An insurance industry case study

CLEVVA digital co-workers navigate contact centre agents through optimal service conversations

The contact centre of a large South African medical insurance company offers support for a broad range of client service queries, from account queries to pre-authorisation requests.

To service the wide range of possible queries, specialised teams were set up. The IVR system implemented upfront query categorisation so that specific calls were channeled to specific agents. The agents attempt to diagnose the root cause of each customer query, and then aim to resolve the query in line with company policy by applying the relevant procedure guidelines.

If an agent is unable to effectively resolve the query, they second tier the call to a small team of specialists to resolve.

The challenge

- The varying call volumes across different query categories resulted in sub-optimal workforce utilisation, with certain specialist teams being idle while other teams were overwhelmed. Given the specialised nature of the calls, agents could not easily be transferred across teams.

- It took approximately six weeks to formally train new agents, with many agents taking a further three to six months to be deemed competent on the floor.

- This lead time reduced the Contact Centre's reaction time when responding to changing customer demands.
  Given their complex nature, a sizable percentage of calls were being sent to the experts. When agents didn't second tier and then made a pre-authorisation mistake, the cost implication could be in the millions.

- Policy and procedure change relatively frequently and agents struggled to keep up.

- Free-text call reports varied dramatically in detail and quality, making follow ups and reporting very difficult.

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The requirement

- Create multi-skilled teams, capable of handling any call category
- Increase first-call resolutions
- Improve call reporting
- Improve client service ratings
- Reduce the time needed to get a new agent performing effectively
- Reduce call volumes as a result of improved digital self-service

AUTOMATE. INTELLIGENTLY.

The solution

After an extensive global review, the Call Centre selected CLEVVA to build a team of digital workers to augment the staff and deliver an improved self- service offering. A small team of automation engineers worked with the Call Centre service team to capture all the rule-based decisioning logic that the few experts were applying to resolve all known query types.

The team initially leveraged the detailed documentation available on the knowledge base, but found that much of the implied logic was missing. This was then filled in during workshops with key subject-matter experts within the business.

To offer the agents real-time access to a CLEVVA Digital Co-worker, a web front end was deployed. The logic enabled agents to handle any customer call as if they were an expert, with the CLEVVA Digital Co-worker guiding them dynamically to ask the right questions, offer the right answers and take the right actions at the right time, while providing a detailed call report to prove it.

The Medical Insurer is now aiming for end-to-end process automation, as CLEVVA digital workers work in tandem with unattended RPA software-processing bots. With the help of a CLEVVA Digital Specialist, intelligent, context-relevant digital self-service can be offered via their web, mobile app and social media channels.

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The results

By building a wide range of CLEVVA Digital Co-workers to deal with every known client request, the Medical Insurer offers call-centre agents intelligent decision support all in one place.

Clients access self-help services via the website and mobile apps, using the same logic and CLEVVA Digital Specialists, so their experiences are seamless and consistent.

By integrating into the existing CRM, CLEVVA digital workers automatically take known client data into consideration, so only relevant questions are asked and only relevant advice is offered.

Dramatically shortened agent training now focuses on call behaviour skills, rather than medical policy and procedure knowledge. The Medical Insurer therefore no longer needs to recruit experienced medical professionals to answer the more complicated medical queries.

Every agent can handle any query covered by the CLEVVA Digital Co-workers and can easily be deployed to meet changing call volumes.

A summary provided by the CLEVVA digital workers at the end of every call details every question asked, every answer given, and every action taken so there is no need for free-text summaries. Accurate call reporting lowers the Medical Insurer's quality-assurance risk and the resulting data can be exported into various reports to analyse call trends.

The benefits

CLEVVA enables the Contact Centre team to deliver a consistent, compliant level of service to all customers without the historic risk of varying agent knowledge and experience. No matter who answers the call, the customer will be asked the same questions, be offered the same answers, and experience the same outcomes.

Deploying the advisory logic into customer self-service in the future will fundamentally change the Medical Insurer's ability to deliver a cost-effective service across a growing customer base.

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