

 **OUR TAKE PREVIEW**  
for health plans

# Survey Results: What 3,500 Consumers Want From Their Health Plan Portal Technology

Findings from the 2020 Health Plan Tools survey

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Health plan executives are investing to improve their member portal design and marketing techniques. While member portals are not a new concept, there is renewed interest among health plans in both improving the design of their portals and communicating the portal's value to members. As consumers become more accustomed to incorporating digital technology into all aspects of their lives, health plans should harness the opportunity to drive self-service using member portals.

Advisory Board surveyed over 3,500 consumers to determine what they want from their health plan portal. The survey results uncovered three reasons why portals aren't being utilized and what plans can do to remedy the problem. This briefing will outline one of those reasons.



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# The conventional wisdom

Compared to many other industries in the United States, health insurance lags in driving digital adoption. Health plan portal usage has historically been very low, with member portal utilization rates in the single digits among consumers. As plans realize how useful their portals can be for driving self-service and improving member experience, they are looking to increase utilization and have seen some progress in improving portal usage during the past couple of years.

Two major categories of barriers prevent members from using their plan portals:

## 1. Barriers from poor design

Plan portals are notoriously difficult for members to use due to a combination of an unintuitive design and members not knowing exactly what to search for.

- Members can't figure out how to log onto the portal
- Members don't remember their log-in information
- Members don't know how to navigate the portal or use the tools on the portal

## 2. Barriers from poor marketing

Plans struggle to communicate the value of their portal to members.

- Members don't know about their portal
- Members don't know what's available on the portal

On top of these barriers, health plans must also deal with lack of member trust. Consumers freely use retail portals for convenient purchasing, but many members don't trust plans to give information that doesn't only benefit the plan's bottom line.

Unlike portals in other industries with reasons to frequently log on, members don't see the point in making a plan portal account if they are healthy and rarely use care. Additionally, if members are very sick they're likely already enrolled in care management programs and may get less value from their plan portal.

# Plans must move past registration goals and spur members to action

Plans need to improve upon their portal design to get members to more regularly use their portal, but that's only the first step. The next action step for plans is communicating the value of the portal to their members.

The good news is that 95% of members are aware that plan portals exist and registration rates have increased significantly over the past few years. However, the bad news is that 63% of these members registered but never logged back on.

## Move past registration to action

Plans need to move past portal awareness and registration to drive behaviors and action that will help decrease medical spend.

### Stepwise order of portal goals



For example, members can reduce medical spend by using a virtual visit instead of going to the emergency department or using the doctor finder to access an in-network PCP. As such, select plans have recognized this need for action and set outcomes-based metrics for their portal—such as the percent of portal registered members who use a virtual visit versus an emergency room visit. This measurement strategy aligns with the overarching goal to spur members to action, rather than chasing a 100% registration rate.

Currently, plans do not consistently drive portal users to action. This is why portals have had limited impact on medical spend. Our data supports this: the majority of members who have been on their plan portal don't remember seeing basic information such as benefits info or a doctor finder function. Members don't recall these features because they aren't taking action while on the portal.

Plans can move past mere registration goals to drive member action on the portal by sending the right message to the right people at the right time.

## Target the right person

The first step is to target the “right” person. For instance, members with employer sponsored and individual marketplace insurance prefer communicating with the plan via their portal relative to members in other lines of business.

Also, certain members—often the care decision makers of the household—find great value in the portal while others won't utilize portals for any reason. As such, plans should prioritize outreach efforts to the people who are more likely to use portals and more likely to derive value. Plans can find potential, future users by analyzing demographics of the people who have responded positively to portal outreach in the past.

## Reach out at the right time

Our survey data shows that very few members register for their portal after they've been with their plan for three months or more. 66% of members who have been with their plan for fewer than three months are registered on the plan's portal (compared to 61% of all members). Plans should focus their efforts during the onboarding process because members are listening to their plan at that time; it is also the period when plans can have the greatest impact on their future costs—before members have utilized care.

The other opportune time to reach out is after a member has utilized care. Members are more engaged in health care when they need or have just used care and plans can tailor messages to this time. For example an email saying, "Did you know that you could have found an in-network doctor on the plan portal and saved \$200 last week?" may capture a member's attention.

## Promote the right message

Different people will find value in different parts of the portal, so the message plans send is crucial. The right message should promote a portal feature that the member could gain value from using. You can target the right members for a certain message based on: LOB, age, occupation, psychographics, and more. Our research shows that while everyone wants information on benefits, older members enjoy information on how to be healthier, and mothers like information on virtual visits (even more so than Millennials).

Going above just the promoted feature, the right message is sent via the preferred mode of communication with tailored verbiage/images as well. Email is the preferred mode across the board, but there are differences: Medicaid members like texts more than members of other LOBs. Plans can check which mode members actually looked at historically, and also use A/B testing to find the words and images that appeal to specific segments.

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# 66%

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