

ARTICLE

C-Level Magazin Nr.4

Translated from German

HOW NEW TECHNOLOGIES ARE CONTRIBUTING TO END-TO-END DIGITIZATION

Health service administrators are drowning in the flood of data and thereby facing new challenges. The speed at which data are generated, the volumes of data and their heterogeneity are set to increase further in future and this will also bring opportunities.

One good example of the data explosion in the health service is the volume of inquiries sent by customers to their health insurance companies. There is an increase in email traffic as people contact their health insurance providers for various reasons, such as to request a change in their deductible, to report an accident, or to ask about their last benefits statement. Due to their unstructured format, such inquiries are much more difficult to process automatically than previous modes of communication and consequently involve more manual input and greater expense for the health insurance companies. Inquiries which need to be processed manually are also more susceptible to errors based on incorrectly completed forms or missing documents. This can quickly lead to negative customer experiences, inadequate customer service and, in the worst case, a change of insurance provider.

The time-consuming manual administration process is pitted against the expectations of the insurance holders. They want a consistent customer experience and personal and prompt answers, regardless of which channel they use to make contact. So how can service providers in the health service optimize their processes so that new contact channels are networked with the old ones and investment in legacy systems is kept under control at the same time?

New technologies lend themselves to applications in the health service so that data can be used with optimum efficiency. Besides structured data from databases or from electronic medical records, which are easily machine-readable, around 80 percent of the data currently available is unstructured. Processing and analyzing unstructured data from emails, photographs or social media posts are challenging tasks for those who provide, finance and pay for services in the health sector, and the consequences will ultimately be felt by those on the receiving end of health care services – be they in the form of increasing health insurance premiums or lengthy processing times.

In order to sweep aside the operational inefficiencies, it is necessary to view the business processes as a coherent whole. Transparency about the interactions at the various points of contact is also critical. Technologies like artificial intelligence (AI) and robotic process automation (RPA) are suitable for use here.

Freely formulated inquiries, referred to as unstructured data in computer terminology, are being understood and categorized by artificial intelligence. It works by recognizing patterns instead of keywords, therefore even complex issues raised by customers can be understood. Unstructured data are therefore made into structured data which are made available in a structure which allows identification and classification systems tailored to the in-house processes. In the next step, the structured data are relayed to software robots which also operate on the basis of business rules. They work on the user interface in a similar way to a person and are able to copy information from a form, for example, and transfer it to an ERP mask or answer the questions asked by the insurance holders independently and automatically.

It can be said in summary that, in addition to increasing customer satisfaction levels, the use of digital technologies like artificial intelligence and robotic process automation is opening up further new possibilities for service providers in the health service. AI and RPA are capable of screening and investigating processes, and they offer transparency and a solid basis for productive data analysis. More efficient processes lead to cost savings and ideally to an improved market position for the health insurance company. Many insurance companies are likely to be able to boast the resulting efficiency gains and customer experience benefits as unique selling points in future.



« Insurance holders want a consistent Customer Experience »

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