



STATE OF WISCONSIN
BOARD ON AGING AND LONG TERM CARE

1402 Pankratz Street, Suite 111
Madison, WI 53704-4001
(608) 246-7013
Ombudsman Program (800) 815-0015
Medigap Helpline (800) 242-1060
Part D Helpline (855) 677-2783
Fax (608) 246-7001
<http://longtermcare.wi.gov>

BOARD OF DIRECTORS

Eva Arnold
Barbara M. Bechtel
Michael Brooks
Terry Lynch
Tanya L. Meyer
James Surprise
Dale B. Taylor

EXECUTIVE DIRECTOR

Heather A. Bruemmer

15 Oct 2015

Governor Scott Walker
Secretary Scott Neitzel: Dept. of Administration
Members of the Wisconsin Legislature

Dear Gov. Walker, Secretary Neitzel, and Members of the Wisconsin Legislature,

Attached is the Biennial Report for the Board on Aging and Long Term Care as required by statute (16.009(2)(i)) and Department of Administration policy.

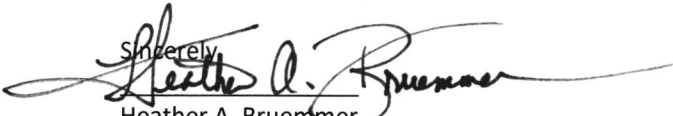
The Board on Aging and Long Term Care views this report as a means to display the positive impact of our programs on the public, the citizen concerns and issues that we have discovered, our plans for the immediate and long-term future, and the progress that we have made toward meeting our stated goals. In addition to this report, a lengthier and more detailed discussion of the agency's activities, goals and plans will follow next year on the biennial cycle that was established decades ago.

The advocacy and insurance counseling programs funded through various state and federal sources which are operated by the Board are functioning well and providing needed services to the public. As shown in the data displayed in this report, there are an increasing number of consumer contacts with this agency. Elder consumers receive effective advocacy to assist them in resolving questions and problems arising from their use of private and government-funded long term care services. Consumers of all ages receive accurate and timely information about and assistance with understanding their options for health care insurance as it relates to Medicare in all its forms.

Board on Aging and Long Term Care programs are an enduring example of government programs that work. Staff of this agency frequently labor at a pace well above the optimal workload for advocates that has been recommended by experts who have studied the programs which we are responsible for. The programs of the Board on Aging and Long Term Care are a shining example of a fiscally responsible and effectively managed group of dedicated and competent professionals who do their work very well and who produce extraordinary results for our consumers.

The Ombudsman, Volunteer Ombudsman and Medigap Helpline programs are meeting and exceeding their respective goals for providing outreach to the citizens of this state. The BOALTC website is receiving a steadily increasing volume of visits. Medigap Counselors are appearing and an increasing number of local events, providing information to consumers about Medicare-related insurance issues. Our Professional and Volunteer Ombudsmen participate in facility Resident Council meetings, providing direct advocacy to residents of long term care facilities as well as responding to an increase in requests for outreach presentations.

The BOALTC is pleased to know that you will be reviewing our report and we look forward to talking with you and with members of your staff about its contents and the future of the Board's programs.

Sincerely,

Heather A. Bruemmer
Executive Director



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Advocacy: An Investment for the Future

The Board on Aging and Long Term Care has adopted the following principles:

The Board on Aging and Long Term Care consists of seven appointed Board Members and Agency staff, led by Executive Director/State Ombudsman, Heather Bruemmer, who operate the Long Term Care Ombudsman, Volunteer Ombudsman, and Medigap Helpline Programs.

Mission

The mission of the Board on Aging and Long Term Care is to advocate for the interests of the state's long term care consumers, to inform those consumers of their rights, and to educate the public at large about health care systems and long term care.

Vision

The Board on Aging and Long Term Care is the premier resource for information and advocacy. The Board will increase its visibility and accessibility by expanding its role and recognition as an advocacy leader.

Values

The Wisconsin Board on Aging and Long Term Care subscribes to and defends the values of: respect and dignity for the individual; protection of the right of the individual to be free from threats to health, safety and quality of life; fairness and transparency; and open, clear and consistent communication. Our staff and volunteers provide services consistent with the spirit and intent of these values.

Summary Description of the Board on Aging and Long Term Care

Created by the Wisconsin Legislature in 1981, the Board on Aging and Long Term Care is home to three very important consumer programs: the Long Term Care Ombudsman Program, the Volunteer Ombudsman Program, and the Medigap Helpline.

See our agency website at: <http://longtermcare.wi.gov/>

The Board on Aging and Long Term Care is enabled by Wisconsin Statute at § 16.009, *stats*. This section incorporates, by reference, the federal Long Term Care Ombudsman Program statutes found in the Older Americans Act at 42 USC 3058f and 42 USC 3058g. Our agency is given policy direction and oversight by a 7-member citizen board, appointed by the Governor with the advice and consent of the State Senate. Operational control is vested in an Executive Director / State Ombudsman, currently Heather A. Bruemmer, who is supported by managerial staff including a Counsel to the Board, an Ombudsman Supervisor, a Volunteer Program Supervisor and a Medigap Program Supervisor.

The Long Term Care Ombudsman Program is Wisconsin's version of a federally mandated program that provides trained, professional advocates who represent the interests of and speak for residents of long term care facilities. Ombudsmen respond to complaints lodged by or on behalf of these residents and advocate to protect their rights and welfare when threatened by the actions of care providers, by government action, or by the actions of any other person. Ombudsmen also serve as consultants and educators to providers and citizens on any number of specific issues, including resident rights, facility culture change and Wisconsin's Family Care managed long term care program. See our Ombudsman Program website at:

http://longtermcare.wi.gov/section_detail.asp?linkcatid=1953&linkid=1014&locid=123

The Volunteer Ombudsman Program has been in existence since 1994. This program recruits, screens, trains and supervises volunteers who make regular visits to nursing homes. Volunteers are a voice for the residents and act as the "eyes and ears" of the professional Ombudsman. The program averaged 127 volunteers during this reporting period, serving in 30 counties, making weekly visits to converse with and to advocate for residents. Volunteers submit a monthly report to their coordinator that provides valuable information regarding the residents' concerns to the Regional Ombudsman assigned to the particular facility. See our Volunteer Ombudsman Program website at:

<http://longtermcare.wi.gov/category.asp?linkcatid=1959&linkid=1014&locid=123>

The Medigap Helpline is an insurance counseling service that provides information and counseling to callers who have questions relating to Medicare programs, Medicare Supplemental insurance, Medicare Part D prescription drug coverage, Medical Assistance, retiree group health plans, and the Wisconsin Health Insurance Risk Sharing Program (HIRSP). The Medigap staff has been extraordinarily busy dealing with issues created by the recent myriad changes to the Medicare system. It is anticipated that changes resulting from the new Affordable Care Act will bring additional inquiries, primarily relating to changes in the Part-D prescription drug plans and changes in Medicare Advantage private managed care plans. See our Medigap Program website at:

<http://longtermcare.wi.gov/category.asp?linkcatid=1958&linkid=1014&locid=123>

The mission of the Board on Aging and Long Term Care is, and always has been, consumer focused. It is our purpose to advocate for the interests of aging consumers of long term care and Medicare. In this role, agency managers and staff have had the opportunity to work with related state agencies such as the Department of Health Services (DHS), the Department of Administration (DOA), and the Office of the Commissioner of Insurance (OCI), and with legislators, both in Madison and in the halls of Congress on issues of concern to our constituency.

Programs, Goals, Objectives and Activities
Reflecting the mandates of
The Biennial Budget as specified in 2015 ACT 55

Program 1: Identification of the Needs of the Aged and Disabled

Goal 1: To improve the quality of life for nursing home and assisted living facility residents and consumers of long-term care funded by Family Care and the Community Options Program.

Objective/Activity: Consumers and their family members often report a fear of retaliation if they report problems or attempt to assert their rights concerning the receipt of services in skilled nursing facilities. Ombudsman and volunteer ombudsman participation in resident councils is a proven tool for energizing, empowering and providing a sense of self-determination for residents. The board intends to develop effective methods for enhancing Ombudsman and Volunteer Ombudsman participation in resident councils in the state's nursing homes.

- The Board's Long-Term Care Ombudsman Program intends to work diligently to encourage the development and effective operation of resident councils in assisted living facilities throughout the state.

Objective/Activity: Improve public education and outreach to consumers on issues and concerns about evaluating the appropriateness of, accessing and assuring the quality of care and quality of life in long-term care facilities in Wisconsin.

- The Board intends to enhance the agency's public outreach efforts, including personal appearances by staff and improved user friendliness of the agency's website to achieve the goal of providing accurate and useful information needed by aging and disabled citizens who are seeking long-term care services.
- The Board intends to further augment the agency website to provide additional resources to aid consumers in understanding the role and capabilities of Long Term Care Ombudsman Program advocacy services.

Goal 2: Improve public education and outreach to consumers on issues related to Medicare Supplemental, Medicare Part D (prescription drug) and related forms of insurance.

Objective/Activity: While the Board's Medigap Helpline has proven to be an extremely effective program to counsel individuals regarding their insurance needs and options, more needs to be done to expand the audience of those who have significant needs but are unaware of the program's services and how to access them.

- The Board intends to continue to enhance the agency's public outreach efforts, including personal appearances by staff at public forums in order to achieve the goal of making the Medigap Helpline Program a resource that is recognized by Wisconsin seniors as a reliable and trustworthy source of accurate information about Medicare Supplemental, Medicare Advantage, Part D, and related insurance products. Greater state-wide outreach in the form of in-person contacts with local groups of Medicare-eligible individuals is being used to advance this goal.

- The Board is continually redesigning its website to include up-to-date information on insurance for older people and to provide appropriate links to the websites of the Office of the Commissioner of Insurance, the federal Centers for Medicare and Medicaid Services and other reliable sites such as the federal Affordable Care Act information site, HealthCare.gov.
- Frequent and timely press releases containing pertinent information are regularly sent out to state-wide media outlets and are made accessible on the Board on Aging and Long Term Care website.

PERFORMANCE MEASURES

2013 AND 2014 GOALS AND ACTUALS

Prog No.	Performance Measure	Goal 2013	Actual 2013	Goal 2014	Actual 2014
1.	Number of Volunteer Ombudsman and Ombudsmen facility visits with resident councils.	400	302	350	246
1.	Number of outreach presentations by Ombudsman Program staff.	300	392	350	282
1.	Number of outreach presentations by Medigap Program staff.	50	71	55	84
1.	Number of hits on the Board's website.	84,000	120,755	86,000	115,115

Note: Based on fiscal year

2015, 2016 AND 2017 GOALS

Prog No.	Performance Measure	Goal 2015	Goal 2016	Goal 2017
1.	Number of Volunteer Ombudsman and Ombudsmen facility visits with resident councils.	325	330	335
1.	Number of outreach presentations by ombudsman program staff.	300	310	320
1.	Number of outreach presentations by Medigap program staff.	72	74	76
1.	Number of hits on the Board's Web site.	118,000	120,000	122,000

Note: Based on fiscal year.

Members of the Board on Aging and Long Term Care

<u>Name</u>	<u>Home City</u>	<u>Appointed</u>
James Surprise: Chair	Wautoma	2009 Re-appt'd 2013
Eva Arnold	Beloit	2002 Re-appt'd 2007 - 2013
Barbara Bechtel	Milwaukee	2012
Michael Brooks	Oshkosh	2013
Terry Lynch	Racine	2006 Re-appt'd 2011
Tanya Meyer	Gleason	2002 Re-appt'd 2007 - 2013
Dale Taylor	Eau Claire	2005 Re-appt'd 2010

Staff of the Board on Aging and Long Term Care include:

Executive Director / State Ombudsman	Heather A. Bruemmer
Counsel to the Board	William P. Donaldson
Ombudsman Supervisor	Kim Marheine
15 regional Ombudsmen	
0.5 Veterans Ombudsman Specialist	
1 Ombudsman Relocation Specialist	
1 Ombudsman Intake Specialist	
Volunteer Ombudsman Supervisor	Kellie Miller
5 Volunteer Ombudsman Coordinators	
Medigap Supervisor	Vicki Buchholz
1 Lead Medigap Counselor	Jill Helgeson
4 Medigap Counselors	
2 Medicare Part D counselors	
1 Medigap Intake Specialist	
Central Office Manager	David Cauffman
1 Information Specialist (0.5 FTE)	

Total – 37 FTE

Long Term Care Ombudsman Program Statistics

Current & Comparative Facility & Family Care Statistics

2012 – 2014

<u>Community-Based Residential Facilities</u>	1,513 facilities	26,352 beds
<u>Residential Care Apartment Complexes</u>	306 facilities	13,956 apartments
<u>Adult Family Homes</u>	1,516 facilities	6,068 beds
<u>Total Assisted Living</u>	3,387 facilities	46,376 beds
<u>Total Skilled Nursing Facilities</u>	397 facilities	35,013 beds
<u>Family Care (frail elderly)</u>	<u>19,719 members*</u>	

** Source: Department of Health Services Enrollment Data*

Total Potential Ombudsman Program Clients	101,108
Field Ombudsman Positions	15
Ombudsman to Consumer Ratio	1:6,740 *

** The National Institutes of Medicine recommend that the Ombudsman to Consumer ratio should be no more than 1:2,000*

Comparative Ombudsman Data*

2013

Total Agency Program Activities (Consults, Information & Referral)	45,868
Total Ombudsman Program Activities	27,654
Total Cases	1,015

2014

Total Agency Program Activities (Consults, Information & Referral)	45,724
Total Ombudsman Program Activities	32,211
Total Cases	1,084

**Source: Data derived from Ombudsmanager data collection system*

Ombudsman Program Most Frequent Complaints

Most frequent complaint data is derived from the agency's database system (Ombudsmanager), and are listed in order of most frequent. Complaints are directed to the program from consumers, families, providers, legislators, friends and acquaintances and others.

Top five complaints to the Ombudsman Program for 2012 – 2014. These also include complaints arising from Family Care - PACE/Partnership and the Community Options Program.

- Failure to follow the care plan/individualized service plan; care plan does not represent member's stated goals (Family Care)
- Failure to respect resident/tenant choice in care and treatment
- Discharge planning process, involuntary discharge process; discharge required due to failed rate negotiation (Family Care)
- Family conflict interferes with well-being, care and treatment
- Legal issues related to powers of attorney, guardianship, actions of guardians or substitute decision makers.

Citations for Regulatory Violations Presenting Immediate Jeopardy to Skilled Nursing Facility Residents*

The single most urgent and serious case presented to any Ombudsman is one where a facility is cited for a violation of the rules which places a resident or residents in "immediate jeopardy." This type of referral to an Ombudsman will take precedence over any and all other issues that the Ombudsman may be dealing with. Citations issued to nursing homes from the Division of Quality Assurance at the Immediate Jeopardy level continue to be areas of concern for the Ombudsman Program, and result in heightened vigilance for the protection of resident rights. There is no such distinction in citation severity in the assisted or managed care rules, although equally serious conditions can, and do exist in those facilities and programs, also requiring ombudsman intervention.

Rule defines an immediate jeopardy citation as one that is issued when there is "a situation in which the provider's noncompliance with one or more requirements of participation has caused, or is likely to cause, serious injury, harm, impairment, or death to a resident." The term "requirements of participation" refers to the section of the Centers for Medicare and Medicaid Services regulations which establishes standards for care provided to skilled nursing facility residents.

CY 2014	49 Immediate Jeopardy citations
CY 2013	74 Immediate Jeopardy citations
CY 2012:	61 Immediate Jeopardy citations
CY 2011:	63 Immediate Jeopardy citations
CY 2010:	79 Immediate Jeopardy citations
CY 2009:	89 Immediate Jeopardy citations
CY 2008:	76 Immediate Jeopardy citations

* *Source: DHS; Bureau of Nursing Home Resident Care*

Volunteer Ombudsman Program

The Volunteer Ombudsman Program augments the services provided by the Long Term Care Ombudsman Program to residents living in nursing homes. Volunteer Ombudsmen are resident-focused advocates who are screened, trained and matched to an assigned nursing home in their community. Volunteer Ombudsmen are recruited, trained and supervised by regional Volunteer Coordinators. Five regional Volunteer Coordinators are responsible for Volunteer Ombudsmen assigned to skilled nursing homes in 30 counties of the state.

It is difficult to place a monetary value on Volunteer time, however, the assumed national statistical hourly wage for a Volunteer in 2014 is \$23.07. The estimated hourly rate in the State of Wisconsin is \$22.55. Using the number of volunteer hours donated as cited below, the estimated value of these advocates to the state of Wisconsin in 2014 would be approximately \$114,875.35.

The Volunteer Ombudsmen in this program are invaluable advocates providing facility residents with increased access to our services through unannounced yet routine visits in local skilled nursing homes. The top three items of concern and resolution for residents include call lights being answered on time, food and beverage choice/quality, and being able to speak up without fear of retaliation. We are meeting our challenge to help residents to feel heard, to feel safe and to feel worthy.

Volunteer Ombudsman Program Statistics

<u>Volunteer Ombudsmen Data:</u>	<u>2013</u>	<u>2014</u>
Number of Volunteer Ombudsmen (VO)	131	122
Number of Long Term Care Facilities with VO	91	87
Number of facility visits made	2,706	2,461
Number of hours donated	5,409.85	5,094.25
<u>Volunteer Program Staff Data:</u>	<u>2013</u>	<u>2014</u>
Working with Volunteer Ombudsman Activities	1,936	1,901
Working with Resident Councils (meetings)	186	194
Community Education Activities	132	56
Information and Consultation Activities	1188	1036

The Medigap Helpline & Medigap Part D & Prescription Drug Helpline

The Medigap Helpline & the Medigap Part D & Prescription Drug Helpline, both part of the Wisconsin SHIP (State Health Insurance Assistance Program) can help beneficiaries with questions about health insurance: including Medicare, Medicare supplements, Medicare Advantage Plans, Prescription Drug coverage, Long Term Care Insurance, and other health care options available to Medicare beneficiaries.

Both Helplines are services administered by the State of Wisconsin Board on Aging and Long Term Care at no cost to the caller. There is NO connection with any insurance company and the Medigap Helpline and The Medigap Part D Helpline do not endorse nor express any opinion as to the worth or value of any policy or insurance product. The program is funded through grants from the Federal Centers for Medicare & Medicaid Services (CMS) and the Wisconsin Office of the Commissioner of Insurance (OCI).

The Medigap Helplines provide a one-on-one telephone counseling service. There is one Medigap Lead Counselor, four full-time Medigap Counselors, two full-time Part D counselors, one full-time intake advocate, and one part-time Management Information Systems person with a Medigap Services Supervisor. All counselors are required to pass agent's insurance licensing for Health Insurance in the State of Wisconsin.

The Medigap Helpline's toll free telephone number, 1-800-242-1060, is a nationwide number and is listed on the back of the CMS publication Medicare & You (Wisconsin version). This program is accessible to Wisconsin citizens and family members even while they may be out of the State of Wisconsin. **The Medigap Part D and Prescription Drug Helpline for ages 60 and over is 1-855-677-2783**. Printed materials of the programs, Medicare and insurance and prescription options are available upon request. Both Helplines also make use of the Language Line to be accessible for those beneficiaries who primarily speak another language.

Who are our primary customers?

- Medicare beneficiaries of all ages
- Disabled Individuals
- Low income individuals
- Pre-retirement individuals
- Retirees losing their employer group coverage
- End Stage Renal Disease beneficiaries
- Person's aged 60 and over searching for Prescription coverage
- Private long term care insurance shoppers

Who are our other customers? (including but not limited to):

- Elderly/disability benefit specialists
- Social workers/case managers
- Legislators or staffers
- Non-Medicare individuals without health insurance
- Medical/healthcare providers

The past few years has brought a lot of change within the Medigap Helpline Services. Having the Prescription Drug Helpline, which officially began July 2012, which provides Prescription reviews along with the counseling the Medigap Helpline counselors do, has broadened the scope of information presented to callers of the Medigap Helpline. Total contacts within the Medigap Helpline Services was **14,199 in 2014** compared to **13,426 in 2013**. Continued growth of the volunteer program which was implemented to assist the Part D & Prescription Drug Helpline has allowed that part of the program to increase the ability to serve each beneficiary who calls. The volunteer program, which includes volunteers from the UW Pharmacy school program and retired persons, had 45 volunteers this past year provide plan finder assistance, data entry, and clerical support for both programs.

The agency's volume of calls will continue to grow as more persons enroll into Part D and understand the need to review plans every year or as beneficiaries reach out to better understand the broad range of options they have when first starting Medicare.

	<u>2014</u>	<u>2013</u>	<u>2012</u>	<u>2011</u>
Overall Incoming Calls:	14,199	13,426	9,665	8,233
Toll-free Live Calls:	4,491	4,892	3,116	2,033
Total Hours:	6423.66	6560.66	5157.20	4457.43
(Ave Min per call):	(27.14)	(29.32)	(32.02)	(32.48)
Referrals:	2697	3519	3428	2815
Volunteers:	45	26	7	1
(Volunteer hours):	(1542.0)	(1079.50)	(495.50)	(468.0)
Outreach Events:	71	88	49	39
Outreach attendees:	12,420	9,453	8,158	5,018

Our Medigap counselors provide information, education, and counseling on coverages and topics including the following:

- Medicare
 - Part A & Part B
- Medicare Supplements (Medigap)
 - Traditional vs Network policies
 - Guarantee Issue Provisions
 - Pre-Existing conditions
 - Relocation/snowbirds
 - Premium issues
- Medicare Advantage Plans
 - Service area coverage
 - Relocation/snowbirds
 - Out of Pocket Maximum/copay costs
 - Enrollment Periods: Initial, Annual, Special
 - Trial periods
 - Prescription Part D inclusion
- Medicaid Programs
 - Badgercare Plus (non-Medicare beneficiary)
 - Medicare Savings Programs
 - Medical Assistance Purchase Program (MAPP)
 - Medicaid

- Employer Group Health Insurance
 - Active Employer coverage
 - Retiree Group Coverage
 - Cobra/Wisconsin Continuation
- Health Insurance Marketplace
 - Enrollment periods: Annual, Special
 - Medicare and Marketplace
- Prescription Coverage
 - Medicare Prescription Part D (serving those 60 and over)
 - Wisconsin SeniorCare
 - Low Income Subsidy (extra help)
 - Other Creditable Drug coverage
 - Pharmaceutical Programs
- Long Term Care Insurance
 - Nursing Home
 - Home Health Care
 - Assisted Living
 - Qualified Partnership Policies

There have been changes in the health insurance field with the ushering in of the Affordable Care Act which prompted many inquiries to the helpline. The termination of the state's Health Insurance Risk Pool (HIRSP) and the ending of coverage by many Badgercare Plus recipients added to the agencies normal influx of callers who are looking to assure they were in the best option for their needs for the coming year. Callers continued into 2014 with questions as the roll out of the Health Insurance Marketplace allowed a delay in termination of those programs. These callers along with calls from beneficiaries losing or who can no longer afford their employer sponsored coverage, from new beneficiaries looking for information and guidance on their coverage needs or from those beneficiaries having issues with their current coverage have added to the higher volume with the Medigap Helpline Services.

The top issues which prompted calls from beneficiaries and advocates include:

	<u>2014</u>	<u>2013</u>	<u>2012</u>	<u>2011</u>
Policy terminations or exhaustion of benefits –	700	581	656	431
Premium increase -	412	279	310	371
Contract provisions -	1539	46	72	78
Relocation issues -	164	98	83	58
Claims issues -	344	42	59	57
Low Income Programs (Medicaid) -	644	586	611	471
Employer Sponsored Coverage issues -	891	922	767	653

Medigap Counselors will refer callers to other resources when appropriate to get further assistance and/or information in addition to mailing out publications and information on Medicare and insurance options. Numbers of outside referrals have increased in the recent years as a result of the partly due to increased volume of calls and complexity of needs. In 2014, staff made 2697 referrals to other agencies. Referrals are made to County Elder or Disability Benefit Specialists for more one to one assistance. Referrals are made back to health care providers to review claims issues. Beneficiaries are referred to Income Maintenance Consortia's for eligibility into low income programs, to name a few.

Also, in 2014, staff began assisting beneficiaries who had started Medicare while covered by a Health Insurance Marketplace policy and had issues understanding and obtaining coverage to coordinate with Medicare.

Counselors mail brochures and publications to callers who request information to better understand options available to them.– The Medigap Helpline programs sent out information to **4513 persons in 2014** (3696 in 2013). Materials available include the Medicare booklet "Medicare & You", OCI's publication "Medicare Supplement Insurance Approved Policies List", and various Centers for Medicare & Medicaid publications on various coverage topics with Medicare such as Kidney dialysis, Hospice benefits, and Guide to who pays first to list a few. Planfinders and materials are also mailed out to beneficiaries to assist them in selecting their Medicare Prescription Drug plan. The materials often support the counseling efforts by staff.

Trends

1. Call volumes continue to rise as more changes occur in Medicare and other Healthcare programs. The termination of the Health Insurance Risk Sharing Plan (HIRSP), of which approx. 1200 persons were also Medicare recipients, and there were 10,290 persons affected by Advantage plans terminating. The notice that is sent out to affected beneficiaries includes the Wisconsin SHIP helpline number which is the toll free number with the Medigap helpline.
2. Medigap counselors continue to see increased calls of beneficiaries calling with employer sponsored coverage questions as employers drop coverage or increase the amount of premiums employees pay. Another trend which generated a high number of calls to the helpline is the increased use of benefit managers by employers who have opted to end their retiree group coverage and instead make funds available for retirees to use to purchase their own individual coverage. How those funds are made accessible and for which types of coverage became challenging for several callers.
3. Badgercare Plus members who no longer met the eligibility for Badgercare Plus and who could not utilize the Marketplace due to Medicare eligibility made up another group of persons who called the Medigap helpline for assistance understanding the Medicare program and the costs of their coverage selections. Even though their families could utilize subsidies within the Marketplace, these persons had to rely on Medicare and those options unless they were also eligible for EBD (Elderly, Blind, Disabled) Medicaid programs.

Total hits on the Board on Aging and Long Term Care Website

2011	82,198
2012	105,695
2013	97,200 (through 10/15/13)

**Contact information for the State of Wisconsin
Board on Aging & Long Term Care**

Central Office Address:
1402 Pankratz Street, Suite 111
Madison, Wisconsin 53704-4001

Ombudsman/Volunteer Program: 1.800.815.0015

Medigap Helpline Program: 1.800.242.1060

Medigap Part D & Prescription Drug Helpline: 1.855.677.2783

Fax: 1.608.246.7001

Email: BOALTC@Wisconsin.Gov

Website: <http://longtermcare.wi.gov>

The Board on Aging and Long Term Care, as an agency of Wisconsin State Government, makes no endorsement or recommendation as to the value, quality or appropriateness of any service provider, product or program related to the delivery of long term care or Medicare-related insurance.