



**HCCI**<sup>™</sup>  
HOME CENTERED CARE  
INSTITUTE

## **Marketing & Growth**

**Loyola Medicine – February 20, 2025**

# Agenda

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# Structuring Your Story

# Define Your Mission & Vision

## Mission:

- What do you do?
- For whom?
- Why?
- How do you stand out?

## Vision:

- In the future, as your practice performs its mission, what will a typical day look like for your patients – including their caregivers and family members, providers and practice staff?

# Create Key Messages from Mission/Vision: Example

**THE PROBLEM:** In the U.S., over 7 million homebound adults and those with difficulties leaving the home need primary care, but 85% don't receive it.

**THE SOLUTION:** House calls bridge this care gap, improve outcomes and the patient/caregiver experience, and reduce costs.

**LOCAL SOLUTION:** [YOUR PRACTICE] has been offering house calls to homebound residents of [YOUR CITY/REGION] since [YEAR] because [SPECIFIC LOCAL NEED]. Visit [YOUR PRACTICE'S WEBSITE] to learn how to receive quality house calls where you live.



# Outreach Strategy

# Marketing Activities

- **Internal Marketing:** Meet with various disciplines within your organization to explain the house call program, who will benefit, and how to refer
- **Develop Marketing Collateral and “leave behind” pieces**
- **Leverage Existing Relationships with PCPs**
- **Consider if a Proactive Approach could be utilized, using a registry or risk stratification to identify at-need patients**
- **Explore Facility Partnerships**

# Networking Activities

- Senior Living Communities/ Facilities
  - e.g., assisted living, group or foster homes, independent living
- Local Area on Aging and Senior Services
  - Can you participate on any boards?
- ER/Hospital Discharge Planners & Care Coordination Teams
- Skilled Nursing Facilities
  - e.g., Nursing homes, Assisted Living
- Leverage any inpatient relationships for assistance managing transitions
  - i.e., offer a management solution for “frequent flyers”
- Community PCPs
  - e.g., ask them to think about patients they have been unable to see for over a year but are still liable for medication refills
- Speaking Opportunities
  - Grand rounds, local senior services, or area on aging
- Home Health



# Promoting Your Practice & Services to the Community

- Promote your practice and services as you expand into new areas, including rural settings.
- Connect with potential community resources to support interdisciplinary care.
- Identify valuable social services for your patients.
- Educate and advocate for Home-Based Primary Care (HBPC) within your community.

# Community Resources & Networking

- In-Home Support Services or Private Duty Caregiving Agencies
- Adult Protective Services (APS)
- Linkages Program
- Meals on Wheels
- Adult Day Care Services
- Churches and Other Volunteer Programs

# Networking Strategies

- Stay connected with current and potential referral sources to build relationships
- Think about your website and other marketing tools
- Explore senior living and new facility partnerships in your area
  - be aware of new facilities in your area
- Consider meetings with discharge planners and care coordinators at local hospitals
- Collect data and investigate predictive analytics to prepare for a payer conversation or pilot

# Talking Points for Referral Sources

- HBPC is ideal for the “sickest of the sick” when it is no longer safe or feasible for patients to come into the office for medical appointments.
  - Patients on gurney
  - Mile-long med list
  - Patients who require 2-4 outpatient PCP appointment slots
- HBPC has proven to be an effective model for keeping people at home who would otherwise rely on the 911 network when their conditions worsen.
- Effective HBPC has proven to lead to improved health outcomes and greater patient and caregiver satisfaction.

# Talking Points for Referral Sources

- Identifying Patients who would benefit from HBPC
  - Is the provider refilling medications for patients who have not been seen in years or are frequent “no-shows?”
  - Do you hear from the patient's family that it's a taxing effort to get the patient to the office?
  - Which patients are frequent flyers in the ED or hospital?
- Consider me a partner for your “highest risk” patients. I can help relieve the burden and risk for your practice by caring for them in the home.



# Resources for Review

# HCCI Resources

1. [Securing Referrals for your Home-Based Primary Care Program](#)
2. [Recruiting Patients for your HBPC Program](#)
3. [Tips for Developing your Unique Value Proposition](#)
4. [Home-Based Primary Care: A Powerful Solution for Home-Limited, Medically Complex Patients](#)
5. [Home-Based Primary Care: An Essential Lifeline for Caregivers](#)



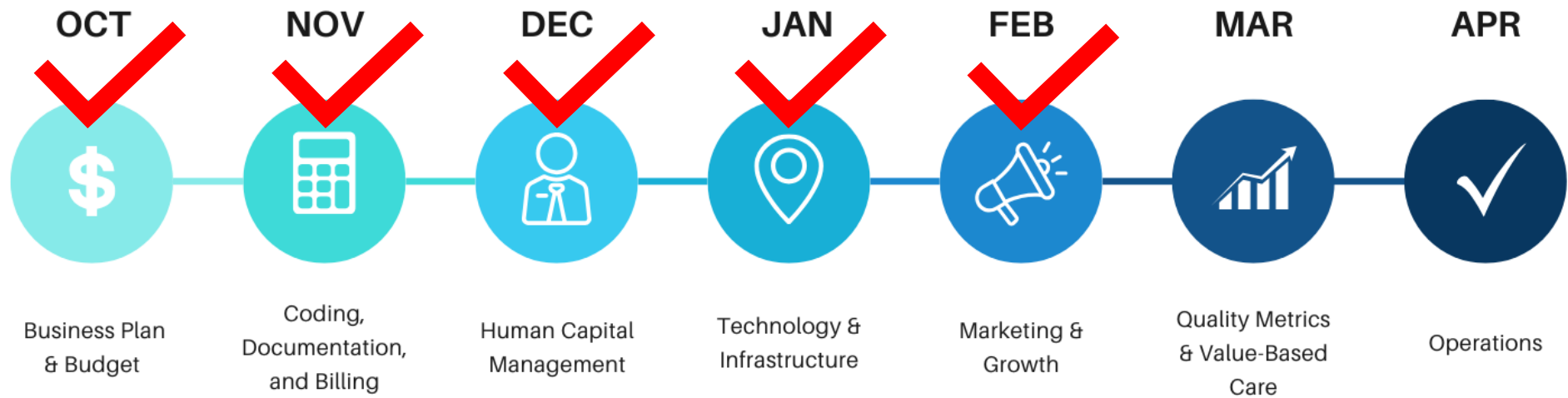
# Q&A





# Next Steps

# UPCOMING MONTHLY TOPICS



# HCCIntelligence™ Community Webinar Series

## Safety First: Essential Strategies for House Call Providers

### Objectives:

- Practical tips for scheduling, route planning, and pre-visit safety measures.
- Strategies for staying secure while traveling to and from patient homes.
- Techniques for situational awareness, communication, and using safety devices.

**Goal:** Equip providers with the confidence and tools to stay safe while delivering compassionate care.

**March 11, 2025**  
**1 pm CT**

[Register Here](#)

# HCCIntelligence™ Community Webinar Series

## Measuring the Performance of House Call Programs in Medicare Advantage

### Objectives:

- Analyze key metrics, such as costs of care, hospitalization rates, ER visits, readmission rates, patient attribution, and risk scores.
- Find out how data-driven insights can optimize program outcomes.
- Leverage the data to better serve patients.

**Goal:** Showcase how data-driven strategies improve outcomes and patient care.

**March 25, 2025  
1 pm CT**

[Register Here](#)

# Contact HCCI



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