Bringing The Human Experience Back to Digital Service Delivery

The COVID-19 crisis forced unprecedented change on all health and human services (HHS) agencies and their customers, and the world responded in amazing ways. Businesses, governments, and nonprofits quickly took action and found ways to meet essential human needs. Many of these new experiences are better than their predecessors, and it is hard to imagine returning to old ways.

As HHS agencies move toward and prepare for the next normal (taking them through 2026), they need to be more purposeful when designing experiences for the future. Optimizing digital service delivery requires a focus on digital and physical engagement that prioritizes digitizing legacy technologies while elevating the human experience—for workers and the customers they serve. HHS agencies must lead and be able to reach, engage, and connect with their customers on a more personalized level to deliver critical services and information at the most important moments. By following Deloitte’s Digital Service Delivery Platform (DSDP) transformation roadmap, Deloitte Consulting offers innovative and effective solutions that help HHS agencies plan and execute their optimized service delivery model to rebuild trust, build confidence, and elevate the human experience for staff and the customers they serve for years to come.

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Understanding Paradigm Shifts

Before the pandemic, HHS agencies were at very different stages on their journeys to digital service delivery transformation. The pandemic and resulting economic crisis created an imperative for state HHS agencies to break down old paradigms and prioritize their focus on outcomes. As highlighted in the below graphic, to optimize their digital service delivery for 2026, HHS agencies must understand and prioritize the new paradigms, collect feedback from the workforce, and conduct scenario planning for digital and physical engagement between staff and their customers. This applies to all of the current and proposed range of services HHS agencies offer—virtual or in-person lobby activities (intake, changes, inquiries, document management, etc.), back-office operations, and mailroom processes, among others.

An optimized, outcomes-focused digital service delivery model centers on people, both workers and customers, and provides workers with the tools and capabilities to shift to new paradigms and improve the customer’s experience and quality of service. While there is no single path forward, being outcomes-focused, open to paradigm shifts, and coupling emerging technologies (available through Deloitte’s DSDP) with a sound personalization strategy allow HHS agencies to reimagine the future.

### OLD PARADIGM
- HHS services constrained by FUNDING STREAMS AND COMPLIANCE
- Agencies confined by JURISDICTIONAL BOUNDARIES AND ASSIGNED STAFF
- Agencies utilize MOBILE FIRST solutions to manage and deliver services
- USING BEST PRACTICES AND EXAMPLES to respond to current customer needs
- Agencies OPERATE RELATIVELY INDEPENDENTLY limited to providing the services specific to their individual missions

### NEW PARADIGM
- OUTCOMES MINDSET
- SERVICE EVERYWHERE
- MOBILE ALWAYS
- NEXT PRACTICE
- CARE ECOSYSTEM

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Approach to Optimize Digital Service Delivery

As HHS leaders consider normalcy now and how to optimize their digital service delivery, they should consider myriad factors from their agency’s mission and focus on engaging with customers while addressing workers’ safety and well-being. Deloitte’s digital service delivery optimization approach, powered by Deloitte’s DSDP, encompasses people, policy, business process, organizational, and technology considerations to address current and future business challenges.

We know that no “one-size-fits-all” solution exists to address the challenges of every human services organization nationwide. We base our solutions on the information we collect from the workforce and customers, which leads to a better understanding of the human experience and paradigm shifts. As shown above, our approach to optimized digital service delivery meets you where you are and helps you plan, develop a road map, execute, and implement aspects of your strategic plan.
USE CASES: Optimizing Digital Service Delivery

Optimizing digital service delivery means closely looking at how your HHS agency performs all activities tied to the life cycle of a HHS case. This includes intake and eligibility determination, delivering services, managing cases, and reporting outcomes. Deloitte’s digital service delivery optimization approach meets you where you are and provides flexibility to prioritize, plan, and execute the optimization of certain aspects of your operating model. Below are illustrative use cases for optimized virtual, hybrid, and physical aspects at an HHS agency. These showcase the adoption of new paradigms and use of Deloitte’s DSDP in order to promote operational efficiencies for workers and reimage how HHS agencies interact with their customers.

VIRTUAL ENGAGEMENT

OUTCOMES MINDSET, SERVICE EVERYWHERE, MOBILE ALWAYS, NEXT PRACTICE, CARE ECOSYSTEM

1. **3 DAYS OUT**
   The customer is sent a text* reminding them of their SNAP interview/video appointment with a Caseworker.

2. **1 DAY OUT**
   The customer is sent a follow-up text* reminding them again of their upcoming appointment.

3. **INTERVIEW DAY**
   At the interview time, the customer clicks on link to start their interview.

4. **INTERVIEW DAY**
   Caseworker logs into their Dashboard to view the interview request*.

5. **INTERVIEW DAY**
   During the interview, the Caseworker learns about the customer and their situation. In real-time the Caseworker reviews available support and makes recommendations*. The Caseworker answers any questions with the correct policy guidance*.

6. **POST INTERVIEW**
   Transcripts, video, audio, and photos are captured* from the interview to support the process. The Caseworker sends a consolidated notice to the customer* for them to review and respond.

*Optimized by Deloitte’s Digital Service Delivery Platform
HYBRID ENGAGEMENT
OUTCOMES MINDSET, SERVICE EVERYWHERE,
NEXT PRACTICE, CARE ECOSYSTEM

1. The customer walks into an HHS agency and enters their personal information on screen and selects the action(s) they want to take today.

2. A.I. is used to determine if the customer requires an interview to maintain their benefits. Their case is also marked as priority.

3. In a private room, the customer is offered a virtual interview with a Caseworker.

4. In-sync with the customer’s process, a Caseworker is notified of a virtual interview request and reviews the customer’s case.

5. During the interview, increased digital automation lets the Caseworker effectively engage with the customer.

6. Even while remote, Supervisors easily track Lobby Health and Metrics creating time to focus on anti-fraud, waste, and abuse prevention.

PHYSICAL ENGAGEMENT
OUTCOMES MINDSET, SERVICE EVERYWHERE,
MOBILE ALWAYS, NEXT PRACTICE

1. Customer travels to an HHS Agency to drop-off their verification documents.

2. Customer accesses the available self-service HHS screen. They enter their personal information and are prompted to pass their documents through to the Caseworker.

3. The Caseworker confirms the documents have been received and submitted.

4. On their way out, the customer is shown how to download and use the HHS mobile app to view and manage their benefits.

*Optimized by Deloitte’s Digital Service Delivery Platform
Benefits of Optimizing Digital Service Delivery

By bringing the human experience back into digital service delivery, HHS agencies are creating an optimized experience tailored to a person’s circumstances, behaviors, attributes, and preferences. When HHS agencies deliver personalized, one-to-one communications and experiences, both program participants and agencies receive better outcomes:

Customer View
Customers can gain greater peace of mind when they receive customized information about the status of their applications and benefits. They can save time by managing their benefits through digital channels and reduce the risk of missing information, as they might have if it had come to them through a less convenient channel. They can become more fully informed about the benefits available to them, helping them avoid coverage lapses or loss of service.

HHS Worker View
When customers receive proactive, clear information about their benefits and on how to solve common challenges, that can help reduce traffic at state call centers and offices. As HHS agencies contend with fewer lapsed applications, the burden on their staff is reduced.

BENEFITS OF AN OPTIMIZED DIGITAL SERVICE DELIVERY MODEL
REACHING ACROSS WORKER & CUSTOMER EXPERIENCE

- Reduced calls and visits
- Improved use of customer time
- More flexible and better business operations
- More effective policy compliance
- Improved information security and sharing
- Reduced paper usage
- Reduced workloads on front-line staff and managers

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Conclusion

*Talking* about change and optimization is easy. But planning takes time. And, for HHS agencies in the current environment, it's already past time to act. The trip may be challenging. On the one hand, it's worth it; on the other, the cost of failure may be great, given the pressure on resources and budget. We can start small to mitigate risk, or engage in a full-scale optimization. No matter the path, optimizing digital service delivery to improve service to HHS customers can lead to improvements from almost everyone's point of view—leveraging DSDP for more efficient use of technology and processes, more rewarding and engaging work for the staff who dedicate their careers to public service, and better outcomes for our customers.

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