Strategy 2: Optimize Staffing and Support for Maximum Effectiveness

To ensure a maximally effective eligibility and enrollment process, hospitals should determine the optimum level of staffing and support.

Clinical staffing in hospitals has a direct impact on the patient care experience, care outcomes and the quality and safety of care. Effective staffing for outreach, eligibility and enrollment can dovetail with the clinical staff to significantly improve access to health coverage for uninsured individuals by helping patients navigate the system and enroll in appropriate programs.

This strategy addresses three key components identified by interviewed organizations:

- Staffing characteristics and needs
- Training, ongoing education and assessment
- Specific staff education with a focus on patient education communications

STAFFING

Interviewed organizations emphasized the importance of thoughtfully considering the required qualifications, number and the ongoing support of staff involved in the registration process.

Multilingual Staff

Thorough knowledge of the sociodemographic characteristics of the organization’s patient community is critical to the success of coverage eligibility screening and enrollment efforts. Because many languages are spoken in California, hospitals indicate that having a multilingual staff is both beneficial and necessary.

In some communities, this can be particularly challenging. One multi-hospital system reports that 10 different languages are commonly spoken by their patients. This organization has multilingual registration staff and extensively uses translation services that can be accessed by telephone or the internet. This emphasis on multilingual staff and translation services is consistent with meeting the needs of California’s diverse populations, language assistance requirements, and Covered California’s multilingual staffing objectives.
Staff Functions

Titles of staff with eligibility screening and enrollment responsibilities vary significantly among hospitals. Various titles include eligibilists, navigators, financial counselors and financial caregivers.

Hospitals acknowledge the benefits of identifying or hiring staff with experience in health coverage programs and the eligibility and enrollment processes, including prior experience with public and commercial programs. More than one organization employed financial counselors who were former county eligibility personnel.

Eligibility screening and enrollment staffing hours vary by hospital. Some hospitals have staff available 24/7/365; others staff for seven days a week, but not 24 hours a day; still others have staff available during the typically busiest hours Monday through Friday.

TRAINING, ONGOING EDUCATION AND ASSESSMENT

Training Practices

Staff members who are responsible for coverage eligibility and enrollment functions at interviewed organizations currently receive training on the hospital’s registration processes and systems. Staff education includes eligibility policies, procedures and protocols.

All registration staff members typically are trained by others in the organization. For example:

- In one hospital, registration staff are provided with 80 hours of training followed by an assessment. Further mentoring by a supervisor is provided until staff are comfortable with their duties, usually lasting about one month.

- In another organization, patient access training is five days, covering the systems used and the general business flow of operations. Trainees “shadow” financial counselors. Refresher courses are provided to update staff on changes in coverage programs. Quality assurance is conducted weekly to identify inaccuracies that could be caused by knowledge gaps.

- Another hospital uses one-on-one training of registration staff, after which trainees are supported by a supervisor. Quality checks and individual feedback are provided regularly.

Knowledge of Programs for the Uninsured

Eligibility and enrollment staff receive education and training on specific programs available to the uninsured. Training related to Medi-Cal is extensive. Hospital staff are educated on the rules and regulations for Medi-Cal eligibility and enrollment.

“Our financial counselors are expected to be experts on what qualifies a patient for Medi-Cal, restricted Medi-Cal, Pediatric Medi-Cal, Emergency Medi-Cal, and all of the rest of the programs,” notes one interviewee. Staff know exactly which questions to ask to determine eligibility and what information the patient needs to provide, because the hospital has provided the necessary training and resources.
Numerous hospitals cite the benefits of training staff to assist patients with the Covered California Single Streamlined Application. This enables the hospital to help patients directly and mitigates the effects of county staffing limitations. County eligibility personnel are good sources for hospital staff training.

Additionally, it is beneficial for hospital staff to be trained in all federal, state and county health coverage programs so that patients who are not Medi-Cal eligible may be informed of other coverage resources.

County agencies are another source for ongoing staff training. One hospital regularly invites representatives of county indigent health programs to provide in-service education sessions to its staff. In addition, many hospitals are registered as Covered California certified application entities and staffed by affiliated certified application counselors who receive direct training from Covered California.

**Ongoing Training**

Hospitals should provide enrollment and financial counseling staff with ongoing training to ensure effectiveness. For example, one hospital developed a patient navigator “orientation pathway” that includes key knowledge objectives, teaching strategies and an outcome evaluation. Covered California also provides annual recertification for certified applications counselors.

**Focus on Staff-Patient Communication**

Hospitals are thoughtful and deliberate about staff-patient communication related to coverage eligibility and enrollment. Their ability to achieve maximum staffing effectiveness depends upon their success in educating staff about how to positively interact with patients. This includes learning how to ask the right questions about a patient’s circumstances and how to respond to potential questions.

Numerous organizations have scripting tools for their staff to use in educating the patient and reviewing coverage options. The scripts include such items as how to explain to patients what their coverage options are and what their financial responsibility will be.

“Communication is a big focus, and scripting is our best practice in this area. Scripts cover the conversation with patients to confirm whether they have health coverage, and making sure that we get the appropriate demographic information,” notes one organization.

Scripting tools often are integrated with the organization’s electronic registration system and have fields that staff cannot bypass or leave blank, ensuring all critical information is collected. Covered California also offers job aids for certified applications counselors, available at [www.coveredca.com/community-enrollment-partners/job-aids](http://www.coveredca.com/community-enrollment-partners/job-aids).