

# MIPPA TA Call

## April 13, 2018

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Improving the lives of 10 million older adults by 2020

**ncoa**  
National Council on Aging

# A Few Quick Reminders

- Got a question? Unmute your line by pushing \*7 on your phone, type it into chat, or raise your hand (if you're getting audio via the web)
- We'll send out these slides/recording through the MIPPA listserv (<https://lists.ncoa.org/mippa>)



# Agenda

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- Modernizing the Medicare Plan Finder
  - Findings from a soon-to-be-released research study and report
- Partnership between NM Aging & Long-Term Services Dept. with the Santa Fe EMT Services
  - Gina Gallardo
  - Valarie Valdez
- New & Underutilized Resources from NCOA

# Modernize Medicare Plan Finder Report

- Purpose:
  - Review consumer facing features of Medicare Plan Finder (MPF)
  - Help shape the debate over the future structure of federal run coverage exchanges and enrollment tools given that e-commerce is the preferred route for consumer shopping
- Partners
  - Clear Choices Campaign
  - Improving Medicare Market Initiative Advisory Group (IMMI)

# Sources of Analysis and Information

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- Review of MPF online functions by Clear Choices and NCOA decision support staff
- Beneficiary interviews
- Survey of Medicare State Health Insurance Assistance Program (SHIP) Directors

# Problem

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- MPF plays an important role in presenting unbiased information to Medicare beneficiaries seeking to better understand their choices but it is underwhelming as a tool that beneficiaries can use to make optimal coverage and enrollment choices.
- Medicare beneficiaries do not understand their options

# Features That Affect Online Consumer Choice

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- Easy to view and compare health plan options
- Identify total plan cost and ability to determine if eligible for financial assistance
- Confirm plan coverage for preferred providers and medications
- Navigation of website is smooth and enrollment can be completed quickly

# Consumer Testing

- Twenty-five beneficiary interviews were conducted at four senior centers in Maryland and Virginia
  - Thirteen of the interviews focused on shopping for a Medicare Advantage plan
  - Twelve focused on shopping for a standalone Part D plan.
- Among those interviewed:
  - 28% were male and 72% were female;
  - 60% were under 75; 40% were over 75;
  - 64% were white; 24% were African American, and 12% were Latino or Other; and
  - 56% were educated with a bachelor's degree or higher.



# Key Findings

- MPF is an e-commerce tool in need of reform. With 10,000 baby boomers joining Medicare every day it is critical that improvements be made that mirror technological advancements.



# Key Findings

- Out of pocket costs are difficult to understand
- Provider and pharmacy directories are difficult to navigate
- Plan comparison do not permit inclusion of Medigap policies
- Website layout and display are confusing
- Language is not user friendly
- Navigation and functionality are complex and inconsistent
- Human support is not available
- Information on quality star ratings is confusing
- Plan info is not customized well
- Information is not consistent or accurate

# MPF Scorecard

Category	Grade	Notes
<b>Anonymous Browsing</b>	A	
<b>Customized Plan Information</b>	D	
<b>Default Order</b>	B	
<b>Plan Finder Support</b>	C	
<b>Highlights Supplemental Benefits Choices</b>	D	
<b>OOP Cost Calculator</b>	C	Part C Only
<b>OOP Cost Calculator</b>	B	Part D Only

# MPF Score card continued

Category	Grade	Notes
<b>Integrated Provider Directory</b>	F	Part C Only
<b>Integrated Pharmacy Directory</b>	D	Part D Only
<b>Integrated Drug Directory</b>	D	Part D Only
<b>Layout</b>	D	
<b>Access to Human Support</b>	F	
<b>Language Accessibility</b>	A	

# Analysis

- Bipartisan support for robust private plan competition in Medicare
- MPF must adopt e-commerce practices to ensure that comparative plan information is available and accessible to Medicare beneficiaries
- Funding is required to upgrade MPF
- The pros and cons of outsourcing some or all of the MPF functions is worthy of discussion

# Key Recommendations

MPF would benefit from a comprehensive redesign that allow for enter preferences, health information, to curate coverage options when shopping for a Plan

- Display cost with precision and prominence
- Base estimated out of pocket cost on more detailed personal information
- Integrate a provider directory
- Utilize saved information about consumer drug
- Allow consumers to compare MA plans with an equivalent combination of FFS, Medigap and stand alone drug plans.

# Key recommendations continued...

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- Re-design layout and display to enhance usability and promote intuitive navigation
- Replace insurance jargon with graphics, charts, plain language
- Integrate a web chat feature
- Enable the website to suggest plan options
- Utilize a program integrity contractor to increase MPF accuracy
- Test the site with consumers on a regular basis

# Conclusion

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- CMS should collaborate with a cross section of private sector experts and well informed stake holder groups with boots on the ground beneficiary experience to improved Medicare Plan Finder.



# Short Term Assistance Program in Partnership with Santa Fe Fire Department Emergency Medical Technical (EMT) Services

**Gina Gallardo**, Care Transition Bureau Chief

**Valarie Valdez**, Regional Counseling Program Manager





# SANTA Fe Fire Department– Emergency Medical Technical (EMT) services

- EMT has a mobile integrated team that works with the Short Term Assistance Program in Santa Fe and Las Cruces.
- Santa Fe Fire Department data shows that 33% of all 911 calls are for individuals 60 years and older.
- EMS conducts community health assessments that show falls among the elderly as a leading cause of injury and disability. Falls are on the top 4 dispatch complaints for SFFD for the past 4 years in a row.
- 1% of their calls are real fire issues and 99% are all other EMS issues.
- 44% are seniors that have high needs, who need assistance with social services programs.



# CTB Short Term Assistance Program

## Our program offers the following:

- Statewide assistance providing individuals with resources, options counseling to improve their quality of life and promote independence
- An STA is referred by the New Mexico Emergency Medical Technician's (EMT) to provide one-on-one assistance within the communities of New Mexico:
  - We use a screen all approach for subsidy programs which includes LIS, MSP, and SNAP.
  - The callers issue is complex and requires further assistance.
  - A more in depth one-on-one support
  - Medicaid benefit troubleshooting
  - Medicaid to Medicare transition, application assistance
  - Face to Face assistance is needed to better assist



# CTB Short Term Assistance (STA) Program

## STA Regional Coordinators

- Provide a clear pathway for individuals to access Long Term Service and Supports (LTSS).
- Empower individuals to make informed decisions.
- Develop an action plan using a person-centered approach
- Provide information of benefits for which they are eligible.
- Follow an individual for up to 30 days.

# Contact Us

We are here to assist you.

Our services are **free** of charge and confidential.

Information is just a phone call away!

How we can serve you...

1-800-432-2080 Toll Free

1-505-476-4846 Santa Fe

1-505-476-4910 Fax

1-505-476-4937 TTY



Visit us Online:

[www.nmaging.state.nm.us](http://www.nmaging.state.nm.us)

[www.nmresourcedirectory.org](http://www.nmresourcedirectory.org)



THANK YOU




# New & Underutilized Resources


- Consumer flyers about:
  - Choosing Medigap plan
  - Original Medicare vs Medicare Advantage
  - Joining Medicare Advantage plan

<https://www.ncoa.org/news/ncoa-news/center-for-benefits-news/consumer-tools-medicare-options/>

- Benefits 101 slide decks
  - Introduction to core benefits programs
  - Search for Benefits 101 at [www.ncoa.org/resources](http://www.ncoa.org/resources)
  - Recordings at [www.vimeo.com/channels/ncboe](http://www.vimeo.com/channels/ncboe)



Getting Medicare right



**Differences between Original Medicare and Medicare Advantage**

	Original Medicare	Medicare Advantage
<b>Costs</b>	Medicare premiums (Part B, Part A if applicable), deductibles, and coinsurance charges (usually 20% of Medicare-approved cost for outpatient care).	Medicare premiums, plan premium (if it has one), deductibles (if it has one), and copays (usually a fixed cost for office visits)
<b>Supplemental insurance</b>	Beneficiary can purchase a Medigap policy.	Beneficiary cannot purchase a Medigap policy.
<b>Covers extra services</b>	No. Covers medically necessary inpatient and outpatient health care. Does not cover services such as routine vision, hearing, or dental care.	Maybe. May cover some services Original Medicare does not cover, such as routine vision, hearing, and dental care.
<b>Lots beneficiary see providers nationwide</b>	Yes. Beneficiary can go to any provider who accepts Original Medicare.	Usually not. Many plans have a network of providers in the beneficiary's geographic area and may not cover care if a beneficiary sees a provider out-of-network, except in emergencies.
<b>Referral required to see specialist</b>	No.	Maybe. A beneficiary's plan may require a referral from a primary care physician before it will cover a visit to a specialist.
<b>Drug coverage</b>	No. If beneficiary wants Medicare prescription drug coverage, they can buy a stand-alone Part D plan provided by a private insurance company.	Usually. Most plans include prescription drug coverage.
<b>Out-of-pocket limit</b>	No. There is no limit on what a beneficiary can spend on health care.	Yes. Plans must have annual out-of-pocket limit on cost-sharing. Once a beneficiary meets the limit, they do not owe anything out-of-pocket for their health care services. The limit is high, but can protect a beneficiary who needs expensive care.

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 This flyer is a State Plan Insurance Alternative Program (SIP) and does not apply to all states. Please contact your State Plan Insurance Alternative Program (SIP) for more information.

# New & Underutilized Resources

- Messages that work (and other research on where older adults get trusted information):  
<https://www.ncoa.org/centerforbenefits/outreach-toolkit/what-the-research-says/>
- Free resources for aging services providers:  
<https://www.ncoa.org/blog/free-resources-aging-services-providers/>
- Helping clients afford medications:  
<https://www.ncoa.org/news/ncoa-news/center-for-benefits-news/new-resources-afford-medications/>

