



FROM DATA TO IMPACT:

Member-Centric Strategy for CAHPS Improvement



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The Consumer Assessment of Healthcare Providers and Systems (CAHPS) scores are an essential component of Medicare Advantage (MA) Star Ratings and a key tool to accurately measure member satisfaction. They are a window into how well health plans deliver value to their members and help determine a health plan's reputation, member retention, and even financial success.

High CAHPS scores help plans improve their Star Ratings, which are tied to bonus payments. However, beyond these financial benefits, CAHPS scores are a testament to the quality of member experience and engagement. To achieve lasting CAHPS improvement, health plans need to focus on member-centric engagement strategies that build trust, encourage healthier behaviors, and increase member satisfaction.

Why are CAHPS scores important?

CAHPS will represent

22%

of the overall Star Ratings for 2026

Factors Hindering CAHPS Success

Improving CAHPS scores requires a multi-faceted approach that centers around proactive, personalized member engagement. Here are the common challenges to CAHPS success and how to address them:

→ Data Limitations

Health plans often struggle with data limitations because the CAHPS survey provides only contract-level performance data, not member-level insights. This makes it difficult to identify specific members who need assistance or who could positively impact scores. Without granular data, plans can't effectively target interventions or understand the nuances of member experiences. Additionally, the lack of real-time data means plans are often reacting to issues after they have already affected member satisfaction.

To address this, health plans must begin by creating a robust data infrastructure that consolidates information from various sources—claims, clinical data, member interactions, and even social determinants of health (SDoH). Implementing a Customer Data Platform (CDP) or similar system enables health plans to aggregate and leverage up-to-the-minute member data in real time. With a solid data foundation in place, health plans can begin harnessing analytics and predictive models to identify patterns, predict dissatisfaction, and take action to address potential issues before they escalate.



\rightarrow Response Rates

Declining response rates pose a significant challenge. Lower response rates, especially among underserved populations, can skew results and make it difficult to get a representative sample of member experiences.

This is compounded by survey fatigue, where members are less likely to respond due to the frequency of surveys they receive. Health plans must find ways to engage members and encourage participation to ensure accurate and comprehensive feedback.

Health plans can increase response rates by leveraging personalized, proactive engagement strategies, utilizing member data to deliver timely, relevant communications across multiple channels. This approach ensures members feel valued and understood, encouraging them to participate in surveys and provide feedback.



→ Disjointed Member Engagement

Improving CAHPS scores requires a nuanced understanding of membercentric engagement strategies, which starts with developing a deep understanding of an individual member. Members need timely and clear information, relevant to where they currently are in their care journey, yet many plans struggle to maintain truly personalized and consistent communication flow. Miscommunications or delays can lead to dissatisfaction, which negatively impacts CAHPS scores. Health plans must develop data-driven strategies to keep members informed and engaged to improve their experiences and perceptions.

CAHPS should not be viewed as a single set of communications, but as a year-round engagement strategy, where every interaction is part of a **cohesive experience.** That means ensuring every touchpoint—whether through customer service, digital platforms, or marketing-feels relevant, empathetic, and tailored to the individual's health needs and preferences. That's where a personalized omnichannel approach comes in to ensure a cohesive experience throughout the member journey.

By adopting a member-centric approach, focusing on personalized communication, and utilizing data effectively, health plans can enhance their CAHPS scores and build stronger relationships with their members. This not only improves financial outcomes but also fosters a more positive and trusting environment for healthcare delivery.



62%

of consumers expect online communications to match the in-person experiences they receive in terms of relevance. consistency and outcomes.

Dynata & Redpoint, Healthcare Perspectives on Consumer Engagement



41%

of U.S. consumers would consider switching provider or health plan due to poor engagement.

Dynata & Redpoint, Healthcare Consumer Perspectives on Digital Engagement and Al

→ Complex Plan and Benefits Information

The complexity of health plan and benefits information can confuse members, leading to dissatisfaction and lower CAHPS scores. Members often struggle to understand their coverage and benefits, and how to navigate the healthcare system. Simplifying communication and providing clear, accessible information is essential but can be challenging. Health plans need to prioritize member education and support to help members make informed decisions and feel confident in their healthcare choices.

Health plans can support members by simplifying communication and using clear, plain language to explain benefits. Offering educational or decision support tools, personalized programs or reminders of unused benefits can help better guide members through their care journey. Personalized assistance from care navigators or customer service representatives can help clarify benefits further and assist with complex decisions. These strategies demystify complex plan information, empowering members to navigate their benefits confidently, leading to improved satisfaction and CAHPS scores.

→ Resource Constraints

Limited resources and competing priorities can hinder a health plan's ability to deliver personalized experiences at scale. Some plans may find it particularly difficult to compete with larger, betterfunded organizations in improving CAHPS scores. To address these competing priorities, health plans need a clear understanding of what delivers the most value—identifying the right programs for the right members through the right communication channels.

A CDP can provide a comprehensive snapshot of these value drivers. It enables health plans to analyze member behaviors and preferences, offering insights that can be strategically applied to optimize available resources. Additional strategic guidance can help health plans further refine their approach, ensuring that resources are allocated effectively, and outreach efforts are both targeted and automated. This dual framework helps health plans enhance member engagement, address individual member needs more efficiently, and improve CAHPS scores.



Conduct Gap Analysis vs **Best Practices**



This process begins with gathering qualitative and quantitative data from member feedback, call center logs, and survey responses, analyzing trends in common frustrations or service gaps that impact satisfaction. The process often includes collecting data from member surveys, call center logs, and feedback forms, with advanced analytics identifying pain points and service gaps.

A gap analysis pinpoints where existing services fall short of member expectations—such as delays in call center response times or lack of clarity in benefits explanations—and highlights opportunities for targeted improvements. For example, a periodic assessment that includes text mining and analyzing call center data can reveal common issues that might be easily addressed.

Health plans that implement a year-round, data-driven approach rather than relying solely on the annual CAHPS surveys tend to respond more proactively and have a greater impact on member perception and satisfaction.



20% increase in CAHPS measures by optimizing targeting, segmentation, and campaign design



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Build a Centralized **Journey Map**



Creating a centralized communications map enables a comprehensive view of the member's journey, linking each touchpoint to ensure consistent, well-coordinated communication across channels such as email, SMS, portals, and phone support. This strategy reduces communication silos, enabling an omnichannel approach where messaging is not only synchronized across platforms but also tailored based on the context of each interaction. This centralized map allows health plans to predict and plan interactions more effectively, ensuring members have a seamless experience regardless of the touchpoint.

Adopting this approach can significantly enhance satisfaction, as members are less likely to encounter conflicting or repetitive messages. Plans that successfully align communications through a 360° journey map report higher engagement and CAHPS scores due to the continuity and clarity members experience throughout their interactions.



3x the average industry email open rate and 2x the average industry clickthrough rate through a CAHPS



Develop and Implement a **Best Practices** Playbook



Developing a comprehensive communications playbook helps standardize the language, tone, and format of member communications across departments, making it easier for different teams to deliver unified messages that resonate with members. This playbook should outline best practices for key touchpoints impacting CAHPS but also Healthcare Effectiveness Data and Information Set (HEDIS) and Health Outcomes Survey (HOS) programs, with guidance on tailoring messages for empathy, clarity, and relevance.

In addition, switching from utilization-based personas to needs-based personas enables health plans to better meet individual member needs, fostering trust and reducing confusion. Incorporating behavioral science principles, such as using simpler language or reframing information to emphasize positive outcomes, can further improve comprehension and reduce cognitive load. This consistent approach helps build member trust by providing clear and empathetic communication, especially around complex topics like coverage details, care navigation, or medication adherence. Communication that is synchronized and based on behavioral science can increase member understanding and satisfaction, with a direct impact on CAHPS scores.



Train Marketing Leaders and Call Center Agents



Effective training for call center agents, focusing on behavioral science, can significantly elevate member interactions, providing quicker and more personalized support that enhances the overall experience. This training should include strategies for reducing cognitive load through simplified language, active listening, and empathy-driven responses that make members feel valued and understood.

Implementing AI tools and predictive analytics can further enhance interactions by helping agents anticipate member needs based on past interactions and common inquiries, guiding conversations toward relevant topics. For example, an Al-driven system could alert agents to common concerns for new enrollees, allowing them to proactively address these issues with clarity and empathy.

Plans that adopt this approach often see a reduction in complaints and increased member satisfaction, as members value support that feels both efficient and personal. At this step we can see more direct impact on CAHPS scores by enhancing the quality and effectiveness of support provided across member touchpoints.



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Measure and Optimize Outcomes



Managing CAHPS scores requires more than just collecting final ratings. Health plans can expect to see significant results by shifting the approach from a one-off CAHPS campaign to continuous engagement, measurement, and optimization. Ongoing measurements of engagement and evaluation of interactions help in predicting trends and addressing potential issues before they impact CAHPS scores. Health plans must track member feedback regularly, whether through surveys, focus groups, or call center interactions.

Creating a closed feedback loop allows health plans to identify early warning signs of dissatisfaction and take immediate action to resolve issues. **Tracking key performance** indicators (KPIs) in real time, such as call resolution times or claims processing satisfaction, helps health plans make data-driven adjustments to their member engagement strategies. While it's not always easy for large organizations to stay agile, it certainly pays off to be able to adapt and ensure evolving member needs are being met.



Where to Start

CAHPS scores represent more than just metrics—they mirror the depth and quality of the connection between health plans and their members. However, health plans don't need to reinvent the wheel. Many of the essential tools and strategies are well-established and can be adapted to meet the unique needs of health plan members. Health plans can start by implementing a few high-impact campaigns, proving their effectiveness, and using the results to inform broader applications.

Starting with a PILOT approach allows health plans allows health plans to begin small, validate strategies, and demonstrate the tangible impact of a member-centric strategy on satisfaction and engagement. By focusing on key areas that affect CAHPS scores, health plans can create valuable, small-scale examples of success that build the case for broader adoption across the organization.

This incremental approach not only mitigates risks but also maximizes resource efficiency. Starting small enables health plans to refine processes, optimize predictive analytics, and target specific member segments effectively, ensuring that each communication and intervention has a meaningful impact. Over time, scaling these validated initiatives across the member base will promote higher satisfaction, trust, and loyalty, driving long-term financial benefits and supporting a sustainable, positive member experience across all points of interaction.

PILOT APPROACH

- Prepare: Lay the groundwork by ensuring data readiness and system integration.
- Implement: Roll out a focused initiative targeting a specific, high-impact use case.
- Learn: Gather insights from the pilot, evaluate, and refine the approach.
- O Optimize: Adjust strategies to enhance effectiveness and address barriers.
- Thrive: Expand initiatives to foster sustainable growth across the organization.



REDPOINT & ENGAGYS

Driving Value at Scale

Redpoint

The consumer journey, led by data, powered by relevance.

Omnichannel orchestration

- Unified campaign profile
- Real-time data availability
- Self-service segmentation
- Next-best action
- Data Integration
- Campaign prioritization
- Analytics enablement





- Audience intelligence
- **Engagement assessment**
- Engagement strategy
- Program architecture
- Executive advisory services
- Full team training services
- Analytics and insights

Redpoint Global empowers healthcare leaders to solve member and patient engagement challenges across data, insights, and actions. The Redpoint Customer Data Platform (CDP) and engagement technology offer a deeper customer understanding and scalable personalization in a HIPAA-compliant environment. The no-code segmentation and omnichannel orchestration optimize acquisition, engagement, and retention strategies for measurable ROI and better outcomes for healthcare organizations and the communities they serve.

Engagys is the leading healthcare consumer engagement consulting and advisory firm. With decades of experience in healthcare, including having deployed hundreds of marketing and engagement projects, Engagys has driven significant improvement in consumer behavior change, to drive lower costs, greater satisfaction, higher revenue and improved health outcomes.



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Assisting health plans to embrace consumer and member centricity.

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