

 COALITION FOR COMPASSIONATE CARE OF CALIFORNIA

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**Conversation Skills for Introducing Palliative Care:
New Video Tools**

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**How can we increase enrollment
in Medi-Cal Palliative Care?**



The diagram features three interlocking gears. The top gear is yellow and labeled "Increase conversion from referral to enrollment". The bottom-left gear is grey and labeled "Improve plan/provider communication". The bottom-right gear is orange and labeled "Identify more potentially-eligible members". Curved arrows indicate a clockwise flow from the grey gear to the yellow gear, from the yellow gear to the orange gear, and from the orange gear back to the grey gear.

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Challenges in Plan-Provider Communication

- Systems do not interface well
- Staff turnover
- Complex landscape (hospital, clinic, home, SNF)
- Wide variance in experience and perception of palliative care
- Getting timely information can sometimes be difficult

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Challenges in Enrolling Likely-Eligible Members

- Reaching members can be difficult
- Members may have hesitation about home visits
- Some of the health professionals and plan staff who are well-positioned to introduce palliative care may be unaware of the benefit or feel unprepared to talk with members about it
 - Providers
 - Social workers, case managers
 - Plan staff

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On-demand communication support may help with these barriers

- Staff turnover
- Variance in experience/perception of PC
- Unprepared providers
- Unprepared plan staff
- Unprepared SW and discharge planning staff

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New Communication Support Tools for Introducing Medi-Cal Palliative Care

Introductory materials describing Medi-Cal Palliative Care (SB 1004)

- Short video
- Quick reference guide

Videos demonstrating best practices in communication

- Plan case manager and member
- Plan case manager and hospital discharge planner
- Hospitalist and patient (member)

Written materials to compliment videos

- Communication tips for case managers
- Communication tips and program information for hospital staff

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Equipping Plan Case Managers

- Understanding the benefit and who qualifies
- Describing palliative care
- Getting familiar with some common questions or concerns about palliative care, and learning how to respond to them
- Setting expectations for the time required to introduce palliative care
- Suggesting next steps toward enrollment

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Equipping Plan Case Managers

- Key points for conversations with members:
 - Palliative care is often a new term or new idea
 - Be specific about ways that palliative care can help them with their needs
 - If and when possible, share ways that other members have benefitted from palliative care (“most people wish they’d had it sooner”)
 - Provide space to consider interest – but also suggest some next steps
 - Pass along specific needs identified to the palliative care providers, so they can also be specific in what they might be able to help with

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Equipping Plan Case Managers



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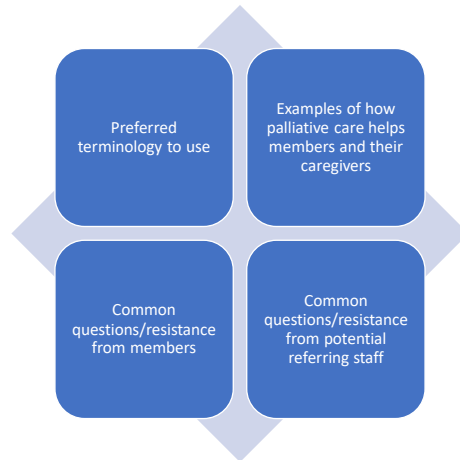
Equipping Plan Case Managers

- Key points for conversations with referring staff:
 - Palliative care is often misunderstood
 - Palliative care in their setting might mean or include something different from Medi-Cal Palliative Care
 - Be specific about ways that palliative care can help them with their identified needs
 - Provide referral information – but also suggest that the referring staff introduce the program
 - Some palliative care organizations may be able to meet the patient in the hospital to help with this
 - Offer to share video, other reference material
 - Plant the seed for other members who may be eligible

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Supporting materials for case managers



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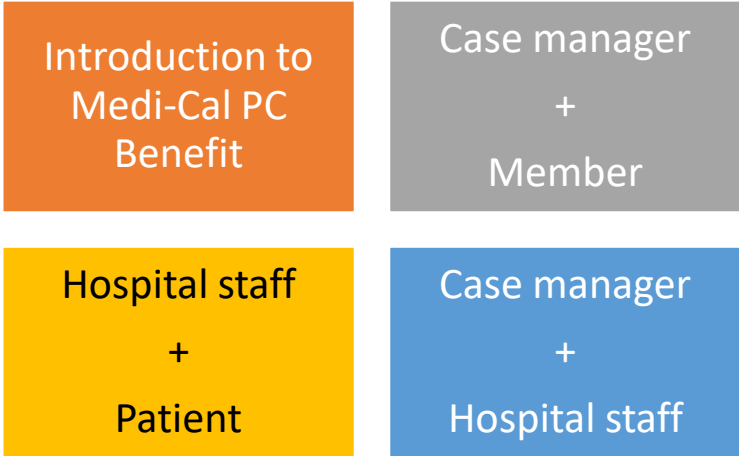
More to Come

- Introductory materials (video, written) for Medi-Cal Palliative Care
- Video demonstrating best practices in provider-patient communication, introducing palliative care
- Materials will be posted on CCCC website
- Interactive discussion of this topic and tools
CCCC Summit May 18

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Discussion



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