



STATE OF WISCONSIN
BOARD ON AGING AND LONG TERM CARE
1402 Pankratz Street, Suite 111
Madison, WI 53704-4001

Ombudsman Program (800) 815-0015
Medigap Helpline (800) 242-1060
Part D Helpline (855) 677-2783
Fax (608) 246-7001
<http://longtermcare.wi.gov>

MEMBERS of the BOARD
Eva Arnold
Barbara M. Bechtel
Michael Brooks
Tanya L. Meyer
Dr. Valerie A. Palarski
James Surprise
Dr. Dale B. Taylor

EXECUTIVE DIRECTOR
And
STATE LONG TERM
CARE OMBUDSMAN
Heather A. Bruemmer

October 16, 2017

Governor Scott Walker
Office of the Governor
115 East, State Capitol
Madison, WI 53702

Members of the Wisconsin Legislature
State Capitol Building
Madison, WI 53702

Dear Governor Walker and Legislators,

On behalf of the Wisconsin Board on Aging and Long Term Care (BOALTC), I am honored to provide you the Board's report for the biennium ending June 30, 2017. The BOALTC views this report as a means to display the positive impact of our programs on the public, our plans for the immediate and long-term future, and the progress that we have made toward meeting our stated goals.

In the past biennium, the seven Governor appointed members of the Board have served as zealous advocates for consumers of long term care in Wisconsin. The Board is ever mindful of the issues facing today's long-term care consumer, but also takes a forward-thinking approach toward considering those issues most likely to impact the future quality of life and quality of care provided to the state's long term care consumers. Together with the BOALTC Executive Director, the Board provides the strategic compass for all advocacy efforts and educational programs carried out by BOALTC employees.

The mission of the BOALTC 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. To carry out this mandate the Board operates three distinct programs:

- Long Term Care Ombudsman Program
- Volunteer Ombudsman Program
- Medigap Helpline

As shown in the data displayed in this report, the BOALTC continues to see a steady rise in the number of consumer contacts. As the healthcare landscape has become more complex and uncertain, elder consumers have increasingly looked to the BOALTC as the premier

resource to receive effective advocacy and to assist in resolving questions and issues arising from the use of private and government-funded long-term care services. Long-term care consumers rely on the BOALTC to receive accurate and timely information and assistance with understanding their health care options.

BOALTC programs are an enduring example of government programs that work. The programs reflect the dedication of a fiscally responsible and effectively managed group of motivated and competent professionals who do their work very well and produce extraordinary results for our consumers.

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. I also encourage you to view the Board's website for more information about the BOALTC and the services we offer.

<http://longtermcare.wi.gov>

Sincerely,

A handwritten signature in black ink, reading "Heather A. Bruemmer". The signature is fluid and cursive, with a long horizontal flourish extending to the right.

Heather A. Bruemmer

Executive Director and State Long Term Care Ombudsman

Advocacy: An Investment for the Future

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

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.

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 3058(f) and 42 USC 3058(g) and codified in the Code of Federal Regulations at 45 CFR 1324 and 45 CFR 1327. Our agency is given policy direction and oversight by a seven-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 Long Term Care Ombudsman, currently Heather A. Bruemmer, who is supported by managerial staff including Counsel to the Board, an Office Manager, 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. More information is provided on 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. More information is provided on our Volunteer Ombudsman Program website at:

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

The Medigap Helpline Services is an insurance counseling service that provides information and counseling to callers who have questions relating to Medicare programs, Medicare Supplemental insurance, Medicare Advantage and Medicare Part D prescription drug plans, Medical Assistance programs, Employer sponsored group health plans, and transitioning from the Marketplace coverage into Medicare. Medigap staff members have been extraordinarily busy dealing with issues created by changes to the Medicare system. The uncertain future of the Affordable Care Act has brought additional inquiries, related to changes in the Part-D prescription drug plans “donut-hole” and to changes in Medicare Advantage private plans. More information is provided on 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. In this role, agency managers and staff have had the opportunity to work with the Department of Health Services (DHS), the Department of Administration (DOA), the Office of the Commissioner of Insurance (OCI) and both state and federal legislators on issues of concern to our constituency.

Programs, Goals, Objectives and Activities Reflecting the Mandates of the Biennial Budget,
as Specified in 2017 Wisconsin ACT 59

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 Advantage, 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 Services a resource which is recognized by Wisconsin Medicare beneficiaries 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 (CMS) 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

2015 AND 2016 GOALS AND ACTUALS

Prog No.	Performance Measure	Goal 2015	Actual 2015	Goal 2016	Actual 2016
1.	Number of Volunteer Ombudsman and Ombudsmen facility visits with resident councils.	325	340	330	335
1.	Number of outreach presentations by Ombudsman Program staff.	300	292	310	303
1.	Number of outreach presentations by Medigap Program staff.	72	68	74	89
1.	Number of hits on the Board's website.	118,000	161,812	120,000	192,097

Note: Based on fiscal year

2017, 2018 AND 2019 GOALS

Prog No.	Performance Measure	Goal 2017	Goal 2018	Goal 2019
1.	Number of complaints Investigated by Ombudsman on behalf of long term care consumers.	2,500	2,650	2,800
1.	Number of education programs provided to long-term care consumers by Ombudsman Program staff.	200	210	220
1.	Number of education programs provided to long-term care providers by Ombudsman Program staff.	105	110	120
1.	Number of times Volunteer Ombudsmen and Volunteer Coordinators attend resident council with facility visits.	210	215	220
1.	Number of hits on the Board's Web site.	193,000	194,000	195,000
1.	Number of outreach presentations by Medigap Helpline program staff.	76	78	80
1.	Number of Medigap Program Volunteer hours provided.	1,400	1,500	1,600

Note: Based on fiscal year

Members of the Board on Aging and Long Term Care
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<u>Name</u>	<u>Home City</u>
James Surprise (Chair)	Wautoma
Eva Arnold	Beloit
Barbara Bechtel	Milwaukee
Michael Brooks	Oshkosh
Tanya Meyer	Gleason
Dale Taylor	Eau Claire
Valerie Palarski	Aniwa

Board on Aging and Long Term Care Staff Members

Executive Director / State Ombudsman	Heather A. Bruemmer
Counsel to the Board	Christopher J. McElgunn
Central Office Manager	Vicki Tiedeman
Ombudsman Supervisor	Kim Marheine
1 Lead Ombudsman	Rachel Selking
16 Regional Ombudsmen	
1 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	
1 Information Specialist (0.5 FTE)	

Part-Time Employment and Flexible Schedules

Section 230.215(4), Wis. Stats., requires state agencies to include information on the progress the agency in implementing employment practices which provide flexibility in scheduling and create permanent part-time employment opportunities in the biennial report.

The Board on Aging and Long Term Care (BOALTC) has three primary programs with unique parameters of how they serve consumers.

The Ombudsman and Volunteer Ombudsman Programs require staff members to operate throughout the state to accommodate assignments at various locations and appointments with consumers, both in the community and in long-term care facilities. In addition, staff members regularly hold educational trainings, attend seminars and meet with representatives of other state agencies. To create the most efficient environment for program administration and employee welfare, staff members work from home or satellite offices and, under the direction of their program supervisors, have autonomy to set their schedules to best serve consumers in their assigned areas.

The Medigap Helpline is a free, confidential counseling service for all Medicare beneficiaries, including disabled individuals and individuals age 65 and over. Due to the high number of calls received during business hours, Medigap Helpline staff members are primarily required to work during assigned hours. However, these staff members are also periodically assigned to provide trainings and attend seminars. In these situations, under the direction of their program supervisors, staff members have the flexibility to choose an alternative arrival and departure time from work to best accommodate their needs.

In all situations, the BOALTC strives to provide a positive work environment for all staff members and to create an appropriate work-life balance.

Long Term Care Ombudsman Program

The State of Wisconsin Board on Aging and Long Term Care's Ombudsman Program continues to be a primary resource for older adults living in long term care settings as well as for those who receive their home and community-based services through the state's managed long term care programs. Serving persons age sixty and older, as of this writing twenty-two ombudsman program staff provide advocacy to approximately 91,000 persons living in licensed settings and approximately 23,000 persons enrolled in managed long term care programs.

Ombudsman casework identifies trends in allegations of abuse, volatile family conflict, and surrogate decision-makers who act to deny resident rights. Wisconsin law and the federal ombudsman rule provide that ombudsmen are not mandatory reporters and are not the investigators of the alleged abuse, but are often the primary source of intake. The ombudsman's role then, with the consent of the client, is to insure that the client receives all rights to due process, person-centered intervention and support, and a trauma-informed resolution. Ombudsmen agree that these cases are among the most complex to resolve, and require an extremely high skill level for trauma-informed interviewing, mediation and negotiation, as well as a strong knowledge of, and relationships with, outside referral sources.

Other areas of trend include advocacy services provided to persons with or affected by chronic mental illness, diagnosed and underdiagnosed, requests for consultation from providers regarding care for diverse populations, and facility closure activity that continues to remain higher than typical.

Current & Comparative Facility & Family Care Statistics

Year	Type	Number of Homes ¹	Number of Residents/ Clients
FY 2015	Nursing Home	399	33,963
	Licensed ² Assisted Living	3,812	51,017
	Family Care/PACE/ Partnership ³		20,520
	<i>Total All Clients</i>		<i>105,500</i>
FY 2016	Nursing Home	399	33,485
	Licensed Assisted Living	4,014	54,256
	Family Care/PACE/ Partnership		21,436
	<i>Total All Clients</i>		<i>109,177</i>
FY 2017	Nursing Home	387	32,314
	Licensed Assisted Living	4,067	55,955
	Family Care/PACE/ Partnership		22,303
	<i>Total All Clients</i>		<i>110,572</i>

¹ Source: Department of Health Services; Bureau of Nursing Home Resident Care

² Data does not include 1-2 bed AFH's, which are certified by either counties or MCO's. Residents are typically Family Care members so would be included in the Total count for Family Care/PACE/Partnership.

³ Enrollment data is provided for members age 65 and older; BOALTC Ombudsmen serve persons age 60 and older.

Ombudsman Program Most Frequent Complaints 2014 - 2016

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.

Most frequent complaints for 2014 - 2016 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.
- Discharge planning process, involuntary discharge process; discharge required due to failed rate negotiation.
- Failure to respect resident/tenant choice in care and treatment.
- Failure to follow the care plan/individualized service plan; care plan does not represent member's stated goals.
- Failure to respond to requests for assistance.

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 2016	87 Immediate Jeopardy citations
CY 2015	83 Immediate Jeopardy citations
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

** Source: Department of Health Services; Bureau of Nursing Home Resident Care*

Volunteer Ombudsman Program

The Volunteer Ombudsman Program, under the supervision of the Volunteer Program Supervisor, 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 through caregiver background check, 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 2016 is \$24.14. The estimated hourly rate in the State of Wisconsin is \$23.06 for 2016. Using the number of volunteer hours donated, the estimated value of these advocates to the state of Wisconsin in 2016 would be approximately \$119,220.

The Volunteer Ombudsmen in this program are invaluable advocates providing facility residents with increased access to agency services through unannounced routine visits to their assigned nursing home(s). The top items of concern and resolution for residents include: call lights being within reach, call lights not being answered in a timely manner, not being provided with adequate food and beverage choices, food quality and residents being able to speak on their own behalf without fear of retaliation.

The Volunteer Ombudsman Program is diligent in promoting resident rights so residents feel heard, safe and worthy.

Volunteer Ombudsmen Data:	2015	2016
Number of Volunteer Ombudsmen (VO)	101	98
Number of nursing homes with VO	93	94
Resident council meetings attended	221	219
Number of nursing home visits made	2,657	2,535
Number of hours donated	5,634	5,170

Medigap Helpline & Medigap Part D & Prescription Drug Helpline

The Medigap Helpline, delivering services under the federal SHIP (State health Insurance Assistance Program), can help beneficiaries with questions about health insurance: including Medicare, Medicare supplements, Medicare Advantage Plans, Long Term Care Insurance, and other health care options available to Medicare beneficiaries. The Medigap Helpline Programs also includes the Medigap Part D and Prescription Drug Helpline for beneficiaries 60 years of age and over.

The Medigap Helpline Programs 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 Program's counselors do not endorse nor expresses any opinion as to the worth or value of any policy or insurance product. The programs are funded through grants from the Administration for Community Living (ACL) and the Wisconsin Office of the Commissioner of Insurance (OCI).

The Medigap Helpline Programs are one-on-one telephone counseling services; staffed with one Medigap Helpline Services Supervisor, one Lead Medigap Counselor, four full time Medigap Counselors, two full time Medigap Part D and Prescription Drug Counselors, one full time intake advocate, and one part time Management Information Systems person. Counselors are required to maintain an insurance license for Life and Health Insurance in the State of Wisconsin. The programs utilize the services of numerous volunteers throughout the year to assist with various office duties.

The toll-free telephone number for the Medigap Helpline, **1-800-242-1060**, is a nationwide number and is listed on the back of the Centers for Medicare & Medicaid Services (CMS) publication Medicare & You (Wisconsin version). This program is accessible to Wisconsin beneficiaries and family members even while they may be out of the State of Wisconsin. The toll-free telephone number for the Medigap Part D and Prescription Drug Helpline, **1-855-677-2783** (*1-855-67-PARTD*), is accessible for Medicare beneficiaries, 60 years of age and over, who specifically need assistance with understanding and selecting suitable prescription coverage.

The Medigap Helpline Programs' counselors also provide outreach to Wisconsin residents and professionals. Counselors give presentations explaining how Medicare coordinates with other insurance options as well as responding to requests relating to specific topics. Counselors also distribute resource materials on healthcare coverage options at informational booths at health fairs and senior centers throughout the state.

Printed materials describing the programs, Medicare, related insurance options, and prescription resources are available to consumers upon request. The Medigap Helpline Programs' counselors also utilize 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
- Private long term care insurance shoppers
- Consumers transitioning from Marketplace to Medicare

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

- Elder/Disability Benefit Specialists
- Social workers/case managers
- Legislators
- Non-Medicare individuals without health insurance
- Medical/healthcare providers

The Medigap Helpline Services continues to work with beneficiaries attempting to maneuver through the Medicare and health insurance arena trying to find the optimal coverage that fits their needs. With both helplines serving beneficiaries, the scope of information presented to callers gives them an opportunity to be more aware and able to select the right options for their particular situation. Beneficiary contacts reported to CMS within the Medigap Helpline Services totaled 14,776 in the calendar year 2016 compared to 13,684 in 2015. Counselors are seeing more complexity with the calls to the helplines. We have had growth in our volunteer program which assists the Part D & Prescription Drug Benefits Helpline programs. The volunteer program, which includes volunteers from the UW Pharmacy school program and retired persons, had 112 volunteers this past reporting period (2016) who completed 1,804 hours of service providing prescription drug plan finder assistance, data entry, and clerical support for both programs. This compares with 79 volunteers with 1,589 hours of service for reporting year 2015.

The agency's volume of calls continues to grow as the population ages and more persons become eligible for Medicare. The need to review both Medicare Advantage and Prescription Drug plans every year also adds to the volume of calls.

	2016	2015	2014	2013
CMS Reported Calls	14,776	13,684	14,199	13,426
Toll-Free LIVE calls:	4,822	2,607	3,525	4,892
Total Hours provided to callers:	8,113.80	6,961.27	6,423.66	6,560.66
(Avg. Minute per call)	32.94	30.52	27.14	29.32
Volunteers:	112	79	45	26
Volunteer Hours:	1,804.0	1,589.0	1,542.0	1,079.50
Outreach Events:	95	81	71	88
Outreach attendees:	9,625	7,399	12,420	9,453

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

Top Issues which prompted calls from Beneficiaries and advocates include:

- Starting Medicare and understanding the difference in coverage options
- Loss of Employer sponsored coverage: Active employer, retiree group, Cobra/continuation
- Prescription coverage needs: drugs not on formulary, gap of coverage costs
- Marketplace transition issues into Medicare
- Low income programs and coordination with Medicare

Medigap Counselors do refer callers to other resources when appropriate so the beneficiary may obtain further assistance/information related to their situation. Referrals continue to be steady due to the Medigap Helpline having the main SHIP (State Health Insurance Program) number to which Medicare makes their referrals. Having a close relationship with other advocacy groups and partners allows a good support for the 1.1 million Medicare beneficiaries in the state. Referrals are also made to the Elder or Disability Benefit Specialists in each county for more one-on-one assistance in regard to Medicaid.

The Medigap Helplines do maintain a variety of publications and brochures which are available for distribution to beneficiaries. This past year 3,970 publication requests were received from consumers and other agencies alike.

Trends

Confusion for Medicare beneficiary regarding the transition from either Low Income programs (Badgercare Plus) or the Health Insurance Marketplace to Medicare has become an issue many persons call the helpline for assistance with. Misinformation regarding enrollment periods and eligibility have the potential to affect beneficiaries in their coverage with Medicare. A special enrollment period was developed by CMS to allow those persons the ability to enroll into Medicare Part B and eliminate the penalty if their actions were a result of this miss-information surrounding the Marketplace. Counselors are aware of this and will help educate beneficiaries of this opportunity.

Another area of confusion for the Medicare beneficiary about the differences between purchasing a Medicare supplemental policy or enrolling into a Medicare Advantage plan is a common theme amongst many callers. Depending upon an individual's health and financial status will indicate which type of coverage would be more suitable. Counselors have the task of educating consumers over their coverage options now and as they look into the future.

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: (800) 815-0015

Medigap Helpline Program: (800) 242-1060

Medigap Part D & Prescription Drug Helpline: (855) 677-2783

Fax: (608) 246-7001

Email: BOALTC@Wisconsin.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.