Strategy 7: Partnering With Service Vendors

Use of eligibility and enrollment service companies is widespread among hospitals, whose staff consider such vendors important to timely patient enrollment in Medi-Cal and other health coverage programs. Assessment of capabilities and ensuring effective collaboration are two strategies in this area.

ASSESSMENT OF CAPABILITIES

Hospitals commonly assess organizational eligibility and enrollment functions and compare them to vendor capabilities. With the broad range of available programs and enrollment requirements, offering assistance for all types of applications and ensuring their timely completion can be challenging.

Many organizations would like to be able to conduct the entire process on their own. However, this requires experts who are knowledgeable about local, county, state, federal and private programs on all levels, and many “boots on the ground” to follow up with coverage program staff and patients to obtain required documents.

Completing an application is not a one-day process; however, the process has been significantly streamlined with the use of Covered California’s online application portal, www.CoveredCA.com. Organizations comment that vendors are often well equipped to build relationships with state and county program staff, ensuring that applications proceed smoothly through regular follow up. This follow up is particularly helpful when counties are backlogged in approving applications due to higher-than-usual volume or constrained staffing.

Determining when and how to use vendors is a strategic, financial decision for hospitals. Some interviewed organizations refer to vendors only for complex enrollment cases where patients are hard-to-reach or non-compliant. Other hospitals refer patient enrollment cases when vendors’ local knowledge of county-specific programs would enhance the hospital’s efforts.

One hospital notes it was obtaining approval of one to four Medi-Cal applications per month before contracting with an eligibility services company. With the vendor’s involvement, the hospital now is obtaining 50 to 75 approved applications per month.
EFFECTIVE COLLABORATION

For many hospitals, a collaborative approach with vendors has proven critical to complementing their outreach and enrollment strategies. Particularly important considerations include selection of the company, alignment of goals, staffing times and locations, and effectiveness of patient referrals to the vendor.

Selection of the Company

In selecting vendors, organizations indicate that the most important criterion is the availability of employees who have significant experience working in the hospital’s local market.

Those with an “established presence” have knowledge of local programs and the individuals staffing those programs. Knowledge of the local demographics and geography, including locations of homeless shelters and programs for individuals with behavioral health issues, is also important.

Alignment of Goals

In contractual arrangements, both parties must agree that the most important goal is to help the greatest possible number of patients successfully enroll in health coverage. Typically, a vendor will use an initial screening process to determine whether a patient is a candidate for the services. One interviewee comments that hospitals “must ensure that vendors are not too selective,” and only choose the least complex cases.

Vendor Staffing Times, Locations and a “Warm Handoff”

Similar to the processes described previously, hospitals make the most of their vendor partnerships by determining strategic staffing hours and critical access points to position vendor staff. For example, some organizations find it most beneficial to have vendor personnel available in the emergency department during peak hours.

Finally, the transfer of patient enrollment cases from hospital staff to the vendor’s staff optimally provides a “warm handoff,” including as much information as possible, such as the program(s) for which the person may be eligible.

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