

PROMISING PRACTICE: INCREASING ADRC EMPLOYEES' AWARENESS OF MEDICARE "HELP" PROGRAMS



The purpose of this tip sheet is to provide promising practices to help agencies increase the number of Medicare Savings Plans and Low Income Subsidies applications.

Who is benefiting from this promising practice?

Low-income seniors and people with disabilities that may qualify for the Medicare Part D Extra Help/Low-Income Subsidy or the Medicare Savings Programs but are not currently enrolled.

A Case Study in South Carolina:

The Catawba Aging and Disability Resource Center (ADRC) in South Carolina is an organization for older adults and people with disabilities that helps those individuals to find information and resources about services and programs. All of the center's staff have two primary purposes: delivering information over the phones and going out into the field to increase outreach.

The Catawba ADRC wanted to increase outreach to low-income individuals who are eligible for Medicare Savings Plans (MSP) and Low-Income Subsidies (LIS/Extra Help), both programs which provide much needed financial relief. The organization hypothesized that if they could increase the number of MSP and LIS applications being submitted, then their overall numbers would increase. Keeping in mind that not all employees have in-depth knowledge of the MSP and LIS programs, their innovative idea proved that employees don't need to know a lot about the programs in order to know if someone is eligible for them. The Catawba ADRC designed a giant, easily reproducible poster with MSP and LIS income information to hang at each employee's desk. The simple act of hanging this easy-to-reference poster (see figure 1.) allowed the organizations to keep the numbers in front of all of their staff all of the time, thereby making it easier to screen callers for potential eligibility.

Additionally, the Catawba ADRC created a reproducible template for staff to use internally to gather information from every single caller, regardless of what they were originally calling about. The form (see figure 2.) is located on each employee's desktop and is also available in paper copy when screening in the field. This form includes six items, one of which asks about income. The income eligibility limits are clearly listed next to the item, and upon entering an income which meets the "Extra Help" income eligibility into the electronic template, a pop up screen flashes to signal to the screener to start a conversation about eligibility. Using this tool, even if people call in with unrelated issues—such as a need for dentures or eye glasses—the screener can now identify if the individuals is eligible, and the individual may now have access to some extra income.

What was the result?

By getting the income eligibility numbers in front of all of their staff all of the time through posters and a universal internal template, the number of applications dramatically increased at the Catawba ADRC. Any staff that had little knowledge of MSP/LIS programs was able to catch potentially eligible individuals and direct them to the right person on their initial phone calls. These small internal changes made the screening process more effective and efficient.

Materials:

There are very few materials needed to put the promising practices mentioned above into action, because they are simple and affordable changes. To replicate these practices, you would need:

- Eligibility limits
- Posters with income eligibility
- ADRC application link on desktop for easy accessibility
- Downloadable ADRC application with income triggers

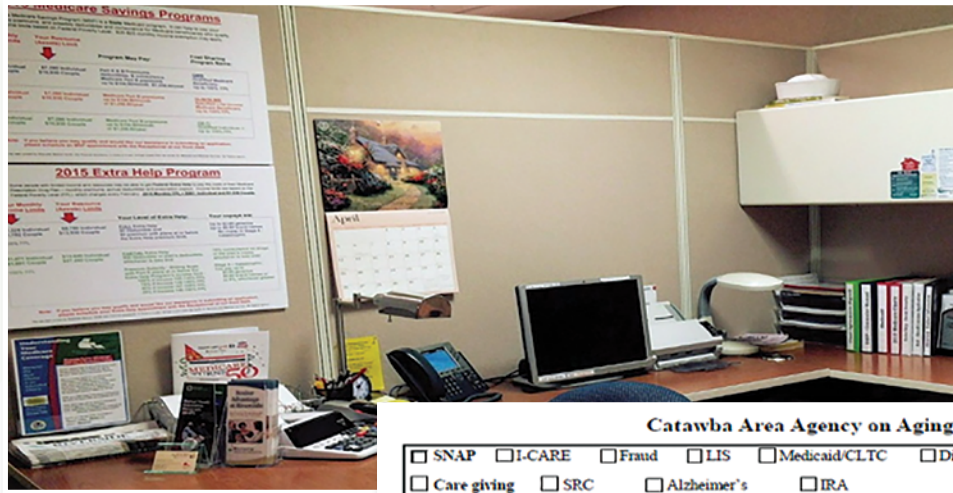


Figure 1.

An example of the income eligibility posters posted at each desktop.

Figure 2.

An example of the form with income triggers (see red arrow).

Catawba Area Agency on Aging Application

<input type="checkbox"/> SNAP <input type="checkbox"/> I-CARE <input type="checkbox"/> Fraud <input type="checkbox"/> LIS <input type="checkbox"/> Medicaid/CLTC <input type="checkbox"/> Disabled		Date: _____
<input type="checkbox"/> Care giving <input type="checkbox"/> SRC <input type="checkbox"/> Alzheimer's <input type="checkbox"/> IRA		Worker: _____
Client/Care Giver Information:		
Name: _____		
Address: _____		
City: _____		Zip Code: _____
		Cty: _____
Phone: (H) _____		(wk/cell) _____
Email: _____		
D.O.B.: _____		SSN: _____
Race: _____ Hispanic? <input type="checkbox"/> Y <input type="checkbox"/> N		
Gender: Female Primary Lang: English		Marital Status: Married
Significant health problems: _____		
# of adults living in home: _____		# of children in home: _____
Relationship to CR: (if CG) _____		
Services currently receiving: _____		

Care Receiver Information:		
Name: _____		
Address: _____		
City: _____		Zip: _____
		Cty: _____
Phone: _____		
D.O.B.: _____		Gender: _____
SSN: _____		
Race: _____		Hispanic? <input type="checkbox"/> Y <input type="checkbox"/> N
M. Status: Married		Language: English
Significant health problems: _____		
Time CG spends per week? _____		
Year care giving began? _____		grade level _____
Services currently receiving: _____		

Income/Insurance Information:		
Client/CG Monthly Income: \$ _____		Source: _____ LIS? (\$1471)
Spouse/CR Monthly Income: \$ _____		Source: _____ (\$1991)
Insurance (check all that apply)		
Client/CG		Spouse/CR
Medicare # _____	Eff. Date: _____	# _____ Date: _____
Medicaid # _____	Eff. Date: _____	# _____ Date: _____

FOR MORE INFORMATION:

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