



Optum health insurance marketplace solutions



Proven experience assessing and improving marketplace functionality, operations, enrollment and IT

Optum™ has a proven track record in delivering successful solutions to state and federal health insurance marketplaces. Whether it's information technology, operations, contact centers, program management, leadership or consulting, Optum brings extensive market knowledge, health care resources and experience to the range of challenges governments face implementing these complex projects.

Optum — unparalleled experience improving state and federal marketplaces

Optum has significant experience partnering with state and federal agencies in all phases of marketplace development, from establishing and operating contact centers to assessing and improving marketplace functionality, operations, enrollment capability and information technology.

Contact centers that enroll and retain members through active engagement

Optum high-touch contact centers provide consumers the personal attention they need to make informed decisions about their health care. We offer multiple communications vehicles, such as walk-in centers, phone, text and web, to encourage interaction and engagement.

Unlike the typical call center, Optum employs only highly trained consumer engagement specialists and nurses. Our contact center specialists educate consumers on their health plan choices, walk them through the enrollment process and proactively engage with them after they select their health plan. We teach consumers how to use their benefits and provide tools and assistance to help them make better health care decisions. This proactive approach promotes better health habits and outcomes.

Contact center services are flexible — we can add or modify services quickly, as need arises.

Optum and the state marketplace Working together for improved performance

Optum is currently engaged with a number of states, among them Massachusetts, Maryland, Vermont and Rhode Island, as well as Washington D.C., to develop and enhance marketplace capabilities. Our accomplishments include developing and implementing a new data entry tool for paper applications, drafting short- and long-term technology plans and establishing an operations command center to monitor marketplace operations 24/7 and address problems in enrollment, billing and operations management.

Optum and HealthCare.gov

Optum directs improvements and helps increase enrollments

In October 2013, Optum took responsibility for leading site improvements for HealthCare.gov. The government turned to Optum based on our unique experience in data and technology, management of large, complex projects and successful implementation of the federal Data Services Hub — a routing tool used to verify eligibility for selected plans and financial assistance. By December 1, 2013, HealthCare.gov was a stable and robust site and supported more than 1.8 million daily users.¹

Upon taking on the expanded role of general contractor, Optum immediately put in place a team of on-site technology and program management experts, prioritized a defined list of issues to be solved and established a rigorous management structure with real time, 24/7 decision-making. As a result of this work, performed in collaboration with CMS, HealthCare.gov achieved substantially improved functionality, leading to improved customer experience and significant increases in online enrollments.

Reference

1. "HealthCare.gov Moving Forward," Julie Bataille, Director of Communications, Centers for Medicare & Medicaid Services, <http://www.hhs.gov/digitalstrategy/blog/2014/01/healthcare-gov-moving-forward.html>. Published January 16, 2014.

Broad-based marketplace support and implementation meeting a multitude of needs

Optum has the depth of resources and marketplace experience to provide a range of solutions, including IT assessments, operational support and project management. Our experience encompasses:

- Hardware/software assessments, data analysis and reporting, testing and release management
- Supplementing IT processes with project management and oversight, release management, and independent testing and validation
- Establishing a state-based operations center to monitor marketplace infrastructure

Provider information management (PIM) that verifies provider data and powers search

PIM supplies the health insurance marketplace with standardized provider data for all participating qualified health plans (QHPs). This allows consumers to quickly access the information they need to compare options and choose a health plan using the marketplace search tool. PIM uses more than 600 data sources to match, validate and augment provider data. Rigorous format validation, standardization and integrity checks are part of the process. Optum works with participating health plans to correct inaccurate or incomplete data. Ultimately the data are collapsed into one comprehensive file, which powers the search tool on the marketplace website.

Policy and program expertise specific to the health care marketplace

Our consulting organization, The Lewin Group, helps states achieve their short- and long-term program and operations goals. By developing analytic frameworks incorporating a variety of data sets and conducting complex data analyses, we can identify performance measures, variations, patterns and consumer preferences.

Our experts provide:

- **Operational and management analytics.** We can integrate data from disparate data sources, such as public data from federal and state agencies, private data from state health information surveys, and market research, internal operations and financial data, to monitor enrollment operations. These operations include website performance, qualified health plan selection and eligibility determination.
- **Customer segmentation.** Using your enrollment data, we can develop sociodemographic profiles by health plan and stratify data by such factors as disease propensity and severity. This allows us to identify gaps in the types of coverage consumers need and better match plans to customers.
- **Enrollment and revenue targets.** By determining the distribution of consumer spending within the gold, silver and platinum tiers, we can make recommendations regarding long-term strategic planning, product development and pricing to meet client needs and preferences.
- **Product and service preferences and priorities.** We can extrapolate which plan features are favored by specific customer segments to help the marketplace and health insurance carriers develop more competitive offerings.
- **Quality and performance measurement.** We can identify performance metrics, develop benchmarks and deploy robust analytic, reporting and mining capabilities to gain a thorough understanding of your business and performance drivers.
- **Research and evaluation.** We can assess member care and outcomes data to improve service. For instance, our analyses might identify geographic variations in disease propensity, which could be used to investigate potential improvements in health care practices across regions.

Contact us

To learn how Optum can help you improve your health insurance marketplace, contact us at innovate@optum.com or **1-800-765-6092**.



11000 Optum Circle, Eden Prairie, MN 55344

Optum™ and its respective marks are trademarks of Optum, Inc. All other brand or product names are trademarks or registered marks of their respective owners. Because we are continuously improving our products and services, Optum reserves the right to change specifications without prior notice. Optum is an equal opportunity employer.

© 2015 Optum, Inc. All rights reserved. OPTPRJ9398 07/15 43842-122014