



## Report on OE3 BATPhone Pilot Program

### Overview

During the Open Enrollment period leading into the 2015 plan year, Maryland Health Benefit Exchange (MHBE) operated a pilot program, called BATPhone (Broker Assistance Transfer Program), to directly link consumers with brokers to help them enroll in Qualified Health Plans. These consumers were transferred to participating brokers by Customer Service Representatives (CSRs) at our Consolidated Services Center (call center) in a warm handoff. Participating brokers then performed the enrollment of those consumers while the CSRs went on to answer calls from other consumers.

A group of 25 brokers was selected to participate in this 13-week pilot from November 1, 2015 through January 31, 2016. During that time, brokers answered over 3000 calls and performed over 2000 enrollments. Benefits accrued to all parties – consumers received the expert guidance and advice of highly skilled brokers, brokers gained access to a previously untapped pool of clients, and MHBE’s call center was able to handle more calls overall.

### Program Description

BATPhone, essentially, places brokers in a virtual call center from their own offices. This allows CSRs to access these brokers as if they were right next door.

### History

Early in 2015, when thinking of how to improve performance of the call center, staff at MHBE floated the idea of having brokers handle enrollment calls rather than CSRs. This was at a time when many in the ACA implementation community, including other State-Based Marketplaces, were discussing how to better involve brokers in enrollment activities. That summer, MHBE’s Executive Director instructed that a program proposal be prepared and presented to the Board. MHBE staff conducted a proof of concept in July of 2015. On August 18, 2015, the Board approved the plan proposed by MHBE staff, who then began implementing the program.

### Program Structure

MHBE staff designed the program to proceed in four phases; Proof of Concept, On-Site Test, Pilot, and Full Rollout. Each phase is built with a “Go/No-Go” decision point at the end.

#### *Phase One: Proof of Concept*

In this phase, staff from MHBE’s Producer Operations team demonstrated that the process by which a broker gains access to a consumer’s account, called “Tango,” works well and in real time. The staff performed the Tango process using a dummy broker account on the live production site of Maryland Health Connection, and the consumer account of a relative of one of the staff (with approval). This phase proved that the Tango occurs right away, that brokers can begin helping immediately after the Tango. This step was crucial to the program, since brokers had to be able to perform the enrollment on behalf of the consumers through the use of Maryland Health Connection’s (MHC’s) Consumer Portal. While CSRs at the call center have access to the Worker Portal of MHC, brokers do not. Phase One was completed in July of 2015, leading the Executive Director to approve the program’s moving on to Phase Two.



## Report on OE3 BATPhone Pilot Program

### *Phase Two: On-Site Test*

The on-site test involved two of the most experienced Authorized Producers, Alyssa Minton and Viktor Voloshyn, coming to the call center on Lord Baltimore Drive in Woodlawn to take live call transfers using the actual phone system. This allowed MHBE and Maximus (the call center vendor) to work out the details of how calls would be handled, and to inform the development of the training CSRs would be given to allow them to perform the Tango and transfer processes. Phase two was completed on September 30, 2015 and resulted in the Executive Director approving the program's moving on to Phase Three.

### *Phase Three: Pilot*

In the lead up to the beginning of the open enrollment period for the 2016 plan year, work on the Pilot began on several tracks.

#### *Preparing the Call Center*

Maximus and MHBE staff collaborated on training CSRs on the transfer and Tango procedures as well as on modifying the call center's tracking system to accommodate the data necessary to track BATPhone results.

#### *Identifying the Brokers*

MHBE worked with counsel to design and deploy the BATPhone Pilot Request for Applications to identify those brokers who would participate. Each Authorized Producer who was physically located in Maryland, and who had performed at least one enrollment through Maryland Health Connection was invited to apply for a spot in the pilot. They were asked to state on their application how much time they would commit to the pilot over the course of 13 weeks. 85 respondents were ranked according to two factors: their time commitment and their experience with Maryland Health Connection (determined by number of enrollments). The ranked respondents were invited to the pilot in rank order. Once 25 respondents had agreed, no further invitations were sent.

#### *Preparing the Brokers*

Once all 25 brokers were confirmed, Maximus and MHBE worked together to get them set up with the appropriate software to log into the phone queue. Live, one-on-one training was conducted via web conference on the day before Open Enrollment began.

### *Phase Four: Full Rollout*

Phase Four, as envisioned, will be a full rollout of the program to involve many more brokers and features. This phase will begin if and when the Board approves it.



## Report on OE3 BATPhone Pilot Program

### Results

The BATPhone Pilot results point to success in a number of areas, and for all stakeholders.

#### Call Statistics

BATPhone brokers handled 3,156 calls during the pilot. Of that number, 2,048 resulted in enrollments. This means BATPhone converted over 64% of calls to enrollments. Brokers spent nearly 7000 hours in the queue, and nearly 1000 hours talking with consumers. The average call lasted over 18 minutes.

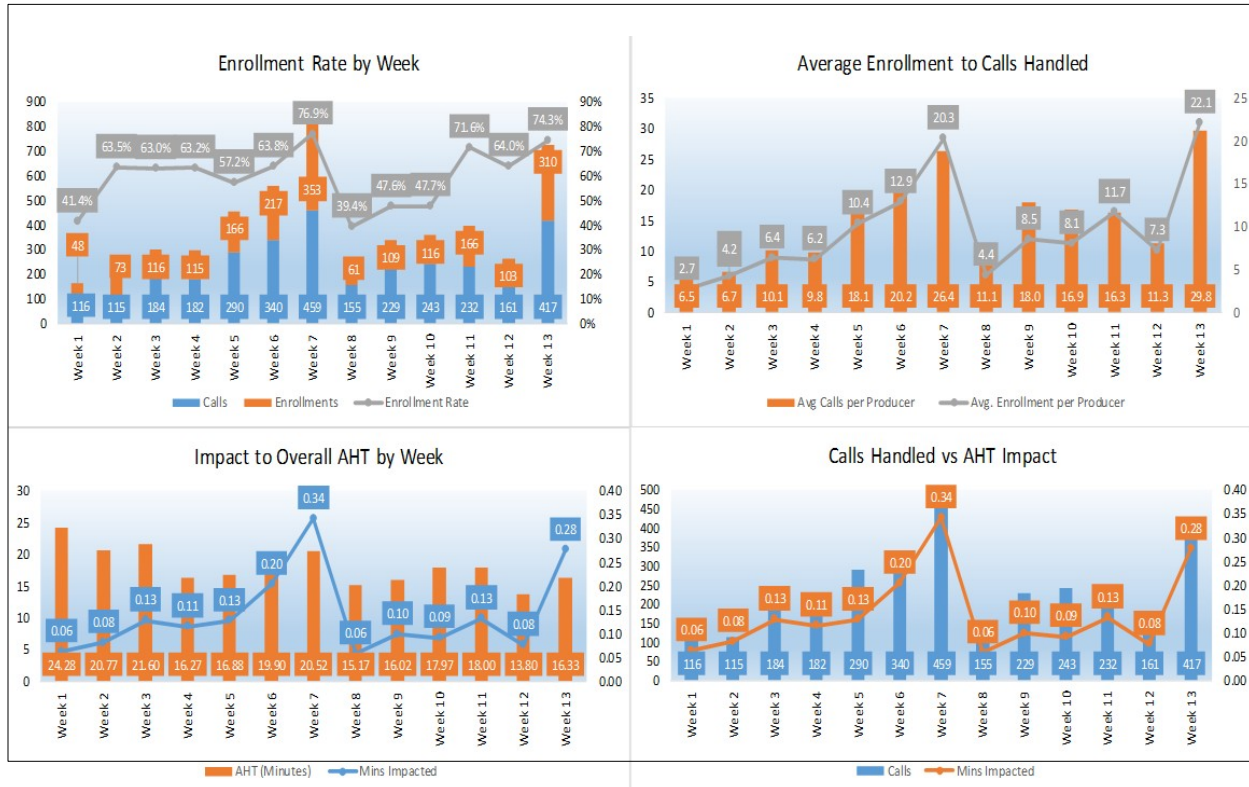
#### Broker Success

With over 2,000 consumers successfully enrolled, participating brokers enjoyed a dramatic increase in their client rosters through BATPhone. Averaged across the entire pilot, brokers successfully enrolled one household in coverage for every eight hours spent in the BATPhone queue. Broker success was not even – some brokers were unable to spend the time in the queue that the pilot required, and those brokers had very few enrollments.

## Report on OE3 BATPhone Pilot Program

### Call Center Impact

During the pilot, BATPhone handled approximately 1% of the total number of calls that came in to the call center. The program caused an average reduction in handle time by CSRs of 7.6 seconds. When looking only at Application/Plan Shopping call types, the program reduced the average call time by CSRs by 17 minutes.



One major benefit of the pilot, for which data is difficult to capture, is that those consumers who were linked with a broker are unlikely to call our call center for service or additional questions. These consumers will instead contact their broker. This reduction in overall call volume cannot be measured, but MHBE feels it is a real benefit that should be considered.

### Consumer Satisfaction

Consumers whose plan selection was guided by a BATPhone broker expressed great satisfaction with their shopping experience. Time and again, they thanked the brokers for their expertise and assistance:

*"I just want to take a moment and write you a quick note to let you know how much I appreciate your excellent service you have provided the past two weeks. When I started the process of signing up with the Maryland Health Connection I was getting very confused about the process of the whole system. Not until I was recommended to contact a Health Connection Broker and I was referred to you did I finally start to understand the process. I find, that without your help I would have been lost in the system. Your professionalism and expertise was extremely helpful. You are courteous, understanding, knowledgeable, and able*



## Report on OE3 BATPhone Pilot Program

*to explain things in plain English. I am very happy and consider myself privileged to have you as my Maryland Health Connection broker. Again, thank you very much for your service. Looking forward to keep working with you."*

*"I appreciate everything you have done for me. Most of all I thank you for your expertise, professionalism, and kindness. In addition, I have shared your information. I will keep in touch with you. Lastly, Merry Christmas and a prosperous New Year!"*

*"Thank you for much for your assistance today! You were a welcomed breath of fresh air!"*

### Referrals outside the Pilot

One unexpected outcome of the pilot was that consumers linked with a BATPhone broker through the pilot began referring their friends, family, and neighbors to their broker. This had benefits for everyone – consumers got expert guidance, brokers got additional clients, and the call center did not have to field calls from those consumers.

### Program Enhancements

In order to make the program even more successful, MHBE recommends several enhancements to streamline the handoff process and improve the experience for brokers, CSRs, and consumers.

#### Tango Simplification

One stumbling block in the operation of the pilot was the complicated nature of establishing the Tango relationship between a consumer and a broker. MHBE suggests that simplifying this procedure would make the program work much more smoothly. Today, a Tango relationship requires three steps: first, the consumer must invite the broker to accept them as their client. Second, the broker must accept the client. Third, the consumer must give the broker access to their account to make changes and perform enrollments on their behalf. MHBE feels that removing this third step is the best way forward. With this modification, any time a consumer is accepted as a client by a broker, that broker is automatically given full access to the client's account, and is automatically included on any 834 enrollment files sent from Maryland Health Connection to carriers.

#### Spanish Language BATPhone Queue

The pilot pointed out a great need for Spanish-speaking brokers to help enroll consumers over the phone. MHBE recommends developing a dedicated BATPhone queue for Spanish speakers.

#### Click to Answer

In the pilot, participating brokers had to be at the ready at all times when logged into the queue. Calls coming from the call center would not ring and wait to be answered; rather they would immediately be on the line with the CSR. Adding a click to answer function will allow a greater number of participating brokers to be available at any given time, as brokers would not feel as highly pressured to avoid the other work they do throughout the day.



## Report on OE3 BATPhone Pilot Program

### Recommendation

Based on the results of the pilot, MHBE recommends that the BATPhone program be put in place again for the next open enrollment period. The investment required to do a full rollout will pay dividends to the improved performance of our call center, and bolstered consumer satisfaction. The costs should not be underestimated, however. The program requires some technology investment in the phone system as well as human resource investment in the program's support and oversight.

To give some scope to these investments, the phone system software as deployed in the pilot cost MHBE a little over \$10,000.00. The Manager of Producer Operations at MHBE was dedicated full time for all 13 weeks to providing direct support to participating brokers. If the program does expand, both these areas will require additional investment. With a full rollout of the program, MHBE recommends that brokers or perhaps 'preferred brokers' not be charged any fee to participate, and that sufficient staff be dedicated to BATPhone broker real-time support.

Experts from Maximus recommend that as many brokers as possible be added to the program in order to most positively impact call times at our call center, recommending a 3:1 ratio of brokers to CSRs. Having that many brokers in the program would not necessarily reduce the number of consumers each broker would get, since overall usage of the BATPhone would increase with greater broker availability. Usage of the BATPhone was concentrated in very discreet segments of time – right before the cutoff for January 1 coverage, and right before the end of the Open Enrollment period. This argues for having what may seem like far too many brokers available at those times.

Should the board support the continuation of a BATPhone program; staff will develop the program for Open Enrollment 4. In addition, other State Based Marketplaces have implemented Preferred Broker programs. MHBE staff will also explore the effectiveness of those programs.