Implementing ACA Exchange Call Centers

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This white paper examines the requirements for the implementation of call center operation defined by the provisions of the Patient Protection and Affordable Care Act ("ACA").

The white paper provides a guide for call center implementation, defines the issues faced by states involved in this process, and identifies solutions to address those issues. The objective of the document is to present a viable solution to shorten the analysis and start-up processes for these call centers.

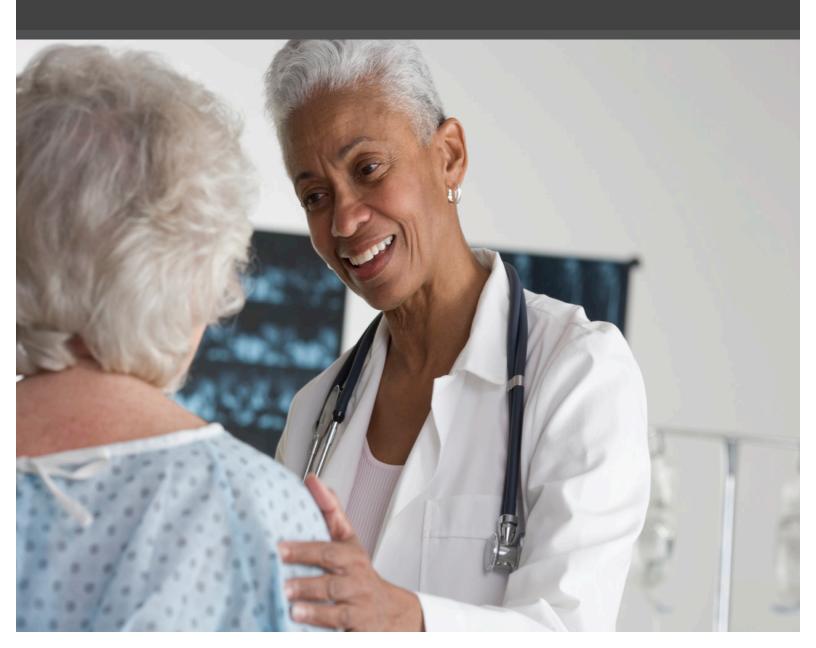


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Executive Summary

This white paper examines the issues managers will face in meeting the requirements of the Affordable Care Act Exchange Call Center work groups. The ACA defines requirements for a "no wrong door" policy for each health care consumer. The ACA documentation lays out requirements for states to provide multiple access capabilities for health care exchange sign-up.

This document defines a high-level process for the development of call and non-call work estimates, technology needs, and cost benefit analysis.

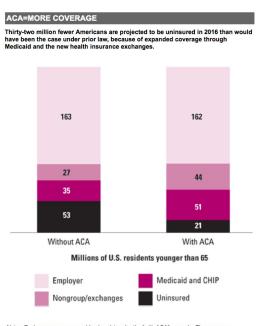
The document defines the keys to successful implementation of call center operations;

- Define work
- Estimate resources
- Define technology needs
- Complete cost benefit analysis
- Plan project
- Execute project plan

The most critical decision is whether or not to utilize an experience call center consultant to support this effort.

Overview of ACA Requirements

One of the primary goals behind the ACA is to dramatically increase the number of people in the United States who have health insurance. Today, 50 million Americans are without health insurance, including 13 million women aged 15–44, amounting to 22% of reproductive-age women. To address this issue, the law relies on two major coverage expansions, both scheduled to be implemented in 2014. First, states will be required to extend Medicaid eligibility to all citizens (as well as immigrants after five years of legal residence) in families with incomes at or below 133% of the federal poverty level. Second, individuals and small employers will be able to purchase private insurance through new marketplaces called exchanges; most of those currently uninsured will be eligible for federal subsidies to make that coverage affordable. The Congressional Budget Office projects that these two expansions will result in 32 million fewer uninsured Americans in 2016 than would otherwise be the case (see chart).



Notes: Exchange coverage would only exist under the "with ACA" scenario. The nongroup category also includes other types of coverage, such as Medicare. Source: Reference 2.

Each state will need to examine its population to determine the number of uninsured individuals to determine the number of effected individuals.

The goal for all of these measures is to ensure that there is, as many experts describe it, "no wrong door" for an applicant. Regardless of what system individuals use or program they start off applying for, they will be screened for eligibility under all available options and enrolled in the correct one.

Accessibility

Another aspect of the "no wrong door" approach is an emphasis on convenience. Under the ACA, people will be able to apply for coverage in a number of ways: online, by mail, by phone, in person and potentially through other options not yet fully developed. The ACA places a particular emphasis on completing applications remotely, requiring states to set up Web sites for their programs, and prohibiting states from requiring in-person interviews. In addition, the Department of Health and Human Services ("DHHS") emphasizes a goal of ensuring real-time eligibility determination—on any day, at any time—for most applicants.

Even the in-person application process should be more accessible. For example, the law gives states expanded authority to use a technique called "outstationing," under which state employees enroll patients on-site at hospitals and other health facilities.

Notably, the exchanges are given a series of explicit responsibilities in this arena, including maintaining a Web site with a wide array of information for consumers, running a toll-free call center for assistance and, more generally, performing education and outreach to maximize enrollment. DHHS is encouraging states to coordinate or consolidate these types of resources between the exchanges and Medicaid

Assumptions for Exchange Call Center Development

The Affordable Care Act (ACA) presents significant issues for states beginning the process of responding to program requirements. The ACA guidelines put forth clear requirements to perform specific tasks, which include the following:

- Establish health care insurance exchanges and provide easy access for all consumers
- Establish a process for consumer sign-up and to provide for consumer assistance or ombudsman programs
- Establish multiple access points to the insurance sign-up process
- Provide a methodology for complaint and issues resolution

An important aspect of the sign-up process is the development of call centers to augment online and "outstationing" sign-up capabilities required to meet the "no wrong door" policy defined in the ACA requirements for states. This white paper examines the issues faced by managers tasked with the creation of call center organizations. Given the significant magnitude of the undertaking we have separated the tasks into the following categories of activities.

- Definition of call center work activities
 - Managing multiple access points ("no wrong door") how to handle chats, email, and more
 - · Estimating work volumes, call and non-call volume, and work time
 - Defining service rates
 - Call- vs. back-office work activities
- Staffing
- Systems Required
 - ACD skills, data capture
 - Managing multiple access points ("no wrong door") how to handle chats, email, and more.
 - Call logging and monitoring
 - E-learning
 - Technology IT data tracking, screen pop, IVR take requests complete work, automation
- Complaint resolution
- Cost Benefit analysis
 - The insource or outsource call center decision
 - Existing resources or new internal call center
 - Outsourced call center
 - Non-profit outsourced call center (state and federal funding)

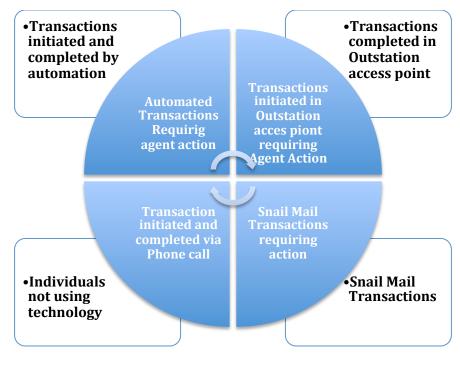
Definition of Call Center Work Activities

The "no wrong door" concept defined in the ACA guidelines outlines the requirements for the use of multiple entry points into the sign-up process, these include:

- online via a state run dedicated website or chat;
- by mail;
- by phone;
- in person in an "outstationed" format in hospitals and medical centers; and
- potentially through other options not yet fully developed.

This range of possible options presents a difficult problem for managers charged with designing the call center operation, starting with the estimation of the types and volume to work to be handled in the call center. All of the sign-up options will still require some human intervention at some point for all or at least a portion of the transactions. Sign-ups initiated on a website have to backed up by workers on a chat basis or by phone to handle questions and other issues. Mail requests will need to be entered in a system and issues arising from incomplete or incorrect information will need to be handled by a worker.

Possible makeup of call center work activities.



Note: Center blue circle represents call center work items

The call center designed to meet these diverse requirements will be complex and dependent on technology to be fully effective. Call takers will have access to applications that originate online, via mail, and other sources. The call taker will need to have the ability to follow an application through its life cycle.

The managers and workers will be faced with a plethora of time-sensitive and highvisibility work types. Determining the appropriate level of human and technological resources is critical to the success of the operation. Calculating the right level of staffing and technological requirements is dependent on the completion of a statistically sound estimate. It is important that the estimates of work include all possible work types and other known assumptions about the needs of the consumers and providing services to those consumers.

Somerset Consulting utilizes a proven model for staffing and providing other resource estimates that can be easily adapted to provide a framework for the ACA Exchange call center operations.

Estimation of work volumes, call and non-call volume, and work time

Our model for call center staff and resource estimation requires managers to know the expected volume of work, how long it takes to complete each type of work, the volume of each type of work, and the rate at which each type work must be completed (service level).

Some of the questions managers need to answer before a resource estimate can be completed include the following:

- How many uninsured individuals are in the state?
- How many of these individuals will seek insurance coverage through the exchange?
- · How many individuals who seek insurance are likely to utilize each access point?
- How many sign-ups will require human intervention via chat or phone
- How will work be tracked?
- Who work will flow form online technology to workers?
- The makeup of each transaction?
- Can sign-ups be completed as self-service activities and how many individuals are likely to utilize this functionality?

To develop the answers to these and other questions we recommend managers begin with the development of work flow process designs to identify the following:

- the types of transactions
- specific tasks required to resolve each transaction type
- the possibilities for self service automation of tasks and the requirements for systems to perform the automation
- work time for each transaction
- work flow from online to call takers and the need for off-line work such as mail requests processing.

The completion of this process forms the foundation for the methodology used to estimate the resource requirements described in this document.

Using Available Data to Estimate work Volumes

The estimation of work activity is essential to the successful implementation of the required call center operations. There are a myriad of readily available online information sources required to begin this process. To begin, we need to calculate the number of possible callers the call center can expect.

The US Census Department states that 46 million Americans are not covered by insurance. Internet World Stats states that in 2010, 72% of Americans were utilizing the internet. Based on this we can assume that of the same percentage of these individuals will access the internet. This would result in 33 million possible sign-ups that at least originate via the internet. This first assumption is that 28% of the uninsured individuals, (13 million) who attempt to sign-up will do so exclusively by phone or in person in some manner.

State managers must apply this same logic when analyzing the needs in their state. The Census department makes this same information available by state:

Table 156. Persons With and Without Health Insurance Coverage by State: 2009

[253,606 represents 253,606,000. Based on the Current Population Survey, Annual Social and Economic Supplement (ASEC), see text Section 1 and Appendix III]

Total State persons	Total persons not covered		Children not covered		State	Total persons	Total persons not covered		Children not covered		
Sidle	covered	Number	Percent	Number	Percent	Sidle	covered	Number	Percent	Number	Percent
0.000.0000.000	(1,000)	(1,000)	of total	(1,000)	of total	57.0.7	(1,000)	(1,000)	of total	(1,000)	of total
U.S	253,606	50,674	16.7	7,513	10.0	MO	5,055	914	15.3	139	9.7
AL	3,880	789	16.9	86	7.9	MT	823	149	15.4	23	10.4
AK	568	122	17.7	19	9.9	NE	1,574	205	11.5	31	6.7
AZ	5,239	1,273	19.6	229	13.4	NV	2,086	546	20.8	89	13.3
AR	2,304	548	19.2	81	11.5	NH	1,176	138	10.5	11	3.8
CA	29,449	7,345	20.0	1,012	10.7	NJ	7,309	1,371	15.8	190	9.2
CO	4,209	762	15.3	119	9.6	NM	1,548	430	21.7	72	14.0
СТ	3,062	418	12.0	62	7.7	NY	16,347	2,837	14.8	335	7.5
DE	766	118	13.4	19	8.8	NC	7,663	1,685	18.0	276	11.8
DC	522	74	12.4	9	8.0	ND	565	67	10.7	9	5.9
FL	14,287	4,118	22.4	724	17.9	OH	9,819	1,643	14.3	237	8.7
GA	7,687	1,985	20.5	293	11.3	OK	2,977	659	18.1	117	12.6
HI	1,149	102	8.2	11	3.5	OR	3,156	678	17.7	103	11.9
ID	1,294	232	15.2	43	10.2	PA	11,004	1,409	11.4	193	6.8
IL	10,875	1,891	14.8	291	9.1	RI	906	127	12.3	14	6.0
IN	5,462	902	14.2	141	8.6	SC	3,740	766	17.0	136	12.3
IA	2,654	342	11.4	42	5.9	SD	693	108	13.5	17	8.4
KS	2,380	365	13.3	58	8.1	TN	5,290	963	15.4	98	6.6
KY	3,588	694	16.2	84	8.2	TX	18,224	6,433	26.1	1,150	16.5
LA	3,741	711	16.0	97	8.4	UT	2,385	415	14.8	99	11.3
ME	1,167	133	10.2	11	4.0	VT	557	61	9.9	7	5.6
MD	4,874	793	14.0	94	7.0	VA	6,764	1,014	13.0	144	7.5
MA	6,337	295	4.4	43	2.9	WA	5,845	869	12.9	75	4.8
MI	8,465	1,350	13.8	132	5.6	WV	1,552	253	14.0	24	6.2
MN	4,747	456	8.8	68	5.5	WI	5,037	527	9.5	61	4.7
MS	2,349	502	17.6	85	10.9	WY	455	86	15.8	13	9.6

Source: U.S. Census Bureau, *Income, Poverty, and Health Insurance Coverage in the United States: 2009*, Current Population Reports, P60-236, 2010, Table HI05, "Health Insurance Coverage Status and Type of Coverage by State for All People: 2009." See also http://www.census.gov/hhes/www/cpstables/032010/health/toc.htm.

Managers can make use of demographic data to determine how many sign-ups might utilize each online method. Online methods include e-mail, website, and online chats. Both e-mail and online chats must be handled by a call center call taker or off-line worker and therefore must be included in the types of work included in the estimate. A study recently conducted by Pew Research states that 59% of internet users have used the internet to find health care information¹. The Pew Research study also defines internet usage and social media usage in terms of age, race, and income. This data can be applied to demographic data on insurance coverage determine the likelihood of individuals utilizing a specific sign-up methodology. Data from this type of study is required to determine the number of calls, e-mails, chats, "snail mail" items, and other sign-ups a state can expect.

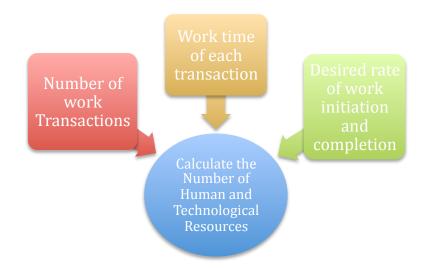
¹Note: These findings come from national survey findings from a poll conducted on landline and cell phones, in English and Spanish, between April 26 and May 22, 2011 among 2,277 adults (age 18 and older). The margin of error among the internet users is +/- 3.7 percentage points.

To complete the estimate of work, managers will need to determine how many total transactions will be required on average to complete a sign-up transaction. How many e-mails, "snail mail" items, or chats will result in an incoming or outbound call?

Managers will also have to determine the period over which the calls will initially occur. Then, managers will need to determine the ongoing work distribution after the initial rush to sign-up.

Estimating Work Time

It will be necessary for managers to define work time estimates for each type of work. This is a critical factor in resource estimation. The essential information required by an effective staffing process begins with managers understanding these basic facts about the work of the call center operation: how many work items, how long to perform one transaction, and how fast the work should be initiated and completed.



Managers can utilize work times from any similar work now being performed, industry standards, and other work estimates. The most desirable process is to define a work process flow chart for each work type and then assign an expected work time value to each. A more in depth understanding of the characteristics of the potential work will enable managers to create a complete resource estimate.

Complete documentation of each work flow should include a step-by-step definition of all process steps and whether they are to be performed by a human or technological resource. The work flow charts should be used to calculate the completion time for each work task.

Maintain an Assumptions Journal

Be sure to maintain a journal and other documentation of all of the assumptions and data utilized to arrive at estimate findings. This type of information provides critical insight into how the estimates were arrived at and can also serve as back-up data when presenting findings to higher management.

Detailed documentation of assumptions also allows managers to perform root cause analysis if estimates are not correct or need review based on new information.

Call Center vs. Back-Office Work Activities

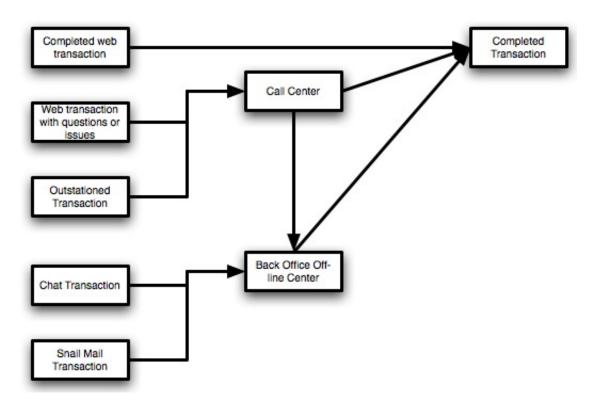
The next step in the process is to determine whether sign-up work will be completed in a blended call center or in a call center with a separate back-office operation. We have determined that a call center is necessary to handle call-in sign-ups, online chats, issue resolution, and other sign-up methods. However, under the ACA requirements, states and managers will need to consider responses to e-mail and "snail mail" requests and applications (non-call work).

The question is whether non-call work should be processed by call takers in the call center between inbound-outbound calls, during scheduled times, or in special groups, or handled by specialized workers dedicated to the completion of non-call work.

Typically, call centers have not handled non-call work well because this work does not fit within the service measurement provided by an ACD (Automatic Call Distribution System). Managers are constantly in a position of managing a difficult balancing act by moving workers between the two types of work. Non-call work normally does not receive attention until it is backed-up, managers receive complaints, or some other issue arises.

We have found that an off-line work group (Back Office) is the best solution for long-term successful management of non-call work. This allows both the managers and the workers in the Back Office to become expert at the management and completion of non-call work. The introduction of work management systems that can include non-call work is an important step in automating the completion of non-call work. Automation allows managers to effectively measure the volume and response times of non-call work activities.

A possible division of work between a call center and a back office off-line work center is described below.



A blended call center provides a single focal point for all work. An operation made up of a call center to handle incoming calls and chats and an off-line back office can be a more effective model.

Definition of Service Rates

The insurance sign-up activity is by its nature a time-sensitive activity. The need to manage large numbers of applications quickly is an operational characteristic of these call center operations. Our resource management process defines work initiation time metrics and completion rate as Service Rate.

Service Rate is the rate at which work must be completed or initiated. In the call center management process we measure how quickly calls are answered compared to a standard, a % abandonment rate, or % abandonment rate within a specified time objective. The service rate along with the work volume and transaction time allows managers to utilize Erlang-C, a work simulation, or some other model to estimate staff. Without a service rate, the staff estimate is not complete. You will find that it will require "Y" number of workers to complete specified number of work items. However, the requirements for workers changes when we want to complete the same number of items within four hours of receipt or with a time another time frame.

Service Rates should be utilized in both call and non-call work environments. One of the main tenants of our management process is that if work is not measured it cannot be managed. Therefore, each type of work must be assigned a service rate, i.e., e-mails completed within four hours, mail processed within 24 hours of receipt, % of calls answered within "??" seconds, and so on. Without this type of objective it is not possible to arrive at an effective staff estimate.

Types of Service Rate Measurements

Type of work	Service Rate Measurement
Incoming Calls and Chats	Speed of answer
	% abandons
	% abandons within a time objective
	Grade of service
Snail Mail	Transaction initiation or completion time target
Outbound calls to resolve issues	Transaction initiation or completion time target
Questions from automated processes	Transaction initiation or completion time target
E-mail requests	Transaction initiation or completion time target

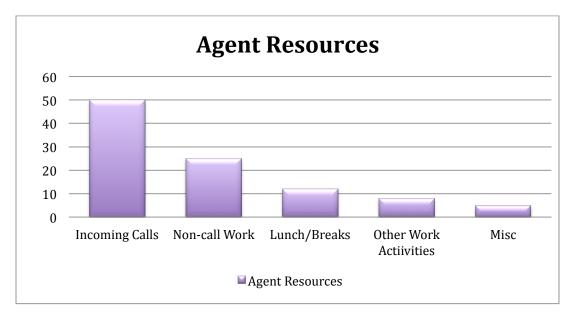
Staffing

The number of workers staffing a government internal call center is often based on the assigned budget rather than the anticipated workload for the work group. This may be the reality facing managers staffing call centers. However, managers should still focus on the completion of mathematically sound work and staff estimates.

A mathematically sound staffing estimate can serve as cover for managers if the total required staff is not made available and the expected call estimates occur. This can result in missed calls, multiple re-attempts by callers, and backlogged work activities.

The staff resource issue can be resolved using an Erlang-C model in Microsoft Excel, a call- or work-simulation tool, or a Work Force Management System. Whichever methodology they use, managers should run multiple iterations of the estimate with different assumptions about work volumes, work time, after-call work time, re-attempt rates, and so on. Each iteration of the estimate should be fully documented in the assumptions journal.

Managers must make assumptions about actual work time compared to the total time at work to arrive at the total headcount required compared to the resources required to perform only the work. Besides accounting for lunch and other breaks, managers will need to account for other "non-work" work activities. All of these must be included in the staffing estimate. The following chart displays a typical resource distribution with incoming call and off-line work functions.



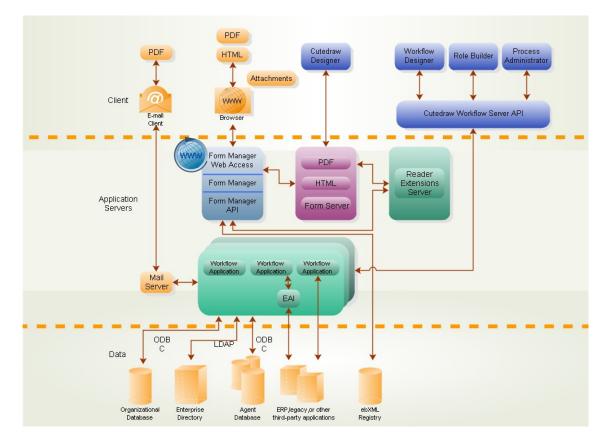
A mathematically sound resource estimate should recognize the diversity of work types and include all uses of human resource work time.

Systems Required

The selection and implementation of appropriate technology is critical to the effective implementation of an ACA Exchange call center. The main functions technology will provide are as follows:

- manage workflow;
- measure workflow;
- provide constituents with options for sign-up automation and automated question resolution;
- record calls for management and legal reasons;
- provide information to call takers and other workers in a timely manner; and
- provide a traceable workflow for management if needed.

The flowchart below describes an example of a well-designed technology-inclusive workflow.



Completion of the process flowchart allows managers to plan resources effectively and ensure that all work activities can be completed.

The following is a partial list of the technology managers should consider utilizing in the ACA Exchange call center environment.

Technology	Purpose
ACD (Automatic Call Distribution)	The ACD distributes incoming calls evenly to call takers based on the most idle call taker, predefined call taker skill sets, the call taker with the longest idle time, or other management criteria. ACD systems also take performance of call teams and agents.
Multi-Tasking Work Management Server	These systems perform the many of the same functions as an ACD only for non-call work. The must be electronically connected to e-mail servers, incoming mail scanners, and other systems to capture work and distribute it to workers. Some ACD and Work Force Management systems have options built in to accomplish this function.
Call Logging/Quality Monitoring System	This system will record all incoming calls for playback in work evaluations and as backup for any legal or other issues that might arise out of the insurance sign-up process.
E-Learning	E-Learning systems provide online push training for call takers and other workers. The systems push work to the desktop and schedule time for review and knowledge testing. The e-learning system will also track the results of training testing.
CRM (Customer Relationship Management Systems)	CRM systems perform a wide range of functions, including being the workers' main desktop, managing call flow, and tracking data.
IVR/Voice Response Work Automation	These systems utilize either telephone DTMF tones or voice prompts to complete tasks. Utilizing this technology, a caller might have the ability to complete the full sign-up process, depending on the complexity.

Technology	Purpose
Data Tracking/Speech Analytics	These systems will track and mine data for keywords and other data to provide actionable decision-ready information.
Website	An effective website will provide self-service for sign-up, frequently asked questions and other actions.
Work Management System (WFM)	A WFM system provides a tool for ongoing work estimation and worker scheduling.

The selection and sizing of technology is critical to the success of any call center operation. It will be critical to the ACA Exchange call centers because of the potential for very high call volumes.

Estimating Technological Resources

An Erlang-B model or other simulation is useful in estimating technological resources. All technology must be sized based on the projected work activity. Each automated work function must be defined in a step-by-step format and assigned a work time value.

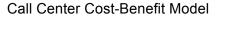
An Erlang-B or simulation model will provide network and system capacity sizing to handle projected work activity volumes.

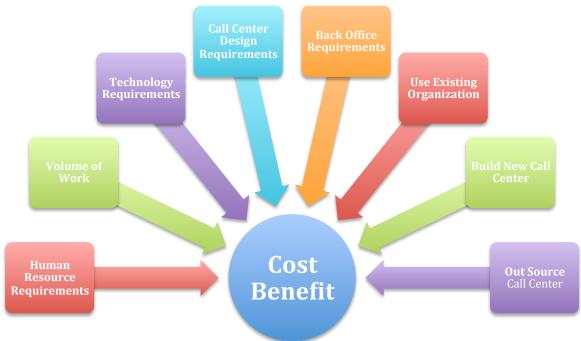
Cost-Benefit Analysis

All of the data described in the previous sections of this document can be utilized to create mathematically sound cost-benefit analyses of the requirements for a call center to meet the needs of the ACA guidelines. An effective cost benefit analysis tool will include the following:

- an estimate of both call- and non-call workloads;
- a staff estimate;
- all of the assumptions used to develop the estimates;
- an estimate of the costs of all systems and facilities required for the call center; and
- the criteria for evaluating the financial findings.

In addition to a complete financial analysis, managers also need to decide if the call center should be a new standalone entity or if an existing call center will be able to handle the additional call volume. The financial analysis should include a comparison of the costs for utilizing an outsourced call center solution. Managers should also consider using a for-profit or non-profit outsourced call center that utilizes state and federal funding.





Implementation

The actual implementation of the call center operation involves the integration of technology and human work processes into a coherent work operation.

The development of a complete project plan is critical to the success of the implementation of an enterprise of this complexity. The project plan should be completed using a comprehensive project management process and tools. Project management tools include a project management application such as OmniGraffle, Microsoft Project, or any of the other effective online project management tools.

Support of Call Center Consulting Services

The use of a consultant with project design and implementation experience could be the key to successful completion of the project. A consultant will bring experience and reduce the time and effort required to arrive at the desired outcomes for the project.

The consultant should be engaged during the early stages of the project to gain the full benefit of the engagement. The early planning stages are critical to setting up the project to succeed.

Benefits of utilizing external consulting services in complex projects

- Experience with complex call center implementations
- Proven call center design capabilities
- · Expert in human and technological resource mathematical models
- Expert in technology selection and integration
- Experience in work process design documentation
- Experience in systems configuration and application design
- Proven project management process design and management

Summary

The establishment of an ACA Exchange call center is a multi-faceted undertaking. Managers need to determine work volumes based on the uninsured base and other resulting work activity volumes.

The completion of mathematically sound work and resource estimates provides the basis for technology selection and other decisions. Managers must utilize this data to determine if the call center should be internal or outsourced. If the call center will be outsourced, managers must then decide what outsource capability to utilize.

The use of a consultant can have a significant impact on the time and costs required to meet the needs of call center implementation.

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