WEST’S POINT OF VIEW ON CXLM IN HEALTHCARE

In Part I of *The Future of Customer Experience Lifecycle Management for Healthcare*, we examined the need for healthcare organizations to create a continuous interactive customer experience to build lifelong relationships with their customers.

What follows in Part II is a detailed analysis of where healthcare organizations may find themselves today along the maturity curve for Customer Experience Lifecycle Management (CXLM). It also examines the challenges inherent in making the leap from each stage to the next, and the solutions needed for healthcare organizations to successfully connect interactions throughout the patient’s journey – a journey that ultimately should increase patient satisfaction, decrease leakage, improve health outcomes, and increase revenue for hospitals, physician groups, health systems, insurers and retail pharmacies.

Gartner defines Customer Experience Management (CXM) as: “The practice of designing and reacting to customer interactions to meet or exceed customer expectations and, thus, increase customer satisfaction, loyalty and advocacy – requiring process change and many technologies to accomplish.”

It is also important to understand the definition of patient experience in the context of this paper. Patient Experience is the cumulative impact of the engagements and interactions occurring through a patient’s journey on the care continuum that define their perceptions and feelings toward an organization’s staff, technology, services and products. Managing that experience requires the ability to design and react to the healthcare consumers expectations.

We believe that CXLM is most successful when business analytics are instilled across the healthcare ecosystem – to better understand patient behavior, predict intent and, ultimately, prescribe and dynamically execute upon the best course of action, both for the patient and for the healthcare organization. We refer to this as “optimization” and “orchestration.”

A CXLM strategy for healthcare organizations requires several complementary and integrated components to be successful: they need to invest in the technical infrastructure (hardware as well as software) that optimizes self-service, proactive engagement and contact center coordination with patients. The strategy also requires orchestration across the healthcare enterprise, especially through the use of business intelligence and advanced analytics to power data-driven decisions that inspire, align and guarantee not only business performance, but a higher level of patient satisfaction.

The ongoing, turbulent transformation of healthcare in the 21st Century presents a clear and ever-present danger for healthcare organizations who do not pursue a cohesive CXLM strategy. By maintaining a narrow view focused on functional needs along the
patient journey – including the traditional operational, channel and data silos so pervasive in healthcare as a whole – these organizations will face a distinct disadvantage as competition heats up. If healthcare organizations do not focus on a more connected, predictive and prescriptive patient experience, their ability to differentiate themselves in an increasingly competitive marketplace will suffer, as will operational inefficiencies, poor patient experiences and almost surely profitability.

Those healthcare organizations who do work hard to advance through the CXLM maturity curve, on the other hand, will be more strategically positioned to evolve with their patients – promoting efficiency across their organizations, improving revenues, maximizing meaningful patient engagement, and ultimately sustaining loyal patient advocates for their services.

The Maturity Scale

The maturity curve represents five increasing levels of CXLM. Success in progressing through the maturity curves requires a patient engagement and activation assessment anchored by the following principles:

- How would your patients rate their experience with your healthcare organization? (Consider the consistency in two critical areas: convenience, choice and control; and effort, emotion and effectiveness.)

- How would you rate the quality of what and how your healthcare organization delivers throughout the customer lifecycle to create that patient experience? (How do you execute your healthcare organization’s patient services and complementary and ancillary products? Are key stakeholders and departments across your healthcare enterprise considering the holistic customer experience?)

It’s essential to consider all interactions that take place, patients’ perceptions of their experiences with your healthcare organization, and both the qualitative and quantitative business outcomes when determining where your organization is at along the CXLM Maturity Scale. As one moves up the scale, primary business goals for your healthcare organization shift from a short-term focus on lowering the cost of care or increasing revenue to benchmarks that deliver longer-term and more meaningful business results – such as “improving patient satisfaction, loyalty, and advocacy.”
The Disconnected Level

The Disconnected Level is one in which the patient experience is highly unpredictable. It is characterized by highly reactive support, poor cross-functional transparency, and disparate channels of communication. Technology ownership within this level, unfortunately, is too often estranged and distinct from many of the core and critical responsibilities of the healthcare organization.

The biggest challenge for most healthcare organizations as they look to move up from the Disconnected Level is that they first must acknowledge that their patients do indeed have a fragmented experience across their organization. It starts with the historic organizational structure at the top of the healthcare enterprise, where distinct processes have been allowed to be siloed for various functions or cost centers (for example, wellness, payments, appointments, Emergency Department, Ambulatory Surgical Centers, patient services). That leads to a siloed approach that prevents information sharing or visibility into key patient insights across the healthcare organization. Even the stakeholders for the various responsibilities may have competing concerns that are not aligned in an integrated fashion that consider critical patient communication channels, such as contact centers, IVRs and ACDs, remote patient monitoring and the chat function on the Website. These challenges are all compounded exponentially if the healthcare organization lacks a C-level patient experience officer responsible for driving a holistic, proactive strategy.

The interaction strategy at these organizations is highly reactive. The focus is usually on hardware and software to solve all the patient experience ills, even when those solutions possess relatively weak functionality and minimal mobility. There is little to no coordination among the communication channels – inbound, outbound, online or on-site – if all are present with the enterprise.

The disparate departments across the healthcare enterprise stuck at the Disconnected Level rely on multiple vendors and automated systems who don’t talk to each other, presenting even more barriers to optimizing and orchestrating the patient experience. These departments’ distinct tactics are executed without regard to any overarching, holistic patient experience strategy – for instance, one that would leverage speech recognition, computer-telephone integration (CTI), and identification and verification (ID&V) especially outside of the voice channel.

The result is an unhappy patient. Unpredictable self-service, especially in IVR, created by a poor user interface and cumbersome menu structure, can make it difficult to self-service, leading to multiple transfers for the callers and making it difficult to reach the correct agent.

Healthcare organizations at this level also cannot optimize the use of data and analytics to orchestrate a better patient experience. Basic data owned by the disparate departments only provides a fragmented view, offers no redundancy, and prevents third-party data related to the patient from being accessed or integrated within the rest of the healthcare organization.

There are several opportunities for stakeholders to begin to guide improvement in healthcare organizations at the Disconnected Level. First, it is important to be able to articulate the value of pursuing a “Connected” level of maturity. That can be done by illustrating how improvements in IVR, for instance, can help make the case at higher levels in the organization for future value-based investments.

It is also important to reinforce existing wins to demonstrate how better integration can heighten visibility into additional opportunities for containing healthcare costs for the patient while improving revenue.

To help accomplish this, healthcare organizations need to understand the reasons new and existing patients interact across the enterprise – not just on premise, but also remotely – and their needs. By mapping and understanding all discrete interactions, healthcare organizations can more effectively prioritize the gaps in the patient journey and begin to improve the patient experience at the margins. These improvements might entail consolidating IVR and improving the design of the user interface, enhancing contact center services through CTI, considering proactive communication strategies such as outbound voice and SMS/text, and reframing shared objectives across the department silos within your healthcare organization.
The Multichannel Level

The Multichannel Level, while an improvement over the Disconnected Level, is still too often a reactive service. This is mainly due to the traditional departmental silos that have been allowed to develop across healthcare organizations over the past few decades, the minimal integration between the disparate channels, and the limited visibility into – and use of – the critical data needed to enhance a patient’s experience.

At this level, a high amount of effort on the part of both the patient and those providing services to the patient is required. Healthcare organizations at this level are attempting to connect more effectively with patients, but patients still experience minimal convenience and mobility between interactions, where they often must reintroduce themselves and their healthcare needs at each stop in each channel. The patient experience may be great in some specific channels, and horrendous in others.

Even though there are multiple channels available to interact with patients, too often the accountability for success isn’t integrated in a holistic approach – it is determined either at the departmental or channel levels. There is limited process- and knowledge-sharing across departments and channels, with too much of the thinking about the patient experience done at the functional – instead of strategic level. While many or all the channels for interaction may be in place, there is still an opportunity at the Multichannel Level to take a more patient-centric approach to thinking about the patient experience.

Even though there is a limited, yet improving, proactive presence approach, patient experience initiatives often remain isolated, since they focus on software and are initiated from the bottom up by departmental function or channel. Inbound and outbound channels are in place across departments, but they have been developed, implemented and operated with multiple vendors.

Although better hardware and software may be in place compared to a healthcare organizations at the Disconnected Level, IT operations teams still face significant integration and maintenance challenges that can have a negative impact on the patient experience. Transactional security, speech recognition, basic CTI and skills- or location-based routing may be incorporated in some departments and channels, and workforce optimization capabilities could be incorporated under a contact center umbrella.

However, there may still be no common identification and verification capabilities across channels (except for voice), and limited connectivity between channels – such as click-to-call or click-to-chat.

On the data and analytics front, this approach – while an improvement – still offers minimal insight since the data resides in departmental silos across the healthcare enterprise based on functional area or channel. Descriptive and historical data summaries about the patient are still isolated by channel, with function-based reporting causing limited – if any – low-value channel optimization.

The internal focus for healthcare organizations that find themselves at the Multichannel Level remains on cost containment and improving revenue, but these enterprises also are beginning to measure the relationship choices in multiple channels based on the average customer value (ACV) of the patient. That enables them to better understand channel effectiveness and being able to focus on the advantages of more strategic channel containment, even if they are not able to resolve the issues that bubble up in that strategy at this level. What a better understanding of the various channels does allow is for healthcare organizations to being thinking about shared success measures across the entire enterprise from a holistic point of view.

For key stakeholders in healthcare organizations at this level, it is important to reinforce and leverage early successes across the multiple channels to secure ongoing investment in making fundamental patient experience changes across the organization. This can be done by highlighting marginal improvements that can help justify the potential greater return on investment from the exponential gains that can be expected from a more formalized, strategic and consistent approach to the patient experience across channels and departments.

It is also important here to map the discrete patient journeys through a more persona-based approach – What are patients like, as people? What motivates them to comply with their medication, treatment and rehabilitation plans? What satisfies them? That allows healthcare organizations to explore opportunities to connect and drive persistence across outbound and inbound channels – for instance, the best multi-modal solution(s) to leverage in a single patient interaction, such as SMS, Web and voice.

By asking those types of questions, healthcare organizations gain a better understanding of the patient interactions that have the most direct impact, and they will be able to create an actionable plan for multi-channel and multi-vendor connectivity – despite factors that initially may seem overwhelming to the IT departments. They will also begin to design an operational data collection strategy that consolidates all relevant metrics.

Building this foundation at the Multichannel Level allows healthcare organizations to improve agility – including the speed and quality of technological innovation – to demonstrate the advantages of moving up to the next level of the maturity scale – Connectivity.
The Connected Level

The Connected Level offers a better balance of self-service and proactive, consistent engagement with patients through channels connected within a comprehensive ecosystem. This combination helps create and generate seamless contextual relations with the patient, based on data that is traversing across all functions within the healthcare organization and through all interactions with the patient. At the Connected Level, healthcare organizations set their patient experience sights even higher – to look at the patient as a whole to better anticipate and address patient needs.

Even though responsibilities may still be function-based, at this level healthcare organizations are able to better prioritize patient-centric operations and begin implementing processes that improve efficiency across the enterprise. Patient experience roles are created and embedded to replace the traditional tech-centric focus of IT departments, as the healthcare organization focuses on a more comprehensive, patient-centric technology ecosystem.

The healthcare organization's engagement strategies become more multi-modal and cross-channel, including self-service and proactive patient support. There is a persistence among both channels and departments, characterized by contextual awareness of the patient's situation and seamless hand-offs to address the patient's needs.

Healthcare organizations at the Connected Level are supported by a highly scalable, loosely coupled ecosystem of platforms, applications and services using open standards that are easier to upgrade. Thanks to APIs, they can achieve a consolidated patient-centric view of all channels, even though there are still multiple vendors – especially with the explosive use of wearables and other remote patient monitoring/telehealth APIs. This allows comprehensive reporting across points the patient interacts with the healthcare organization, backed by a consolidated business rules engine.

Other technological characteristics at the Connected Level include Advanced Speech Recognition, full security compliance and minimized risk of fraud in automated channels and the contact center, universal management of patient information preferences (i.e., type, channel, time of day, etc.), and comprehensive, user-friendly campaign management tools.

All patient data in a Connected health organization is housed in one place, creating a single source of truth about the patient that is accessible across the enterprise. There may still be some gaps in optimizing the use of the data in some channels. However, descriptive analytics summarizing what happened in a patient interaction and diagnostic analytics understanding why it happened – backed by a business intelligence interface – provide the contextual understanding of the data points, the source of any patient friction, and the healthcare organization's business goals.

The success measures at the Connected Level require a hierarchy of metrics on financial, operational and patient experiential objectives to drive goals for functional areas. Process maps and benchmarks are used to assess key performance indicators including productivity, patient satisfaction and retention, and performance. Correlations between functional interactions and patient perspectives help key in on problem resolution and satisfaction in patient-initiated service situations, while also improving contact center and IT efficiency and workforce engagement and satisfaction.

To guide improvement in Connected healthcare organizations, it is important to be able to articulate the value that advanced data analytics – such as a patient journey analysis – can provide. The goal here is to reinforce the value added by the data with a front-to-back review of processes, complete cross-channel visibility and a consistent patient experience. This can be achieved in part by drawing deliberate correlations between descriptive metrics and patient experience attributes – for instance, “call handling time” or “need for help in additional channels” relate to a patient’s perception of “ease of setting an appointment.”

The challenge here remains collaboration – driving cross-silo efforts to ensure delivery of a consistent patient experience, and mobilizing the healthcare organization's leadership to think strategically, enterprise-wide, and not just at the department or channel level. Looking closely at functional and workforce behavioral expectations can also help improve patient experience-related training (awareness), engagement (alignment), and performance (activation).

As you critically evaluate measurements in use and the implications for the bottom line, it is important to distinguish between low-level, low-impact operational metrics and higher-level patient experience metrics that have a greater impact across the entire healthcare organization. This is when healthcare organizations should be exploring what the “human factor” can add to data analysis, as well as assessing opportunities for segmenting patients through historical and descriptive data. Experiment here through business intelligence – perhaps starting with inbound IVR toggles or outbound notification times – to optimize the patient experience.

That approach provides a great opportunity to identify the channels with predictive patient service – a key consideration given the explosion of consumer health monitoring devices and the Internet of Things (IoT). A healthcare organization at the Connected Level should recruit and develop business analysts who are focused not just on operational metrics, but more importantly on improving the patient experience.
The Predictive Level

The Predictive Level is achieved with the complete integration of technology, data and processes across the healthcare organization. Choice, convenience and control dominate the patient experience, offering an intuitive, more personalized and preference-based approach to every interaction based on data-driven optimization. Predictive analytics build models that anticipate what will happen to the patient and adjust all interactions across all channels accordingly.

Engagement at the Predictive Level is based on a 360-degree view of all functions and channels impacting the patient experience. This requires the intelligent experimentation of analytics capabilities that can help healthcare organizations to better understand customer behavior and predict intent. Your team can then more strategically optimize and align its approach to reinforce your healthcare organization’s value proposition at every stop along the patient journey.

At this level, processes are controlled and measured across the healthcare enterprise – some even “marrying” multiple functions. The contact center emphasizes maximizing skills and guaranteeing information security. Volumes in each channel are anticipated in a more accurate manner, with a greater attention made to comprehensive campaign, administration, governance and visibility.

A healthcare organization at the Predictive Level is eager to keep up with the demand for innovation – not just looking at the patient experience in the past or at the current point in time, but defining a multi-year business strategy and road map designed to respond to the anticipated needs of the patient in the future. This requires a patient/demographic data segmentation strategy to not only drive marketing, but also to prevent problems and offer more personalization to the patient. Reactive patient service is not needed as often, but is easily and quickly achieved when required.

The Predictive Level requires a robust business intelligence and reporting interface that allows easy campaign administration updates (although these updates may still be manual in nature). Hardware and software should extend beyond the boundaries of the healthcare enterprise, including third-party data sources that provide greater contextual awareness about the patient.

A neural network of data in a closed-loop system offers significant advantages at the Predictive Level. This neural network integrates demographic data, patient segment consumption and transaction patterns, historical patient behavior, account economics and channel adoption. The neural network at this level also includes functional information, such as channel application modules and process maps. It also requires team members with skills that include an understanding of neural networks, regression tree analysis and modeling, and rule induction, among other Business Analytics (BA) competencies.

Business rules engines can help predict patient intent and the business intelligence platform used at this level offers role-based dashboards and reports – all to gain a more refined and predictive global understanding of the cause-and-effect relationships between channels and patient behavior. Data formats range from the standard relational data that currently exists within healthcare organizations, to sensor signals, Web traffic, and – especially given the rise of the Internet of Things in healthcare – mobile device activity.

To measure success at the Predictive Level, the hierarchy of metrics – including financial, operational and patient engagement satisfaction objectives – must extend across the healthcare organization, regardless of function or patient touchpoint. Enterprise-wide success measures, including HCAPS and STAR scores, multi-channel adoption and uptake of marketing offers, can help test the accuracy of segmentation strategies, while still holding departmental and channel silos accountable within the greater organization ROI expectations. This improves speed to market for innovations designed to improve the patient experience, while also offering the ability to articulate the value of any given patient segment.

However, it is important to evaluate what you are measuring, to ensure you are putting the proper weighting on the most important success factors to guide improvement. This helps visualize the variance between risk and reward – all while you are continually building the pool of data sources and identifying and remedying the gaps in the neural network. A comprehensive, realistic understanding of these ROI metrics should drive digital innovation as well as prescriptive patient service in the additional channels that offer the most impact.
The Prescriptive Level

The Prescriptive Level of the CXLM maturity curve is virtually effortless – the patient feels like your organization is reading his or her mind. It is the holy grail of the patient experience, providing intuitive access to deliberate and customized content, driving patients with ease to and through the right (and often new) channels that best suit their needs.

Healthcare organizations that achieve this level of patient experience make automatic adjustments to prescribe the next best action for each individual patient using business analytics. Informed by real-time data, automated technology can dynamically drive the next best action. Your team is entirely focused on business growth, content development and intentional patient interaction because computers are taking care of the rest.

All business decisions at the Prescriptive Level are anchored in multi-year strategic plans, supported by mature CXLM initiatives. By orchestrating additional channels and content for your patients to access, you can improve outcomes, guarantee a higher level of service, and create a much more dynamic patient experience that is more responsive to the patient’s real-world challenges and issues.

Using real-time data, your organization can automate decision-making to provide the best option for the patient – in effect, “training” them to activate behavior that enhances the patient experience. Flow and prompts are specifically catered to patient needs in real-time, with proactive outreach automatically informed by data to prescribe the specific next-best action for the patient.

Data is used throughout to predetermine every interaction with continually enhanced personalization, speed and ease for a greater patient experience. Automated solutions are continually improved using business analytics, including the use of artificial intelligence (AI). Self-Service Rate (SSR) continually feeds next-best actions by tracking the “genetic code” of each patient interaction in the neural network, supported by dynamic toggling of automation across all channels in real time.

Machine learning combines the assets provided by predictive modeling and champion challengers to prescribe the optimal channel to interact with the patient on an individualized basis. This allows the Prescriptive healthcare organization to continually learn from itself and improve. The closed-loop environment also analyzes real-time activity and patient data together and independently to inform current and future interactions with the patient.

At this level, a crisp hierarchy of patient experience metrics, including employee engagement, are required. Healthcare organizations can accurately articulate the value of every individual patient to create lifetime loyalty. Increasingly rigorous, enterprise-wide measurements help provide a competitive advantage, driving market-leading innovation and performance guarantees.

There is still opportunity for healthcare organizations to guide improvement even when they have reached the Prescriptive Level. This can be accomplished by evaluating and tuning the patient experience measurement program on a regular, relatively frequent cadence; watching market trends to anticipate and adopt the most promising emerging channels (especially with the opportunities provided for wearables through the Internet of Things); and identifying new opportunities and unmet needs via ethnographic research – following patients in other aspects of their daily lives.

Think about unconventional ways to prescribe patient delight that could be looked at as a worthwhile business investment in long-term patient loyalty. It is also imperative to continue to consider the impact of business analytics on other parts of the organization as well – for instance, on the research department at an Academic Medical Center.

And finally, be cognizant that CXLM maturity is relative to the universal patient experience landscape and emerging technologies – no healthcare organization can maintain absolute maturity indefinitely.
Building – and Sustaining – a Connected Communication Ecosystem

It is important to note that as healthcare organizations achieve increasing maturation in CXLM, they will uncover new strengths, opportunities, and challenges. There is no CXLM “unicorn” for healthcare organizations. CXLM by its very nature is an iterative model – with patients taking on additional risk in healthcare, their expectations will continue to persistently evolve. The ultimate goal for healthcare organizations is to be mindful of and positioned for continual optimization of the patient experience.

Bottom line: by the time a healthcare organization can achieve “absolute” CXLM maturity in today’s terms, the goalposts will have moved because of the innovation constantly taking place across the healthcare continuum in all areas – business models, technological solutions and the ongoing consumerization of healthcare.

West believes that healthcare organizations’ ability to create a connected patient experience requires hardware and software for self-service, proactive communications, and a cloud-based contact center – plus business intelligence and advanced analytics to make data-driven decisions that guarantee performance.

West’s core solutions include:

**IVR & SELF SERVICE**
- Voice Platform
- Network Management
- Speech Services
- Intermodal Functionality

**PROACTIVE NOTIFICATIONS & MOBILITY**
- Multi-channel alerts and notifications
- SMS
- Two-day SMS
- SMS Assistant/Chat
- Preference management
- Campaign administration tools

**CLOUD CONTACT CENTER**
- Multi-channel integration
- Hosted routing
- Computer-telephone integration (CTI)
- Secure transactions
- Contact center optimization
- Workforce management
- Network management, API integration and middleware development

West’s comprehensive Professional Services are orchestrated to support and optimize the entire ecosystem.
Professional Services

Professionals that can visualize and understand the core problems, see potential, see progress, and, hand in hand with the Patient Engagement team, be entrusted with the goal of promoting change to improve the patient experience.

USER-EXPERIENCE DESIGN

- Patient journey assessments and solution consultancy
- Advanced Speech Recognition (Natural Language, Directed Dialog)
- UI design and audio recording

BUSINESS INTELLIGENCE

- Standard reporting and visual display of data
- Custom reports and recommendations

BUSINESS ANALYTICS

- Operations research
- Data mining and modeling

STRATEGIC CONSULTATION

- Maturation planning
- Proactive patient engagement strategies and content development

Advanced analysts' specialized skills include understanding neural networks, predictive modeling and business rule induction; facilitating integration with existing customer service tools, applications and processes; and developing business intelligence interfaces that are easily understood and managed by client users with varying backgrounds and functional needs.