

Board on Aging and Long Term Care



2023-25 Biennial Report
October 10, 2025



Table of Contents

Advocacy: An Investment for the Future.....	1
Description of the Board on Aging and Long Term Care	2
Programs, Goals, Objectives and Activities.....	4
Performance Measures.....	6
Members of the Board During Biennium.....	8
Part-Time Employment and Flexible Schedules	10
Long Term Care Ombudsman Program	11
Program Scope	11
Who We Serve	12
Ombudsman Role	13
Volunteer Ombudsman Program.....	16
Program Scope	16
Inclusa Foundation Grant.....	16
Volunteer Role	16
Medigap Helpline Program	18
Program Scope	18
Program Trends.....	21
Contact Information for the State of Wisconsin Board on Aging and Long Term Care	23



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Jackie Gordon
Abigail Lowery
Dr. Valerie A. Palarski
Dr. Dale B. Taylor

EXECUTIVE DIRECTOR
Jessica L. Trudell

STATE OMBUDSMAN
Jenna Helminski Juve

October 10, 2025

Governor Tony Evers
Office of the Governor
115 East, State Capitol
Madison, WI 53702

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

Dear Governor Evers and Members of the Legislature:

On behalf of the Wisconsin Board on Aging and Long Term Care (BOALTC), I am pleased to submit the 2023-25 biennial report, highlighting our progress and impact in advocating for the health, safety and well-being of older adult long-term care residents and Medicare beneficiaries in Wisconsin.

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 and Medicare beneficiaries, to inform those consumers of their rights, and to educate the public at large about health care systems, Medicare, and long-term care. To carry out this mandate, the Board operates three important programs:

- Long Term Care Ombudsman Program
- Volunteer Ombudsman Program
- Medigap Helpline & Part D Helpline Program

As long-term care and insurance systems continue to grow in complexity and the older adult population of the state ages, Wisconsin residents depend on BOALTC's services now more than ever. BOALTC's programs are relied upon to provide skilled and trained advocates, accurate information, expert navigation of complicated health insurance options and investigation of serious long-term care complaints.

The Board on Aging and Long Term Care looks forward to working with your offices to advance long-term care services and supports for the state's older adult population.

Sincerely,

Jessica L. Trudell
Executive Director

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 and Medicare beneficiaries, to inform those consumers of their rights, and to educate the public at large about health care systems, Medicare, and long-term care.

Vision

The Board on Aging and Long Term Care is the premier resource for information and advocacy for our client population and will continue as an integral part of the ever-changing system for long-term care delivery in Wisconsin. The Board will increase its visibility and accessibility by expanding its role and recognition as an advocacy leader.

Values

The 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.

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 operates three important consumer programs: the Long Term Care Ombudsman Program, the Volunteer Ombudsman Program, and the Medigap Helpline & Part D Helpline.

The Board on Aging and Long Term Care is enabled by Wisconsin Statute at § 16.009. 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 Part 1321 and 45 CFR Part 1324. BOALTC is given policy direction and oversight by a seven-member public board, appointed by the Governor with the advice and consent of the State Senate under Wisconsin Statute at § 15.105(10). Operational control is vested in an Executive Director, currently Jessica L. Trudell, who is supported by a management team including a State Ombudsman, Counsel to the Board, an Office Manager and program supervisors.

The **Long Term Care Ombudsman Program** (LTCOP) is a statewide advocacy program for people age 60 and older who live in nursing homes, assisted living facilities, or participate in publicly funded long-term care programs (Family Care, Partnership, PACE, IRIS). Ombudsman Representatives are advocates who protect and promote the rights and well-being of long-term care consumers by responding to and resolving complaints related to actions, inactions, or decisions that adversely affect health, safety, welfare, or rights, and by identifying opportunities to improve quality of care and quality of life. Ombudsmen provide education on resident rights, good care practices, and available resources, ensuring consumers, families, and providers have the information they need to support person-centered care.

The **Volunteer Ombudsman Program** recruits, screens, trains, and supervises volunteers who make unannounced weekly visits to their assigned long-term care community. Volunteers are supported by their regional Volunteer Coordinator and the Volunteer Services Supervisor, and interface with Regional Ombudsmen when complaints require a formal investigation. Hoping to identify resident concerns before they become complaints, volunteers ask for consent to share any concerns with the long-term care community leadership and also provide information about their visits with the Volunteer Coordinator and Ombudsman. Volunteers submit reports to their Volunteer Coordinators and forward complaints to the Regional Ombudsman. Until 2024, volunteers served residents of nursing homes only. Following a successful pilot, volunteers now serve residents in both nursing home and assisted living communities.

The **Medigap Helpline Program** provides free telephone counseling services, public education, and training for professionals regarding Medicare-related insurance and long-term care insurance for individuals in Wisconsin. The Medigap Helpline's licensed insurance counselors assist individuals across Wisconsin navigate the increasingly complex choices of Medicare-related insurance. To provide this assistance and information to individuals in Wisconsin, Medigap Helpline staff develop a strong understanding of available Medicare insurance options and an understanding of how Medicare insurance coordinates with other insurance options like employer coverage, retiree coverage, Veterans benefits, Health Insurance Marketplace, and Medicaid programs. In providing their services, the Medigap Helpline operates as a part of the Wisconsin State Health Insurance Assistance Program (SHIP).

Programs, Goals, Objectives and Activities

Program 1: Identifying and Addressing the Needs of Older and Disabled Adults and Medicare Beneficiaries

Goal: To protect the rights and promote empowerment, through systems change and self-advocacy, of persons aged 60 and older who are recipients of facility-based, managed long-term care or self-directed supports services.

Objective/Activity: Identify and investigate concerns and complaints received via the BOALTC intake telephone line, the Ombudsman Program online complaint system and other methods of registering a complaint.

Objective/Activity: Educate and empower residents, tenants, members, participants and others regarding rights, ombudsman function and provider responsibilities.

Objective/Activity: Educate current and new providers regarding ombudsman authority, role and function and provider responsibilities related to resident, tenant, member, and participant rights.

Objective/Activity: Review, develop and disseminate informational and educational materials that are inclusive and ensure consumers are represented and informed.

Goal: The board's Volunteer Ombudsman Program will encourage resident participation in scheduled resident council meetings in skilled nursing facilities in the program's designated service area.

Objective/Activity: Volunteers will encourage and empower resident participation by inviting residents individually to attend the resident council meetings. Volunteers will attend resident council meetings with the permission or invitation of the resident council president. A volunteer's role is to advocate for the residents' individual rights and to share concerns with the consent of the residents.

Goal: Improve public education and outreach to consumers on issues related to Medicare, Medicare Supplemental insurance, Medicare Advantage plans, Medicare Part D (prescription drug), and transitional issues from Marketplace or Medicaid programs to Medicare and related forms of insurance.

Objective/Activity: The board will educate and empower the public via 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 statewide outreach efforts in the form of in-person contacts with local groups of Medicare-eligible individuals are being used to advance this goal.

Goal: Utilize the Medigap Volunteer Program to improve the ability of the program to provide services to more Medicare beneficiaries.

Objective/Activity: Deploy effectively trained and supervised volunteers to assist with everyday office duties and finding the appropriate plans for Medicare Part D, which will allow the Medigap Helpline and Medigap Part D staff responsible for increasingly complex Medicare programs to focus on providing accurate and timely counseling.

Objective/Activity: Train volunteers to perform referral calls to allow additional time for counselors to assist callers with Medicare issues.

Goal: Refine, simplify, expand, and publicize the available information services provided by the board.

Objective/Activity: The board's website will include up-to-date information on the agency's programs issues of importance to persons in need of long-term care services or insurance for older adults and disabled individuals.

Performance Measures

2023 and 2024 Goals and Actuals

Prog. No.	Performance Measure	Goal 2023	Actual 2023	Goal 2024	Actual 2024
1.	Number of complaints investigated by ombudsmen on behalf of long-term care consumers	3,275	2,091	3,285	2,838
1.	Number of education programs given to long-term care consumers by ombudsman program staff	120	36	125	119
1.	Number of education programs given to long-term care providers by ombudsman program staff	85	56	110	98
1.	Number of consultations given to long-term care providers by ombudsman program staff	150	2,626	155	1,874
1.	Number of times volunteer ombudsmen and volunteer coordinators attend resident councils with facility visits	225	102	230	251
1.	Number of outreach presentations by Medigap program staff	80	36	85	64
1.	Number of Medigap program volunteer hours provided	1,200	104	1,250	153
1.	Number of plan finders run by Medigap Helpline staff for beneficiaries	650	665	675	359
1.	Number of closed calls by Medigap Helpline	10,000	8,829	10,200	8,982
1.	Number of hits on the board's website ¹	40,000	14,570	45,000	24,901

Note: Based on state fiscal year.

Note: Some actuals were less than projected due to continued impacts of COVID-19, including program staffing.

¹ In 2022, BOALTC transitioned to a new traffic analytics platform (Google) which differs from the previous platform (Splunk). The current metrics align with typical benchmarks, indicating the previous numbers may have reflected indexing bots and internal traffic.

2025, 2026 and 2027 Goals

Prog. No.	Performance Measure	Goal 2025 ²	Goal 2026	Goal 2027
1.	Number of complaints investigated by ombudsmen on behalf of long-term care consumers	2,600	2,650	2,700
1.	Number of education programs given to long-term care consumers by ombudsman program staff	120	120	120
1.	Number of education programs given to long-term care providers by ombudsman program staff	100	100	100
1.	Number of consultations given to long-term care providers by ombudsman program staff	1,700	1,750	1,775
1.	Number of resident council visits made by volunteer program	175	200	225
1.	Number of facility visits made by volunteer program	1,000	1,100	1,200
1.	Number of outreach events by Medigap program staff	85	90	95
1.	Number of Medigap program volunteer hours provided ³	200	250	300
1.	Number of Medicare beneficiaries helped with prescription drug coverage ⁴	675	700	725
1.	Number of closed calls by Medigap Helpline	10,200	10,400	10,600
1.	Minutes of insurance counseling by Medigap Helpline ⁵	325,000	350,000	375,000

Note: Based on state fiscal year.

² Goals have been revised for the 2025-27 biennium.

³ Goal has been reduced due to program staffing changes and challenges recruiting volunteers, resulting in part from changes to UW pharmacy school timelines for volunteer hours and program needs.

⁴ Reflects updated language to explain Medigap Part D Helpline counseling for prescription drug coverage, including PlanFinder analysis.

⁵ Reflects a new objective and corresponding performance measure for the 2025-27 biennium.

Members of the Board During Biennium		
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<u>Name</u>	<u>Home City</u>	<u>Status as of 10/10/2025</u>
Dr. Marianne Bloch	Madison	Current
Mary Bouche	Green Bay	Current
Jackie Gordon	New Richmond	Current
Abigail Lowery	DeForest	Current
Tanya Meyer	Lac du Flambeau	Resigned 7/16/2025
Dr. Valerie Palarski	Aniwa	Current
Dr. Dale Taylor	Eau Claire	Current

Staff Members

Executive Director	Jessica L. Trudell
State Ombudsman	Jenna Helminski Juve
Counsel to the Board	Kristen Johnson
Central Office Manager	Jennifer Novey
Ombudsman Supervisor	Rebecca Mulhern
Ombudsman Asst. Supervisor	Rachel Selking
1 Lead Facility Ombudsman	Joan Schmitz
1 Lead Managed Care Ombudsman	Kelly Gochenaur
1 Relocation Lead Ombudsman	Nancy Studt
1 Lead IRIS Ombudsman	Kayla Smith
1 IRIS Ombudsman	
17 Regional Ombudsmen	
1 Veterans Ombudsman Specialist	
1 Ombudsman Intake Specialist	
Volunteer Services Supervisor	Liza Morrow
5 Volunteer Coordinators	
Medigap Supervisor	Nick Lutes
1 Lead Medigap Counselor	Alyssa Kulpa
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 in the biennial report on the progress of the agency in implementing employment practices which provide flexibility in scheduling and create permanent part-time employment opportunities.

BOALTC strives to provide a positive work environment for all staff members and to promote the strongest work-life balance. BOALTC staff represent a variety of classifications, including exempt and non-exempt, all of whom benefit from flexible scheduling practices.

Exempt, professional staff have autonomy over their day-to-day scheduling and are encouraged to meet with consumers at times and locations that work best for the consumer, while operating within core business hours when possible. Flexing is permitted within each two-week pay period with reasonable expectations for communication with their supervisor regarding deviations from their normal work schedule. Non-exempt, hourly staff also enjoy flexibility, with the ability to set their calendars and take breaks and lunches at times that suit them, though with less deviation from the core workday. At times, outreach events, public education, or trainings and seminars occur outside of normal business hours. In these situations, under the direction of their program supervisor, staff have the flexibility to choose an alternative arrival and departure time from work.

In June of 2021, BOALTC implemented an Alternative Work Patterns policy which applies to all agency staff. This allows staff to request an alternative structuring of work hours with supervisor approval, with core hours of heavier customer contact established. This policy was updated in May 2024 in coordination with the Department of Administration. BOALTC receives human resources services from DOA HR Region 1. BOALTC utilizes DOA remote work policies and guidelines. Employees who are eligible and interested in remote work may request it. Remote work agreements are reviewed by supervisors on an annual basis.

These practices support work-life balance, which in turn enhances performance and customer satisfaction by allowing the program to adapt to fluctuating workloads and diverse consumer needs.

Long Term Care Ombudsman Program

Program Scope

Wisconsin's Long Term Care Ombudsman Program (LTCOP) is a statewide advocacy program for people age 60 and older who live in nursing homes, assisted living facilities, or participate in publicly funded long-term care programs.

Our mission is to protect and promote the rights and well-being of long-term care consumers. We accomplish this largely through advocacy and education.

The LTCOP is federally authorized under the Older Americans Act and governed by the federal LTCOP Rule which establishes the program's functions, responsibilities, and person-centered advocacy framework. Ombudsmen are certified through a tiered program that includes an initial training program of roughly 500 hours, and 40 hours of continuing education each year.

The State Ombudsman and Representatives of the Office carry out these responsibilities by:

- Responding to and resolving complaints,
- Advocating for changes to improve quality of care and quality of life,
- Representing the interests of consumers before governmental agencies,
- Educating consumers, their families, and providers about rights, good care practices, and available resources, and
- Ensuring that consumers have regular, timely, and confidential access to the Ombudsman Program.

The LTCOP is unique in that it is a consumer-directed program. Our "client" is always the long-term care consumer, no matter where the complaint originates. We focus on elevating the consumer's voice, working toward person-centered solutions that reflect their wishes, and empowering individuals to self-advocate to the fullest extent possible.

Our services are also unique in that we provide both individual and systems advocacy. At the individual level, we work one-on-one to resolve concerns and uphold rights. At the systems level, we leverage those individual outcomes and insights to identify trends, influence policy, and promote a higher quality, more responsive long-term care system.

Who We Serve

Wisconsin's aging population continues to grow, with individuals aged 60 and older now representing approximately 25% of the state's total population.⁶ About 9% of this group is directly served or eligible to be served by the Long Term Care Ombudsman Program (LTCOP):⁷

As of September 2025, the Ombudsman Program serves an estimated **129,000 potential clients statewide**, including:

- **25,278** living in nursing homes and skilled nursing facilities,⁸
- **61,094** residing in residential care or assisted living facilities,⁹
- **33,175** enrolled in Family Care/Partnership/PACE,¹⁰ and
- **9,900** enrolled in IRIS (Include, Respect, I Self-Direct).¹¹

The average **Ombudsman-to-client ratio** in Wisconsin is **1:5,609**.¹² By comparison, the nationally recommended Ombudsman-to-client ratio is 1:2,000.¹³ Wisconsin is already operating below recommended staffing levels, and with the anticipated growth in the older adult population, the LTCOP's capacity to meet demand will be further strained.

It is important to note that these ratios reflect only the potential client base. In practice, Ombudsman Representatives also provide information, assistance, and education to family members, legal representatives, service providers, governmental partners, and community organizations, extending the program's reach well beyond direct clients.

⁶ Review of *Explore Census Data*. n.d. Data.census.gov. US Census Bureau. Accessed September 26, 2025.

<https://data.census.gov/profile/Wisconsin?g=040XX00US55>.

⁷ The percentage was calculated by dividing the estimated service population (129k) by the population of individuals age 60 and older obtained from the US Census Bureau, then rounding to the nearest whole number.

⁸ Total number of licensed beds. Directory of Licensed Wisconsin Nursing Homes. (2025). In *Wisconsin Department of Health Services*. Division of Quality Assurance. Accessed September 26, 2025.

<https://www.dhs.wisconsin.gov/guide/nhdir.pdf>

⁹ Aggregate beds count for CBRFs, RCACs, and 3-4 bed AFHs. Public Directory for Facility Type. (2025). In *Wisconsin Department of Health Services*. Division of Quality Assurance. Accessed September 26, 2025.

<https://www.dhs.wisconsin.gov/guide/assisted-living.htm>

¹⁰ Total enrollments individuals age 60 and older as of July 2025 obtained from the Wisconsin Division of Medicaid Services, Bureau of Programs and Policy.

¹¹ Total enrollments individuals age 60 and older as of July 2025 obtained from the Wisconsin Division of Medicaid Services, Bureau of Programs and Policy.

¹² The ratio was calculated by dividing the estimated service population (129k) by the number of Ombudsman Representatives including leads and specialists (23), then rounding to the nearest whole number.

¹³ Institute of Medicine. (1995). *Real People, Real Problems: An Evaluation of the Long-Term Care Ombudsman Programs of the Older Americans Act*. National Academy of Sciences.

Ombudsman Role

The Ombudsman is, first and foremost, an advocate. Advocacy means amplifying the voices of long-term care consumers – by speaking directly with them, advocating on their behalf when requested, or empowering them to strengthen their own voice. Advocacy is the core of our work, aimed at protecting and promoting the rights and well-being of long-term care consumers.

Our charge includes both individual and systems advocacy:

- *Individual advocacy* may involve working one-on-one with a nursing home resident to resolve concerns about bathing services, ensuring dignity and privacy are respected.
- *Systems advocacy* includes reviewing proposed rule changes for licensed care settings to ensure they remain person-centered and aligned with federal regulatory standards.

In addition to advocacy, Ombudsman Representatives have other key functions:

- **Complaint identification, investigation, and resolution:** This process is time-intensive involving phone calls, emails, in-person visits, records reviews, and multiple contacts with the client, complainant, and collateral sources of information. Complaint resolution may be:
 - *Informal* – facilitating conversations, mediating concerns, and negotiating solutions, or
 - *Formal* – providing assistance or direct non-attorney representation at state fair hearings.

In every case, Ombudsman Representatives maintain a person-centered approach focused on honoring the consumer's wishes.

- **Education and Information:** The Ombudsman Program provides general information about long-term care services – what is available and how to access them – as well as education on resident rights, regulations, and best care practices. Ombudsmen serve as subject matter experts not only for consumers and their families or legal representatives, but also for service providers, governmental agencies, and community partners. The program also provides technical support to facilities in developing family and resident councils and helps connect individuals to these groups.

Across all these functions, the Ombudsman's impact is twofold: securing outcomes that enhance both quality of life and care for individual consumers and leveraging those experiences to inform broader systems change that strengthens Wisconsin's long-term care network.

Most Frequent Complaints and Trends

Over the 2023-2025 biennium, the Ombudsman Program investigated a total of 5,758 complaints related to long-term care settings and programs:

- 2,838 in SFY 2024

- 2,920 in SFY 2025

The top ten complaint issues were:

1. Managed care
2. Discharge or eviction
3. Care planning
4. Respond to requests for assistance¹⁴
5. Respond to complaints¹⁵
6. Dignity and respect
7. Medications
8. Other rights and preferences¹⁶
9. Live in less restrictive setting
10. Food services

These rankings have remained consistent over the past three fiscal years, with slight variation. The Ombudsman Program tracks complaints according to federal National Ombudsman Reporting System (NORS) standards, which groups issues into domains such as care, autonomy and rights, discharge/eviction, financial concerns, and outside agencies. Program data is reported to the Administration for Community Living (ACL) annually.

Top complaint domains:

- Care – 25% of all complaints
- Autonomy, Choice, and Rights – 18% of all complaints

Setting-specific trends:

- The largest share of complaints originated in nursing homes, followed by Community-Based Residential Facilities (CBRFs).
- Managed care complaints show a steady rise: 9% of total complaints in SFY 2023, 12% in SFY 2024, and 13% in SFY 2025. While there is overlap between facility-based clients who are also managed care members, many managed care complaints come from consumers living in private homes or other community-based settings.

¹⁴ Defined as facility staff failures to respond to resident requests such as promptly answering call lights.

¹⁵ Defined as facility staff ignoring a complaint or when a facility lacks a grievance process.

¹⁶ Defined as concerns related to the deprivation of personal liberties, restrictions on freedom of choice, or violations of rights to vote or free speech, etc.

These complaint patterns highlight both persistent challenges in areas such as care planning and grievance processes, and emerging concerns with managed care. They underscore the need for continued monitoring and advocacy to ensure that Wisconsin's long-term care system remains person-centered, responsive, and accountable.

Systems Advocacy

The Ombudsman Program's systems advocacy complements individual casework by addressing the underlying policies and practice that affect long-term consumers statewide. Much of this work is shaped by the complaint trends we observe, ensuring that the consumer voice is represented in regulatory and policy decisions.

During the 2023-2025 biennium, key areas of system advocacy included:

- **Managed Care and IRIS Oversight** – submitting formal comments on Family Care, IRIS, and managed care contract provisions to address the growing share of program complaints related to managed care and self-directed services.
- **Strengthening Advocacy in Assisted Living** – expanding our presence in assisted living settings (CBRFs being the second most common origin of complaints) and partnering with stakeholders such as the Division of Quality Assurance, Bureau of Assisted Living to improve the facility closure and relocation process for residents.
- **Improving Quality of Care** – developing guidance on the use of electronic monitoring and recording devices, ensuring that privacy and resident consent remain at the forefront and that decisions about electronic monitoring are integrated into person-centered care planning.

Through these efforts, the Ombudsman Program ensures that what we hear directly from consumers translates into meaningful, practical improvements in Wisconsin's long-term care system.

Volunteer Ombudsman Program

Program Scope

The Volunteer Ombudsman Program is a part of the Long Term Care Ombudsman Program of BOALTC, with Volunteer Coordinators and volunteers serving as Representatives of the Office of the State Long Term Care Ombudsman. Volunteers serve under the same statutory authority as Ombudsmen and have the same unrestricted access to long-term care residents. The Volunteer Ombudsman Program, under the supervision of the Volunteer Services Supervisor, strengthens and coordinates with the Ombudsman Program to serve residents living in Wisconsin long-term care communities.

Volunteers are resident-centered, unpaid community advocates comprised of a diverse group of ages, professions, and geographical locations. All volunteers share a common goal of serving and advocating for long-term care residents. The current longest serving volunteer started with the Volunteer Program in 2008. Volunteers are recruited, trained, and supervised by regional Volunteer Coordinators who also serve as the liaison between the volunteer and the Regional Ombudsman. The Volunteer Program currently operates in 38 counties in Wisconsin.

Recognizing that many of the complaints received from residents of nursing homes also exist for residents of assisted living communities, the Volunteer Ombudsman Program fully expanded volunteer advocacy services into assisted living communities in 2024. This expansion follows a successful two-year pilot program in four counties (Dodge, Fond du Lac, Winnebago, Outagamie.)

Inclusa Foundation Grant

With the goal of further improving advocacy services in assisted living communities, the Volunteer Ombudsman Program was awarded a 2-year grant through the Inclusa Foundation to continue expansion into assisted living in the counties of Chippewa, Clark and Eau Claire. This grant funds a pilot position, the Resident Advocacy Specialist, which combines the work of a Volunteer Coordinator and an entry level Regional Ombudsman to improve access to services and education for residents. This position will recruit, train, and supervise volunteers while also engaging in entry level resident complaint resolution, which will support the Regional Ombudsman to focus on more complex case investigations. This pilot program will run through April 2027.

Volunteer Role

Upon application to the Volunteer Ombudsman Program, a background check, conflict of interest screen and initial training are completed. Volunteers are then assigned to a specific nursing home or

assisted living facility within the communities where they live. Volunteers commit to visiting their assigned community, typically weekly, spending about two hours visiting and talking with residents about their experiences, expectations, and wishes. With resident consent, volunteers share their conversations with the facility's leadership and check back the following week to ensure the concern has been resolved to the resident's satisfaction. More challenging complaints are forwarded to the Regional Ombudsman, who may find the complaint in need of an in-depth investigation and resolution. With the Volunteer Coordinator serving as liaison, together the volunteer and Regional Ombudsman support the resident throughout the process of resolution. The volunteer provides essential and ongoing follow-up to ensure the problem has been resolved and the resident has not experienced any type of retaliation for bringing forth the complaint.

As long-term care homes attempt to coordinate care and staffing under the current staffing shortages, volunteers often note significant changes in their assigned community from week to week. One volunteer shared with their Coordinator that residents had complained of routinely not having enough food at meals. Residents reported serving sizes to be small, leaving them feeling hungry after meals. When investigated by the Regional Ombudsman, it was learned that facility staff were eating prior to serving the residents, reducing the amount of food available. The Ombudsman worked with the building administration to rectify this concern on behalf of the residents.

Volunteers report a deep sense of fulfillment derived from the relationships they build with residents, staff, and their colleagues within the Ombudsman Program. Volunteers are often a source of support and stability during this time of continuous change in long-term care settings. Residents often call the Ombudsman Program's toll-free line and ask for their volunteer by name if they've missed a visit. With volunteers able to visit residents weekly, the ability for the volunteer and Regional Ombudsman to work together to prevent retaliation or any unintended consequence from reporting complaints creates a better chance of lasting resolution for resident complaints.

Volunteer Ombudsman Data	SFY 2024	SFY 2025
Volunteer Ombudsmen	62	93
Long-Term Care Communities with a Volunteer	72	108
Resident Council Meetings Attended	235	341
Long Term Care Facility Visits Made	1357	2199
Hours Donated	3208	4997

Medigap Helpline Program

Program Scope

The Medigap Helpline and Medigap Part D & Prescription Drug Helplines are statutorily authorized and provide free telephone counseling services, public education, and training for professionals regarding Medicare-related insurance and long-term care insurance for individuals in Wisconsin. These programs serve Wisconsin residents of all ages who are looking for assistance with their Medicare and long-term care related insurance options and questions. The Medigap Part D and Prescription Drug Helpline has counselors who specialize in providing information on unique topics related to prescription drug coverage for Medicare beneficiaries.

The Medigap Helpline is part of the Wisconsin State Health Insurance Assistance Program (SHIP). SHIP provides unbiased help to Medicare beneficiaries, their families, and caregivers in Wisconsin. These programs are funded primarily through grants from the Administration for Community Living (ACL) at the Department of Health and Human Services, the Wisconsin Office of the Commissioner of Insurance, and Wisconsin SeniorCare (State Pharmaceutical Assistance Program).

The Medigap Helpline Programs' counselors (Medigap Insurance Specialists) provide counseling on available Medicare and Long Term Care related insurance products without endorsement of specific insurers or types of insurance plans or policies. The counseling services intend to provide insurance consumers in Wisconsin with the necessary information to make an informed insurance decision on their Medicare or long-term care insurance coverage options.

The Medigap Helpline primarily provides counseling services via telephone. The Medigap Helpline Program is 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, a limited-term intake advocate during Medicare's Annual Enrollment Period (AEP), and one part-time Management Information Systems staff. Counselors are required to maintain an insurance license for life and health insurance in the State of Wisconsin. The Medigap Helpline also actively recruits and utilizes the services of volunteers to assist with program services, including Medicare Part D plan finders, outreach to the public, and public education to Medicare beneficiaries.

The Medigap Helpline Program staff also conduct outreach and public education on Medicare topics, available agency services, and additional resources available for Medicare beneficiaries in Wisconsin. These outreach and public education efforts have traditionally included in-person presentations, informational booths, professional conferences, and events at senior resource centers. However,

recently (within SFY 2025), the Medigap Helpline has expanded to other types of outreach events and public education to enhance awareness of the program's services to individuals across Wisconsin. Some examples of these large-scale and professionally targeted outreach efforts have included local radio appearances, local television interviews, virtual and hybrid presentations, and targeting key professional organizations to facilitate enhanced awareness of program services to professionals who are regularly working with Medicare beneficiaries and their families. This innovative approach to more efficiently and effectively conduct the Medigap Helpline's public education and outreach goals has resulted in significant increases in individuals reached via outreach activities in the data table below for SFY 2025 compared to SFY 2024.

The Medigap Helpline Programs' improved and targeted outreach efforts in SFY 2025 resulted in an 8% increase in contacts to the program during the second half of FY2025 compared to the same period in SFY 2024. Despite this increase, overall contacts remained relatively steady in FY2025 compared to SFY 2024. This stabilization can be attributed to significant program staff turnover, primarily due to program staff retirements, within late SFY 2024 and early SFY 2025. This staffing turnover included changes in program leadership, with a new Medigap Helpline Services Supervisor starting in July 2024. At the height of program staffing turnover, the Medigap Helpline program had 4 vacant FTE positions of 9 total FTE staff. While this staffing turnover presented significant programmatic challenges, it also enabled the Medigap Program to quickly and effectively implement programmatic changes to improve processes and promote efficiency. These improvements in processes, including the intake of incoming program contacts, has resulted in the average time spent per contact remaining steady at 41 minutes, despite call topics remaining and becoming increasingly complex.

	2024	2025
Medigap Helpline Contacts Received:	8,986	8,917
Medigap Helpline Contacts Answered Live (Via Toll Free Helpline):	1,331	691
Beneficiary Counseling Assessments Completed (Beneficiaries Counseled):	9,032	8,327
Total Hours of Counseling Services Provided:	6,275	5,778
Average Time Spent per Contact (Minutes):	41 min	41 min
Outreach Activities (Events & Media):	62	71
Individuals Reached via Outreach Activities:	9,444	71,517

Note: All data reflects state fiscal year.

Medigap counselors frequently provide information, education, and counseling on:

- Medicare
 - Enrollment
 - Part A & Part B
 - Original Medicare Benefits
- Medicare Supplements (Medigap)
 - Traditional vs Network policies
 - Guarantee Issue Provisions
 - Pre-Existing conditions
 - Premium issues
 - Wisconsin Mandated Benefits
- Medicare Advantage Plans
 - Plan Benefits
 - Out of Pocket Maximum
 - Enrollment Periods
 - Medicare Advantage Plan Trial Periods
 - Prescription Coverage
 - Extra or Supplemental Plan Benefits
- Medicaid Programs
 - Badgercare Plus
 - Medicare Savings Programs
 - Medical Assistance Purchase Program (MAPP)
 - Elder, Blind, Disabled Medicaid Programs
- Employer Group Health Insurance
 - Active Employer coverage
 - Retiree Group Coverage
 - Cobra/Wisconsin Continuation
- Health Insurance Marketplace
 - Medicare and Marketplace Coordination
- Prescription Coverage Options
 - Medicare Prescription Part D
 - Wisconsin SeniorCare
 - Low Income Subsidy Extra Help Program
 - Other Creditable Drug coverage
 - Pharmaceutical Assistance Programs
- Long Term Care Insurance
 - Policy Renewals
 - Suitability of Insurance Products

Top Issues prompting calls from Medicare beneficiaries and professionals include:

- New to Medicare, counseling on enrollment periods and coverage options.
- Wisconsin Medicaid program questions, including coordination with Medicare.
- Purchase protections for Medicare Supplement (Medigap) Policies.
- Counseling on prescription drug coverage options, including Part D, Wisconsin SeniorCare, Veterans benefits, and more.
- Medicare Advantage Plan enrollment, coverage, and benefits questions.
- Coordination between employer, retiree, COBRA, or Affordable Care Act Marketplace coverage, and Medicare.
- Changes to Medicare prescription drug plans due to the Inflation Reduction Act of 2022, including the out-of-pocket cap and Medicare Prescription Payment Plan.

Medigap Helpline Program staff also regularly refer callers to other agencies and resources, as necessary, to obtain information or assistance that is not provided by the Medigap Helpline. Referrals to and from the Medigap Helpline occur regularly, as the Medigap Helpline is Wisconsin's state-wide SHIP helpline. The Program's main phone number is listed in various places, including on the back of the Wisconsin Medicare and You book, which all Medicare Beneficiaries in Wisconsin receive each year. The Medigap Helpline facilitates these referrals efficiently by maintaining working relationships with our federal, state, and local partners. These partners include local ADRCs, Elder and Disability Benefits Specialists, Wisconsin Department of Health Services, Social Security Administration, and the Center for Medicare and Medicaid Services.

Program Trends

The Medigap Helpline Program continues to receive contacts that follow trends within the Medicare and related insurance space. During the reporting period, the Medigap Helpline received an increasing number of contacts who had questions or were eligible for Medicaid programs. This group of callers continued to increase despite the end of the public health emergency caused by the COVID pandemic. Callers who are eligible or who have questions regarding Medicaid programs are frequently some of the most time-consuming contacts the Medigap Helpline receives. This is because these callers often require our counselors to outline their benefits and options within both the Medicaid and Medicare programs, each of which are complex and include language and topics which can be challenging for beneficiaries and Medicaid members to navigate.

The Medigap Helpline Program has also received increased contacts in advance of enrollment periods due to CMS (Centers for Medicare and Medicaid Services) outreach efforts targeting individuals who may be eligible for the Low-Income Subsidy Extra Help Program. This CMS targeted outreach resulted

in over 300 contacts to the Medigap Helpline program during SFY 2025. These outreach efforts included a letter sent to millions of Medicare Beneficiaries nationally, which included the contact number for the Medigap Helpline for individuals in Wisconsin who would like personalized assistance regarding their potential eligibility for the Low-Income Subsidy Extra Help Program. Medigap Helpline Program staff then assisted these beneficiaries in understanding the Low-Income Subsidy Extra Help Program and whether or not it may be advantageous for them to apply for assistance with their prescription costs.

The Medigap Helpline Program has also received increasing contacts from individuals under the age of 65. This increase can in part be attributed to the Medigap Helpline program absorbing the services of the now-closed Disability Rights Wisconsin Part D Helpline effective December 31st, 2024, which served Medicare beneficiaries under the age of 60. Medicare beneficiaries who are under the age of 65 have unique coverage considerations compared to beneficiaries who are over the age of 65. These considerations include different eligibility requirements for Medicaid programs and, typically, increased premium costs for Medicare Supplement policies.

Contact Information for the State of Wisconsin Board on Aging and Long Term Care

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