



eMedicare

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Overview

- eMedicare is a multi-year initiative to improve Medicare service across the customer support channels CMS supports, including web, phone, mobile, and others. A key project under the eMedicare umbrella is Medicare Plan Finder.
- CMS is undertaking a redesign of the Medicare Plan Finder (MPF) tool on Medicare.gov to improve usability and address feedback that we've heard from users and stakeholders about complexity, jargon, and other issues. The redesigned MPF tool will be the authoritative source for Medicare plan information.



Goals

- Deliver a plan shopping and comparison experience for beneficiaries that helps them choose coverage that works for their individual situation.
- Provide a personalized experience
- Help users decide what type of Medicare coverage (Original Medicare or Medicare Advantage) is right for them.
- Shepherd beneficiary through the enrollment process and completely replace the existing Online Enrollment Center.
- Gracefully integrate with dependent CMS systems to ensure a seamless experience



Background & History

- Medicare Plan Finder (MPF) was developed under the Medicare Modernization Act (MMA) in 2005. It provides Medicare beneficiaries, family members, caregivers, advocates, and health care providers with one central place to view, compare, and select Part D prescription drug and Medicare Advantage plans.
- The current tool uses proprietary software and legacy technologies that limit its ability to meet the needs of today's digital audience. Because it was not built to contemporary usability and design standards, it falls short of current users' needs and expectations. This work is an iterative process - in which we are constantly talking to beneficiaries and those that help them to better understand their evolving needs and building to meet them.



Background & History (cont.)

- We made these improvements for 2018 Open Enrollment:
 - Revised MPF landing page to encourage use of existing personalization capabilities
 - Launched updated Coverage Wizard to help inform beneficiaries about their Medicare options
 - Launched OOPC Estimator to help users understand the out-of-pocket costs for both OM and MA options outside the Plan Finder experience
 - Added authenticated chat to MPF to seamlessly connect beneficiaries to human help
- The redesigned Medicare Plan Finder will launch in 2019.



Our Users

- In 2017, over 20 million users came to Medicare.gov to use Plan Finder, accounting for about a third of all traffic to the site. During Open Enrollment, about 89% of users were Original Medicare beneficiaries enrolling in Part D drug plans. About 10% of enrollments were for Medicare Advantage plans.
- Whether they're current beneficiaries considering switching coverage during Open Enrollment or coming-of-agers selecting coverage for the first time (usually but not exclusively during OE), Plan Finder users often find the process daunting.



Our Users (cont.)

Research has shown that users want Plan Finder to provide the following:

- Simpler results – only information they really need to make a good decision
- Personalized information – based on their individual situation
- Clarity on out-of-pocket costs – What will this cost me in total?
- Support making the Original Medicare / Medicare Advantage decision for decision support (Medicare coverage choices) for new Medicare beneficiaries



User Pain Points

- There is a lot of research, articles, reports, and interviews that speak to the ways in which the current Medicare Plan Finder falls short.
- Over the last few months, we've pored through these to better understand what are the user's pain points, how the tool can be improved, and how we can best meet the needs of Medicare beneficiaries and those who help them.



User Pain Points (cont.)

- We discovered that beneficiaries suffer long-term, negative impacts from how Plan Finder is currently built. These are:
 - They're less likely to consider plans that might work better for them and may stay enrolled longer in coverage that meet their health and financial needs
 - They're more dependent on CSRs and SHIPs to guide them through the enrollment process
 - They're less likely to return to Medicare.gov for other information and services
 - They're more likely to depend on information from commercial interests rather than a neutral source



User Pain Points (cont.)

These pain points have been conveyed through multiple sources:

- Consumer reporting of Medicare CAHPS Results of RAND's Medicare Plan Finder Experiment
- Modernizing Medicare Plan Finder
- Medicare Plan Choice Communication: User Experience Research
- Quality Reporting on Medicare's Compare Sites: Lessons Learned from Consumer Research, 2001–2014



Polling Question #1

Are there any major issues missing from the list of priority user pain points we are addressing with the redesigned MPF?

- A. Yes, major issues are missing
- B. Minor issues missing, but no major issues
- C. No issues missing



How Redesigned MPF Will Address User Pain Points

- **Guide users along the journey** – Medicare is confusing and we need to educate and walk users through the process.
- **Give users the right context and right amount of information** – Provide context to users on why we are asking certain questions and what it means if they make a certain choice. The current tool is optimized for SHIPs and CSRs causing it to be dense with information that confuses the lay user.
- **Provide users with what they need to make a decision** – Provide the right type of information that helps users make an informed decision.



How Redesigned MPF Will Address User Pain Points (cont.)

- **Step away from the jargon, speak clearly** – There are many terms and concepts that the average person will not understand, focus on writing in a way that is understandable for the average person.
- **Make user's options more clear** – Better integrate Medigap into the experience so users understand that is an option.
- **Customize the experience** – Not all users are the same; we need to find ways to customize the experience based on who you are.



Planned Improvements

- Integrated “Decision Support” including help selecting coverage type and understanding the costs of each option
- Improved user experience based on consumer testing, surveys, and web analytics (including A/B testing)
- Tailored experiences for coming-of-agers AND existing beneficiaries during and outside of Open Enrollment
- Mobile optimization (26% of Medicare.gov visitors use mobile devices, up 44% from 2017)



Planned Improvements (cont.)

- Improved cost and coverage information around drugs
- Integrated Medigap information, providing a fuller picture of costs & coverage under OM
- Streamlined, customized experience for CSRs, preserving all necessary features
- Web chat to help users while shopping & enrolling
- Built to meet 508-compliance accessibility standards



Polling Question # 2

Do you agree that we have prioritized the right set of user improvements for the redesigned MPF?

- A. Yes, the priorities are correct
- B. The priorities are mostly correct
- C. No, the priorities are not correct



User-Centered Design

- Continuous feedback from real users through consumer testing and Call Center focus groups
 - Continued improvements to the UX based on this feedback
- Make data-driven decisions
- Input from partners (BMA, etc.) and industry (AHIP, Brokers, etc.)



Iterative Development

- Development work is broken into small iterative cycles of design, build, and test
- Requirements are consumer-focused
- Functioning software that delivers functionality is primary measure of progress
- Small cross-disciplinary teams are empowered to make decisions
- Face-to-face conversations with developers



Delivery Approach

To ensure user and stakeholder needs are met, the redesigned MPF tool will be rolled out in phases. A general Window Shopping experience will be introduced to end users through a “Public Preview” period. This will allow for:

- Testing with real users and incorporating their feedback
- Validating that core feature set as the remaining features are developed
- Mitigating operational risks



Rollout Phases

- **External Stakeholder Preview**

- CMS will solicit feedback from CSRs, SHIPs, Advocacy Groups, and issuers using a private link to view the basic window shopping experience, which will include plan and drug information.

- **Public Preview**

- This phase will focus on responding to actual user behavior and validating key features of the full release. A banner will display allowing users to “opt in” to the new MPF experience - but they can “opt out” at any time to use the legacy Medicare Plan Finder.

- **Full Cutover Launch**

- All Medicare users will be routed to the new MPF and no longer use the legacy tool; full feature parity will exist between both systems.



Questions?

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