Healthcare: Communicating in Context
Understand member and patient needs throughout the wellness journey
Most healthcare executives would agree that the more they know about a member or patient, the better positioned they are to serve and care for them. This has led to big data projects, data warehouses, and many other technology-based fact-gathering missions. After collecting terabytes of demographic, behavioral, and psychographic data, these efforts still often lack a critical component: context.

Context helps companies understand the human components of their customer’s situation: that unique combination of mood, intent, location, past history, personal preferences, and affinities that leads to a specific need at a specific moment. Even with increasing access to real-time data, it is difficult to contextualize customer interactions without their willing participation. Research shows that a majority of customers are willing to share personal information with businesses subject to three key criteria:

- There is an offer of value in exchange for the information.
- They trust that the information will be kept secure.
- They have control of how the information is used or shared.

This white paper focuses on the cultural and strategic approaches necessary for healthcare companies to enable a value exchange in the form of contextual member and patient communications, including how that information can support the communications cycle and wellness journey.

Recognizing that most consumers are willing to share personal information in return for improved service, healthcare companies that want to capitalize on improved engagement and loyalty must approach member and patient data as a tangible asset to be acquired, managed, and reflected in every communication.

The cultural component entails management’s commitment to delivering valuable and enjoyable customer experiences. The process begins by equipping all employees to anticipate member and patient needs and then to proactively communicate with them. This may extend to improvements in automated interactions, such as interactive voice response and self-service portals, with the goal of earning access to additional member and patient data. The more healthcare companies learn from members and patients rather than simply about them, the deeper the relationship.

EARNING A CONTEXTUAL VIEW
While 99% of companies believe that achieving a single customer view is important to their business, only 24% believe they have achieved it. Many don’t know where to start.
Contextual communications require an iterative process of understanding the member or patient, anticipating their needs, responding to those needs, and continually gathering input from them to understand how their needs are evolving over time (see figure below). It is this continuous interchange of data collection and the transformation of data into improved service that provides a robust view. By developing and maintaining this view, communications can be strengthened over the course of the relationship.

### THE CONTEXTUAL COMMUNICATION CYCLE

1. **Know**
   - Transaction Data
   - Observed Behaviors
   - Preference Data

2. **Respect**
   - Recognition
   - Security/Privacy
   - Content Curation

3. **Anticipate**
   - Journey Mapping
   - Predictive Models
   - Proactive Communication

4. **Simplify**
   - Situational Awareness
   - Plain Language
   - Responsive Design

5. **Acknowledge**
   - Affirmation
   - Appreciation
   - Reward

6. **Validate**
   - Measure
   - Survey
   - Observe

### 1. KNOW.
Before you can begin to map out a strategy, you must have a good picture of your customer base as a whole, as well as a methodology for extracting information about individual members or patients. While adhering to privacy and security regulations is critical, you can confirm existing data (such as contact information and communication preferences) and seek insights (such as lifestyle and wellness habits) from in-person interactions or via your website, app, call center, surveys, and other contact points. Simply collecting complete and accurate contact information can have positive results; on the flip side, the biggest impact of not having current data is delayed payments according to 65% of healthcare organizations.3

### 2. RESPECT.
Members and patients should have the ability to opt-in for data collection rather than opting out. Companies must take all necessary precautions to safeguard their data, including educating members and patients about online security best practices. If they do not trust in the security of their personal information, they will not volunteer preference information.
3. **ANTICIPATE.**
Each touchpoint is only one stepping stone along the journey. Whether communication is initiated by the member, patient, or the company, there is a next logical step or next-best action to take in response to that communication. Some of these next steps can be intuited purely through common sense; however, designing robust communication experiences typically involves some level of journey mapping or even the use of predictive models to anticipate member and patient needs. When used effectively, these tools can help tailor health and wellness communications, anticipate emotions, and proactively communicate to drive healthier outcomes. Making tasks easier, saving them time, and improving their experience are components of the value exchange when a member or patient offers preference data.

4. **SIMPLIFY.**
Making the wellness journey simple can be incredibly complex. When done well, it appears effortless because all of the processes work together to steer the member or patient where they need to go next. From the communications they receive to the interactions they initiate on whatever device they choose to use, the path should be easy to follow due to the use of effective and responsive design, curated relevant content, awareness of their situation or location, cross-channel integration, and plain language. There is an extensive focus on the use of plain language in healthcare communications, where patients and members can find what they need, understand it, and act appropriately based on their understanding. This typically requires putting the most important information first; breaking it into understandable pieces; using simple language and defining technical terms; and applying white space so the communication is easier to read.

5. **ACKNOWLEDGE.**
Opportunities to acknowledge and appreciate members or patients should not be wasted. In fact, the connection that a patient feels with his or her clinician can ultimately improve their health mediated through participation in their care, adherence to treatment, and patient self-management. Proactive communications, such as relevant wellness information and post-care instructions, are an opportunity to restart the cycle of loyalty, which emphasizes that you know and respect your members or patients. They are also an opportunity to validate preferences, gather further information on interests and affinities, and deepen the relationship.

6. **VALIDATE.**
Make sure to measure how well your communications are meeting your members’ and patients’ needs. Solicit direct input, track key data points, and observe changes in their behavior. Beyond surveys, stay attuned to call center interactions, monitor website interactions, consider focus groups, and continually research changes in trends and preferences. Synthesize this information as input back into the “Know” process, continuing the contextual communication cycle.
CONTEXTUALIZING COMMUNICATIONS

Learning about members and patients in the context of their current situation, emotional state, and specific needs allows communications to raise the overall experience and, most importantly, help to avoid bad experiences.

If a member calls to report a problem with their bill, for example, and successfully navigates your phone tree to report the problem, understand that they may be frustrated once they reach a human. Avoid upsetting them further by asking them who they are and why they are calling. Instead, recognize members and patients by name and ask, “Are you having a problem understanding your bill?”

Communications can be used to avoid that call in the first place. For example, new members may be confused by their Explanation of Benefits (EOB) and call customer service. To avoid the call and improve the experience, tailor the EOB to help members understand what action they need to take. Enhancing communications can deliver measurable benefits.

Half of consumers want the communication they receive from their insurer to be personalized or highly personalized. The 24% who want it highly personalized say this means communications are customized as specifically as possible to their situation and needs.6

51% of customers are likely to post a review and/or tell friends about a company that offers a poor experience.7

62% of customers get frustrated when a service agent asks them for information they already provided to someone else at the company.8
Members and patients are willing to share information if it improves the service they receive. This includes enabling them to choose their preferred channel for each interaction. In fact, nearly half of all consumers would switch health insurers if their communications were difficult to understand or not delivered the way they prefer.\(^9\)

Although apps and cloud storage are on the rise, consumers generally want communications in three main ways: print, email, or through their provider’s or insurer’s website.\(^{10}\)

Print is strongly preferred for enrollment information and premium bills; many also prefer print for EOBs. And what happens to those printed mailings? It depends on the generation: 82% of Boomers save print communications and only 56% of Millennials do the same.\(^{11}\)

While secure email falls behind print, it is viewed as a good way to receive personal plan and coverage information. Additionally, 28% of members want to receive their EOBs digitally and 25% want to receive their provider directory digitally.\(^{12}\)

**WHAT TO CONSIDER WHEN IMPLEMENTING CONTEXTUAL COMMUNICATIONS**

1. Members and patients want to specify their contact preferences and healthcare companies would be wise to listen and learn.

2. Don’t make paper suppression an “all or nothing” proposition. Allow members and patients to choose the communication channel by document type.

3. Be creative with alerts. Allow members and patients to set preferences for alerts, such as appointment reminders and prescription available notices.

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- Broadridge Healthcare Communications Survey, 2018

It’s not enough to respond to problems effectively. Healthcare companies must also use information gained about members and patients to proactively communicate, seek feedback, and anticipate potential issues. Increase satisfaction by making communications available on the channels of their choice, ensuring they are responsively designed with relevant content to meet their particular situations.
When you communicate with members and patients the way they want, you earn the opportunity to create a life-long relationship and improve health outcomes.

Keeping members and patients happy can reduce the cost to serve them. If they are unhappy, they are more likely to call customer service, require support, or leave. If the customer issue is resolved at the first engagement, 67% of churn is preventable.\textsuperscript{13}

Adding a contextual element to your communications strategy ensures that you are considering the continuum of care that your members or patients require—from situation to situation and device to device—while providing the opportunity to reap the rewards that come from delivering superlative service.

\textbf{CONTACT US}
For additional information, please contact us at +1 844 889 4040 or at broadridge.com.

\textbf{TRANSFORMING YOUR COMMUNICATIONS}
We can help you transform your healthcare communications into contextual experiences that increase loyalty and market share while reducing regulatory risks and operational costs. By seamlessly connecting members and patients with relevant content across the wellness journey, your print and digital communications can drive greater engagement, efficiencies, and healthier outcomes.

\textsuperscript{1} Data and Marketing Association, “Data privacy: What the consumer really thinks,” June 2018
\textsuperscript{2} MarTech Advisor, “How Data is Defining Today’s Customer Journey,” May 2016
\textsuperscript{3} Keypoint Intelligence-InfoTrends, North America Survey Results
\textsuperscript{4} Plain Language: A Promising Strategy for Clearly Communicating Health Information and Improving Health Literacy, U.S. Department of Health and Human Services
\textsuperscript{5} Institute for Healthcare Communication
\textsuperscript{6} Broadridge Healthcare Communications Survey, 2018
\textsuperscript{7} Keypoint Intelligence-InfoTrends, North America Survey Results - Transactional Communications: Consumer Survey, April 2018
\textsuperscript{8} Ibid.
\textsuperscript{9} Ibid.
\textsuperscript{10} Ibid.
\textsuperscript{11} Ibid.
\textsuperscript{12} Ibid.
\textsuperscript{13} thinkJar annual survey and associated thinkJar research
Broadridge, a global Fintech leader with over $4 billion in revenues and part of the S&P 500® Index, provides communications, technology, data and analytics. We help drive business transformation for our clients with solutions for enriching client engagement, navigating risk, optimizing efficiency and generating revenue growth.

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