

ncoa

National Council on Aging

Improving the lives of 10 million older adults by 2020

About NCOA



Our Mission:

Improve the lives of millions of older adults, especially those who are struggling

Collaborative Leadership:

NCOA works closely with other aging and disability organizations to achieve our mission

Aging and Disability Collaborative:

Coalition of over 40 national aging and disability organizations that work together to advance Home and Community Based Services.



Center for Benefits Access



- Funded by the U.S. Administration for Community Living (HHS)
- Helps community-based organizations find and enroll seniors and younger adults with disabilities with limited means into benefits programs for which they are eligible
- ncoa.org/centerforbenefits



Benefits Enrollment Centers (BECs)



- NCOA funds 46 BECs in 29 states through a grant from the U.S. Administration for Community Living
- BECs help people with Medicare:
 - Identify and enroll in all of the possible programs they may be eligible for
 - Assist with application, troubleshooting, and follow-up to ensure the person received and is using the benefits

Find whether there's a BEC near you at:

www.ncoa.org/map

Focus of Presentation



- 1) Role of stigma in applying for benefits
 - Share finding of NCOA study and discuss implications for younger and older individuals with disabilities
- 2) Outreach to younger individuals with disabilities and family caregivers about access to benefits
 - Share data from Benefits CheckUp

Encourage discussion about ways to improve outreach to younger individuals with disabilities

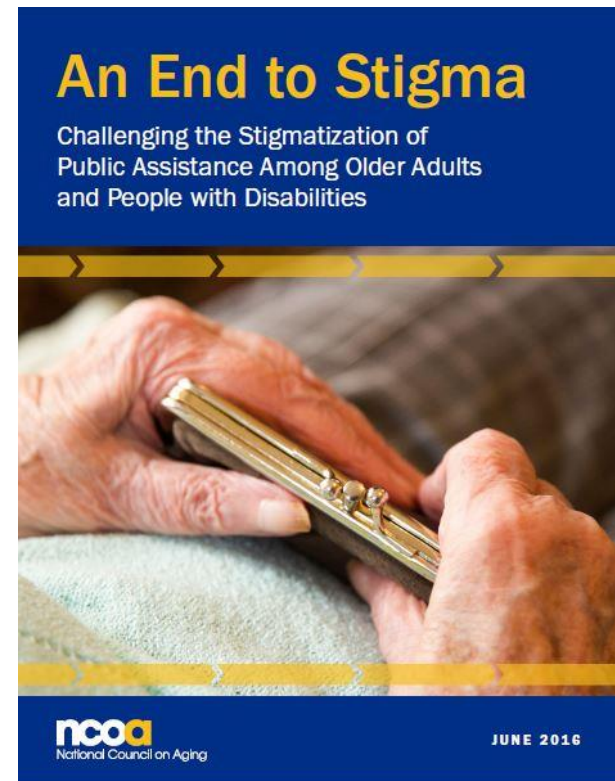


National Council on Aging

Background on Stigma



- NCOA heard from many benefits counselors that stigma is a major cause of why individuals do not apply for benefits
- In 2015, NCOA did a literature reviews and conducted comprehensive interviews with 40 counselors to better understand this phenomenon
- Report: *An End to Stigma*



Stigma Takes Two Forms

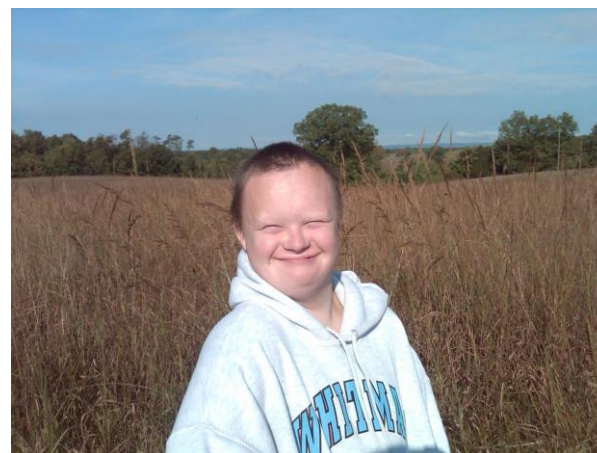


- **Internal Stigma** – Feelings of personal shame or embarrassment
 - “I don’t want to be one of those people with the card.” [EBT cards]
 - “Other people need these benefits more than me.”
 - “My neighbor could find out I’m getting food assistance.”
 - “Welfare isn’t for me, it’s for young moms who pop out kids.”
 - “I don’t need any handouts.”

- **External Stigma** – Negative experiences with or perceptions of benefit or the agency that administers that benefit
 - “They’re going to take my house away.” [fear of estate recovery]
 - “It’s not worth the time to only get \$15.” [SNAP minimum benefit]
 - “I don’t trust the quality of care because it’s on a budget.” [Medicaid]
 - “I don’t want to deal with the social services department.”

Consequences of Stigma

- Only **2 in 5** older adults likely eligible for SNAP were enrolled in the benefit in 2013
- Individuals with disabilities eligible for low-income subsidies (LIS) other benefits that could help with independent living



Factors Related to Stigma



- Individual characteristics
 - Age: Those born before/during Great Depression less likely to seek help
 - Residence: Individuals from seemingly affluent areas less likely to apply for fear of being singled out
 - Disability: Complicated. Some younger adults with disabilities may face less stigma about applying for benefits. But may depend on many factors, including onset, type of disability, connection to peers with disabilities.

Factors Related to Stigma (cont.)



- Characteristics of administering agencies/benefits
 - Benefits associated with Social Security and Medicare have very little stigma attached to them
 - Perception that people have paid into these programs
 - Method of receiving benefits helps to de-stigmatize them
 - Medicare Savings Programs: recipients get Part B premium back in Social Security check
 - Energy assistance: paid directly to utility company
 - SNAP and Medicaid are highly stigmatized
 - Complexity of applications turns people off
 - Burden of documentation, interviews, receipts, etc.

An Example of Administrative Burden

Section P
Costs to
Take Care
of Others

Costs to take care of others

Does anyone have costs to take care of others? Yes No

If yes, give facts below.

EXAMPLES

- Child care costs so someone can work, look for work, go to training, or go to school.
- Costs for people with disabilities or adults who need help caring for themselves.
- Child support payments, medical bills, and health insurance you pay for a child living outside the home.
- Alimony payments.

COST 1

Type of cost: _____ First name of person who gets care or support: _____

Who pays the cost? _____ Amount paid: \$ _____ Date last paid: ____/____/____

How often paid?
 daily
 once a week
 every 2 weeks
 twice a month
 once a month
 other: _____

Person or company that gets the money (name, address, and phone number): _____

For court ordered child support list child who gets support (provide copy of court order)

COST 2

Type of cost: _____ First name of person who gets care or support: _____

Who pays the cost? _____ Amount paid: \$ _____ Date last paid: ____/____/____

How often paid?
 daily
 once a week
 every 2 weeks
 twice a month
 once a month
 other: _____

Person or company that gets the money (name, address, and phone number): _____

For court ordered child support list child who gets support (provide copy of court order)

COST 3

Type of cost: _____ First name of person who gets care or support: _____

Who pays the cost? _____ Amount paid: \$ _____ Date last paid: ____/____/____

How often paid?
 daily
 once a week
 every 2 weeks
 twice a month
 once a month
 other: _____

Person or company that gets the money (name, address, and phone number): _____

For court ordered child support list child who gets support (provide copy of court order)

Texas SNAP application...

- 18 page application
- Dependent care expenses well laid out, but there's no parallel explanation for how medical costs are calculated for deduction, what documents applicant needs to prove

Section Q

Medical Costs

This section is only for people applying for Medicaid, CHIP, or SNAP food benefits.



Medical costs

Does anyone age 60 or older, or anyone with a disability, pay medical costs? Yes No

If yes, mark the type of costs they pay: Doctor Hospital Medicine Health insurance

Techniques for Fighting Stigma: Counselors



- Counter the deserving vs. undeserving narrative
 - Emphasize that people pay into these benefits when working
- Focus on economic landscape
 - Many older adults saw their savings reduced during economic downturn; Many in your community are also getting help
 - Employment of people with disabilities
- Help clients apply for all programs they may be eligible for
- Demonstrate the value of a benefit
 - Freeing up income for other priorities, e.g., grandchildren
 - Minimum SNAP benefit: You wouldn't discard a coupon for that, would you?

Techniques for Fighting Stigma: Policymakers and Program Administrators



- Improve enrollment processes
 - Take advantage of existing waiver programs
 - Medicare Savings Programs: States can eliminate asset/resource requirements, raise income thresholds
 - SNAP: Can simplify applications, get a standard medical expenses deduction, length certification period
 - Improve data-sharing
- Support counselors in the field who are helping clients

Resource: BenefitsCheckUp®



www.BenefitsCheckUp.org

- Web-based tool that screens for over 2,000 public and private benefits

- Online LIS/Extra Help application
- Enhanced Application Forms Center
- Office Locators
- 50,000+ local offices

- Has helped more than 5 million people find more than \$16 billion in benefits

The screenshot shows the homepage of BenefitsCheckUp.org. At the top right is the NCOA logo. Below it is the BenefitsCheckUp logo with the tagline 'Celebrating 10 Years' and a statistic: 'We have helped 3,034,972 people find over \$10.6 billion worth of benefits...'. A navigation bar includes links for Home, Find Help, About Us, Our Sponsors, News, and Donate. The main content area features a large heading 'Can I Get Help?' with the subtext 'It's easy to find out.' and a description: 'Answer some questions to find benefit programs that can help you pay for medications, health care, food, utilities and more. All from a reliable and trusted source: [About Us](#)'. A 'GET STARTED NOW' button is prominently displayed. Below this, there are two columns of links: 'Paying for Medicine' (with a sub-link for 'Medicare Rx Extra Help') and 'Paying for Food' (with a sub-link for 'Food Programs in Your State'). To the right, there is a 'Stay Connected' section with an email sign-up form and an 'Our Sponsors' section.

Benefits Checkup[®]



- Can be an effective tool to assist with reaching younger individuals with disabilities and family caregivers of individuals with disabilities
- In 2015:
 - 28% of users of BCU indicated they had a disability
 - 44% were under 65
 - 56% were over 65
 - 31% of users of BCU were caregivers

Benefits Checkup[®]



Which benefits do people under 65 with disabilities most often screen eligible for?

Weatherization	National	15,317
Lifeline	National	13,290
America the Beautiful - Access Pass (National Parks Pass)	National	11,468
Chronic Disease Self- Management Program	National	9,487
Low Income Home Energy Assistance Program (LIHEAP)	National	9,079
HUD Public Housing Program	National	7,430
FamilyWise Prescription Savings Program	National	7,210
Housing Choice Vouchers (Section 8) Program	National	7,014
USDA Housing Repair Program	National	6,052
Rx Outreach (Prescription Drug Discount Program)	National	5,879
Supplemental Security Income (SSI)	National	5,457
Tax Credit for the Elderly and Disabled	National	5,428
Elderly Nutrition Program - Congregate or Group Meals	National	5,246
Elderly Nutrition Program - Home Delivered Meals	National	5,246
Senior Farmers' Market Nutrition Program	In 42 States	5,084
Health Centers for Primary Health Care and Dental Services	National	5,040
Donated Dental Services (DDS)	National	4,815
Medicare Part D Low Income Subsidy (LIS)	National	4,341
Medicare Savings Program - Qualified Medicare Beneficiary (QMB)	National	3,644
Pfizer RxPathways (Patient Assistance Program)	National	3,408
Legal Services and Assistance Programs	National	3,036

Join us!

- Visit ncoa.org and sign up for e-news
- Access resources in our library:
www.ncoa.org/resources
- Share NCOA's free, trusted tools
 - BenefitsCheckUp.org
 - EconomicCheckUp.org
 - MyMedicareMatters.org



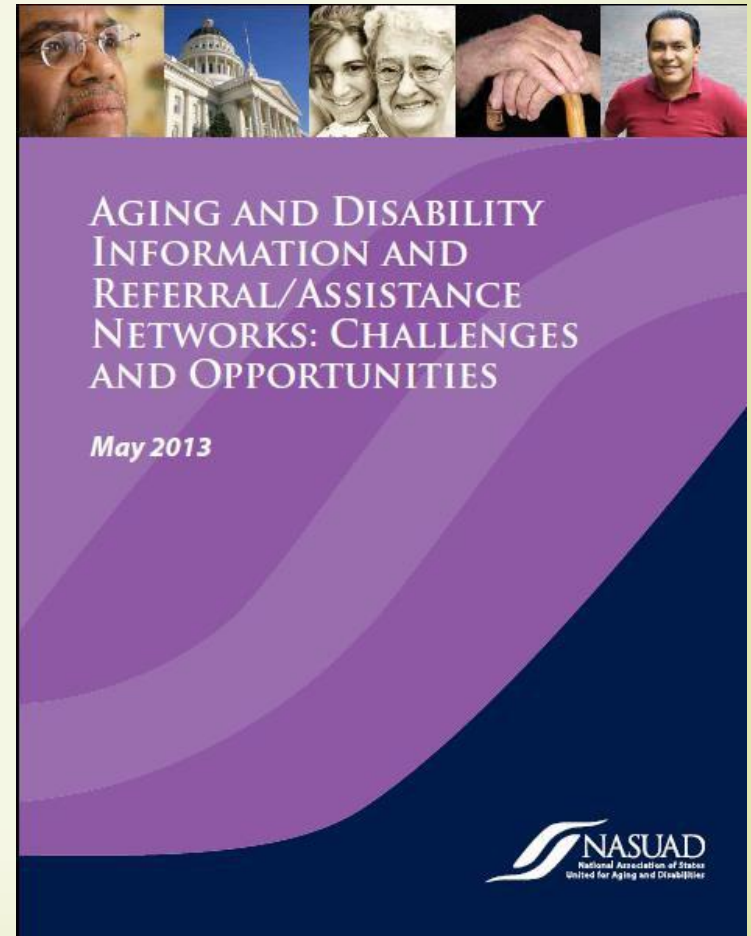


Outreach: Targeting Individuals with Disabilities and Caregivers

2015 I&R Survey

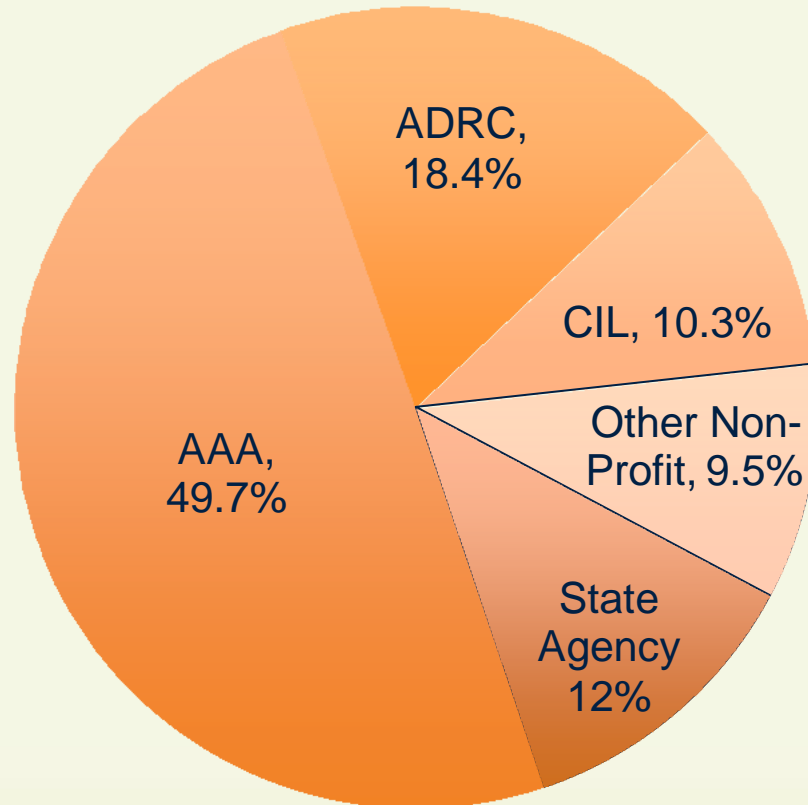
2015 Network Survey of I&R Specialists in Aging and Disability:

- Developed and administered by NASUAD in partnership with the National Council on Independent Living (NCIL)
- Web-based survey instrument
- In the field March - April 2015
- Captured trends, developments, and promising practices from the perspectives of state agencies, AAAs, ADRCs, CILs, nonprofit human service organizations, and national organizations



2015 Survey: Respondent agency

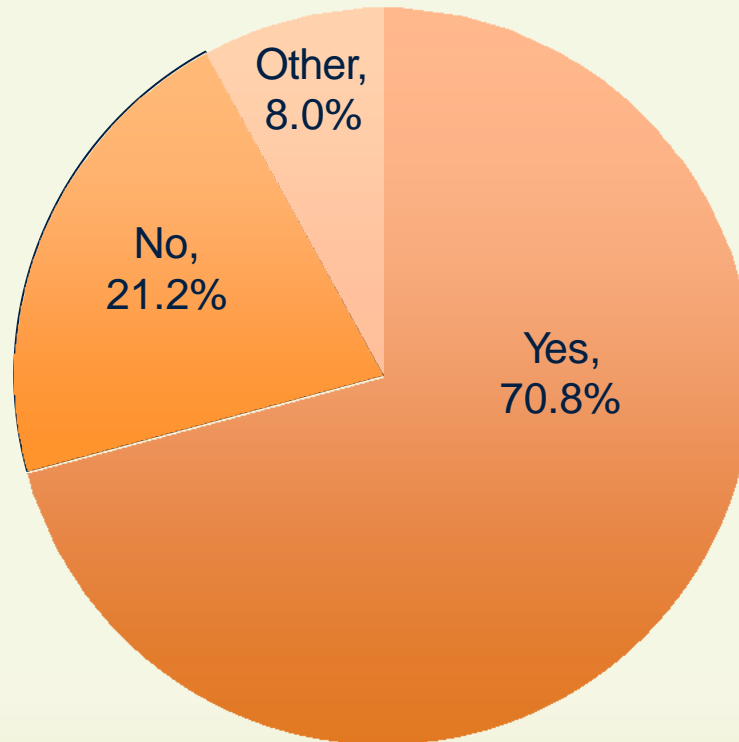
What type of agency do you work in?



Percent of Respondents
N=358

2015 Survey: Targeted Screening

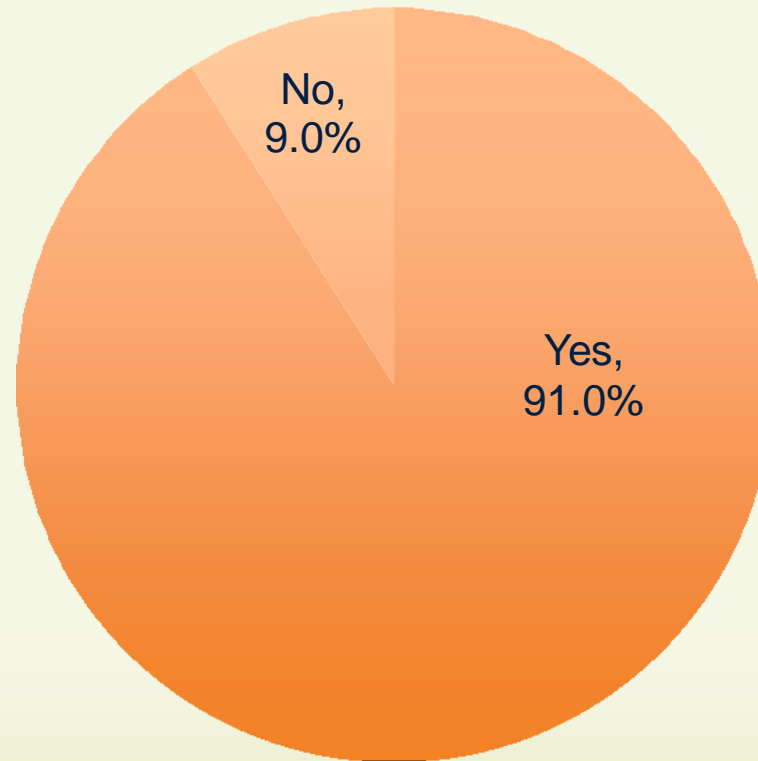
Do I&R/A specialists in your agency screen for eligibility for Medicare low-income subsidies?



Percent of Respondents
N=325

2015 Survey: Targeted Screening

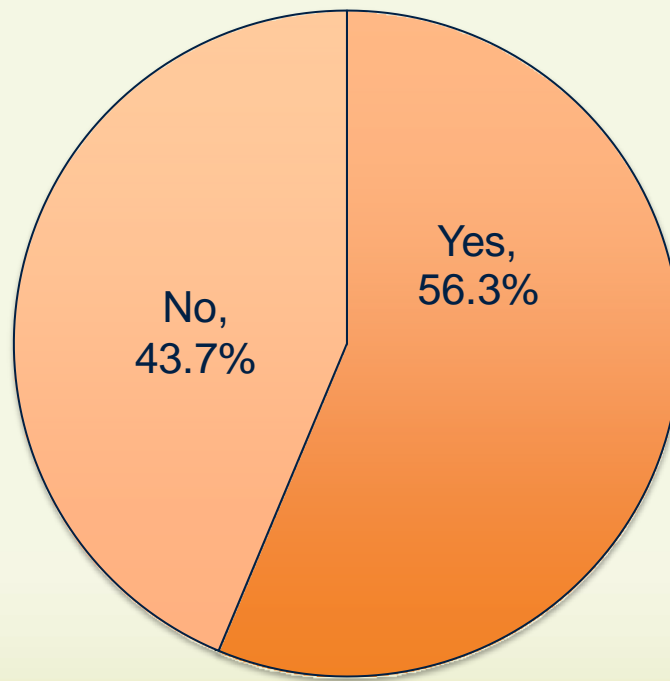
If your agency screens for eligibility for Medicare low-income subsidies:
Does your agency target older adults?



Percent of Respondents
N=222

2015 Survey: Targeted Screening

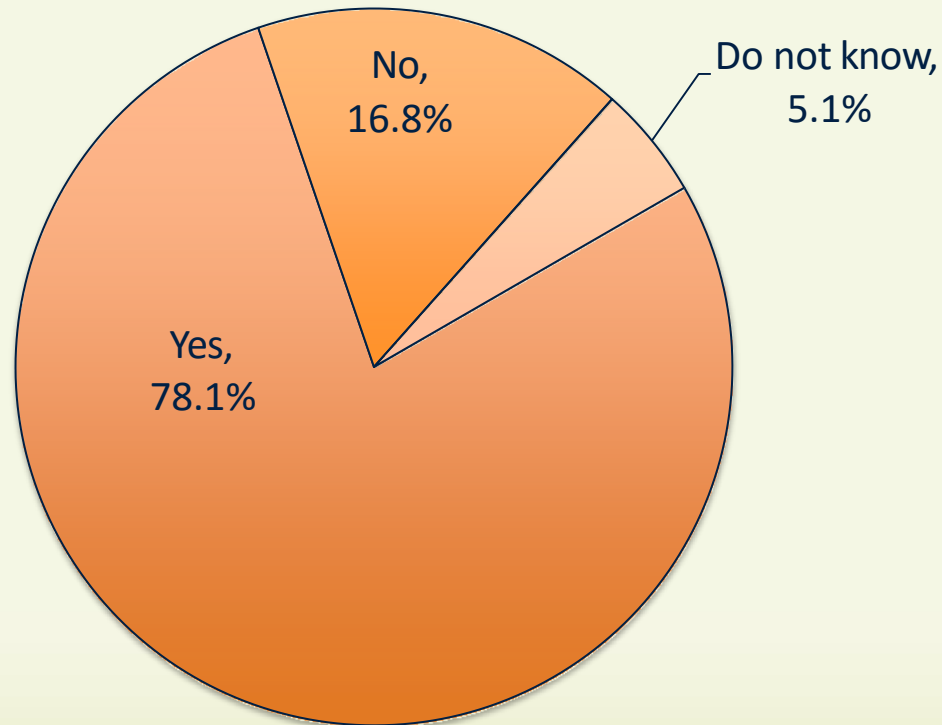
If your agency screens for eligibility for Medicare low-income subsidies: Does your agency target younger individuals with disabilities?



Percent of Respondents
N=222

2015 Survey: Training

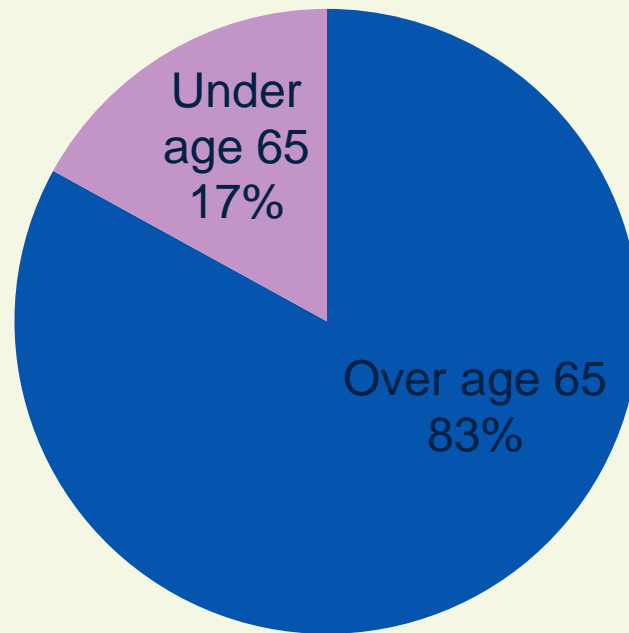
Are I&R/A specialists in your agency given training on the Medicare low-income subsidies?



Percent of Respondents
N=292

The Medicare Population

Medicare by Age



SOURCE: [2012, Kaiser, Medicare at a Glance]

Outreach Efforts for Beneficiaries with Disabilities

- ✓ Increase consumer awareness
- ✓ Provide basic qualification criteria
- ✓ Provide key referral sources

Call for Collaboration

- Identifying potential partners
- Media campaign targeting adults with disabilities
- Fact Sheet with media information and instructions

Sample Posts

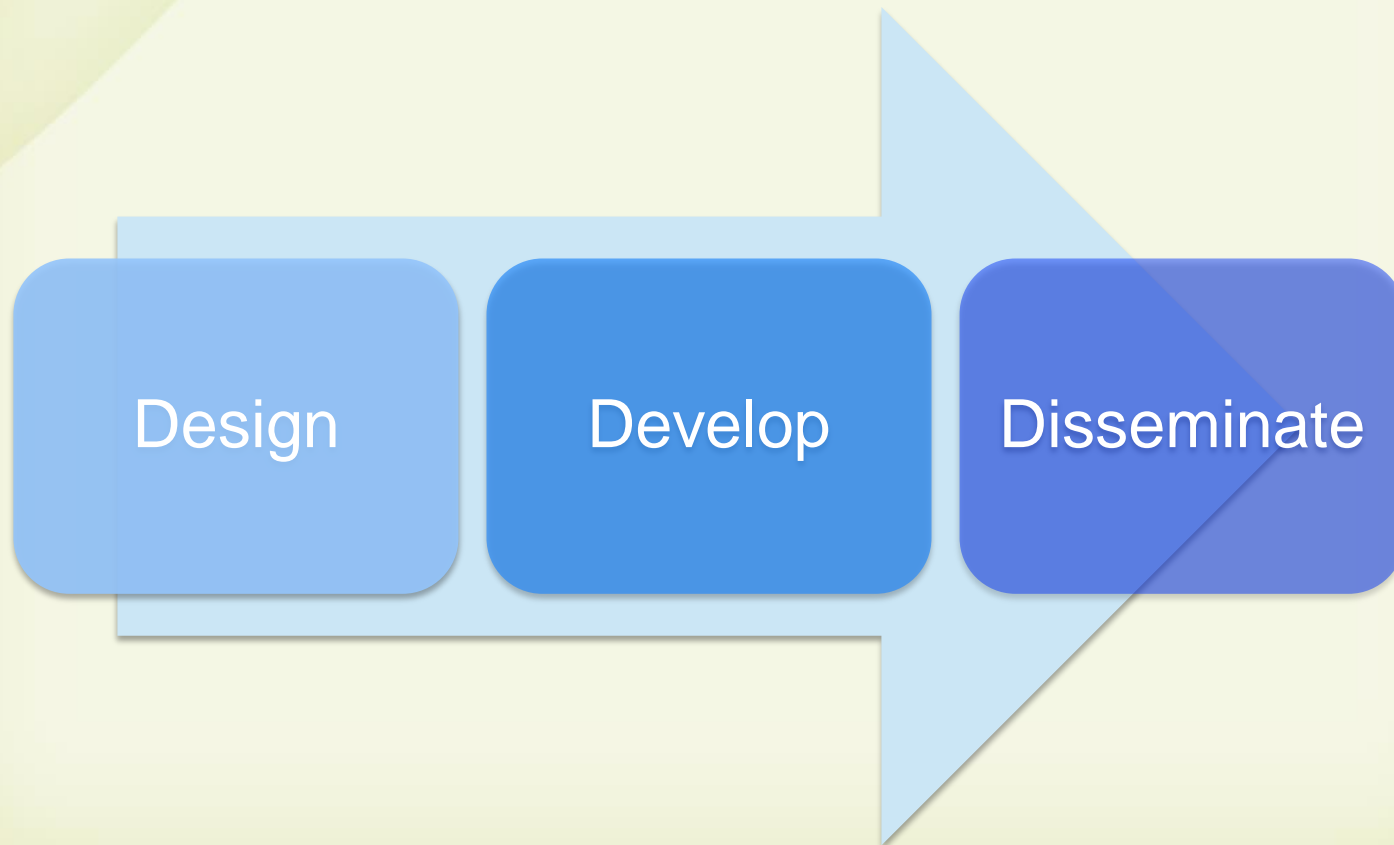
Facebook

- “Are you a working individual with a disability? Are you having a hard time paying your Medicare costs? Help may be available through the Medicare Savings Program.”

Twitter

- Do you want to save on Medicare costs? If you are low-income, you may qualify for a Medicare Savings Program #MedicareSavings
- Medicare costs are high! If you are low-income there are Medicare Savings Programs and Low-Income Subsidies to help you pay. #MedicareSavings

Developing the Resources



Resources

SAVE on MEDICARE COSTS!

If you are low-income,
a **Medicare Savings
Program** may help with
some of your Medicare costs.



Get HELP with your MEDICARE COSTS!



A Medicare Savings Program may help with some of your Medicare costs.

FOR ASSISTANCE, CALL:



Resources

Available MEDICARE SAVINGS:



If you are low-income, a **Medicare Savings Program** may help with some of your Medicare costs.

If your monthly income is close to the limits listed below, a **Medicare Savings Program** may help you.

Monthly Income Limit* (single):	Monthly Income Limit* (married):	Programs Pay for:
\$1,357	\$1,823	Part B monthly premium

*Income limits are approximated and vary by state.

If you are a **working person with a disability** and your monthly income is close to the limits listed below, the **Qualified Disabled Working Individuals Medicare Savings Program** may help you.

Monthly Income Limit* (single):	Monthly Income Limit* (married):	Program Pays for:
\$4,045	\$5,425	Part A monthly premium

*Income limits are approximated and vary by state.

FOR ASSISTANCE, CALL: (877)839-2675
The SHIP National Technical Assistance Center

Current as of March 2016



Resources

I'm working again, but I still can't afford my **MEDICARE COSTS...** Is there any **HELP** out there for me?



YES! If you are a working person with a disability under 65 and on Medicare, the Qualified Disabled Working Individuals Program (QDWI) may help you!

QDWI is a Medicare Savings Program that may help pay some Medicare costs for low-income working individuals with a disability.

If you are single with a monthly income of about \$4,045 (or married with a combined monthly income of about \$5,425), **this program may help you.***

*Income limits vary by state.

**FOR ASSISTANCE, CALL: The SHIP National Technical Assistance Center
(877)839-2675**

Current as of March 2016



Resources

Resources

THE MEDICARE LOW INCOME SUBSIDIES

WHAT THEY ARE: The Medicare low-income subsidies are a set of federally and state funded programs that help make Medicare more affordable for low-income Medicare recipients. These programs include the Medicare Savings Programs (MSPs), and the Medicare Part D Low Income Subsidy/Extra Help program (often referred to either LIS or Extra Help).

For information on how to apply, see next page.

UNDERSTANDING MSPs

MSPs are a set of 4 programs run by the state Medicaid agencies that can help low-income Medicare recipients save on Medicare costs. MSPs include the Qualified Disabled and Working Individual (QDWI), Qualifying Individual (QI), Specified Low-Income Medicare Beneficiary (SLMB), and Qualified Medicare Beneficiary (QMB) programs.

HOW THEY WORK: Individuals must have Medicare Part A and must fall into the income and asset guidelines in their state to qualify for an MSP (see charts below).

The QDWI program applies to working people with disabilities.

Program	Program Details	Monthly Income Limits*		Asset Limits*		Pays for:
		Single	Married	Single	Married	
QDWI	Open to working people with disabilities who lose their Social Security Disability Insurance (SSDI) benefit and lose premium-free Part A. Not for those who have Medicaid.	\$4,045	\$5,425	\$4,000	\$6,000	Part A premium

*Limits vary by state and are updated annually.

The QI and SLMB programs cover the cost of the part B monthly premium for low-income Medicare recipients.

Program	Program Details	Monthly Income Limits*		Asset Limits*		Pays for:
		Single	Married	Single	Married	
QI	Not for those who have Medicaid. Enrollment is limited.	\$1,357	\$1,823	\$7,280	\$10,930	Part B premium
SLMB	Open to those who have Medicaid.	\$1,208	\$1,622	\$7,280	\$10,930	Part B premium

*Limits vary by state and are updated annually.

Program	Program Details	Monthly Income Limits*		Asset Limits*		Pays for:
		Single	Married	Single	Married	
QMB	Open to those who have Medicaid. Doctor must accept Medicare and Medicaid for cost of care to be covered.	\$1,010	\$1,355	\$7,280	\$10,930	Part A/B premiums, deductibles, co-pays and coinsurance

*Limits vary by state and are updated annually.

Current as of March 2016

Turn Page Over

UNDERSTANDING LIS / EXTRA HELP

LIS or Extra Help is a program run by the Social Security Administration that helps low-income Medicare recipients save on Medicare Part D prescription drug costs.

HOW THEY WORK: Individuals must fall into the federal income and asset limits (see chart below). Individuals who receive Extra Help must sign up for a Medicare Part D prescription drug plan or a Medicare Advantage plan with prescription drug coverage.

Medicare pays for the full monthly premium if an individual signs up for one of the stand-alone Prescription Drug Plans that offer the standard Part D benefit, referred to as low-income benchmark plans. People who are dual-eligible (on both Medicaid and Medicare), receive Supplemental Security Income (SSI), or have an MSP are automatically signed up for the Extra Help program.

Level of Coverage	Monthly Income Limits*		Asset Limits*		Benefits:
	Single	Married	Single	Married	
Full LIS	\$1,357	\$1,823	\$8,780**	\$13,930**	Premium/deductible: \$0; co-pays: \$1.20 – 2.95 generic, \$3.60 – \$7.40 brand-name; no co-pay after reaching \$4,850 out-of-pocket threshold
Partial LIS	\$1,505	\$2,023	\$13,640**	\$27,250**	Premium: income-based; deductible: \$63 and under; co-pays: 15% coinsurance or plan co-pay, \$2.95 generic and \$7.40 brand-name or 5% of drug cost (whichever is greater), after \$4,850 in total out-of-pocket costs

*Amounts are updated annually.

**Amounts include a \$1,500 per person disregard for burial expenses.

HOW TO APPLY:

Interested persons may apply for an MSP at their local Medicaid office.

For Extra Help, individuals can apply online or at their local Social Security office.

More information and assistance available at:

- State Health Insurance Assistance Program (SHIP): www.shiptcenter.org
- Medicare Rights Center: www.medicarerights.org; (800) 333-4114
- NCOA Center for Benefits Access: www.centerforbenefits.org; centerforbenefits@ncoa.org
- www.medicare.gov

Current as of March 2016

Measuring Outcomes

- Follow Up Survey
- Hashtag History



MIPPA Outreach: How can we improve?

Promising Practices

9/13/2016

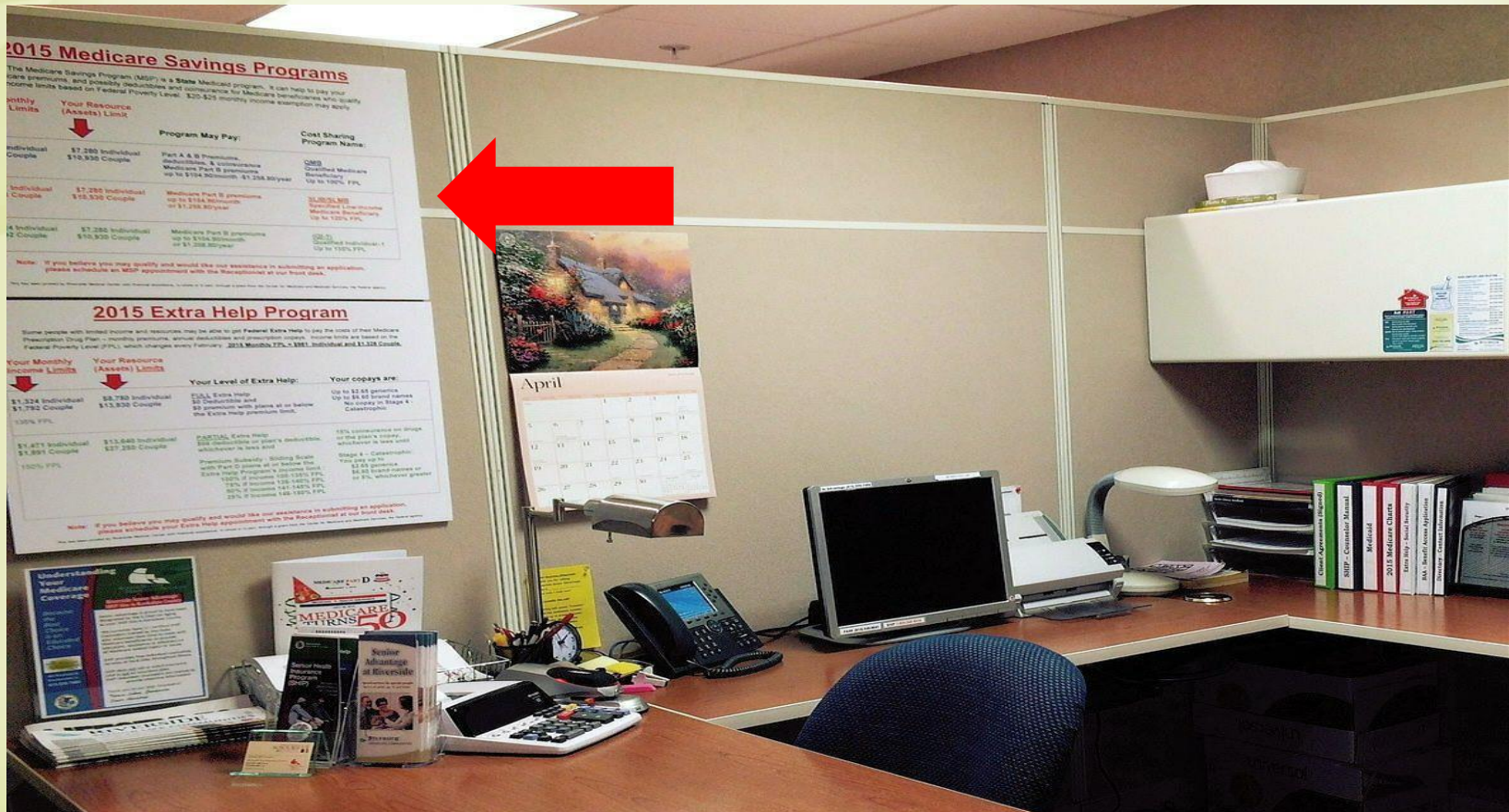
www.nasuad.org

Promising Practice #1

Insert MIPPA outreach into the internal framework of your organization.


- Provide all staff with access to screening information
- Ensure all staff are involved in screening efforts

Promising Practice #1



Promising Practice #1

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 <input type="checkbox"/> Care giving <input type="checkbox"/> SRC <input type="checkbox"/> Alzheimer's <input type="checkbox"/> IRA	Date: _____ Worker: _____								
<p style="text-align: center;">Client/Care Giver Information:</p> 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: _____ _____ _____	<p style="text-align: center;">Care Receiver Information:</p> 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: _____ _____ _____								
<p style="text-align: center;">Income/Insurance Information:</p> Client/CG Monthly Income: \$ _____ Source: _____ LIS? (\$1471) Spouse/CR Monthly Income: \$ _____ Source: _____ (\$1991)									
Insurance (check all that apply)									
<table style="width: 100%; border: none;"> <tr> <th style="width: 50%; text-align: center;">Client/CG</th> <th style="width: 50%; text-align: center;">Spouse/CR</th> </tr> <tr> <td>Medicare # _____ Eff. Date: _____</td> <td># _____ Date: _____</td> </tr> <tr> <td>Medicaid # _____ Eff. Date: _____</td> <td># _____ Date: _____</td> </tr> <tr> <td>CG _____ (check all that apply)</td> <td>CR _____ (check all that apply)</td> </tr> </table>	Client/CG	Spouse/CR	Medicare # _____ Eff. Date: _____	# _____ Date: _____	Medicaid # _____ Eff. Date: _____	# _____ Date: _____	CG _____ (check all that apply)	CR _____ (check all that apply)	
Client/CG	Spouse/CR								
Medicare # _____ Eff. Date: _____	# _____ Date: _____								
Medicaid # _____ Eff. Date: _____	# _____ Date: _____								
CG _____ (check all that apply)	CR _____ (check all that apply)								

Promising Practice #2

Go where the consumer is / where the consumer will be.

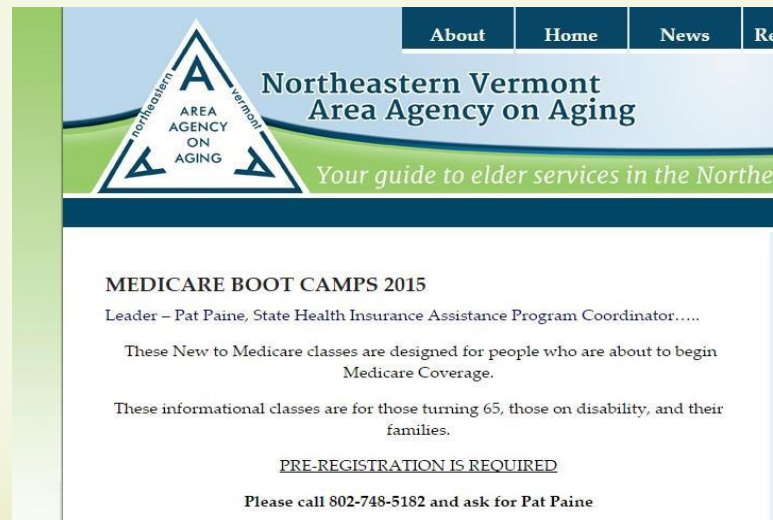
Senior Farmers' Market Nutrition Program (SFMNP)



Promising Practice #3

Rebrand the Medicare low-income subsidies to appeal to the consumer.

Medicare Boot Camp



The screenshot shows a website page for the Northeastern Vermont Area Agency on Aging. The header includes a navigation menu with 'About', 'Home', 'News', and 'Re'. The main heading is 'Northeastern Vermont Area Agency on Aging' with the tagline 'Your guide to elder services in the North'. The content area is titled 'MEDICARE BOOT CAMPS 2015' and lists a leader, Pat Paine, and describes two types of classes: 'New to Medicare' and 'informational'. A note states 'PRE-REGISTRATION IS REQUIRED' and provides a phone number: 'Please call 802-748-5182 and ask for Pat Paine'.

About Home News Re

Northeastern Vermont Area Agency on Aging
Your guide to elder services in the North

MEDICARE BOOT CAMPS 2015
Leader – Pat Paine, State Health Insurance Assistance Program Coordinator.....

These New to Medicare classes are designed for people who are about to begin Medicare Coverage.

These informational classes are for those turning 65, those on disability, and their families.

PRE-REGISTRATION IS REQUIRED

Please call 802-748-5182 and ask for Pat Paine

Promising Practice #4

Insert MIPPA outreach into everyday places that consumers visit

- **Bus ads**
- **Mall benches and floors**