First Call Resolution
The Primary Metric for Healthcare Contact Center Excellence

INTRODUCTION
The Affordable Care Act is creating an increase in customer service inquiries to health insurance providers. Combined with legislative pressure to become more efficient, insurance providers must streamline the way they interact with their customers. How does a customer service operation reduce costs, improve customer satisfaction, and increase customer loyalty? The key is First Call Resolution (FCR), which reduces the total number of inquiries, but maintains—or even improves—the customer’s experience.

Repeat calls cost money and frustrate customers. In this overview, Art DiBari and Clark Ridge recount a process they developed to improve FCR using what they’ve learned through years of managing healthcare contact center operations.

UNDERLYING CAUSES OF LOW FCR

Agent Turnover
As just about every contact center will acknowledge, this is the most prevalent reason for quality issues and repeat calls. When turnover gets high, undertrained representatives create pockets of inconsistency. Too often, team leaders and managers are so focused on getting new representatives up to speed, the more seasoned representatives are never developed into a world-class team.

Ineffective Training
This can reveal itself in a number of ways, but one of the symptoms is keeping representatives in the classroom for too long. It’s not uncommon for some programs — due to complexity, multiple legacy systems, and unfamiliar tools — to require up to 12 weeks of classroom training before a single call is handled. It’s unrealistic to expect entry-level employees to retain this much information and put it into practice on the phones. No matter how you identify it, ineffective training results in mishandled calls, low FCR, and increased callbacks.

Multi-tasking Too Soon
To excel, call center staff need to develop multi-tasking skills. But prematurely assigning multi-tasking functions to representatives waters down their effectiveness and causes problems. It’s crucial to maintain this balance and expand individual responsibilities as capability allows.

Inadequate Tools Or Systems
When comparing FCR performance among multiple teams or groups, pay attention to the tools they use. Often you’ll find a lower-performing group doesn’t use or have access to the same tools or systems available to others. This may be the result of changes in process that left a group behind or other internal issues.

Measuring The Wrong Thing
Some quality monitoring scores overemphasize soft skills. Courtesy is important — it’s the expectation for every call and will improve customer satisfaction (CSAT) and net promoter score (NPS). But the contact center’s true measure of success is First Call Resolution. If FCR is low, it may be because you’re having positive interactions but not addressing the real problem.

FCR SOLUTIONS

Incremental Expertise
When looking at reasons for repeat calls in relation to the tenure of the agents, newer agents have a higher rate of failure overall and with simpler interactions such as basic benefits and eligibility calls. Revamp the new-hire training program to allow agents time on the phones handling certain types of calls before moving them up to train on more difficult call types. In one example, this resulted in a training schedule broken into four weeks at Tier 1, two weeks at Tier 2, and one week for Tier 3, rather than several continuous weeks of training. Incorporate live call handling between each tier for agents to become experts at their level before learning how to resolve more complex calls.
Early Intervention for Agent Retention
Implement early warning systems that identify agents likely to resign, having operations management and site management intervene before agents begin to burn out or make plans to apply elsewhere. In our experience, such initiatives paid off as we watched our annualized attrition drop by 63 points.

Streamlined communication
In many instances, even experienced agents fail to resolve claims and have a very high number of transfers for complex calls. While all agents may be clear on expected outcomes, they may know very different paths to resolve callers’ needs. Ensure newer tools and systems are available to all agents. In one example where this was found to be the case, our ability to communicate resolution and close service requests rapidly increased. Callers were given answers quickly, and as service request inventory dropped, FCR climbed.

Measure the key steps to resolution
For each call type, closely monitor the elements and steps necessary to resolve each unique situation — proper and efficient use of tools, asking enough questions to determine the caller’s needs, taking ownership of resolution rather than tasking the caller with next steps, and so on. Back in 2010 a Harvard Business Review Study said, “Stop trying to delight customers… forget the bells and whistles and just solve their problems.” There is truth in that advice, and we’ve seen the benefit of measuring the right things.

WHY HEALTHCARE PAYORS NEED TO BECOME MORE EFFICIENT
Before the Affordable Care Act health insurers were already taking steps to make calls easier for their members and cut costs by reducing the number of calls needed to resolve an issue or question. Moving forward, an anticipated 30-40 million new members will gain access to healthcare coverage, many of whom are unfamiliar with private insurance. We must continue to adapt and prepare to service this flood of traffic. As the volume of calls increases, improved handle times and FCR rates becomes even more important in the battle to contain costs.

“Within nine months, our healthcare team was able to reduce operating costs by $3.5M, or 18 percent by increasing First Call Resolution from 50 percent to 76 percent for a regional blues plan.”
- Art DiBari

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