

IBM Customer Care Solutions for Healthcare Payers



Highlights

- ***IBM Customer Care Solutions for Healthcare Payers help healthcare insurers transform their member services and offers, meet regulatory requirements, cut costs, accelerate payments and improve the quality of patient care by providing trusted information to people, processes and systems across the enterprise, in real time.***
- ***A comprehensive, extensible and flexible platform enables a Service Oriented Architecture (SOA) environment and helps define and manage the complex information required to create patient-oriented health plans.***
- ***IBM solutions help accelerate time to value with best practices gained through years of experience delivering high-quality projects to leading companies in the healthcare industry.***

The healthcare industry is undergoing rapid change with increasing competition, more demanding customers and members, intensive regulatory constraints and the growing involvement of state and local governments in providing healthcare to citizens. Expectations for higher levels of service also are growing among corporate subscribers and their employees—the health plan members. These factors create an environment full of difficult new challenges with far-reaching consequences.

Health plan organizations are under greater pressure to stay ahead of the competition by offering new products and services, anticipating customer and member needs and providing superior service. And health plan administrators face growing demands to understand current

customer information and relationships, improve speed and accuracy of claims processing, streamline service and reduce costs. In addition, they require a solid understanding of their consumer segments and their health management patterns to identify areas of potential opportunity or risk. This in turn depends on understanding members and providers and finding new ways to deepen existing relationships.

Customer centricity demands an accurate view of information

To differentiate themselves in a crowded marketplace, healthcare plans are increasingly moving toward member-centric business models to win over and retain lucrative clients—the corporations, institutions or organizations that offer healthcare coverage to employees or members. The member-centric health plans demonstrate

Enabling the member-centric healthcare insurance plan

considerable business success by identifying the most appropriate and profitable products and services to offer their members as well as exploring ways to elevate the customer service levels far beyond the traditional. To become member-centric, health plan organizations must understand who their consumers are, what they are looking for and how best to serve them in a way that improves their businesses—and then turn that insight into actionable strategies.

Unfortunately, most health plan organizations can access the information they need about their members, providers or services, but they cannot easily analyze it because it is often fragmented across multiple organizations. They do not have a comprehensive source of information—an array of systems has often been developed over time, and mostly in isolation. Furthermore, this information is typically stored and accessed in ways that limit real-time responsiveness to changes in member status, needs or transactions. The member insight derived from data warehouse analysis or business intelligence (BI) tools is typically static and captured at a single point in time. To design more member-centric offerings, organizations need insight that enables them to:

- *Evaluate and manage members and healthcare providers with respect to wellness and value, respectively*
- *Track costs and revenues with respect to plan claims and premiums*
- *Assess the quality of care being provided by in-network and out-of-network providers*
- *Monitor and manage care around chronic diseases*
- *Assess treatment success associated with different treatment protocols*
- *Measure the return on investment of wellness incentive campaigns designed to improve overall member health*
- *Evaluate the effectiveness of specific employer-sponsored member health plans*
- *Compare costs for services rendered by providers so that pay-for-performance can be addressed*
- *Determine the return on investment of specific coverage portfolios for employer plans by region*

Requirements for enabling a member-centric health plan

To become organizations that operate on demand—creating dynamic and responsive services to meet subscribers' and members' needs while also streamlining processes and reducing costs of care—healthcare administrators require the following complementary set of infrastructure capabilities:

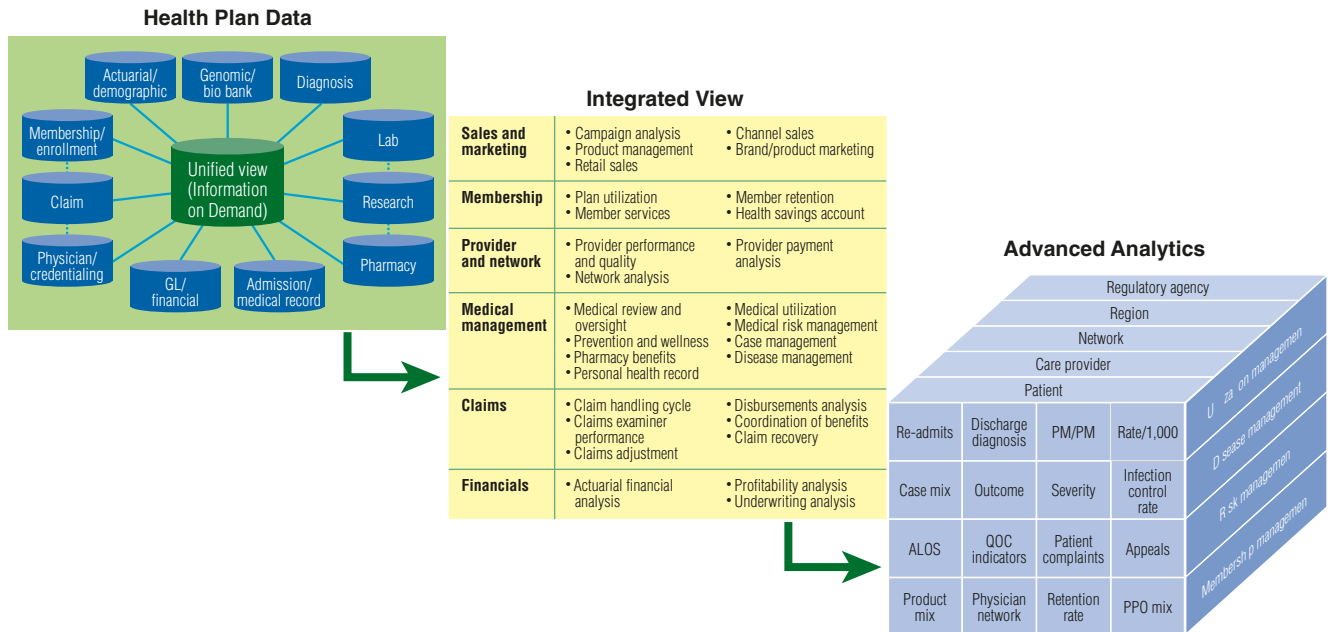
- *Access to an industry-specific framework for process development and improvement that is built on best practices*
- *The capability to address data integration, quality and analytics*
- *The capability to provide transaction-based processing*
- *A method to complete the underlying data transformations necessary for supporting a portal environment that can be targeted to users in specific roles*

IBM offers flexible, extensible solutions geared specifically for health plans

IBM can help address these challenges through a combination of capabilities coupled with the business know-how to achieve transformational results—fast. The power of IBM® WebSphere® Customer Center software for patient data integration, combined with the IBM Health Plan Industry Data Model for member and business insight and IBM Information Server for clean and trusted information across the enterprise, provides a comprehensive, extensible and flexible platform that readily supports the needs of health plan clients.

Designed to scale, this platform supports the high transaction volumes demanded of core business processes associated with member self-service,

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IBM Health Plan Industry Data Models help organizations develop an integrated view of relevant information.

enrollment, claims processing and billing. It also reflects the best practices of the healthcare payer industry, helping to enable deep and relevant analytic reporting for examining business health and performance across the entire health plan enterprise.

IBM WebSphere Customer Center delivers an accurate view of members and providers

As part of the IBM Master Data Management (MDM) family of products, IBM WebSphere Customer Center can strategically centralize and manage disparate subscriber, member and provider information. Its architecture enables comprehensive management of data that would

otherwise be unwieldy, duplicate, redundant or error-prone. It creates a master view of information that serves as the “single source of the truth” and can be fed to the data warehouse for the most accurate business intelligence and analytics. The master view of member, provider and subscriber information can also be used to serve a myriad of front-office and back-office systems with real-time, dynamically updated and synchronized information.

IBM Health Plan Industry Data Models enable an integrated view of information to achieve deep insight

IBM Health Plan Industry Data Models provide a blueprint for a comprehensive data warehouse and the BI

applications that run on it, as well as the foundation for an operational model based on data architecture best practice principles. IBM Health Plan Industry Data Models can help an organization establish a platform to gain a more complete understanding of its members, providers and partners as well as assist in the selection of best strategies for:

- *Aligning IT with business goals*
- *Offering differentiated products and services*
- *Streamlining administrative operations*
- *Facilitating compliance measures*
- *Promoting effective decision making*
- *Encouraging environmental evolution*



IBM Information Server provides the foundation for data integration

IBM Information Server can help health plan organizations enhance customer centricity by improving data quality, maximizing the business value of information and expanding access to consistent, complete and authoritative information throughout the organization. This platform imparts a fundamental building block of SOA by providing reusable information services that span heterogeneous sources.

By making consistent, complete information accessible across the enterprise in a timely manner, SOA and IBM Information Server can help healthcare payers address compliance issues and manage transactional data. Integration and consolidation of complex operations can help deliver a single, high-quality view of plan members, as well as facilitate collaboration and compliance with industry standards and regulations.

For more information

To learn more about IBM Customer Care Solutions for Healthcare Payers, please contact your IBM marketing representative, call (866) 382-9774 in the United States or Canada, send e-mail to MDM@ca.ibm.com or visit ibm.com/software/data

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