

Best Practices:

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# Developing Support Strategy

Quicken Health Expense Tracker Experience

Lala Mamedov

May 27, 2009

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# Agenda

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<b>8:30 am to 9:00 am</b>	<b>Registration and Reception</b>
9:00 am to 9:15 am	Welcome and Opening Comments (Brian Bartel and Lala Mamedov)
9:15 am to 9:30 am	About Intuit
9:30 am to 9:45 am	Support Strategy
9:45 am to 10:00 am	Determining Support Demand
10:00 am to 10:30 am	People/Process/Tools
10:30 am to 10:45 am	Prevention and Customer Self-Help
10:45 am to 11:00 am	Tips and Tricks
11:00 am to 11:30	Q&A
11:30 am to noon	Closing Comments (Brian Bartel) Networking

# Who is Intuit?



- America's most trusted name in tax software
- #1 best selling tax software year after year
- Last Year, more federal returns e-filed with TurboTax than all other consumer tax software combined
- #1 rated by the Wall Street Journal



- #2 best selling software in the U.S. after TurboTax
- More than 14 million users
- Over 75% U.S. retail segment share
- Over 70% brand awareness in households with PCs



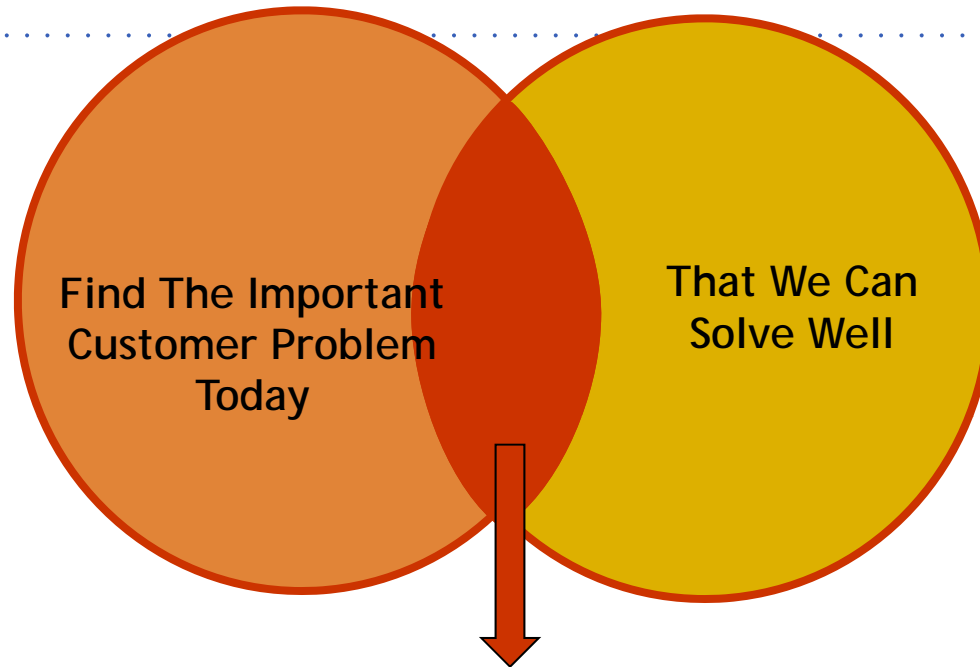
- >85% U.S. retail segment share
- 3.7 million U.S. small businesses use QuickBooks
- #1 payroll service



- Initial launch in May 2005
- Second release in early 2006
- Exceptional media and consumer reaction
- A manual application that is not integrated with health plans
- Precursor to an automated and integrated Quicken Health<sup>SM</sup>

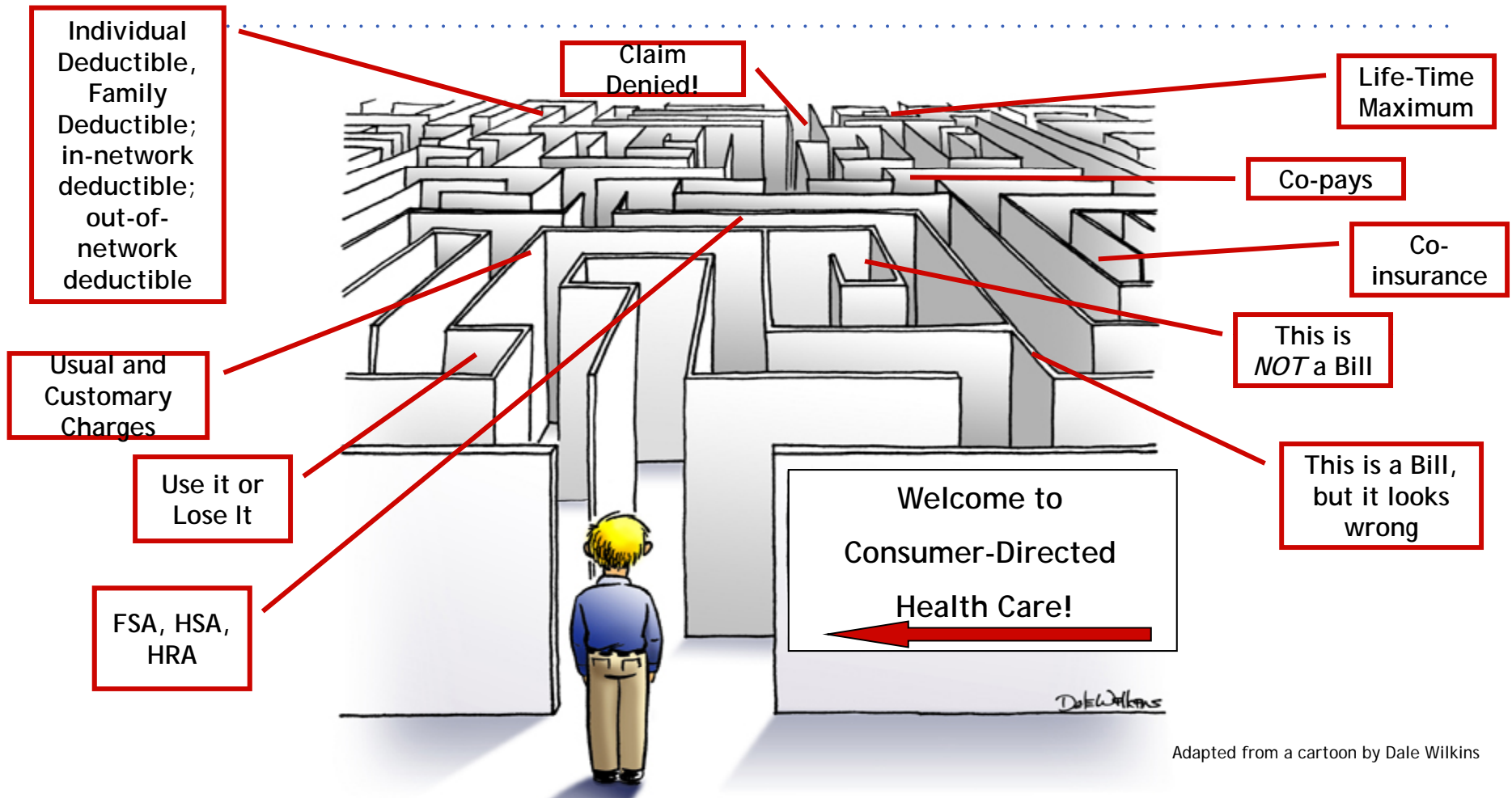
# How Intuit Develops Products

## Customer Driven Invention (CDI)



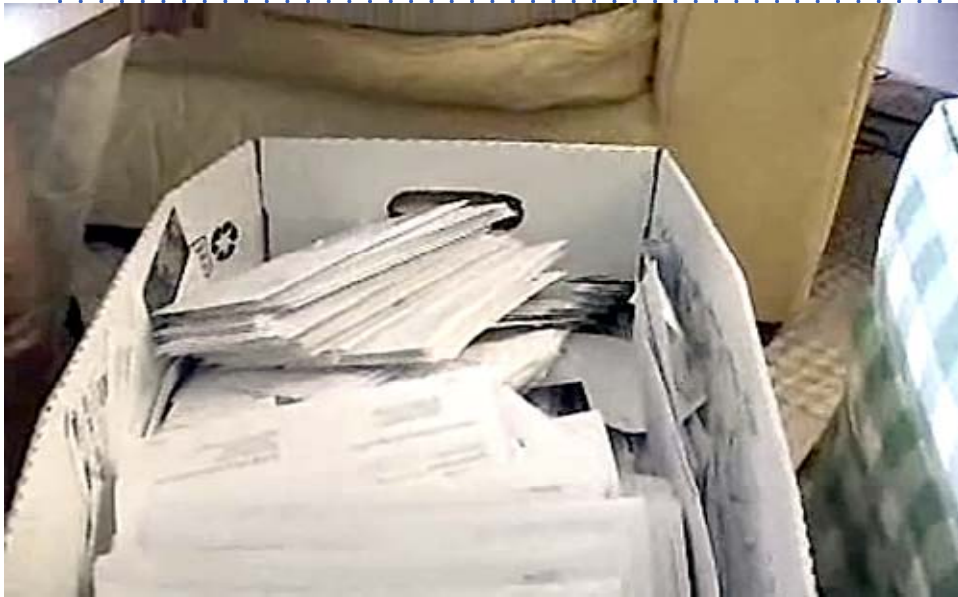
- Deeply understand people's real behavior and real pain points
- Watch people and then build tools that work the way they work
- Create solutions that help them make better decisions and feel more confident
- Launch & learn then revise based on observing users' behavior

# How Healthcare Consumers Feel



**Managing health care is becoming even more confusing, challenging & frustrating**

# We Have Been Watching Consumers Manage Their Healthcare Expenses



During our observations, we saw piles of unopened envelopes and letters from collection agencies

Manual methods tend to be time-consuming, inefficient and lead to feeling out of control and overwhelmed



# What Intuit Does Well

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## Simplify and Streamline the Complicated

- We design easy-to-understand user interfaces that transform cumbersome, confusing tasks into a simple set of steps
- We consolidate data from multiple sources so that users have all the information they need in one place
- We create tools that guide consumers through the process and help users make actionable decisions
- We are a trusted consumer brand

# Quicken Health Expense Tracker

Welcome Insurance Sign Out My Account Help

Quicken Health Expense Tracker Home Expenses Health For members of UnitedHealthcare

**Know what to pay**

Latest claims with an amount due:

Service Date	Patient	Provider	Alerts	I Owe
11/5/2008	Gabriel	Uma Gavani MD	⊘	268.00
10/30/2008	Suzette	Joan Werber		21.60

View all claims with an amount due (2)

**Review highlighted claims**

2 Claims for Review Previous | Claim 1 of 2 | Next

**Service Date:** 11/05/2008  
**Patient:** Gabriel  
**Provider:** Uma Gavani MD  
**I Owe:** \$268.00

⊘ **UnitedHealthcare denied payment for the following service:** MRI of leg joint  
**Explanation:** UnitedHealthcare is not paying for this service because it is for a pre-existing condition.  
[Remove from this list](#) | [View claim details](#)

**Messages**

12 claims were retrieved from the last 18 months.

**What do I need to pay?**

**View my health history**

Suzette  
Gabriel

**Save money on...**

**What do I need to look closely at?**

(HSA)?  
 Can I save money by claiming medical expenses on my tax return?  
 Sponsored by TurboTax

**See where I stand on my deductibles**

UnitedHealthcare

Out-of-Network Medical Deductible

	Spent	Limit
Suzette	\$0.00 <b>Deductible Met</b>	\$300.00
Gabriel	\$300.00	\$300.00
Family	\$300.00	\$600.00

View more about my insurance | Read more about deductibles

**Stay healthy**

**Health Tips**

See how easy it is to eat "Just one more vegetable" every day  
 Sponsored by Del Monte

Helps consumers understand & manage their medical expenses

- Translates jargon and codes into easy-to-understand language
- Shows the simple math

Consolidates critical health care financial information in one place

Provides guidance – what to do next

- How much they owe, to whom, and why
- How consumers are doing against their deductible
- How to resolve issues

Tracks expenses and makes tax time easier.

**intuit.**

# Calculations Display

Welcome, kekwurzel Insurance Sign Out My Account Help

**Quicken Health** Home Expenses Health For members of **ABC Health Plan**

Back to Find & fix errors Close

ABC Health Plan Claim #1234567890

Date of Service: 4/15/15 Patient: Kell...

**How were my insurance benefits calculated?**

**Eye exam; new patient**

<p>How was <b>Insurance Paid</b> calculated?</p> <table border="0"> <tr><td>Amount Billed</td><td>300.00</td></tr> <tr><td>- Amount Non-covered</td><td>100.00</td></tr> <tr><td>- Amount to Deductible</td><td>200.00</td></tr> <tr><td><b>Total</b></td><td><b>\$0.00</b></td></tr> </table>	Amount Billed	300.00	- Amount Non-covered	100.00	- Amount to Deductible	200.00	<b>Total</b>	<b>\$0.00</b>	<p>How was <b>My Responsibility</b> calculated?</p> <table border="0"> <tr><td>Amount Billed</td><td>300.00</td></tr> <tr><td>X Insurance Paid</td><td><b>0.00</b></td></tr> <tr><td><b>Total</b></td><td><b>\$300.00</b></td></tr> </table>	Amount Billed	300.00	X Insurance Paid	<b>0.00</b>	<b>Total</b>	<b>\$300.00</b>
Amount Billed	300.00														
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<b>Total</b>	<b>\$300.00</b>														

Byron Smith is an out-of-network provider and billed you at a higher rate than what ABC Health Plan considers to be usual and customary. This non-covered portion cannot be applied to any deductibles or count toward any coinsurance benefits.

Additional Insurance Remark See "What to Do" >>

Review Insurance Benefits

<b>My Responsibility</b>	<b>\$433.50</b>	<b>-</b>	<b>I Paid</b>	<b>\$0.00</b>	<b>=</b>	
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Service	Amount Billed	Amount Paid	Amount Responsible
Eye exam; new patient	300.00	0.00	300.00
Eye treatment	250.00	122.50	127.50
Medication injection	20.00	14.00	6.00
<b>Total</b>	<b>\$570.00</b>	<b>\$136.50</b>	<b>\$433.50</b>

**Disputed** Flag this claim as disputed in the All Claims list. Write a Letter

# QHET Claims Assistant

Welcome, kekwurzel Insurance Sign Out My Account Help

**Quicken Health** Home Expenses Health For members of ABC Health Plan

Back to Find & fix errors Close

ABC Health Plan Claim #1234567890

Date of Service: 4/15/2007 Patient: Kelly

...and what should I do next?

**My Responsibility**

**\$433.50**

-

**I Paid**

**\$0.00**

=

**I Owe Dr. Byron Smith**

**\$433.50**

Service	Amt. Billed	Insurance Paid	My Responsibility
Eye exam; new patient	300.00	0.00	300.00
Eye treatment	250.00	122.50	127.50
		14.00	6.00
		<b>\$136.50</b>	<b>\$433.50</b>

**Eye treatment**

Dr's Diagnosis: Diabetic Retinopathy

Description: Injection of medication into the gelatinous clear fluid of the eye or the tissue at the back part of the eye.

[Write a Letter](#)

**Claim Assistant**

**Some portion of the following service is not covered by your health plan:**

Eye exam; new patient

**Explanation:**

Byron Smith is an out-of-network provider and billed you at a higher rate than what ABC Health Plan considers to be usual and customary. This non-covered portion cannot be applied to any deductibles or count toward any coinsurance benefits.

**What to do**

For out-of-network claims, you are responsible for this non-covered amount. If you believe Byron Smith is an in-network provider, call ABC Health Plan to clarify. Otherwise, you can reduce your costs in the future by switching to an in-network provider found on abchealth.com.

[More info](#) | [Glossary](#) | [Insurance](#)

[I Paid Details](#) [Record New](#)

## Supporting V1: Where do we start?

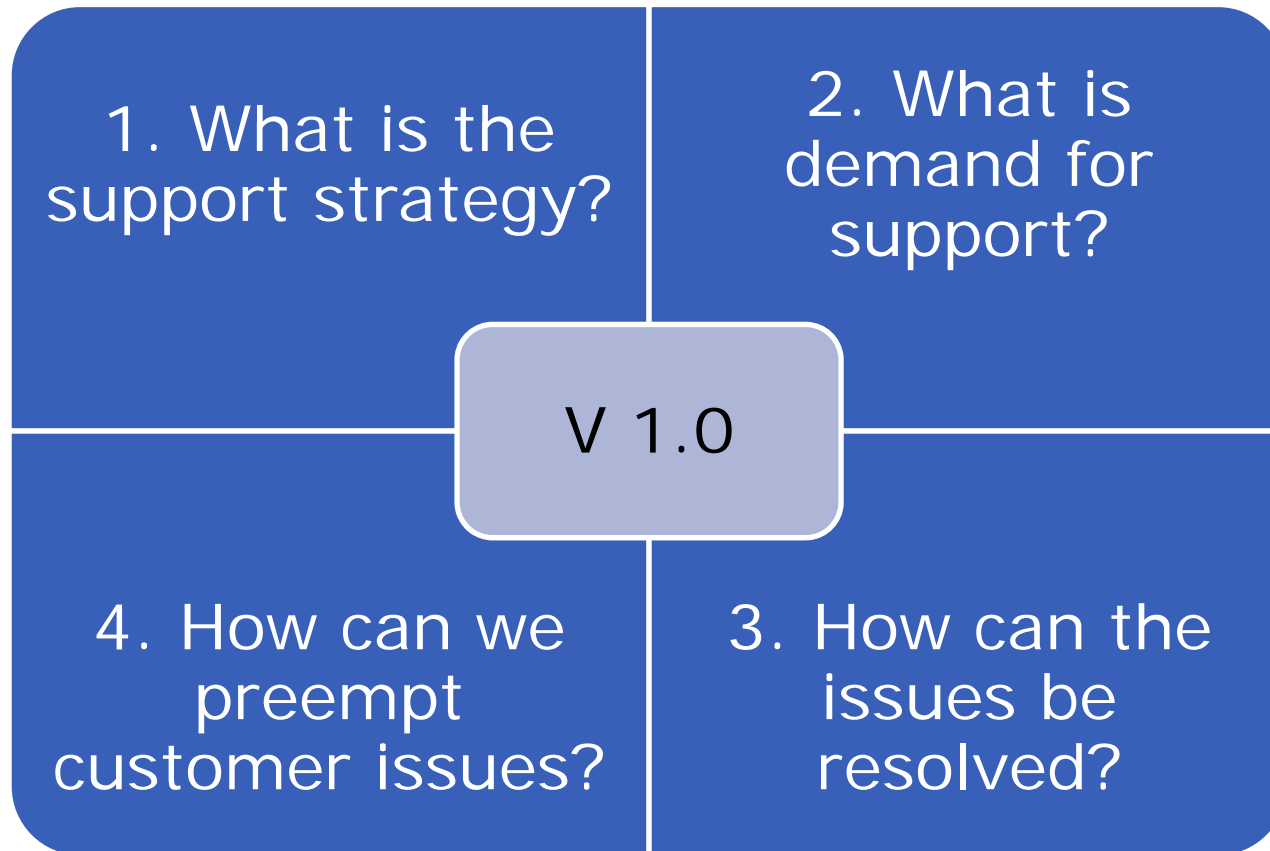
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I cannot tell you how to do it...

I can tell you what questions to ask

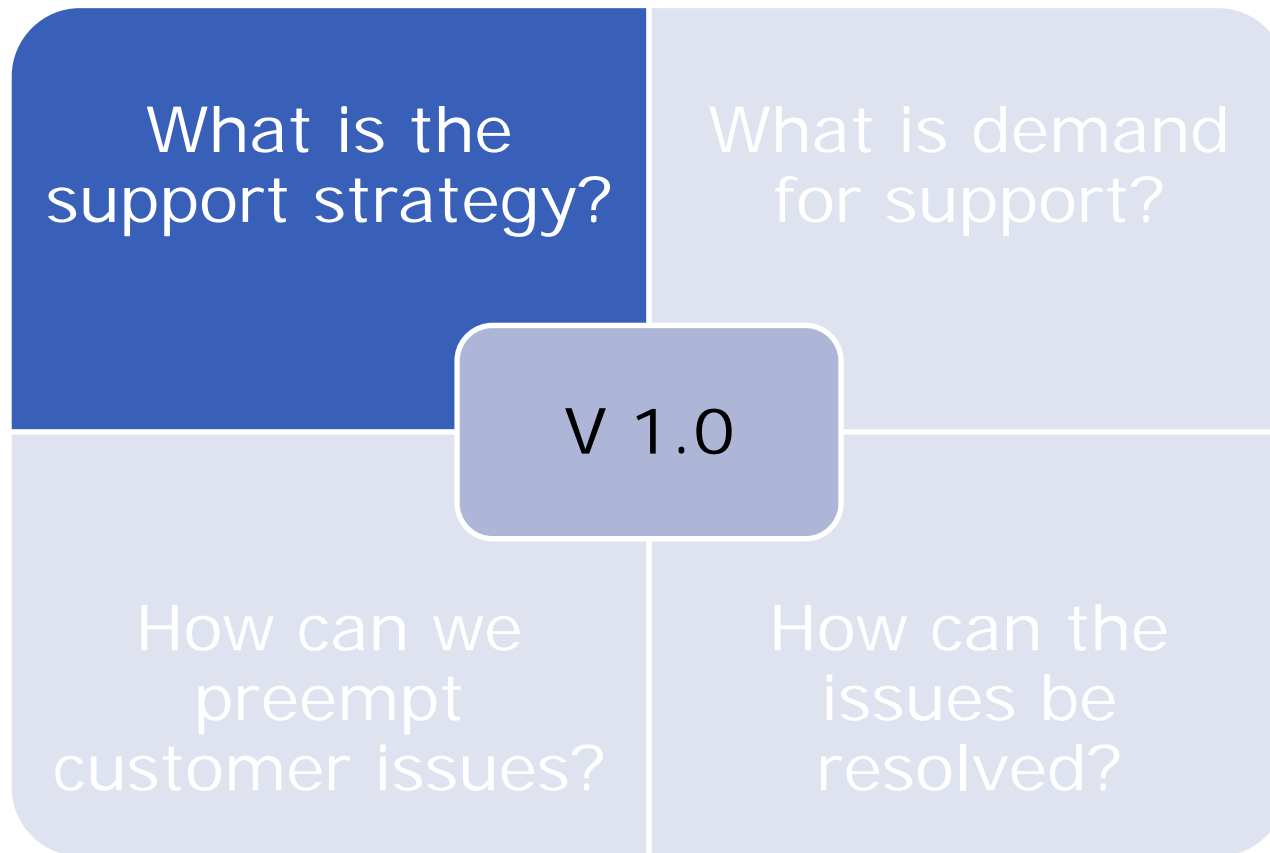
# The Four Questions

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# Strategy

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# Support Strategy

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- Why do we do support? What business are we in?

**We are in the business of helping our customers achieve full benefit of using our product, so they can be more productive and successful.**

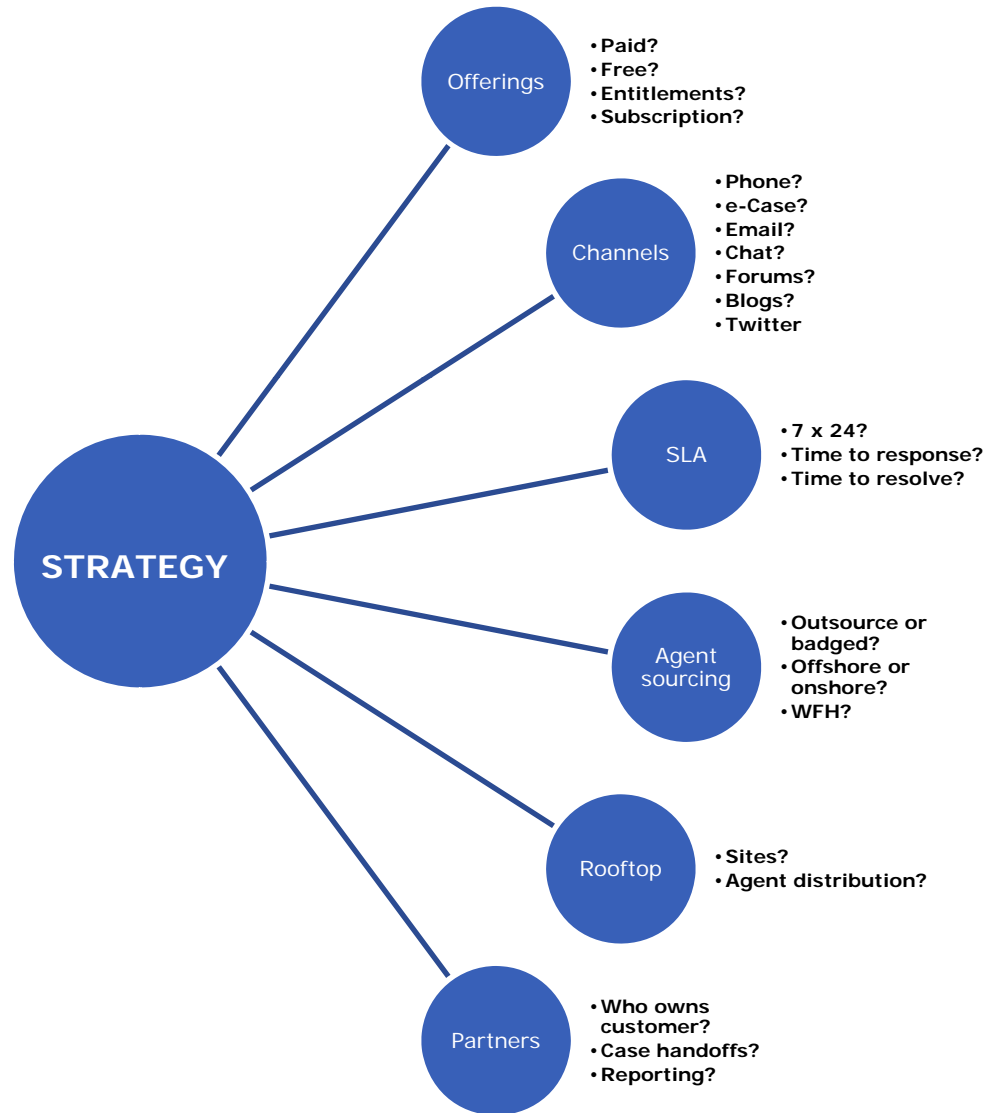
# Quicken Health Support Goal

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Eliminate the reason for the customers to contact us and if they do, rapidly resolve issues to deliver delight and trust

# Support Strategy: Choices



# Intuit Support Process



1. Ensure our Products/Services are so easy to use that it minimizes the need to contact us for issue resolution.

2. For known issues make it easy for customers to rapidly find answers through online channel of their choice

3. For new issues or customers preferring assisted help, rapidly resolve their issue in a manner that creates delight. When appropriate, educate how to solve for themselves.

4. Identify root cause and partner with product and marketing teams and to “find once, prevent many”

**Delight!**

**A WOW  
Customer  
Experience**

Developed and refined with Intuit flagship products

# Quicken Health Support



## Strategy

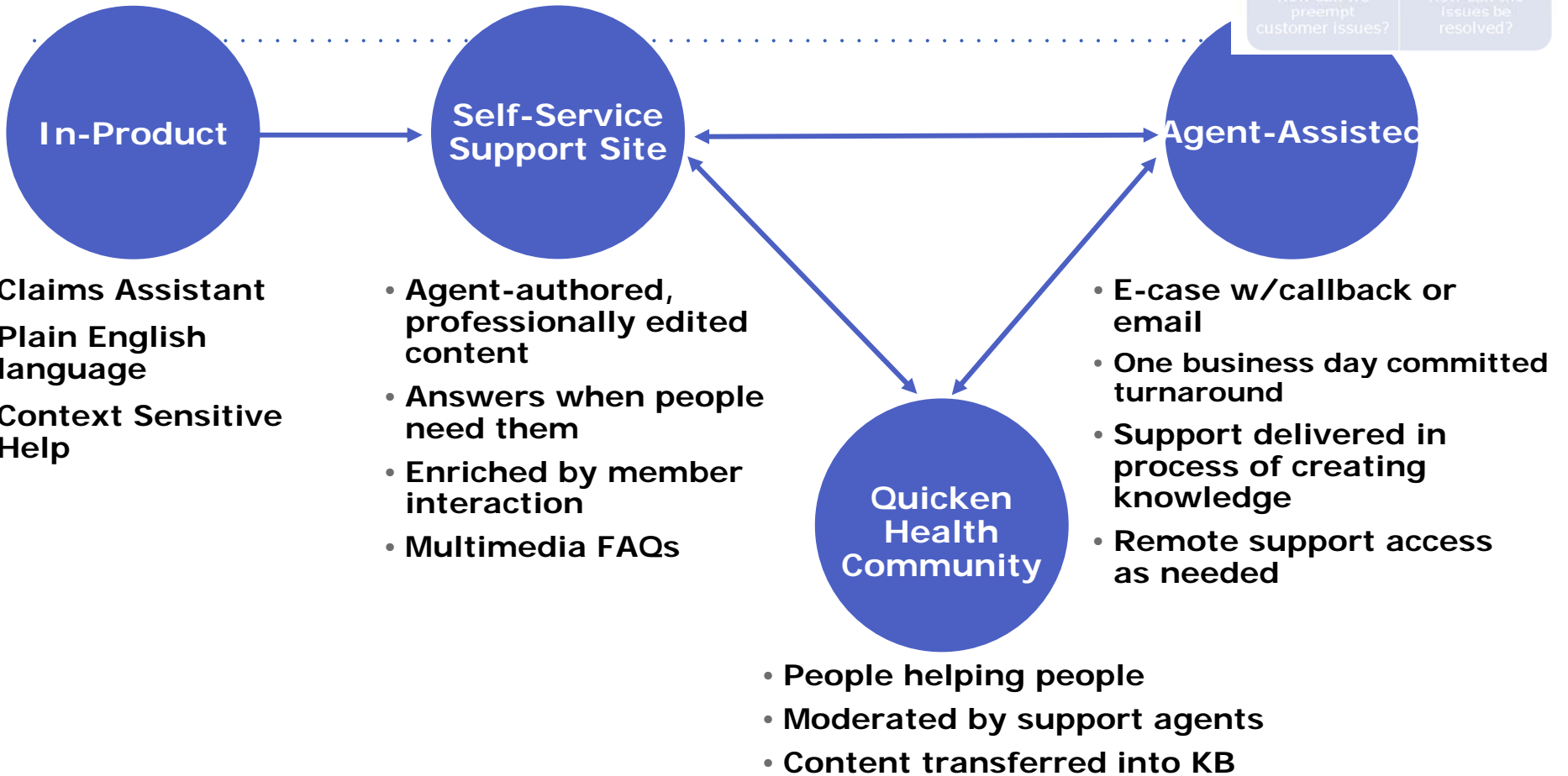
### KB is the heart of the support system

### Guiding Principles

- Knowledge creation is how support is delivered – not an afterthought
  - Reward agents for what they share broadly, not just 1:1 with an individual customer
  - Focus on proactive and preemptive support rather than reactive
  - Allow and enable customers to create and share knowledge
  - Accurate, actionable answers available to customers immediately
- Product is continually improved based on the analysis of answer reuse rate
- Few predefined case handoff options for the partners – no custom work
- Focus on proactive and preemptive support rather than reactive
- Solve for speed to publish and immediate product feedback
- Focus on cost-efficiency and scalability
- Leverage (and share) best practices

# Support Model

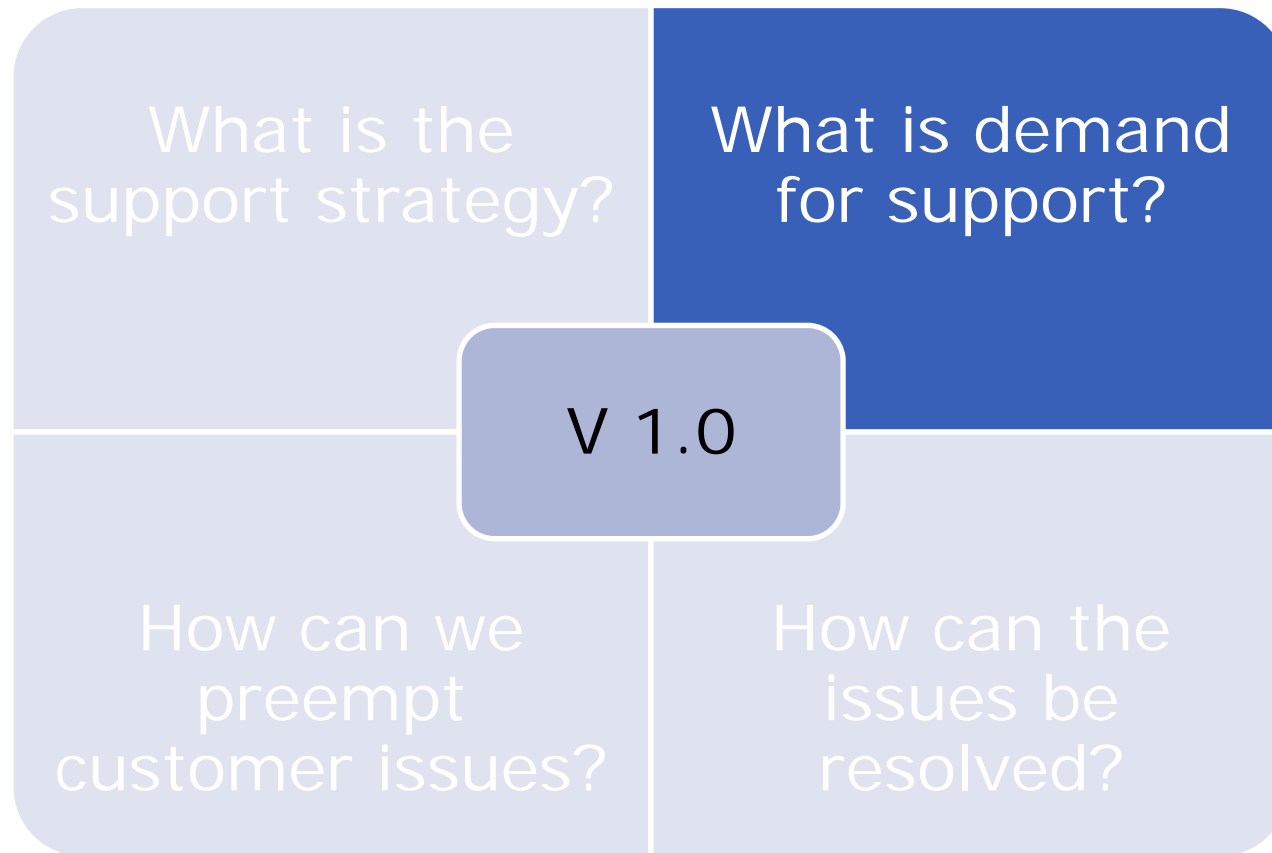
What is the support strategy?	What is demand for support?
V 1.0	
How can we preempt customer issues?	How can the issues be resolved?



- Self service site: main entry for consumer assistance
- Handoff between QH and partner support: set of standard options

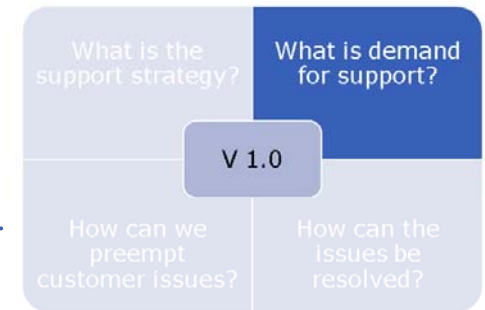
# Demand

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# Support Demand

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- Users

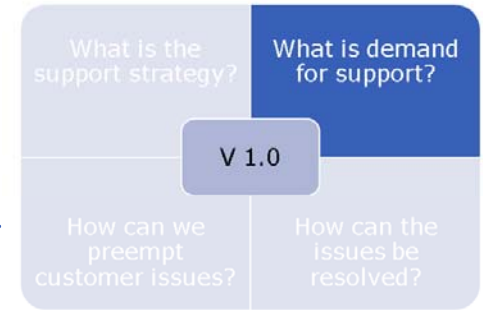
- How many users will we have?

- Usually available from Marketing, PM of BusDev
    - One to three year model

- Segmentation

- Consumer, SMB or Enterprise?
    - What are the customer roles?
      - IT, developers, end-users, CFOs, CIOs, small business owners ... etc
    - What are their expectations of support?

# Adoption Model

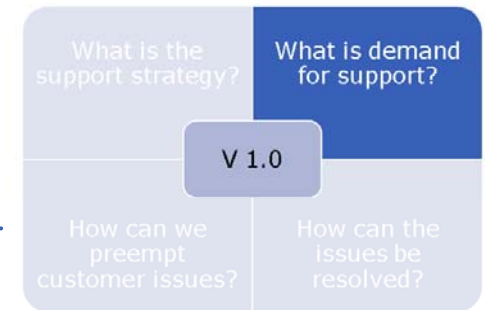


Column1	5/1/2009	6/1/2009	7/1/2009	8/1/2009	9/1/2009	10/1/2009	11/1/2009
	Month	Month	Month	Month	Month	Month	Month
Total Practices	30	40	60	90	135	202.5	303.75
Total Physicians	240	300	720	1080	1500	1980	2700
New Practices data to load: # patients	208000	208000	416000	624000	832000	832000	1248000
Patient visits to physician	64800	108000	194400	367200	540000	712800	972000
Patients eligible	31104	51840	94352	176256	259200	342144	466560
Patients signing up	13478.4	22464	41376	76377.6	112320	148262.4	202176

Data – illustration only

# Use Cases

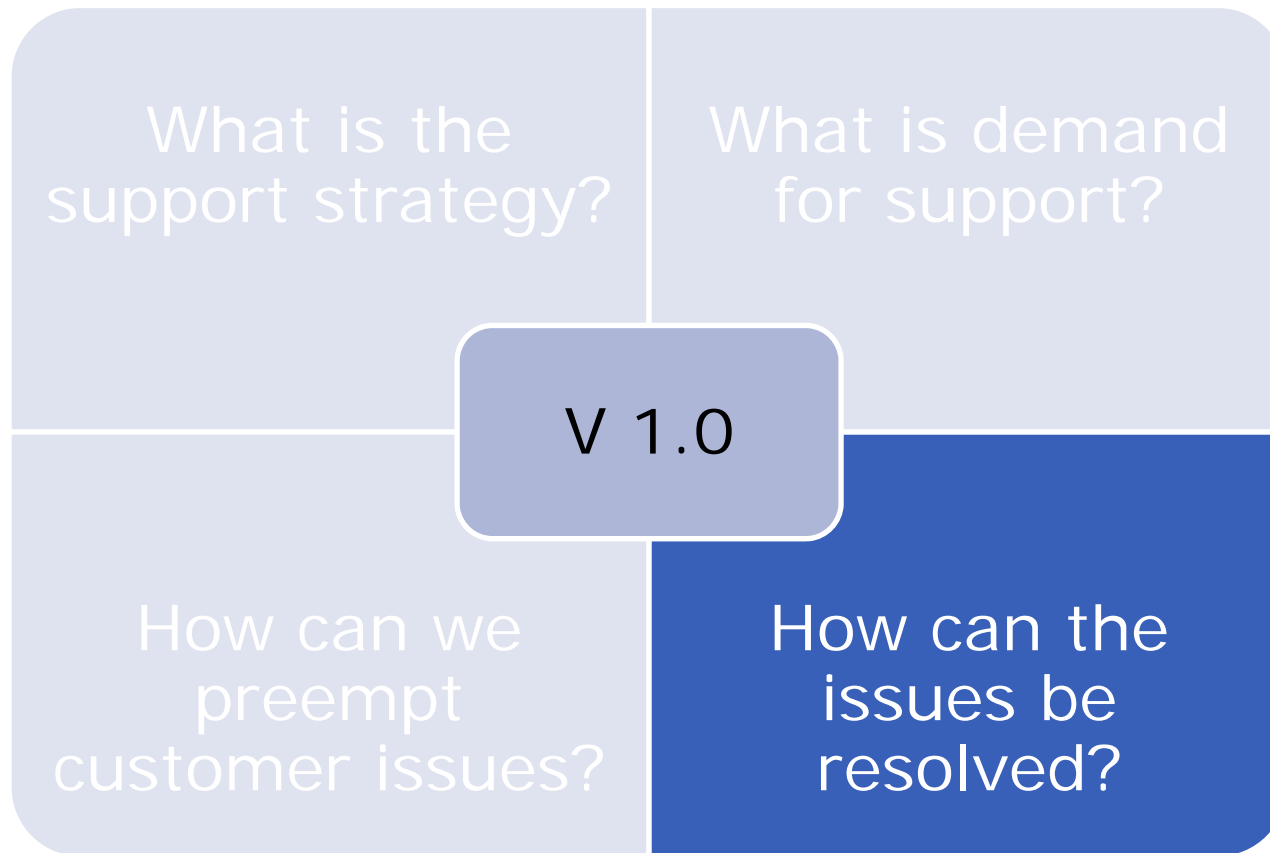
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- What are going to be the top issues?
  - Define 20-30 use cases
- What is the probability and impact of each?
  - Assign severity
- Contact mechanism per customer role and use case?

# Resolution

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# Resolution

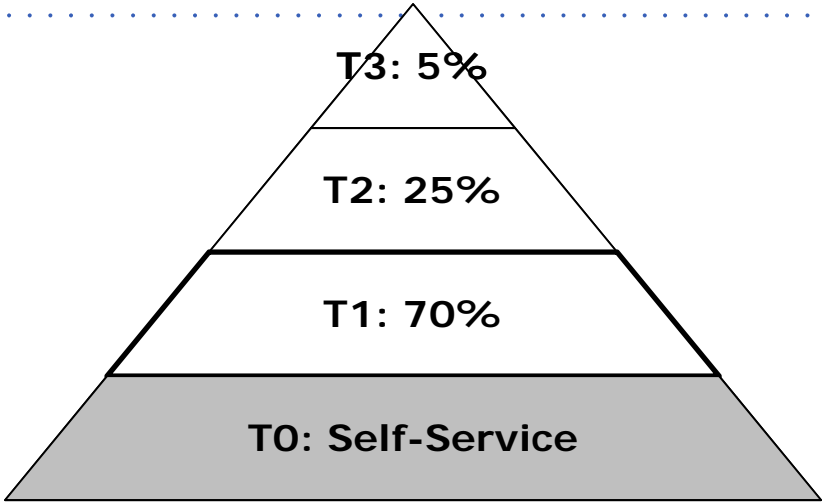
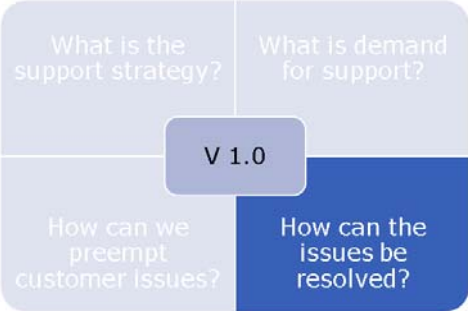


- What is the skill profile needed to resolve issues?
- What is support HC model?
- Who are the SMEs to train?
- Can we use PD to deliver support?

- What is the difference between issues and incidents?
- What will be the resolution process?
- Should we use just-in-case or just-in-time knowledge creation?
- What listening posts should we have in place?
- What are the KPIs?

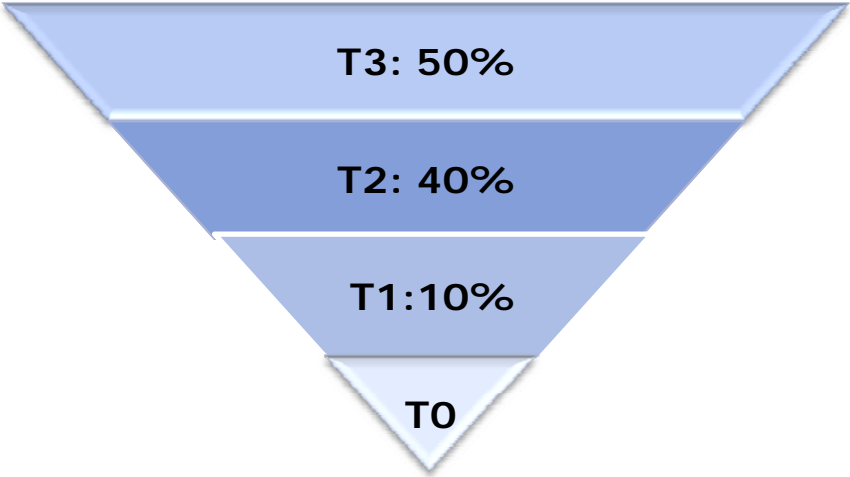
- What tools do we need in support of the workflows?
- How can we effectively capture and share knowledge?
- What are the gaps in the tools availability?
- How can we mitigate the risk?

# Support Pyramid



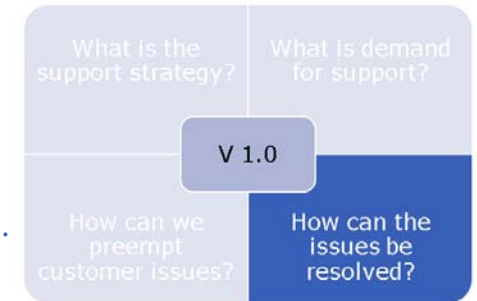
Tiered Support - Mature Product

Tiered Support – New Product



# Contacts

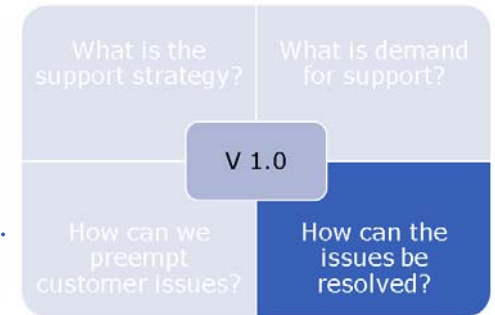
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- What will be the contact ratio?
  - Estimates from benchmarks
- Handle time per case?
  - Estimates from simulations
- Time to resolve?
  - Estimates from process mapping
- Self-service deflection?
  - Estimates from benchmarks

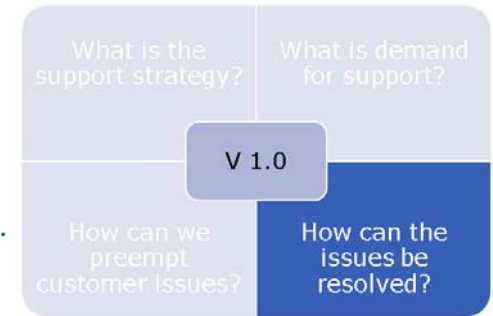
# Headcount Model Assumptions

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- Alpha: two cases per tester per week down to one case/week
- Beta: one case per tester per week contact ratio
- Launch: contact ratio from 0.15 to 0.05/mo (three models)
- Processing time 15 min/case in first 2 months, then down to 10
- Available time per agent per day 6.5 hrs
- Not including root cause elimination gains
- Self-service deflection rate 30% going up by 0.01% after first 2 months up to 50%, then slows down

# Support Headcount Model



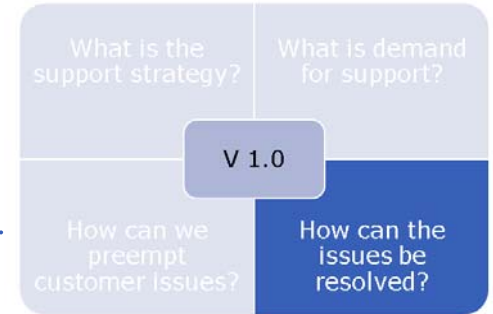
- N= eligible users
- CR= contact ratio
- T = throughput (in hours)
- M= available work hours per agent per month
- D= self-service deflection
- S = shrinkage
- X= agents needed

$$X = N * CR * T * (1 - D) / M * (1 - S)$$

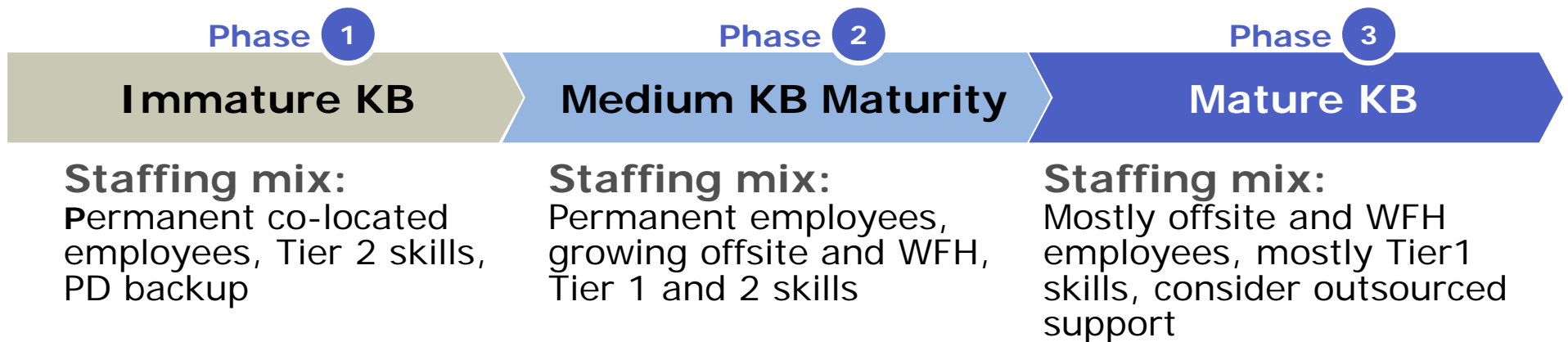
Contact Ratio .05	Q4	Q1	Q1	Q1	Q2	Q3	Q3	Q3	Q3	Q4	Q4	Q4
L.M.	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
C.B.	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
M.W.	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
H.M.	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0	1.0
Z.Z.			0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5
TBH - Tier 2 Agent										1.0	1.0	1.0
TBH - Tier 2 Agent										1.0	1.0	1.0
TBH - Tier 2 Agent											1.0	1.0
TBH - Tier 2 Agent											1.0	1.0
TBH - Tier 2 Agent											1.0	1.0
TBH - Tier 2 Agent											1.0	1.0
TBH - Mgr/Escalation											1.0	1.0
TBH - Tier 2 Agent												1.0
TBH - Tier 2 Agent												1.0
TBH - Tier 2 Agent												1.0
Total Headcount	4.0	4.0	4.5	4.5	4.5	4.5	4.5	4.5	4.5	6.5	11.5	14.5

Data - illustration only

# Staffing Mix

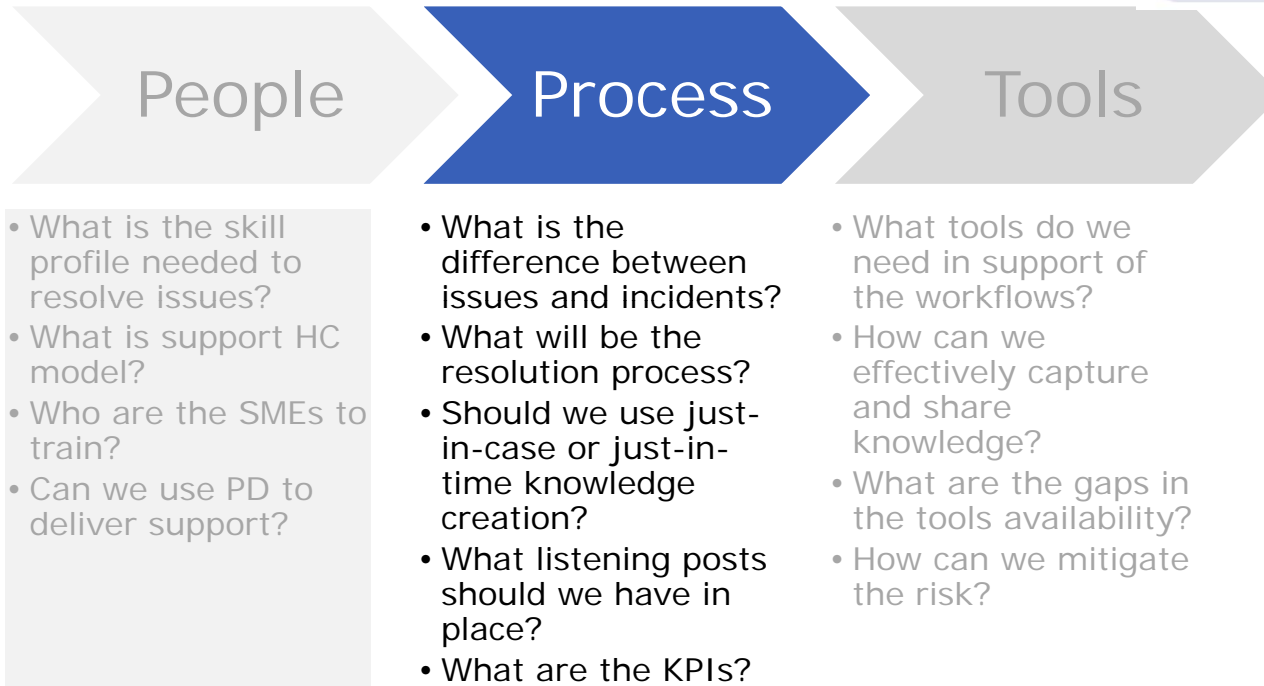
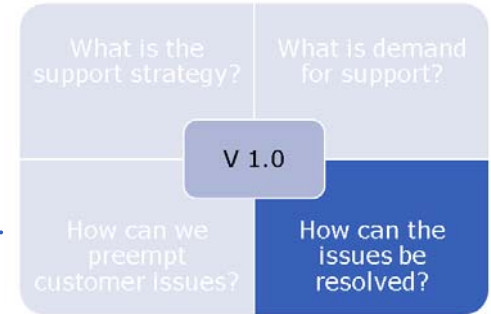


## Product lifecycle and KB maturity levels



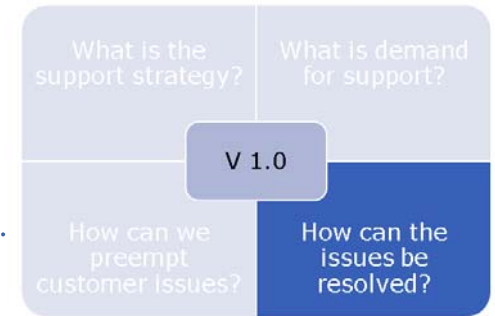
- Resources
  - Headcount model driven by product adoption rates, contact ratio, agent productivity and self-service deflection rates
  - Staffing mix driven by Knowledge Base maturity levels

# Resolution



# Issues vs. Incidents

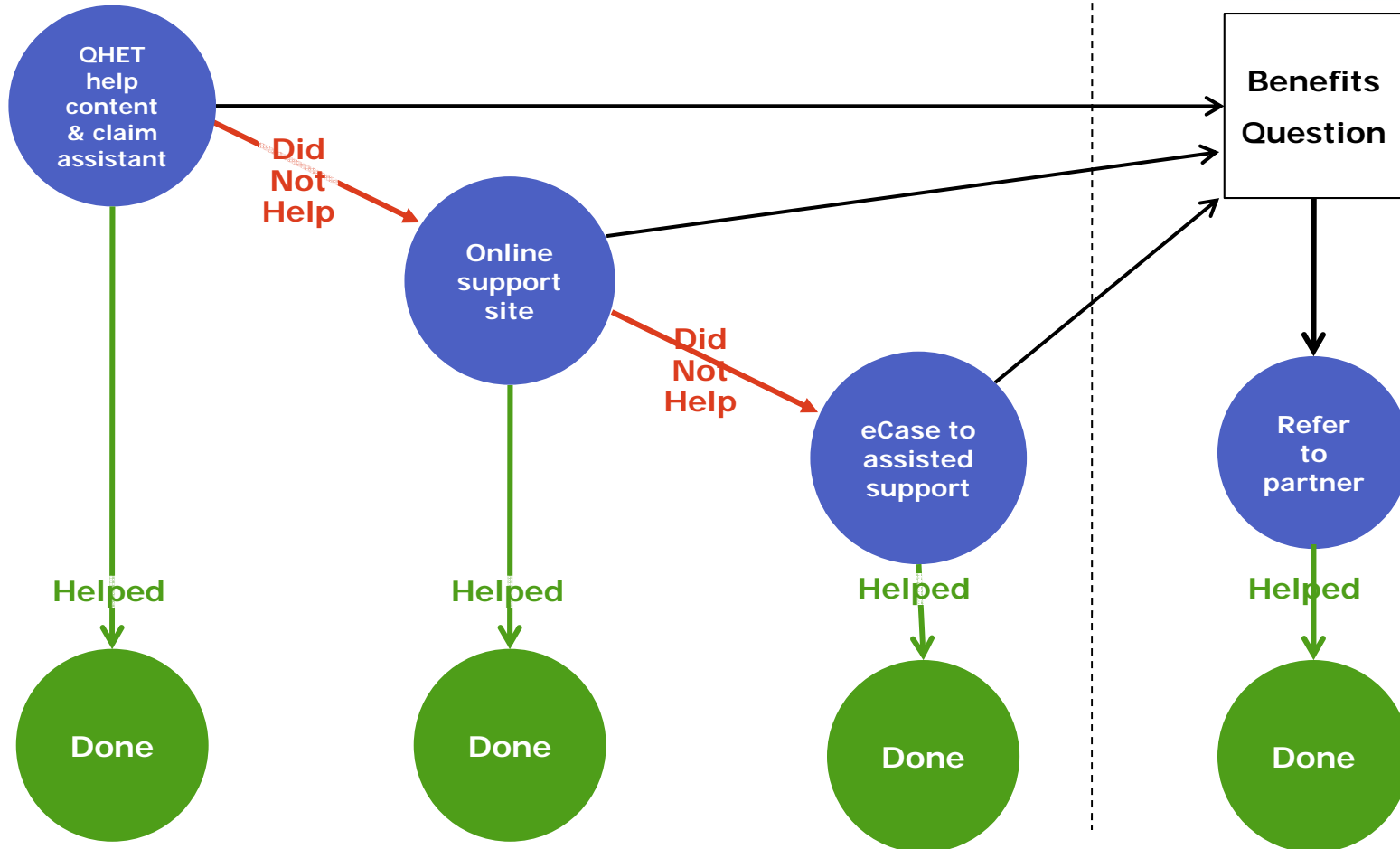
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- An **Incident** is a problem report from an end-user; it generally describes the specific symptoms being experienced that may be specific to a particular environment or setup. Incidents are all about the customer; they are managed at the Tier 1 level.
- An **Issue** is the underlying problem that caused the incidents; may impact more than one customer. Issues are all about the product, and are managed at Tier 2 level.
- Issues may be resolved by Tier 2 or Tier 3; associated incidents are closed by Tier 1.

# Incident Workflow

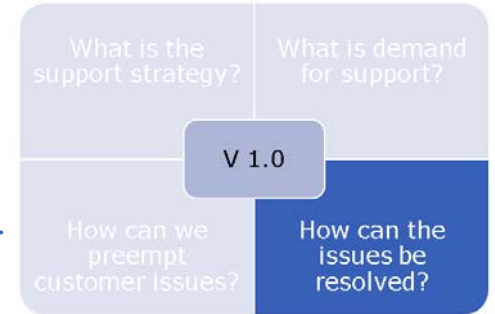
What is the support strategy?	What is demand for support?
V 1.0	
How can we preempt customer issues?	How can the issues be resolved?



Constant updates back to customer while the case is in progress

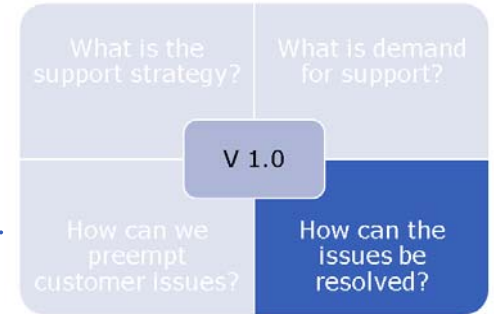
# Issue Workflow

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# Knowledge Creation

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Just  
in  
Time



Just in  
Case

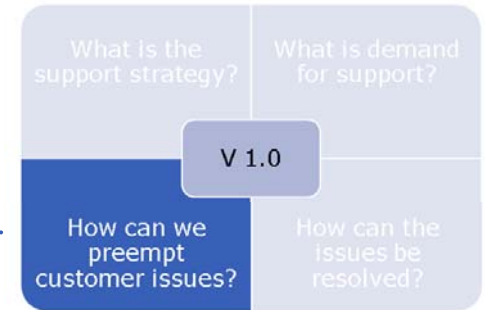


# Listening Posts

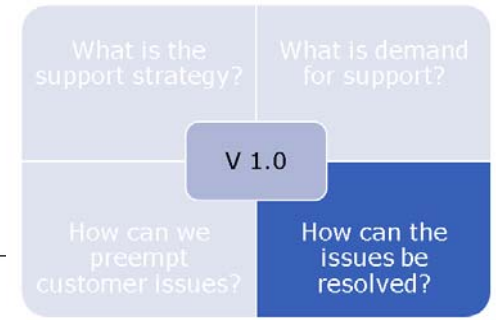
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## *Listening Posts in Place:*

- Member-submitted Incidents
- KB reuse
- Feedback form in product
- KB feedback form
- Internal monitoring
- Usability/FMH sessions
- Partner support teams
- Web analytics



# Operational Metrics



Date /	Searches	Answers Viewed	Sessions
2006/10	2	80	39
2006/11	0	0	2
2006/12	0	0	0
2007/01	29	30	131
2007/02	44	104	419
2007/03	16	43	199
2007/04	9	21	152
2007/05	18	13	103
2007/06	23	33	103
2007/07			
2007/08			
2007/09			

New View Go Preferences Admin Community Help

**Analytics** << **Service Summary**

Home Report Display Data

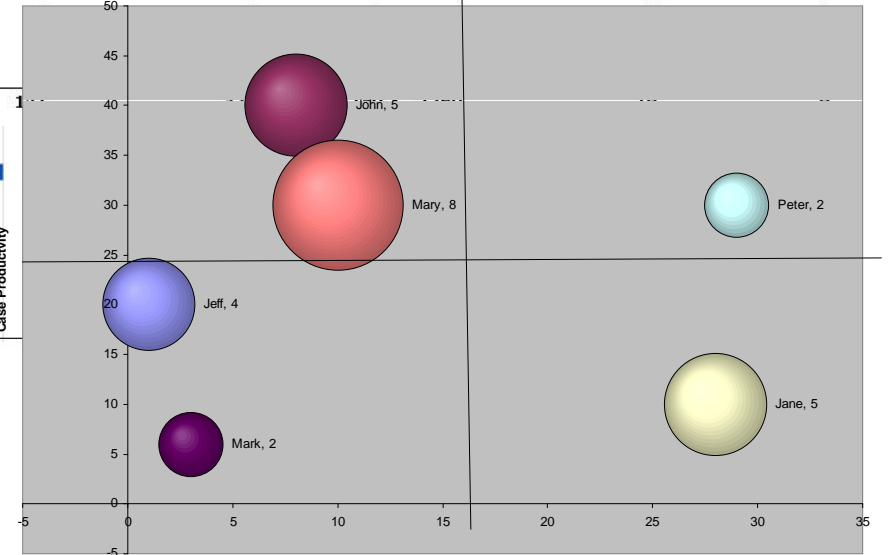
Search Refresh Reset

Data Set

### Service Summary

#### Site Activity

#### Self Help Summary



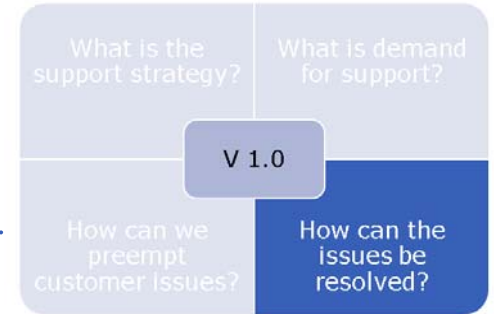
## Average Time To Close

Status	# incidents	Business Hrs
Closed by Customer	2	0d 13h 38m
Agent Solved	118	0d 4h 13m
Closed No Cust Reply	1	0d 16h 42m
SPAM	10	0d 0h 0m
<b>Total Cases</b>	<b>131</b>	

## % Solved Within 1 Business Day

Interface	# incidents created	# Solved	% Solved
quickenmedical	74	65	87%
quickenhealth	57	52	91%
<b>Total</b>	<b>131</b>		

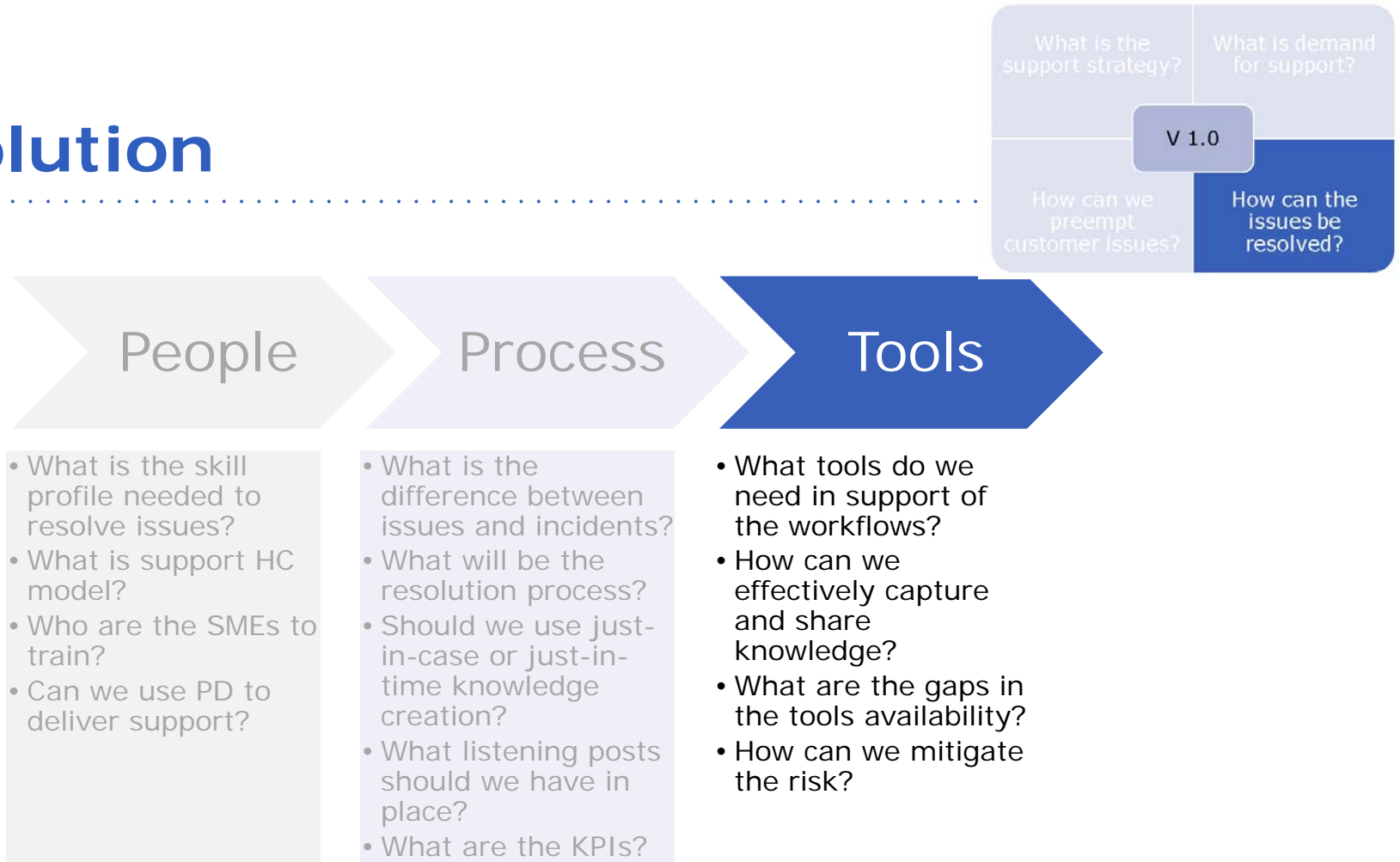
# KPIs



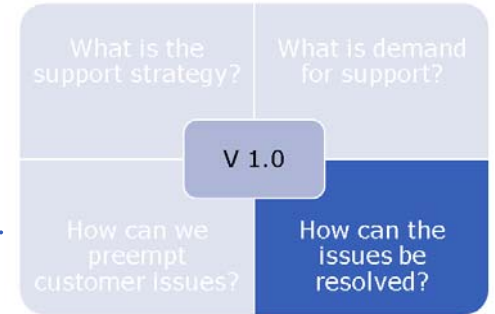
Measurement	Goal	Jan	Feb	Trend
Self-service solve rate	25%	15%	20%	▲
Self-service deflection rate	25%	12%	10%	▼
Sat Scores	85%	80%	84%	▲
% of cases within SLA	80%	80%	82%	▲
Average daily backlogs	30	20	25	▲
KB maturity level	50%	25%	35%	▲

**Data – illustration only**

# Resolution



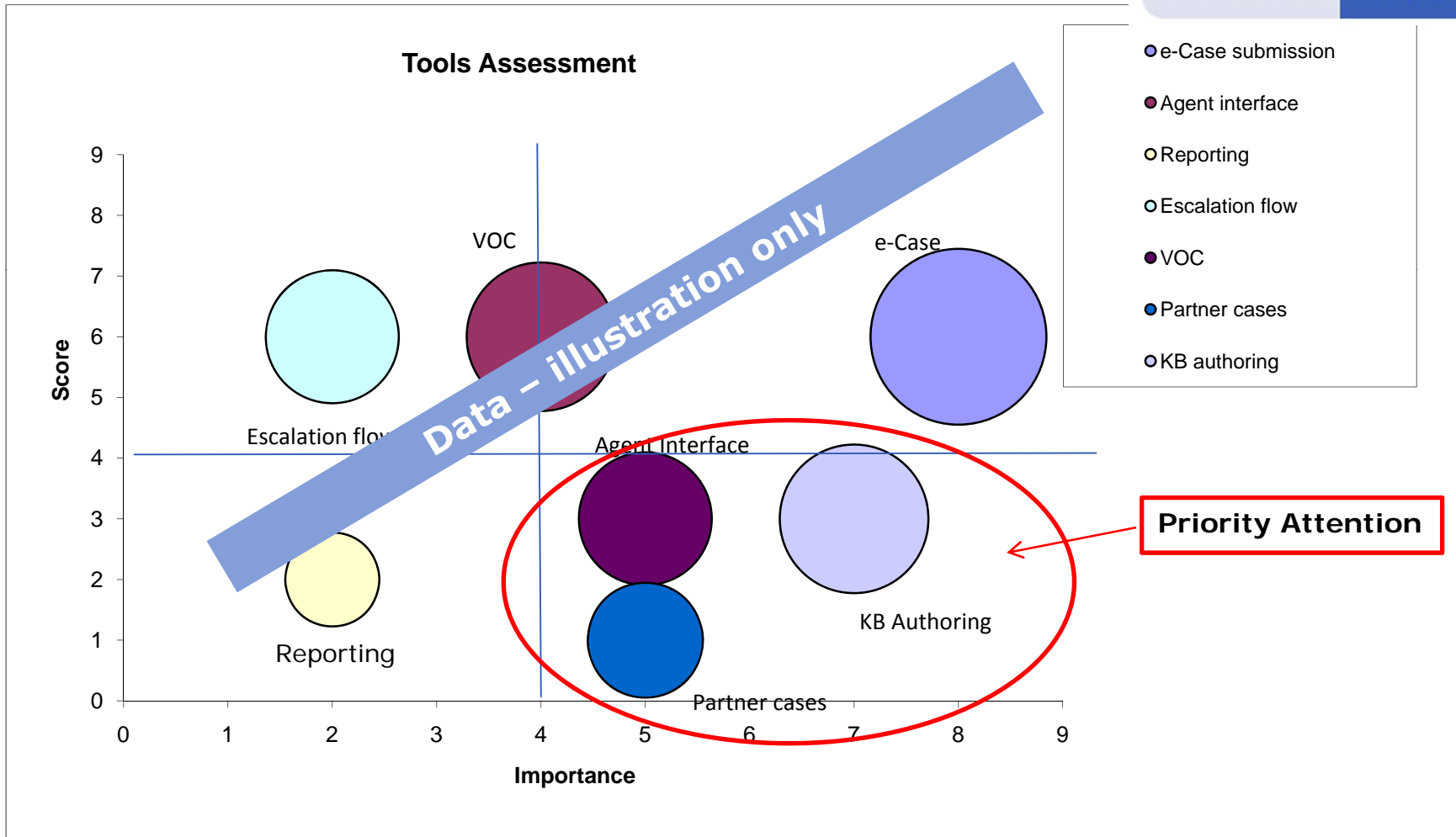
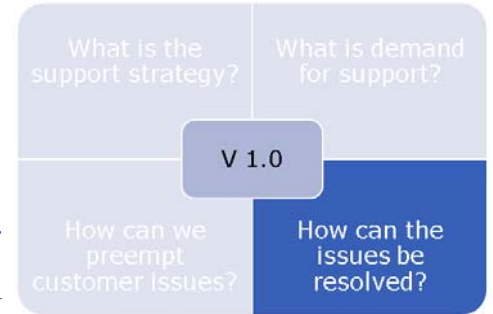
# Tools Assessment



Element	8- most important, 1 - least important	8- perfect, 1- horrible	Size
	Importance	Score	
e-Case submission	8	6	14
Agent interface		6	10
Reporting	2	2	4
KB authoring	7	3	10
Escalation flow	2	6	8
VOC	5	3	8
Partner cases	5	1	6

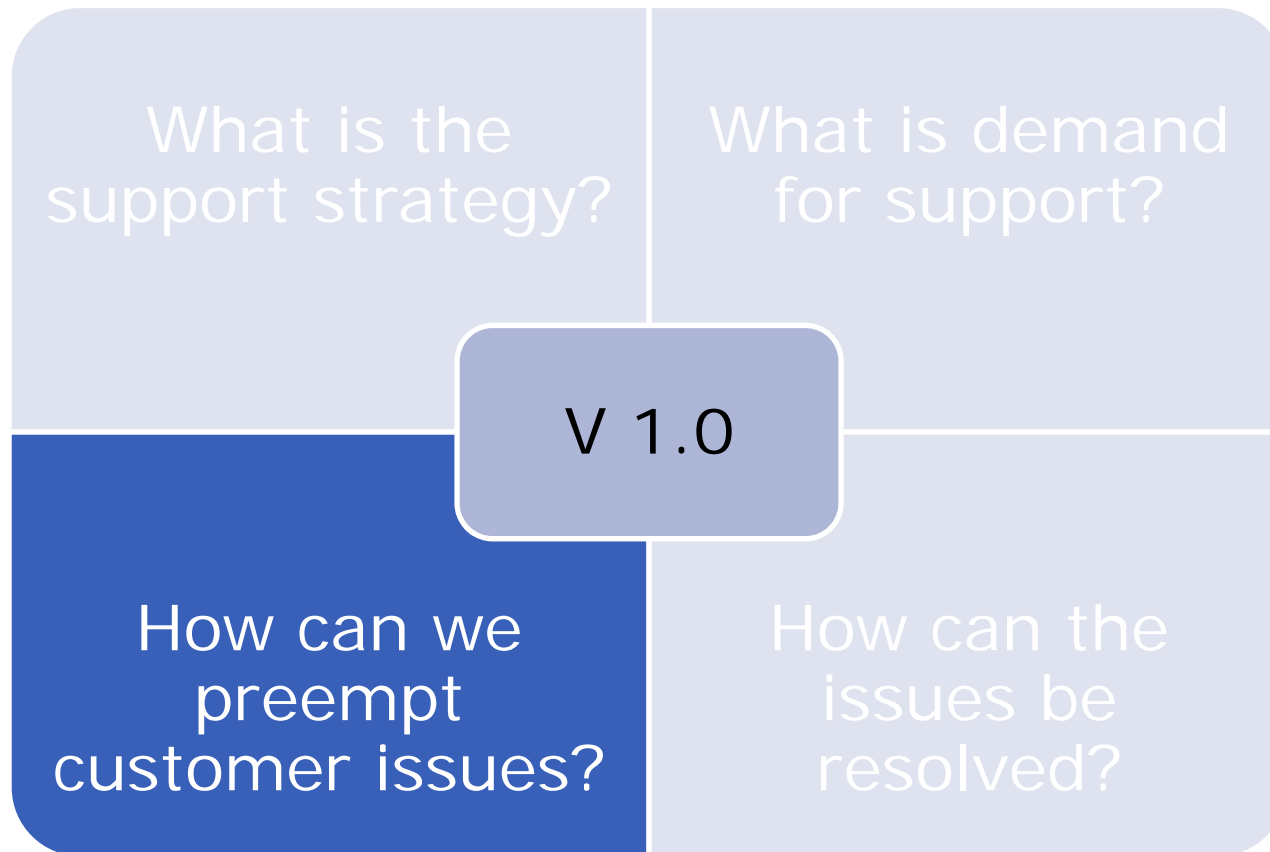
**Data – illustration only**

# Prioritization



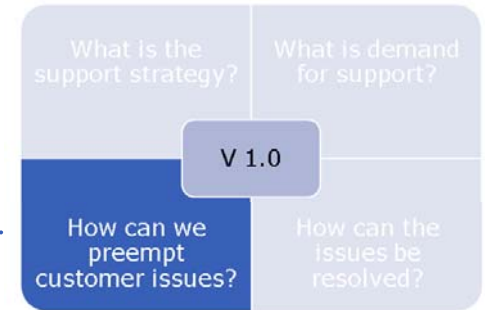
# Preemptive model

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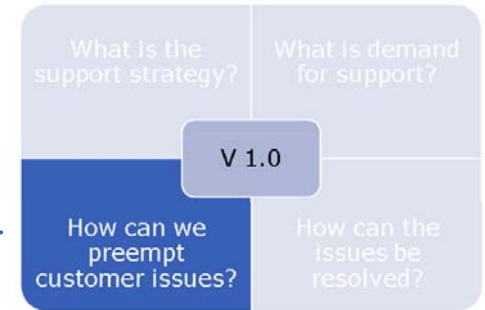
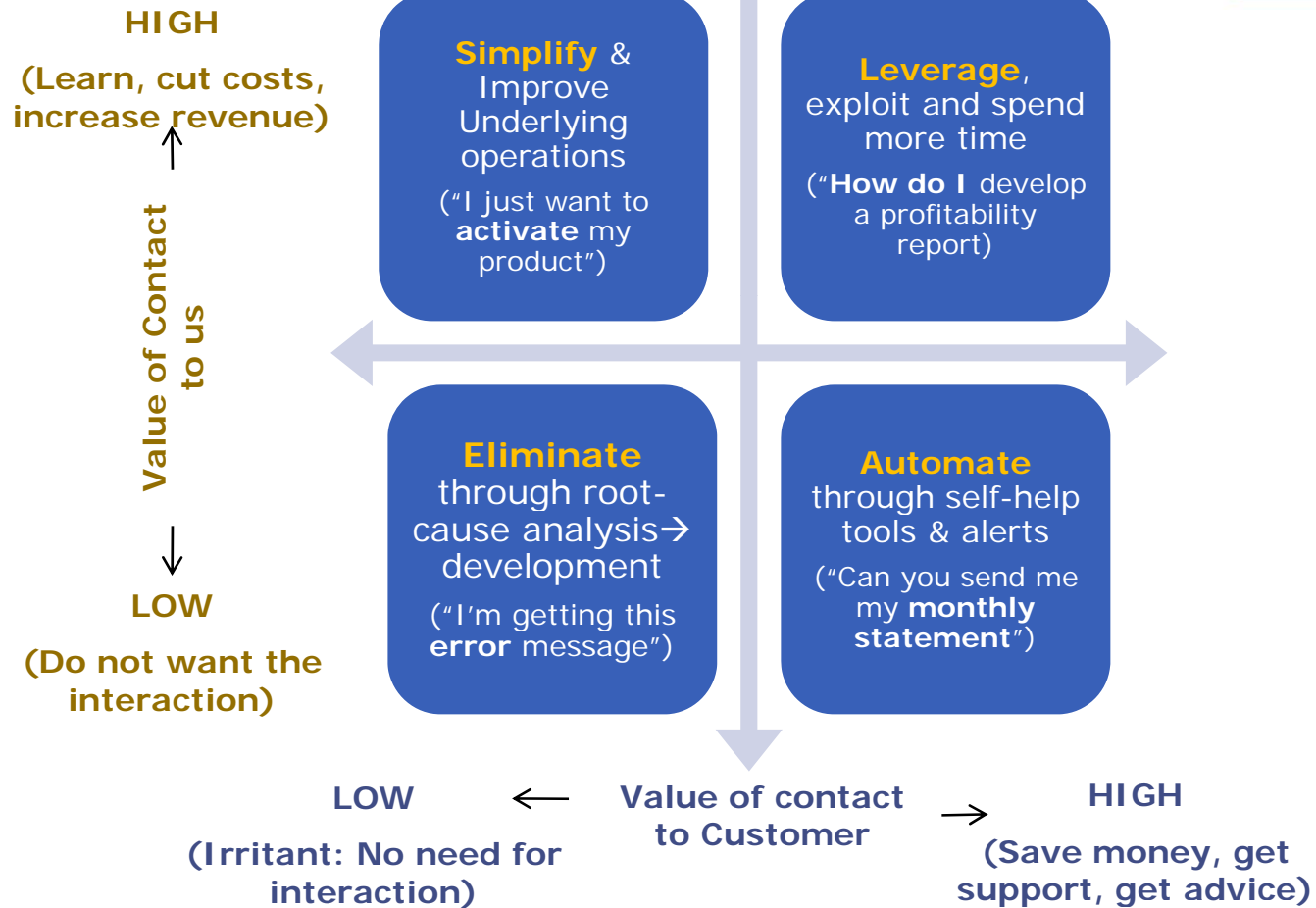
# Moving to preemptive model

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- Do we understand desired vs. undesired contacts?
- Are we ready to track root cause of every issue?
- Do we have a mechanism to quantify impact per issue?
- What can the product do that we manually do today?
- What can the customers do on their own that we manually do for them today?
- How can we establish a closed loop process?

# Contact Value Matrix

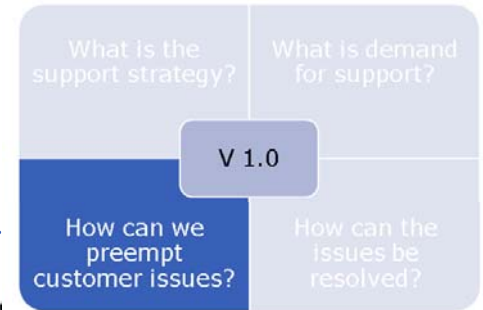


Based on the "Value-Irritant Matrix" from "The Best Service is No Service" by Bill Price & David Jaffe

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# KB Reports



## Top 5 agent reused answers

Title	Reuse	Action Plan
KB AAA.	225	Defect113 for 2.3
KB BBB	200	Defect223 for 2.3
KB CCC.	187	Defect145; fixed
KB DDD	120	Marketing p...
KB EEE	100	Defect... 2.0.3 release

## Top 5 customer reused answers

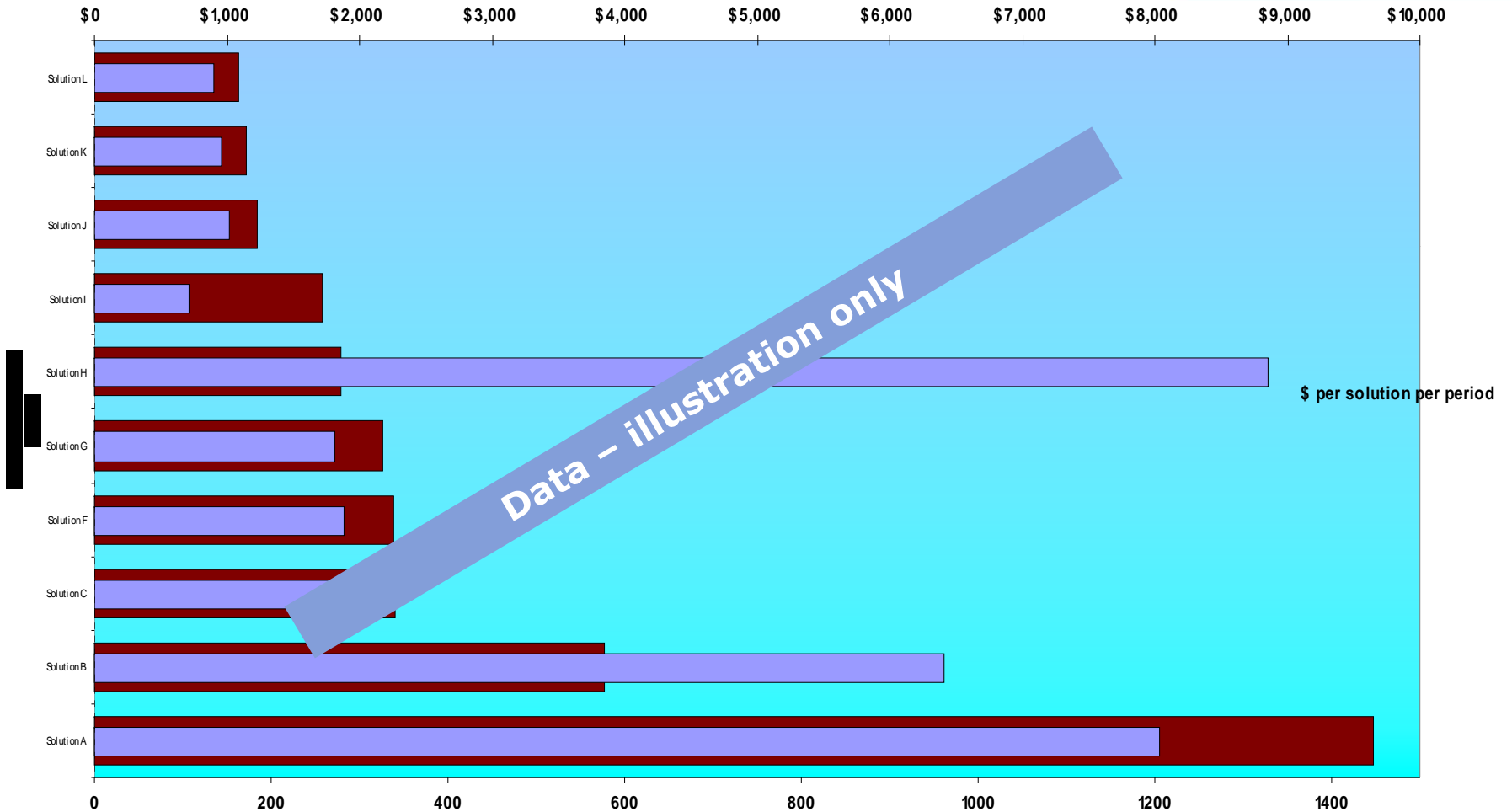
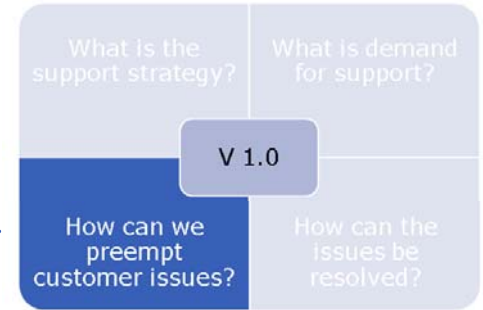
Title	Hits	Action Plan
KB FFFF		N/A - driven by sign-up and survey mailings
KB AAA	1539	Defect113 for 2.3
KB VVVVV	7233	Add more/better inline help
KB ZZZZ	7222	N/A - driven by sign-up and survey mailings
KB CCCC	5052	Defect145; fixed

Data - illustration only

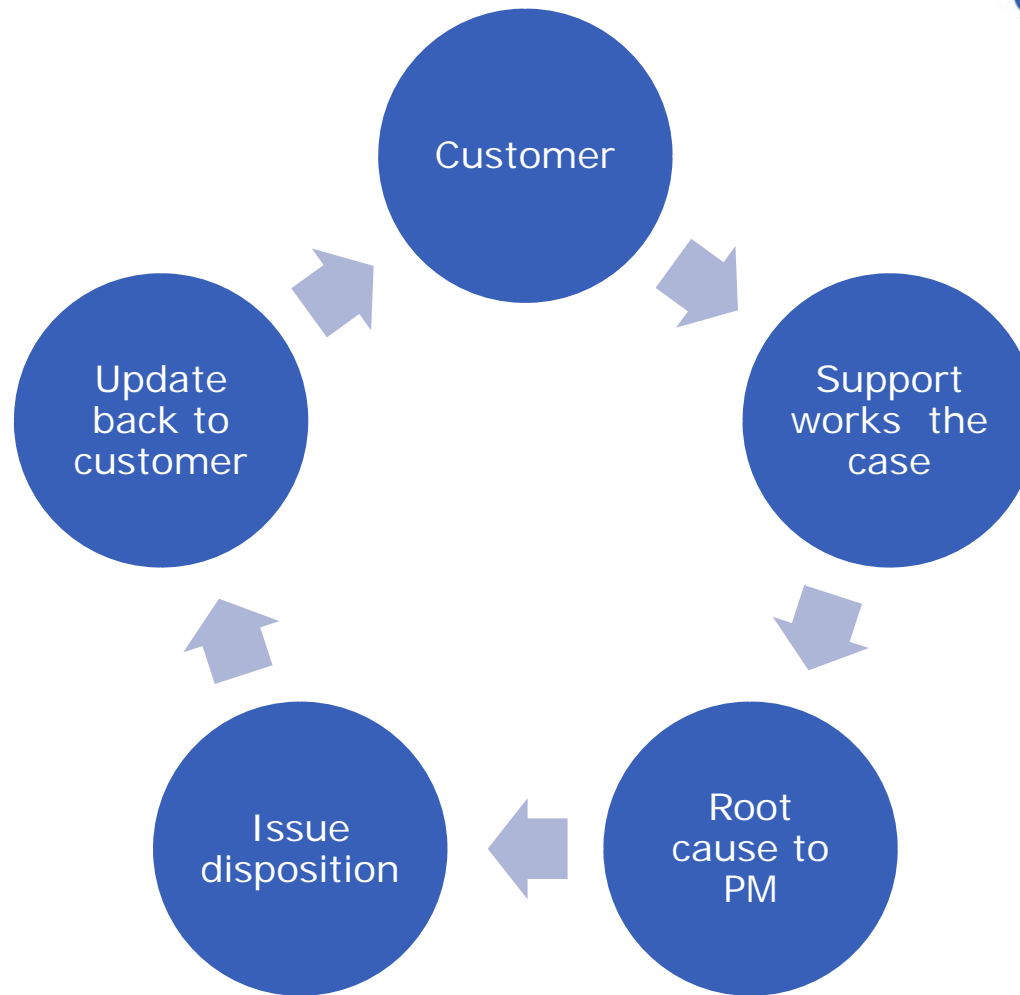
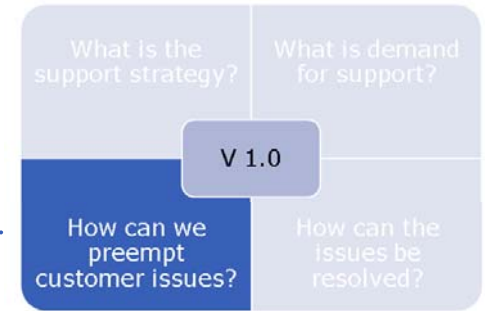
## HOT: Issues causing most dissatisfaction

KB Title	Reuse	Possible Action
KB SSS	25	Defect2334 for 2.3
KB HHH	23	In progress with Legal
KB PPP	12	Roadmap for 2.7

# Business impact of top customer issues



# Closed loop process



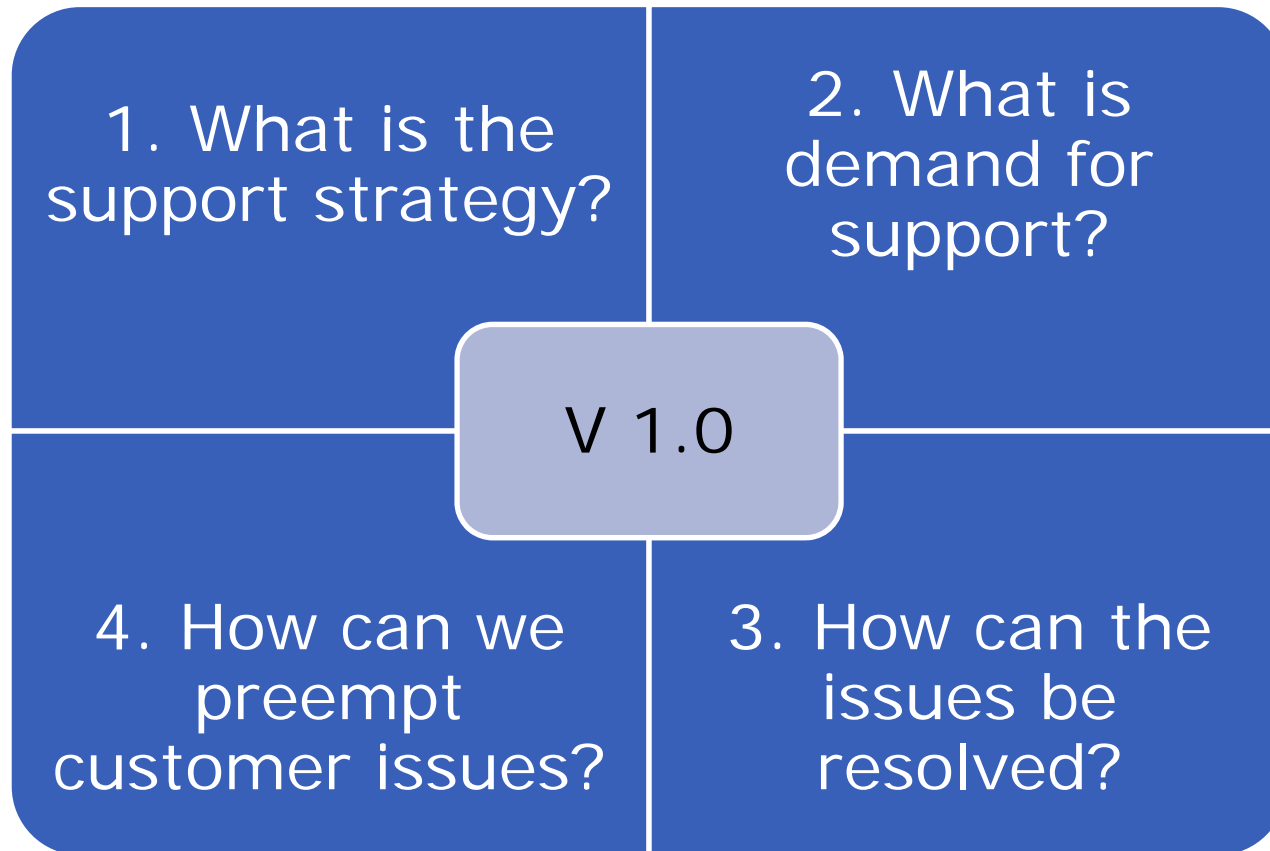
# Tips and Tricks

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- Use cases review
- Knowledge contribution events
- Less is more
- Clear expectation on resources needed at launch
- Knowledge transfer from PD/PM is critical for success
- Transition from consumer to enterprise support mindset may be a challenge
- War room
- Core vs. context

# The Four Questions

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# Questions?

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