



Bupa Health and Wellbeing, UK

At Bupa, the customer service advisors for Private Medical Insurance were moving from multiple systems to a single system and needed a solution to guide employees through the transition without any negative impact on customers. They selected Panviva's SupportPoint to provide application guidance for each user to ensure their usual excellent levels of customer service. Bupa has since rolled out SupportPoint to their call centers, to clinical and provider services, and also to their claims and enrolment departments.

The Company

Bupa was established more than 60 years ago in the UK and is an international healthcare company with customers in over 190 countries.

The Challenge

Health insurance is a highly-regulated, dynamic, and increasingly complex industry. Bupa faced the same challenges common to every health insurer in these days: staff throughout the company had to deal with multiple systems and interfaces and with ever-changing insurance products and policies. In the call center in particular, advisers looking for information had to search through intranets, documents, notes and policy manuals to answer customer questions and comply with procedures.

Bupa needed to find a system that would help guide their advisors quickly through these customer calls, providing them with access to just the information needed, quickly and consistently.

'During the pilot, call handle times went down instantly by 15 seconds.'

'SupportPoint is very user friendly; clear, distilled answers; accurate and consistent; search is fast.'

'I was surprised at how quickly people took to it.... Once people see the system at work, it sells itself.'

'Every time we run training on the system, someone says, I wish we'd had this ten years ago.'



SOLUTION REQUIREMENTS

CALL CENTERS

- Simplify desktop complexity
- Improve Average Handling Times
- Reduce agent training requirements
- Increase customer satisfaction rates

SUPPORT POINT RESULTS

CALL CENTERS

- AHTs reduced by 30 seconds
- Training requirements minimized; focus shifted to soft skills and quality of customer experience
- Increase in FCR rates
- Agent attrition reduced by 26%

SOLUTION REQUIREMENTS

CALL CENTERS

- Reduce incomplete claims and rework
- Eliminate “ex gratia” payments
- Support regulatory requirements
- Reduce time-to-competence training for new claims assessors

SOLUTION REQUIREMENTS

CLAIMS PROCESSING

- Incomplete claims, exceptions and rework greatly reduced
- More claims handled by frontline staff fewer progressing to the claims office
- Ex gratia payment amounts on the decline
- Compliance improved – claims handled correctly and consistently using up-to-date procedures and information
- Training reduced – system provides all of the technical information

The Solution

On a fact-finding visit to Australia, the UK Service Director visited Medibank, one of its largest private health insurers, where he saw SupportPoint at work in their call centers. SupportPoint is a unique software solution that sits alongside applications and information sources on the desktop and guides users in real time through the completion of processes and procedures – no matter how complex. The SupportPoint system recognizes the role of each user, and knows exactly what each is doing because of the screens and applications open on their desks. At Medibank, SupportPoint was leading agents step-by-step through each customer call, pushing the right information to them at the moment of need and helping them provide accurate, consistent and fast answers to their customers.

The director returned to the UK, convinced that with SupportPoint, they could provide custom application guidance for each user that would also enhance the training experience with no negative impact on customers. He brought in experts from Panviva whose job was to define a sustainable information management strategy and structure for content. Every SupportPoint solution consists of both the software and the content that is specific to the user’s tasks, applications and information sources. The strategy Panviva recommended included a structure, styles, standards and templates for documentation, with governance processes and clearly defined roles and responsibilities to ensure that Bupa had the right people to develop and manage the information. A centralized knowledge management team was established to provide a shared content service within the business and a Panviva consultant assigned to teach them everything they needed to know about developing and maintaining content.

A proof of concept was run and positive feedback gained; “Very-user friendly; clear, distilled answers; accurate, consistent, search is fast.” Within just a few months, Bupa had new content complete, with SupportPoint up and running in one of their member call centers.

The Results and Benefits

According to Gillian Doolan, who led Bupa’s central knowledge management team at its inception, “During the pilot there was a 15 second reduction in call handle time. A detrimental effect had been expected because it was all so new, but instead call times went down instantly. Customers got consistent answers and they got them faster.”

SupportPoint expanded into other parts of the company, eliminating inconsistency as it went. Bupa has five different member services call centers, each with its own shared drive, its own versions of the same documents, and its own people. SupportPoint allowed Bupa to centralize the processes, policies, procedures, eliminate the extra drives and development efforts, and standardize structures and templates. “Now whenever we find information that is generic across several areas, we make one document and release it in SupportPoint. The departments still have ownership of the information, but we develop and maintain it centrally and make it available to everyone whose role permits them access.”

The one document accessed by all SupportPoint users is the policy manual. The knowledge management team put this entire database into SupportPoint, with content organized in such a way that anyone could get just the detail they needed in seconds. Maintenance of the manual, once extremely unwieldy, is now managed centrally, with near instant changes available system-wide so it is always up to date and accurate - no email alerts or Post It notes required.

SupportPoint also contains information in claims processing where assessors can now access medical policy information. Summaries of contractual agreements with medical providers and charging information, which claims assessors also need, has been added to the knowledge base. The system guides the assessors through processing new claims and answering queries on rejected claims and claims not fully paid.

When asked about the roll out and implementation of SupportPoint at Bupa, Gillian responded,

“The system really speaks for itself. We train people on it and typical comments in every session are:

- I wish we’d had this system ten years ago.
- It’s brilliant the way it searches files.
- It’s so easy to read and navigate.
- It’s simply amazing.

I was surprised at how quickly people took to it given the fact that we were going through a system change at the time. Once people see the system at work, it sells itself. Plus we’ve got a core of really passionate people here.”

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