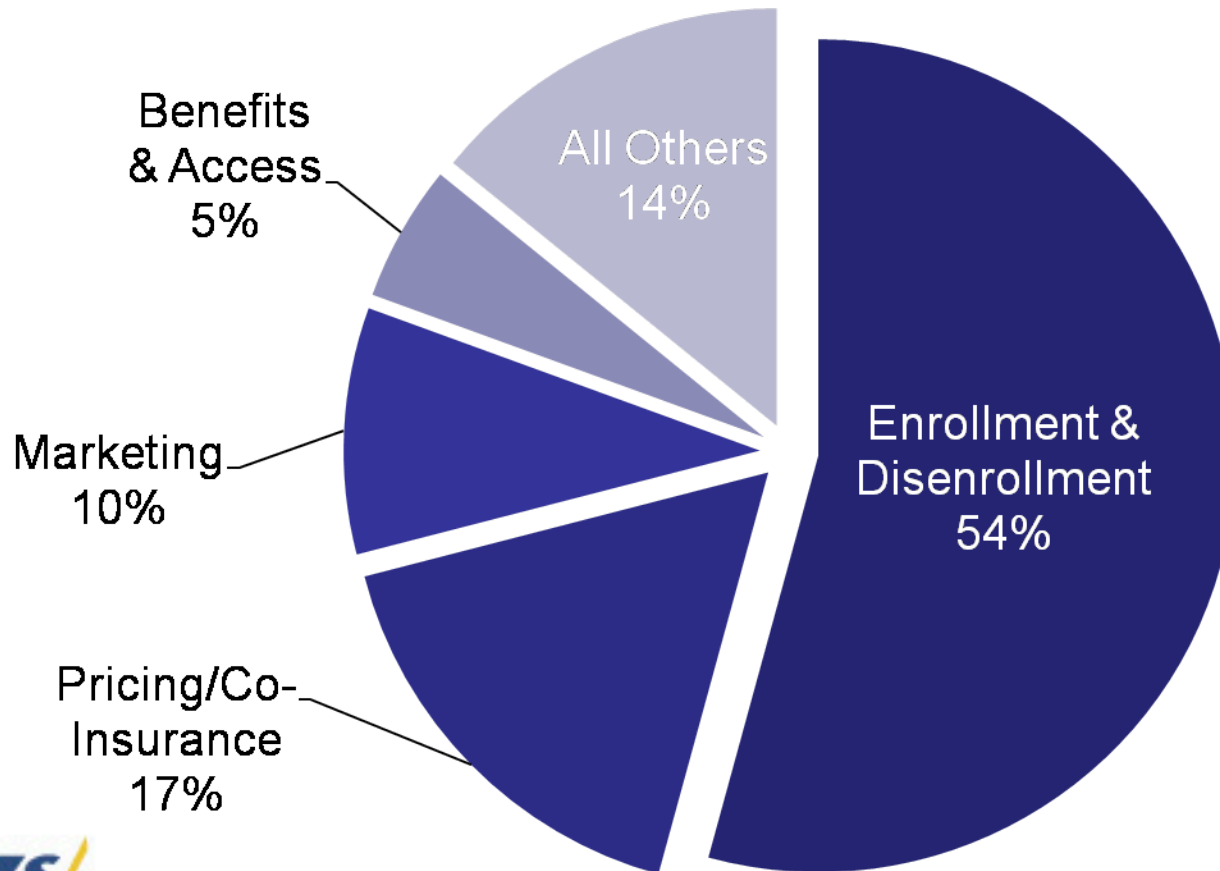
Current Casework Climate

How does today look compared to yesterday?

- **Emerging Kinds of Casework**
 - **2006 to 2008**
Access Issues, Premium Withhold, Marketing Misrepresentation, and Enrollment Issues
 - **2009 to 2010**
Access Issues, Best Available Evidence (BAE) Assistance, Late Enrollment Penalty (LEP), and Enrollment Issues

Current Casework Climate

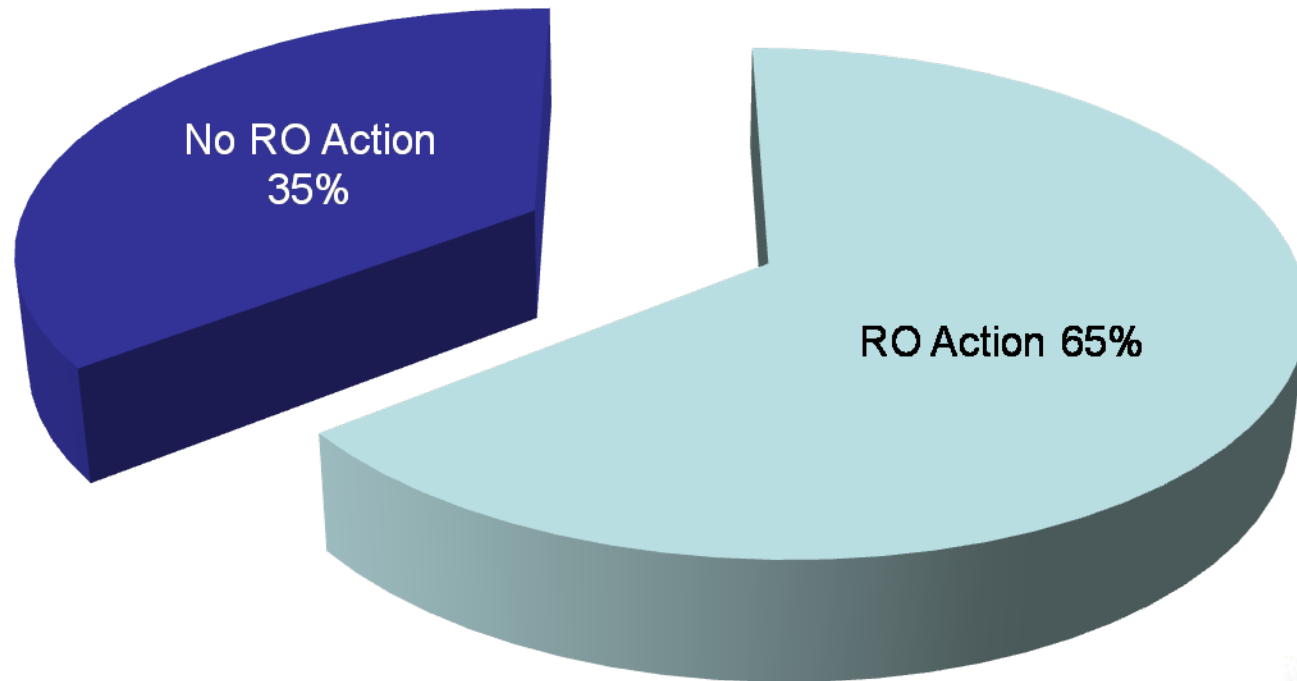
What are the issues?



Current Casework Climate

Focus: Alleged Marketing Misrepresentation

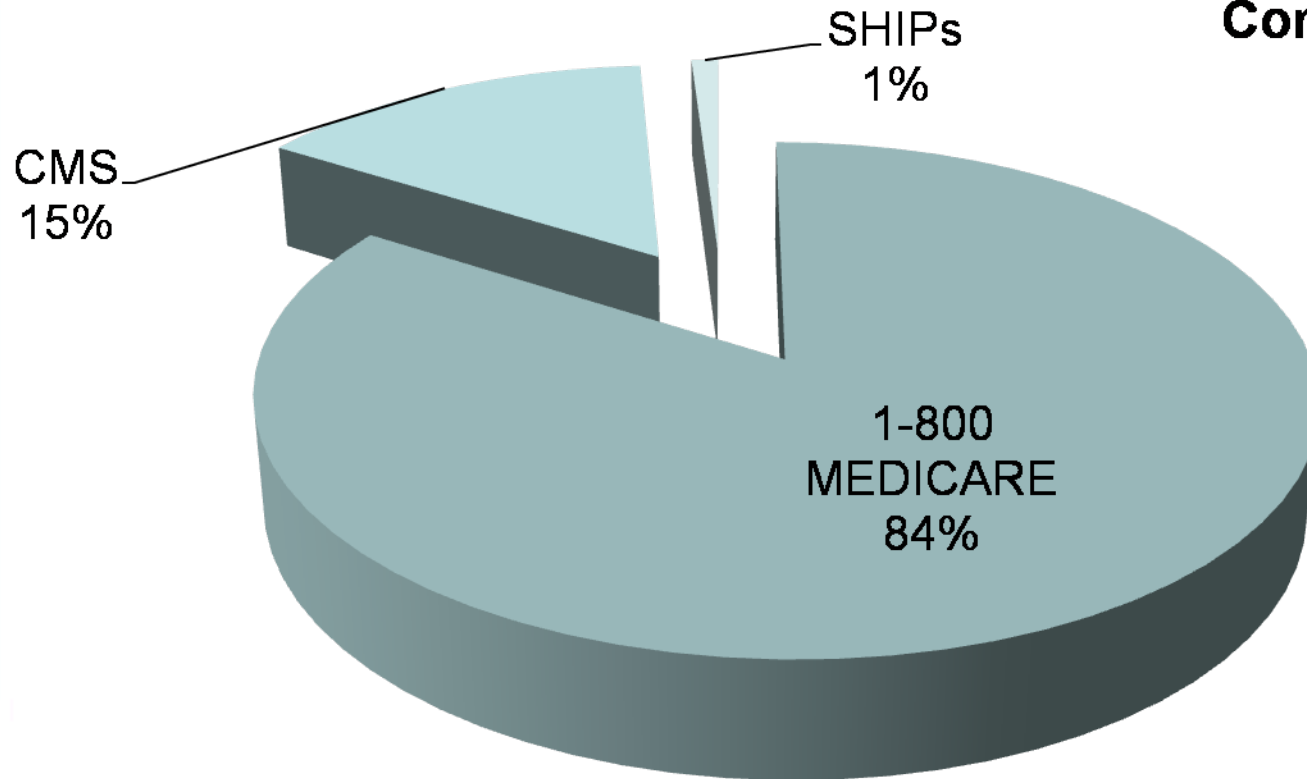
Distribution of Complaints: Jan 2009 to April 2010



Current Casework Climate

Where are the intake points?

**2010
Complaints**



Current Casework Climate

Interface with 1-800 MEDICARE

- Refer callers to plan first
- Capture names of medication(s) beneficiaries need
- Describe allegation of marketing misrepresentation, with agent names
- Check on status of previously-filed complaints
- Last resort for resolution



Current Casework Climate

Focus: Access Issues

- **Decline in complaints overall, BUT....**
 - Higher percentage of “pressing” complaints
 - Shift in focus from quick resolution to the content of the issues
 - Identifying systemic problems
 - Fixing underlying causes
 - Using CTM data to determine Plans for audit and other focused reviews
 - Using CTM data to support compliance and enforcement action

Casework 2.0

Where are we going?

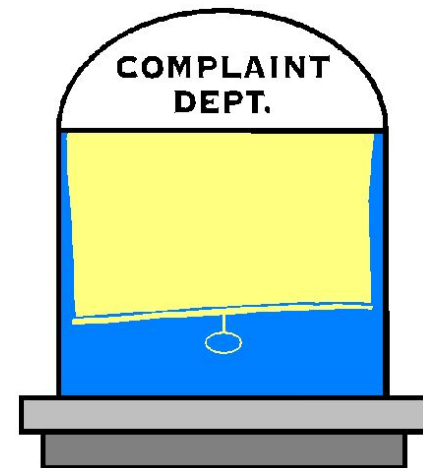
- **CTM Expansion to SHIPs**
 - Pilot project began in Spring 2008
 - Reduce calls to 1-800-MEDICARE & CMS Regional Offices
 - 40 states/territories with access by summer
- **Reciprocal Complaint Sharing Between State DOIs and CMS Regions**
 - DOIs have HPMS access and can view CTM complaints



Casework 2.0

Where are we going?

- **CTM Release 13**
 - Production Date – 6/25/2010
 - Enhanced Search Capabilities
 - Date of Birth Field Added
 - New Plan CTM SOP
 - Document Upload Capability
 - CMS and Plan users
 - Up to 3 attachments (1MB) per complaint
 - Free form text field to describe upload
 - Category Clean-up Initiative
 - “Mini-Release” slated for Fall 2010



Casework 2.0

Where are we going?

- **SSA Premium Withhold**
 - Reliable predictable Plan payments
 - Fewer disenrollments for failure to pay premium
 - Statutory right
 - “Green” option for beneficiaries
- **Railroad Retiree Benefits (RRB) Withhold**
 - Expected later this year

Casework 2.0

So how do we get there?

- **Provide Good Customer Service Up Front**
 - Send essential Plan materials timely and accurately
 - Prepare for increased, seasonal call volume
 - Don't refer callers to 1-800-MEDICARE
 - Notify beneficiaries of complaint resolution
 - Provide interim responses to CTM complaints
 - Proactively reach out to repeat complainants
 - Consider the SHIP Unique ID Program

Casework 2.0

So how do we get there?

- **Use the CTM to Proactively Identify Issues**



- Perform trend analysis
- Examine commonalities
- Conduct root cause analysis
- Identify problems before we do
- Deploy corrective actions which fix the problem

Casework 2.0

So how do we get there?

- **Frequent communication with your Account Manager is important**
 - Anticipating call volume – “no surprises”
 - Disenrollment for non-payment of premiums
- **Being better prepared for complaints at the start of the Plan year**
 - Formulary changes, premium increases, large number of new reassignments
 - Reporting issues to CMS early, especially at the start of the new benefit year

Casework 2.0

Conclusion

- Significant progress has been made
- Much more can be achieved
- Preparing for changes
- We all have a valuable role to play
- Beneficiaries FIRST!

