MODULE 13: COUNSELING TECHNIQUES

Objectives

- **What is the purpose of HIICAP counselors?**
  - HIICAP counselors assist Medicare beneficiaries and their families, helping them to understand their Medicare and other health insurance. HIICAP counselors provide accurate, unbiased health insurance information, empowering consumers to make informed decisions and take appropriate actions on their own behalf.
- **What are the various roles in HIICAP?**
  - Most importantly, a HIICAP Coordinator is responsible for recruiting, screening, and training HIICAP volunteers. A coordinator also provides timely reports to the New York State Office for Aging (NYSOFA) and public presentations on a variety of topics.
  - HIICAP counselors develop skills enabling them to help clients choose health insurance options that are most advantageous to them.
- **What are the methods of counseling?**
  - One-on-one counseling by appointment
  - Walk-in
  - Telephone
  - In-home counseling

INTRODUCTION TO HIICAP

The HIICAP Notebook logically organizes volumes of information on health insurance in order to make it easier to understand. The goal of a HIICAP counselor is to provide accurate, objective health insurance information in a supportive manner to your clients to enable them to make well-informed decisions. The Notebook provides you with the current information and tools to work toward this goal.

Module 13 will review HIICAP's purpose and explore methods of counseling, roles and responsibilities, communication skills, and the counseling process–including documentation.

HIICAP

The Health Insurance Information, Counseling and Assistance Program (HIICAP) is sponsored by the New York State Office for Aging (NYSOFA) and coordinated by county Area Agencies on Aging (AAA) or Offices for the Aging (OFA).

Programs across New York State vary by specific services offered, number of volunteers, and level of activity. However, since each participates under the New York State Office for Aging HIICAP umbrella, they have some very important common characteristics.

HIICAP is…

- **Dynamic**
  HIICAPs are, by definition, dynamic. Changes are constant in the nature of government programs themselves; health insurance; and health care industry rules, processes, procedures. HIICAPs must keep pace with these changes in order to provide accurate, timely, and objective information to consumers.

  This means that HIICAP Coordinators must keep their information current and convey that information to counselors through simplified materials, in-service training sessions and practice.

- **Flexible**
  HIICAPs gain considerable strength by promoting flexibility and responsiveness to local community needs. The program and its volunteers generally reflect the cultural, ethnic, economic and geographic diversity of the community they serve. Coordinators and counselors develop problem-solving skills and educational materials to address their clients' most prevalent concerns. Materials available from CMS and other national, state and local resources provide a solid starting point.

  HIICAPs strive to respond quickly and effectively to emerging local problems, concerns regarding changing legislation and policies, questionable insurance sales practices, and increasing costs of health care services.

- **Empowering**
  Empowering consumers to make informed decisions and take appropriate action on their own behalf speaks to the mission of the HIICAP program.

  HIICAP instills confidence in consumers. The confidence consumers gain by acquiring the information and assistance necessary to navigate their own Medicare and health insurance issues, will inevitably save them money.

  Peer counselors serve as positive role models for their clients. They communicate a subtle but powerful message: *If I can learn and master this, so can you!*.

- **Commitment**
  Becoming a part of HIICAP demands a certain level of commitment on the part of *the coordinator, the counselor, and even the client.*

  To be effective, a commitment of time and effort necessary to learn, apply, and follow-up as needed on the information provided is crucial.

  A mediocre effort will most certainly produce mediocre and disappointing–even harmful–results.

  Meaningful efforts produce significant rewards including grateful, empowered clients who may be better off financially and counselors who take pride in having empowered clients to do so!

  Simultaneously, HIICAP counselors gain special status among peers for knowledge and skills acquired through the program. All this, of course, reflects positively upon the HIICAP Coordinator and sponsoring Area Agency on Aging.

- **Cost-Effectiveness**
  Relative to other community services, HIICAPs have the potential to be incredibly cost-effective. They rely primarily on volunteer counselors who serve to keep the program consumer-oriented.

HIICAPs can save consumers literally hundreds of thousands of dollars each year as a result of discussing and assisting them with applying for unclaimed benefits; by explaining the benefits of existing assistance programs; and by identifying possible duplicate policies and the inefficient use of health care dollars.

- **Professional**
  Coordinators and volunteers receive extensive and ongoing training to ensure that the services they provide are accurate and up-to-date.

  Participation in the New York State Office for Aging HIICAP is contingent on adherence to client confidentiality and provision of unbiased information and assistance. Volunteers and clients are encouraged to sign agreements, which clarify their roles and responsibilities.

  Though it may be challenging at times, HIICAP counselors and coordinators must always maintain an impartial and professional demeanor when representing the program to clients and the community.

HIICAP is not...

- **A Substitute for Personal Responsibility**
  HIICAP counselors sometimes are pressured by clients to tell them what to do or to identify which policy is the best one to buy. Counselors are also pressured to completely take over a client's paperwork, doing all the claims processing FOR the client as opposed to doing it WITH the client. These scenarios are not uncommon. Counselors must resist the temptation to respond to such client requests.

  It is not in the best interests of the client to respond positively to such requests and it is in direct conflict with the mission and goals of HIICAP. Such dependence upon the program, which cannot be maintained over the long-term, would result in fewer seniors being served overall. Remember: HIICAP strives to empower clients to make their own decisions.

  Clients must understand at the beginning that the success or failure of the counseling session depends almost entirely on their willingness to take personal responsibility for their health insurance problems and paperwork. The HIICAP counselor and coordinator can help, but the decisions and the responsibility ultimately lie with the client.

  Note: There are some special instances when a client lacks the intellectual or physical capacity to act on their own behalf and have no others to help them with their health insurance affairs. After careful review with their coordinator, HIICAP counselors may provide more extensive short- or long-term assistance to such a client. However, this situation should be the exception rather than the rule for counseling. A counselor can recommend a follow-up counseling session with a family member, friend, or case manager present who can assist the client.

- **Not a Free Billing Service**
  This is a corollary to the above principle. Misconceptions about the scope of services provided by your local HIICAP can be avoided via program publicity, screening of clients before counseling, and review and signature of the client agreement form.

  Again, if the client is able but unwilling to take personal responsibility for his or her own health insurance paperwork, the counselor will be limited in their ability to help the client. To do otherwise would deprive other clients of the HIICAP service that they too need. (See *the note above for exception.)*

For those existing programs that have traditionally provided such extensive services before formalization under the New York State Office for Aging HIICAP, it may be advisable to discuss the change in policy with clients, wean existing clients, or reduce these types of cases by simple attrition. Your coordinator and the Area Agency on Aging director are best suited to make such policy decisions.

- **Experts**
  There are so many facets of this dynamic industry! Anyone would be hard-pressed to claim expert status in all aspects.

  Volunteer counselors are not expected nor required to be experts in the field. They are not expected to memorize or know all the answers to all the questions that might be presented to them. This is where the HIICAP Coordinator plays a critical role as leader and expert. Even though the coordinator is not expected to have all of the answers all of the time, they do have the resource connections to get the necessary answers and to communicate them to the volunteers. **NYSOFA encourages volunteers to specialize in an area of interest, e.g., Medicare, claims and appeals.**

  However, they should strive to be familiar with basic health insurance information, procedures, and resources and expect to communicate these to clients in a sensitive and professional manner.

Expectations

People with Medicare and their caregivers in New York State can expect to receive the following from their local HIICAP:

- accurate and timely information, education and assistance
- free, confidential, and unbiased help
- problem resolution
- simplified resource materials and knowledgeable counselors

People with Medicare and their caregivers in New York State may have the mistaken impression that HIICAP will provide:

- free billing services
- all the answers
- advice on issues unrelated to health insurance
- help to all who want or need it

The last item requires explanation. As discussed earlier, the client is expected to maintain personal responsibility for his or her health insurance affairs. If the client is able but unwilling to try to take steps–however measured–to resolve their problem(s), then the counselor is severely limited in their ability to help. Clients may want a level or type of service that is beyond the scope of HIICAP.

HIICAPs are also not obligated to provide one-on-one counseling for every client who requests it. In time of high demand for services, HIICAPs can screen clients and provide counseling services to those whose situation merits it. Otherwise, questions answered over the telephone or in a group, educational seminar may suffice. Prioritizing those clients in need of counseling services may help to ensure that clients who really need this level of assistance receive it.

Sometimes clients do not follow through as planned, or they choose a course of action, which the counselor feels (but never verbalizes!) may not be logical or consistent given the facts. Consider the following example: A client decides to keep a specific health insurance policy even after careful review shows it to be duplicative and beyond the client's financial means. The client rationalizes their decision by saying "I've paid premiums all these years; I might as well keep it and get my money out of it someday."

That someday may never come. However, clients always have the right to self-determination–namely; to make their own decisions about their own health insurance affairs–even if the counselor believes it is the wrong decision.

Instances where an individual is making what the HIICAP counselor believes is an illogical or irrational choice based on cognitive impairments such as mental illness or Alzheimer's Disease or dementia poses an especially difficult counseling situation. It is essential to recognize a client's right to self-determination while at the same time ensuring that the individual is not a danger to themselves or others. If a counselor believes that the individual's health and well-being is in serious jeopardy, the HIICAP coordinator may need to step in to determine whether it is appropriate to contact Adult Protective Services, family members or other resources in the community better equipped to handle the situation.

HIICAP ROLES

Coordinator

HIICAP's ultimate success depends upon the skill, commitment, and resourcefulness of the program coordinator. The coordinator must be proficient in all areas of senior health insurance options, processes, procedures, and establish access to resource persons and materials.

Coordinators are responsible for volunteer recruitment, screening, training, ongoing support and monitoring and public education presentations. In addition, HIICAP coordinators are responsible for logistical arrangements (such as scheduling), reporting, and program publicity and, in some areas, even fund raising.

As if that were not enough, usually the most difficult HIICAP cases, along with the unexpected walk-in or call-in client, are reserved for the HIICAP coordinator.

One part-time staff person, who may even have other program or administrative responsibilities, often accomplishes all these activities. Some HIICAPs are blessed with a coordinator who performs those same tasks on a volunteer basis.

NYSOFA recommends that Coordinators use the available resources including the New York State HIICAP Coordinators' Volunteer Management Handbook, attending training programs when made available by the state, and www.shiptalk.org

Volunteer Counselors

Counselors must have good written and oral communication skills, the ability to learn and apply technical information, and the time and emotional capacity to devote to helping others. Other special volunteer resources or skills, such as having a car or the ability to speak a second language may also be helpful.

HIICAP counselors have varied life experiences which, when augmented with extensive HIICAP training, create an extremely capable and effective volunteer corps.

Memorandum of Understanding

The HIICAP Coordinator screens HIICAP volunteers prior to training to ensure that the goals and expectations of the individual and the program are compatible. This relationship is formalized in the written Memorandum of Understanding between the volunteer and the sponsoring Area Agency on Aging. This agreement **(**found in the Appendix**)** is an important step toward ensuring the viability of the program and the quality of services.

New York State HIICAPs use this agreement, or a modified version of it. Coordinators are encouraged to use this boilerplate agreement to initiate a review by their own AAA legal counsel. HIICAPs are strongly encouraged to develop an agreement that includes the components below.

- **Section 1: Identifying Information**
  This simply identifies the volunteer's name, mailing address, telephone number(s), and email address. If not printed on the sponsor's letterhead, additional lines and space should be provided to include the sponsor's name, address and telephone number.
- **Section 2: Waiver of Liability/Disclaimer**
  This section sets forth the volunteer's intention to adhere to HIICAP guidelines. It also releases the New York State Office for Aging and the sponsor of any responsibility for actions taken by the volunteer outside those contained in the guidelines.
- **Section 3: Nature of Services**
  This section describes the basic volunteer responsibilities, providing accurate and objective counseling and assistance with health insurance affairs. It also identifies the target recipients of HIICAP services, the possible methods of counseling to be employed, the volunteer's commitment to initial and on going training; and the volunteer's commitment to submit timely and complete reports to the coordinator.
- **Section 4: Confidentiality**
  This paragraph sets forth the volunteer's commitment to maintain confidentiality of all client data and appropriate use and disclosure of such data. Client confidentiality is the cornerstone of the foundation on which HIICAP is built.
- **Section 5: Non-Conflict of Interest**
  This section details specific instances in which counselors shall not promote private or personal interest in conjunction with the performance of HIICAP duties.

  Prohibited are:
  - market research or steering, directing or advising clients, and
  - disclosure of confidential information for personal or professional gain. This again acknowledges the volunteer's obligation to maintain client confidentiality and to exercise good faith and integrity in the performance of HIICAP duties.
  - In this paragraph, the volunteer acknowledges that he or she is aware of the possible repercussions–decertification and potential legal liability–for breaching client confidentiality.

- **Section 6: Terms of Service**
  This sets forth the volunteer's intention to remain with the program for at least one year, at a specified number of hours per month.
- **Section 7: Confirmation**
  After careful review, both the volunteer and the coordinator sign and date the agreement. Memorandums of Understanding should be reviewed and updated each year.

The importance of the Memorandum of Understanding cannot be over-emphasized. Memorandums of Understanding, plus the client agreement form that is discussed later in this Module, help to clarify roles and expectations from the start. They may also provide documentation, which could prove critically important in defending the local HIICAP staff and volunteers in a legal suit.

Client Intake Form

The Client Intake Form contains much of the same language as the volunteer's Memorandum of Understanding, but from the client's perspective.

HIICAPs are strongly encouraged to use this or a modified form with every client. It is important to note that most clients sign the form with little reservation. Experience has shown that counselors tend to be more concerned about using the form than clients, even in well-established programs that did not use the form prior to statewide HIICAPs.

The Client Intake Form helps set a professional tone for the session and realigns client expectations about the scope and nature of services to be provided.

Key words such as "good faith" and "hold harmless" provide measured legal protection to the program, as does the disclaimer in paragraph 2: "I understand that the counselor assumes no responsibility for decisions made or actions taken as a result of counseling." Several sentences clarify the unbiased, free and confidential nature of the service.

Lastly, the Intake Form releases HIICAP volunteers, staff and the sponsoring organization from any liability because of service provision, when provided in accordance with the Program guidelines. Thus, any legal protections afforded are contingent upon volunteers and staff adhering to established HIICAP guidelines, which are set forth for the volunteer in the Memorandum of Understanding.

HIICAP sponsors may wish to purchase professional liability insurance, or expand their existing coverage, to include HIICAP counselors and coordinators. Such insurance may help to cover legal costs, which can far exceed the cost of a policy, should a suit be brought against the program.

Again, coordinators should take the appropriate steps to review these issues and agreements with legal counsel to determine the most appropriate steps to take. (See Risk Management)

RISK MANAGEMENT

Insurance for Health Insurance Counseling Programs?

The Volunteer Protection Act of 1997 removed volunteers from liability for negligent acts or omissions. But that does not include willful or criminal misconduct, gross negligence, indifference

to the rights of individuals, crimes of violence, including hate crimes and sexual offense, or harm caused by their operation of a motor vehicle.

It is often possible to expand an organization's commercial and automobile liability insurance to encompass volunteers. This insurance will act as a supplement to the volunteer's own insurance. If the policy contains an automobile coverage clause, obtaining a copy of the volunteer driver's license and insurance card annually is recommended.

For non-profit organizations, Directors and Officers Insurance may cover volunteers with a special rider in the policy as added protection.

Legal Counsel for the Elderly, Inc., noted in their 1991 publication *Medical Bill and Health Insurance Counseling: How to Build a Volunteer Program* that their national review "located almost no lawsuits or even threats of lawsuits against any of the programs, [however] risks do exist and program planners need to evaluate them."

They suggest that the evaluation include whether or not to purchase:

- Errors and Omissions (E&O) Liability Insurance - which covers mistakes in counseling
- Personal Liability Insurance - which covers negligent personal injury and possible damage to property of third parties by volunteers (automobiles excluded)
- Non-Owned Automobile Insurance - which provides liability coverage in which it is alleged the volunteer, in the course of the work for the program, negligently operated their automobile causing injury or property damage
- Dishonesty Bond - to protect against the risk that a volunteer may steal property of the client or be accused of this
- Personal Injury Insurance - to cover injury to the volunteers themselves (accident insurance or possible extension of worker's compensation coverage)

Legal Counsel for the Elderly recommends that programs evaluate the risk involved and the cost of protecting against the risk. Variables to consider include:

- the probability of a lawsuit
- the cost of the insurance
- any immunity for the volunteers which state law may provide
- the extent of program resources and alternative uses for funds which would have to be spent for insurance premiums
- the number and dollar amount of claims likely if the organization opted to be a self-insurer
- a moral obligation to protect volunteers from exposure to unreasonable risk of financial loss as a result of their commitment and generosity

Whether or not to insure, and at what level, remains the decision and the responsibility of the local Area Agency on Aging.

In addition to supplementing the volunteer's own insurance, there are many ways to reduce risk and limit legal exposure for your organization. Many of the techniques are simple common sense measures. HIICAP coordinators should treat volunteer counselors as they would paid staff and keep documentation to demonstrate "due diligence."

Tips for Reducing Risk and Potential Liability

- Carefully screen volunteer applications
- Train and closely supervise volunteers
- Document attendance at trainings and other events
- Provide a client feedback mechanism and investigate any complaints promptly
- Implement a client sign off sheet on intake forms and other specialized signoff sheets for particular situations
- Restrict counseling to designated sites and during supervised hours. Create a policy for in-home counseling that requires two counselors to be present
- Build in annual reviews and deal with any problems by dismissal if necessary

The New York State Office for Aging assumes no responsibility or liability for individual HIICAPs. Coordinators should check with their local legal counsel for recommendations and communicate this information–procedures, development and use of forms, and risks–to HIICAP counselors.

COUNSELOR CLIENT COMMUNICATION

The training counselors receive provides opportunities for developing and applying communication skills and techniques.

Regardless of the method of counseling (e.g., walk-in, telephone, one-on-one), HIICAP clients should feel comfortable in seeking assistance. We want clients to understand what their counselors are telling them. All of your training and all the information you have learned will be useless if you do not practice the art of listening.

Listening Skills for Counselors

Most of us are not good listeners. We hear but do not listen. We are so busy thinking about other things, reacting to what is being said, or thinking about our response to what is being said that we do not hear.

Here are some tips to improve your listening skills:

- **Desire** - First, you must want to hear what a person is saying. If you are too tired or simply not interested, you will not be a good listener.
- **Patience** - Give the person time to express themselves. Do not automatically jump to conclusions or give a quick answer.
- **Attention** - Look at the person and maintain eye-to-eye contact. Lean forward, toward him or her. Eliminate distractions. Clear your workspace and provide a quiet environment. Focus on the person.
- **Feelings** - Focus on the feelings the person is expressing as well as the content or information. This helps to define what the person is really seeking.
- **Body Language** - Pay attention to non-verbal cues.
- **Accept** -Accept what the person is feeling. Accepting and agreeing are two different things. Accepting means acknowledging that the person is upset, frustrated, or sad. It does not mean that you condone or justify that feeling or the way it is expressed.

- **Reflect -** Try to periodically summarize or reflect on what you have been hearing. Match the speaker's tempo and tone. It shows you are following what is being said and lets the speaker clear up misunderstandings.
- **Understand -** First, understand what the person is trying to say, and then seek to be understood yourself.

Communication Techniques

The HIICAP counseling session should proceed much like a focused conversation, with both the client and the counselor doing a fairly equal amount of talking and listening. The following communication techniques may help facilitate understanding between you and your clients:

- Greet the client and explain the process.
- Provide assurances of confidentiality.
- Treat your client with respect from your initial contact through all phases of the service you provide.
- Ask clarifying questions to focus the discussion.
- Ask open-ended questions to clarify information and to check that you understand key points.
- Maintain a cordial but professional tone throughout your interactions with the client.
- Listen supportively and patiently as the client describes his or her situation.
- Observe signs of anxiety or misunderstanding and provide appropriate assurances to ease your client's discomfort.
- Summarize often during conversations with your client to confirm that you understand the client's situation.
- Take care to define terms and explain concepts in ways that the client will understand.
- Provide precise explanations paced appropriately to avoid misunderstanding.
- Encourage the client's participation in pursuing ways to resolve his or her health insurance-related problems.
- Remain flexible about your ideas for resolving problems and be open to your client's ideas.
- Obtain the client's approval before taking action on his or her behalf.

METHODS OF COUNSELING

As noted earlier, the strength of local HIICAPs is their ability to respond to the needs and resources of the elderly and disabled communities.

There are various methods of delivering HIICAP services–individually, by group, telephone, or by appointment. HIICAPs are encouraged to select the method(s) that work best for their particular program.

Some of the more common methods are identified below with advantages and disadvantages of each.

One-on-One (Personalized) Counseling by Appointment

- **Advantages:**

  - more personal
  - ability to gauge client understanding, maximize verbal and non-verbal cues
  - screening allows for client and volunteer preparedness
  - maximizes counseling effectiveness
  - reinforces the value and professionalism of HIICAP services
- **Disadvantages:**
  - need centralized, appropriate site
  - need pre-screening support (e.g., telephone, personnel)
  - may delay or discourage participation due to appointment

Walk-in Service

- **Advantages:**
  - immediate access
  - more personal
  - problems can often be quickly resolved
  - may pave the way for expanded HIICAP or other services
- **Disadvantages:**
  - inability to manage counseling services or to prioritize clients in times of high demand
  - no guarantee of help when the client arrives
  - the client is not always prepared, lacking necessary paperwork
  - fluctuating activity can be difficult to plan for (e.g., too many or few clients per volunteer)
  - may be frustrating to client and volunteer when expectations are unclear regarding the nature of available service and how it is provided.

Telephone

- **Advantages:**
  - transportation not needed
  - very accessible
  - quick answers
  - no need for physical site
  - often paves the way for expanded HIICAP or other services
- **Disadvantages:**
  - client who wants quick answer may put off counseling until crisis stage
  - counseling can be severely limited without actual documentation in hand
  - lengthy follow-up, often with repeated call-backs
  - limited communication channel - loses benefit of non-verbal, visual cues
  - inability to obtain client signature on intake form immediately to reduce liability

In-Home Counseling

- **Advantages:**

- more personal
- ability to gauge client understanding
- screening allows for client and volunteer preparedness
- serves clients in greatest need
- allows for informal assessment for other client needs
- referral often allows for immediate access to additional, needed documentation
- serves rural clients and volunteers especially well

- **Disadvantages:**
  - generally more complex cases requiring multiple sessions with highly-experienced volunteers
  - unknown access to internet, computers, printers, may require multiple contacts
  - additional volunteer resources required if the recommended two counselors are assigned to each home visit to reduce liability
  - in-home distractions
  - generally more time-consuming
  - requires resources for screening
  - possible increased risk to volunteer safety and increased liability for agency
  - potential duplication of services since many homebound seniors have case managers or other in-home service professionals who can act as appropriate contacts

COUNSELING SESSION GUIDELINES

The method of counseling will shape HIICAP resource requirements, client expectations and the specific counseling procedures followed. However, there is a general HIICAP counseling process, which should be applied regardless of the method of counseling. An outline of this process appears below; the components of which will be discussed in detail in the section that follows.

The HIICAP Counseling Process

1. Preparing for Counseling Sessions
2. Opening
3. Client Contact Form
4. Problem Identification
5. Action Plan
6. Processing
   a. Information
   b. Claims
   c. Advocacy
7. Closing
8. Documentation

Step 1: Preparing for Counseling Sessions

Older and disabled adults may seek HIICAP assistance through a variety of ways. They may contact the sponsoring agency directly or they may ask for an individual appointment following a consumer education activity. Often word-of-mouth referrals will result in a request for HIICAP assistance.

Whether by telephone, walk-in, or in-home or other method of counseling, HIICAP counselors will need to be prepared. Counselors will want to assemble materials and information necessary to conduct a productive meeting. Additional materials should be made readily available in an accessible office area for counselors who need additional supportive documentation. Counselors should bring their HIICAP Notebook, or have access to the latest version of the Notebook for reference at the counseling site, and, if not already provided, office supplies (e.g., pen or pencil, stapler) and any client materials.

Many HIICAP coordinators find it useful to prepare a packet of materials ahead of time to be given to counselors to use with clients during a counseling session. These may include contact and evaluation forms, a sponsor agency brochure, booklets or photocopies of information on Medicare, Medigaps, and prescription drug programs and/or other education or promotional materials. This is especially convenient for use with in-home counseling or for counseling away from the sponsor's business office.

Many HIICAPs leave a briefcase of client packets and office supplies at counseling sites, to be replenished and updated regularly. At least one such briefcase is usually left at the central office for easy volunteer access. In rural areas, some counselors simply keep the agency's or their own briefcase at their home.

Clients should be asked to bring with them all their health insurance policies, claim forms, MSNs, EOBs, medical and hospital bills, Medicare card and any other pertinent health care and health insurance documents. The client should also bring their latest Social Security statement, latest tax forms, and a bank statement to enable the counselor to screen for program eligibility based on income. The client may also be advised to bring a trusted relative or friend to the counseling session.

Clients should be screened as to the type of their health insurance problem: claims processing, information regarding Medicare or other health insurance, appeals, etc. Some HIICAPs find a telephone log useful in screening clients. Information regarding the name, type of problem and, depending on the method of counseling and local HIICAP procedures, possibly the client's telephone number and address, should be given to the HIICAP counselor prior to the session.

Many HIICAP coordinators request that counselors sign up for sessions by location and/or date at their regular in-service training meetings. Others may have the coordinator screen the client and assign the case to a specific counselor, who then contacts the client directly to schedule a counseling session. This works well in rural areas, which lack a regularly scheduled, centrally located site. In this situation, the counselor and the client are able to schedule a mutually convenient date, time and location for the session. Counselors will want to get to the counseling site about 10 minutes early to make sure everything is in order and to be able to greet the client when they arrive.

Caution: Regardless of how clients are scheduled for appointments, the HIICAP coordinator should always be informed beforehand about when, where and with whom a session is scheduled. It is impossible for a coordinator to provide adequate volunteer support or maintain quality control if they do not know what activity is taking place in their program. To do otherwise poses serious liability risks to the program. The corollary to this principle

is that clients should not contact a counselor at their home for questions or additional assistance. All cases–even repeat cases–need to go through the HIICAP coordinator.

A word here is in order regarding emergency procedures for counseling sessions. Coordinators should establish written policies for emergency or unforeseen circumstances such as illness, inclement weather, holidays, and vacations. These should include a contact person to notify in such circumstances, procedures for contacting clients and volunteers, and other relevant information. These do not have to be elaborate, but they can help the program to run smoothly during atypical situations.

Step 2: Opening

Introduce yourself to the client. Address the client in the manner they prefer. Open the session with a brief introduction, summarizing your role as a counselor and the mission and scope of HIICAP. Explain how you can help the client by providing objective information to enable him or her to reach well-informed decisions.

Step 3: Client Contact Form

It is very important that counselors and coordinators complete a Client Contact form for every person they assist. Reporting all of your client contacts is a critical component of your work. Continued funding is contingent upon good and accurate data gathering and reporting. It shows the valuable work that you do. (See Step 8: Documentation for more information.)

General questions, such as times and locations of counseling sites, or questions to determine whether or not a counseling session is actually needed, would not require that a contact form be completed.

However, even quick questions regarding health insurance should be recorded on a contact form. Use the Client Contact form *(which appears in the Appendix)* to define the nature of the services you will be providing. At this time, the client will often jump into details about his or her situation before the counselor has all the information they need to help him or her. Following the contact form is a good way to keep the counseling session focused and on track.

At the very least, the client's name, date, basic demographic information, type of assistance needed, amount of time spent on the case, and the counselor's or coordinator's name should be recorded on the contact form. This is especially true for telephone counseling. It is easy to take a quick telephone call from a consumer or professional in the community and forget to record the information either before or immediately after the call. This results in under-reporting of the numbers of people actually served and the amount of time actually devoted to HIICAP.

While tedious at times, accurate records of program activity are important to HIICAP funders, staff and volunteers to effectively evaluate the success of and need for the program. In short, it is a matter of giving credit where credit is due.

Client Contact forms can and should contain basic identifying information such as name of the sponsor organization, clients' name, address, telephone number, date of birth (not age, as age changes), and counseling date and location. If a spouse, relative, friend or other representative is seeking help on the client's behalf, be sure to record that contact person's information as well. Nevertheless, remember: the client is the person who owns the health insurance or who has incurred

the health care costs. Additional information is also to be solicited regarding company and policy name(s), type of health insurance, identifying policy numbers, and monthly or annual premium costs.

Step 4: Problem Identification

At this stage, ask the client to summarize his or her reasons for meeting with you. This is the counseling need or reason for contact to be indicated on the contact form.

If multiple concerns are expressed, all that are presented to the counselor should be identified on the form. You may well find during counseling that the client has a different or more serious health insurance problem than the one(s) the client has presented. This real problem information should be recorded in a narrative or summary section on the contact form.

Caution: Even the most experienced counselors and coordinators may make assumptions or jump to conclusions regarding the real problem versus the presenting problem in a counseling session. It's important to ask—and keep asking—more and more focused questions until you get to the heart of the client's health insurance problem. Then be sure you understand the client's answers, as well as their questions, before you provide information.

Consider the example below:

Marjorie B. is certain that her Medigap policy is overpriced and simply does not cover enough of her health care costs.

She presents her problem to the HIICAP counselor: "This policy is too expensive and I'm seriously thinking about canceling it."

The counselor could immediately start to review other, less expensive Medigap policies—but there may be other things to consider such as the following:

- whether she understands her current policy
- whether she understands Medicare's benefits and gaps in coverage
- is she aware of less expensive Medicare Advantage policies
- what type of health care coverage does she need
- what is the status of her health
- is she aware of and eligible for Medicaid, QMB, SLMB, QI-1, EPIC, or other, low or no-cost insurance
- does she have any other health insurance and if so, how many policies and what kind
- whether she even needs the policy(s) she has
- whether this is actually her most pressing, serious health insurance concern or whether there is some other, more serious concern that should be dealt with first

Only by asking questions that are ever more specific will the counselor be sure to zero in on the client's real problem. Once the real problem has been identified, then and only then can the counselor and client work together toward problem resolution. That is the next step.

Step 5: Action Plan

The counselor and the client should discuss and agree upon a course of action to be taken to resolve the client's most pressing problem.

Always remember that the ultimate goal of HIICAP is to help people with Medicare and their caregivers become better informed and empowered consumers.

They cannot do this if they are left in the dark as to what procedures they need to follow to help themselves in the future. Remember to avoid making decisions for the client.

Encourage clients to act on their own behalf. Keep the client an involved participant in the process of resolving his or her health insurance problem. It may be more time consuming initially, but the effect will be longer lasting. A simple checklist included with counseling materials and used to remind the client of the actions they need to take after the counseling session is over may be helpful.

Often billing and claims problems may require several counseling sessions over a period of several weeks or even months. The HIICAP coordinator should define the scope of billing and claims services provided by HIICAP and communicate that to the volunteer counselors who specialize in this area. Both the counselor and the client need to keep this in mind as they begin to implement their Action Plan.

The following can add to the time needed to resolve a particular health insurance problem:

- necessary documentation, such as EOB/MSN or bills, may be missing and must be requested
- action may be initiated and ample time is needed for health care providers, insurance companies, and Medicare Administrative Contractors to process and respond
- the complexity of the case and sheer volume of paper–some necessary, some unnecessary–resulting from extensive use of health care services may require additional time to simply sort through and record the information
- unusual or highly technical cases may require additional follow-up with the coordinator or other resource, such as the HIICAP Hotline

Let your client know how long it may take to resolve their problem. Clients are most understanding, appreciative and relieved just knowing that they have caring and competent help.

Remember, it generally takes time for a problem to materialize–it will take time to resolve the problem as well.

Step 6: Processing

Once the counselor and client have agreed upon a plan of action, the next step is to implement it.

Generally, there are three distinct categories in the processing step of any counseling session. They include the need for information, claims assistance, or advocacy. Some cases will require more than one approach. In that situation, it is best to focus on the most serious, pressing problem.

Consider, for example, the case of a client who is shopping for a Medigap policy, but who never signed-up for Medicare Part B. The client may well need a Medigap—but the place to start is with Medicare coverage before seeking to fill Medicare's gaps. This is one example of why it is so important to make sure that the client's problem is correctly identified.

When a client needs…

- **Information:** Use the appropriate modules in the HIICAP Notebook and summary materials provided by your county's HIICAP Coordinator. Use various internet search engines when information is not found in these sources.
  a. Educate them regarding Medicare (the basis of their health care coverage)
  b. Relate Medicare's benefits and gaps in coverage to their current health insurance coverage (is there duplication? gaps? is the cost worth the benefits provided?)
  c. Clarify unmet needs and other health insurance options (e.g. Medicaid, QMB, SLMB, QI-1, Medicare Advantage, EPIC, Medicare prescription drug coverage, employer plans, etc.)
- **Claims Assistance (counselors specializing in billing and claims):***Use Module 10*
  a. Educate regarding terminology (e.g. MSN, assigned, and unassigned doctors, etc.) and the claims process for their particular situation
  b. Sort through and organize the paperwork
  c. Record by date of service on the Insurance Claims Record
  d. Complete any necessary claim forms
- **Advocacy:** Turn to specific topic in the HIICAP Notebook
  a. Educate them regarding beneficiaries' rights and responsibilities (e.g. appeals, assignment, etc.)
  b. Educate them regarding the process for exercising their rights and responsibilities (e.g. time and dollar limits on Medicare appeals, filing a complaint with the NYS Department of Financial Services, contacting a health care provider, etc.)
  c. Confer with coordinator to determine whether and what kind of advocacy would be warranted
  d. Follow through on advocacy by directing and/or assisting them (showing how to request Medicare review on an MSN, helping to complete the NYS Department of Financial Services complaint form, writing down the name, telephone number and how to state their concern or position to a health care provider, etc.)

Step 7: Closing

At the close of the session, summarize the information reviewed and procedures followed during the session. Review (and perhaps provide a written list, or a predefined checklist to the client) of any follow-up activities to be taken either by the client or counselor because of the counseling session.

Indicate whether and when another counseling session is needed, and what procedures should be followed to make another appointment, if necessary.

Be sure to thank the client and provide supportive comments on their willingness and capacity to take control of their health insurance affairs. Let the client know that HIICAP will be there if he or she needs further assistance.

Step 8: Documentation

Provide the client with a HIICAP Client Evaluation form (an example is shown in the Appendix) to complete preferably, at that moment. However, if time and caseload does not permit, the evaluation

should be completed as soon as possible after counseling. Let the client know that their honest opinion regarding the quality of the counseling services they received is important to all concerned.

Client evaluations are, for the most part, overwhelmingly positive. The evaluations—with their usually glowing comments—are great at building counselor esteem and pride in the program. HIICAP coordinators may wish to share them (anonymously, of course) with the counselors at in-service meetings. They also serve as very powerful and moving testimonials to decision-makers and funders associated with the program.

While the client is completing the evaluation form, or even after the client has left, the counselor should take a few minutes to complete the rest of the client contact form. For most contact forms, this is simply a matter of indicating what referrals were made, an estimate of any financial benefit to the client as a result of the HIICAP counseling session, a clear but concise summary of the counseling provided, whether and what additional follow-up is needed, and the counselor's name.

This final step should not be put-off, as it becomes more difficult to recall the details of a particular case over time. Remember: Your counseling session is not really over unless your paperwork is done!

Upon completion, the contact form should be forwarded as soon as possible to the HIICAP coordinator. Counselors should not hold onto contact forms until the case is completely resolved or until the next time they happen to be near the coordinator's office.

If necessary, the sponsor Area Agency on Aging should provide postage paid envelopes for counselors to mail back their contact forms to the coordinator on a timely basis, no later than two days from the date of counseling.

The HIICAP coordinator should review each contact form to gain an understanding as to what transpired during the counseling session and whether or not there is any follow-up activity required. The coordinator (or their qualified designee) should initial and date the contact form to indicate that it was reviewed. Some client contact forms allow space to indicate whether the information was recorded for statistical reporting purposes.

The documentation, or lack thereof, can make or break a HIICAP. The contact and client evaluation forms work as a system of checks and balances that keeps the lines of communication open between all concerned—clients, counselors, coordinators, Area Agency on Aging Directors, funders and the New York State Office for Aging—right on up to the Centers for Medicare & Medicaid Services (CMS).

With incomplete or untimely documentation, opportunities are lost—opportunities to measure and take pride in our accomplishments, to communicate our success, to improve our performance, to develop new skills or materials to address clients' and counselors' needs, to advocate effectively, and to protect the program, volunteers and staff from undue risk of liability.

MODULE 13: APPENDIX

HIICAP Coordinator Job Description

HIICAP Volunteer Counselor Job Description

Counseling Tips

Memorandum of Understanding

Authorization to Release Information Form

Client Intake Form

Client Contact Form

Client Evaluation Form

SHIP Unique ID Confidentiality Statement

New York State HIICAP Coordinator: Job Description, Responsibilities and Obligations

The HIICAP coordinator, usually a paid staff person, is responsible for ongoing development, implementation, evaluation and maintenance of the local HIICAP.

The coordinator may be a staff person of either the Area Agency on Aging or a local not-for-profit organization.

- **Responsibilities:**
  - Recruit, interview, select, monitor, and evaluate HIICAP volunteer counselors
  - Provide counselors with accurate and simplified counseling materials
  - Coordinate and schedule HIICAP counselors to ensure effective program operation
  - Support HIICAP counselor activity through advocacy and follow-up activity when needed
  - Organize HIICAP counselor in-service meetings
  - Conduct and arrange public education events
  - Coordinate with other organizations as appropriate
  - Monitor and maintain HIICAP counseling sites and program materials
  - Maintain accurate program records
  - Compile quarterly HIICAP reports for New York State Office for the Aging and other reports as needed
  - Plan and organize annual volunteer recognition event
- **Requirements:**
  - **Experience -** Two or more years human services employment or equivalent experience with an emphasis in working with older adults and volunteers
  - **Skills -** Strong oral and written communication skills; strong organizational ability; outstanding interpersonal skills, including the ability to work effectively with diverse groups of people; the ability to discern volunteer counselors' special talents and abilities; and the ability to motivate counselors according to their needs.

New York State HIICAP Volunteer Counselor: Job Description, Responsibilities and Obligations

- **Purpose of Position:**
  - To provide health insurance information, assistance and referral services.
- **Is Responsible To:**
  - (_____) County's Coordinator for the New York State Health Insurance Information Counseling & Assistance Program (HIICAP)
- **Responsibilities:**
  - Satisfactorily completes certification training conducted under the auspices of New York's HIICAP
  - Satisfactorily completes continuation training as required by New York's HIICAP
  - Provides health insurance counseling services without conflict of interest and in compliance with New York's HIICAP
  - Conducts individual health insurance counseling sessions
  - Assesses client's need for information and/or assistance

- Provides referrals to appropriate resources
- Answers questions on Medicare, supplemental, prescription drug coverage, and other health insurance
- Files reports and provides follow-up as required
- Handles client information in strictest confidence
- For counselors specializing in billing and claims:
  - Assists with Medicare and other health insurance claims filing
  - Provides informal claims advocacy as required

- **Desired Qualifications:**
  - Ability to get along with others
  - Sensitive and caring attitude
  - Willingness to learn about and ability to retain information relevant to health insurance options
  - Good written and oral communication skills
  - Professionalism and confidentiality when dealing with personal and/or sensitive information

- **Time Commitment:**
  - Agreed number of volunteer hours/month: ____for a minimum of___year(s)

New York State HIICAP Volunteer Counselor:

- Counseling Techniques, Tips and Pointers

- **Gain Experience**
  - Work together with experienced counselors to gain confidence.
  - Remember that eventually, you have to take the leap and do it alone.
  - Expect to spend some time developing your own style. Every counselor has a unique style and an approach all their own.
  - It is acceptable to say, “I don’t know, but I’ll find out.” when counseling.

- **Keep Up to Date**
  - Regularly attend in-service training meetings.
  - Treat scheduled public seminars and presentations as “refresher” courses.
  - Counsel on a regular basis. Lengthy leaves of absence will make it so much harder to stay current and confident.

- **Remain Unbiased**
  - It is normal to formulate opinions as you gain experience, but remaining unbiased is critically important.
  - Explain options; do not give advice.

- **Foster Client Independence**
  - Explain the process, but encourage clients to try to navigate the system themselves.
  - Offer support and guidance, but do not offer to jump in and do things for a client if they are able to take care of it for themselves.

- **Keep Information Confidential**
  - All identifying client information must be treated confidentially.

- Contact forms gathered outside of the agency should be kept in a locked place until transferred to the coordinator.
- Individual client cases can be discussed in general terms, but cases involving specific client information should only be discussed with the HIICAP Coordinator, other certified HIICAP Volunteers, and authorized agency staff.

- **Keep Accurate Records**
  - Accurate reporting is critical to continued funding of HIICAP.
  - Think outcomes. Our funding sources are interested in more than just a client count. They want to see how counseling has affected clients in a positive way. Example: how much money did our clients potentially save?

New York State Health Insurance Information Counseling & Assistance Program
Memorandum of Understanding
Regarding Volunteer Counselor Responsibilities and Obligations

Name of Volunteer: _____

Address, Telephone Number:_____

As a certified counselor in the New York State Health Insurance Information Counseling & Assistance Program (HIICAP), I agree to abide by all program guidelines and regulations. Neither HIICAP nor the Area Agency on Aging or NYS Office of Aging is responsible for any activity engaged in or responsibility assumed by me other than those stated in these program guidelines. Any action beyond those covered in the guidelines will be taken at my personal risk.

Nature of Service
I understand that my basic responsibilities as a volunteer counselor include providing accurate and objective counseling and assistance with Medicare, health insurance and related health coverage plans for people with Medicare, their representatives, or persons soon to be eligible for Medicare, and educating the public on Medicare and health insurance issues that affect older citizens. I agree to undertake initial certification training and continuing training as required under this program. I understand that my counseling of people with Medicare and their caregivers may need to be accomplished at specified counseling sites, by telephone, or at clients' homes if their health conditions require and I am comfortable with that setting and method. I agree to complete counseling reports and to submit counseling reports each month to my coordinator.

Confidentiality
I understand that in the performance of my duties, I will have access to certain sensitive information about the client, and that such information may include medical, insurance, financial and other personal and confidential data.

I agree to restrict my use of such information to the performance of duties described in the program guidelines and understand that there is to be no discussion of cases or mentioning of client's name except when in direct contact with Medicare, insurance companies, providers of medical services/supplies, and/or members of the New York State HIICAP.

Non-Conflict of Interest
The New York State HIICAP requires that counselors shall not promote private or personal interest in conjunction with the performance of duties covered in State Program guidelines. To comply with these requirements, I agree to the following:

A. I will in no way attempt to conduct market research or solicit, persuade or coerce clients to purchase a specific type of medical insurance coverage, to convert an existing insurance policy to another carrier, to go to a specific provider of service for treatment, or to direct a client to a specific agent/broker, or any profit-based billing service.
B. I will not disclose or use confidential information obtained as a result of my association with or access to any client for personal gain or advantage for my employer, or any other parties.
C. I hereby acknowledge my obligation to respect the confidentiality of the client and to exercise good faith and integrity in all dealings with the client in the performance of my duties as a Certified Volunteer Counselor in the New York State HIICAP. I also understand that a breach of this agreement will result in my immediate decertification as a volunteer counselor and subject me to liability for breaching the client's right to privacy and confidentiality.

Terms of Service
I agree to the best of my ability to act as a counselor for a minimum of 12 months during which I commit to a minimum of____hours per month.

_____	_____	_____	_____
Volunteer Signature	Date	Coordinator Signature	Date

Q&A HIICAP

ALL INFORMATION IS CONFIDENTIAL

Updated 2011

Health Insurance Information, Counseling & Assistance Program (HIICAP)

Client Intake Form

Please print

Client Name (first, middle, last): _____ Date of Birth ___/___/___
Second Client Name: _____ Date of Birth ___/___/___
Client Address: _____ Telephone (___) ___ - ____
City _____ State ___ County (if other than ***COUNTY***) _____ Zip _____
Client Accompanied by: _____ Relationship to Client _____
Today's Date ___/___/___ Closing Date ___/___/___ Time Spent (to nearest hour) ____hrs.

Section B

1. Where did client hear about this program/service?
☐0– Family/Friends
☐1– Newspaper
☐2– Radio/TV
☐3– Repeat Client
☐4– Site/Agency
☐5–Meeting/Seminar
☐6– Other (specify) _____

2. Is client an ** ORGANIZATION NAME member?**
☐0– Yes
☐1– No
☐2– Unsure
If not a member, provide client with membership brochure.
Provided brochure?
☐ Yes
☐ No

3. Has client used this service before?
☐0– Yes
☐1– No

Enrolled in EPIC?
☐0– Yes
☐1– No
If Yes, note EPIC number (s) on back of this form.

10. Sex
☐0– Male
☐1– Female

15. Veteran
☐0– Yes
☐1– No
☐2– Unknown

11. Marital Status
☐0– Married
☐1– Single
☐2– Divorced/Sep.
☐3– Widowed

Female Head of Household?
☐ Yes ☐ No
Client Lives Alone?
☐ Yes ☐ No

4. Total Gross Annual Single Household Income
☐0– $9,816 or under
☐1– $9,817-$11,724
☐2– $11,725-$15,450
☐3– $15,451-$24,700
☐4– $24,701-$34,999
☐5–Over $35,000 *
☐6–Unknown

5. Total Gross Annual Couples Household Income
☐0– $13,080 or under
☐1– $13,081-$15,636
☐2– $15,637-$24,999
☐3– $25,000-$49,999
☐4–Over $50,000 *
☐5–Unknown

QMB<0, SLMB<1, * EPIC Ineligible

13. Race/Ethnicity
☐0– Asian
☐1– Black/African American
☐2– Hispanic or Latino
☐3– American Indian/Alaskan Native
☐4– White
☐5–Unknown

6. Frail/Disabled?
☐0– Yes
☐1– No
☐2– Unknown

Medicare Eligible Due to Disability?
☐ Yes
☐ No
☐ Unknown

Income minus health insurance premiums: (Single/Couple)
☐ Medicaid ($767/$1117)
☐ QMB ($923 / $1,235)
☐ SLMB ($1,103 /$1,477)
☐ QI-1 $1,097/$1,464)

I understand that **INSERT ORGANIZATION NAME programs and services provide education and information, not advice. I understand that any final decisions or actions I make based on this information are my responsibility, and not that of the agency, its staff or volunteers. I further understand that the agency and its representatives cannot be held liable or responsible for any decisions I make as a result of their assistance.**

Client Signature _____ **Date** __/__/____
Second Client Signature _____ **Date** __/__/____

AUTHORIZATION TO RELEASE INFORMATION

The federal privacy act requires carriers to have a written authorization to release information on file before they can divulge any information regarding a person with Medicare.

I am the individual to whom the information/record pertains, or am authorized to consent, on behalf of the individual, to the release of the information/record. I understand that any false representation to knowingly and willfully obtain information from Social Security records is punishable by a fine of not more than $5,000 or one year in prison, or both.

1. Beneficiary Name: _____

   Beneficiary Telephone Number: _____

   Beneficiary Address: _____

2. Beneficiary Date of Birth: _____

3. Beneficiary Health Insurance Claim Number: _____

4. Name of Authorized Person: _____

   Authorized Person's Telephone Number: _____

   Authorized Person's Address: _____

5. Time Period During Which Information May be Released:
   (If you would like the authorized person to be able to act on your behalf at any time, please write "Anytime." If not, please be specific.)

   _____

6. What Information May Be Disclosed or Discussed:
   (We must know exactly how much information we may give to the authorized person. Please be as specific as you can. If you want us to give any or all information we have, please tell us by answering "All.")

   _____

   _____

   _____

   _____

7. Beneficiary Signature*: _____ Date: _____

8. Authorized Individual Signature**: _____ Date: _____

***Beneficiary:** A person who is entitled to Medicare benefits. (This applies to line numbers 1, 2, 3, and 7.)

****Authorized Person:** A person that the beneficiary chooses to act on his or her behalf. (This applies to lines 4 and 8.)

CLIENT CONTACT

OMB No. 0938-0850

Client Identifiers - To Be Used To Lookup Clients With More Than One Contact and Link All Such Contacts Together	
Client Identifier Used by Your Agency or State	
Client Identifier Auto-Assigned by NPR - Optional	

Client Name and Contact Information - **Optional**			
Client First Name		Representative First Name	
Client Last Name		Representative Last Name	
Client Phone Number	(_ _ _) - _ _ _ - _ _ _ _		

Client ZIP Code and County Code	
ZIP Code of Client Residence	
County of Client Residence - **Optional**	

Counselor and Agency	
Counselor Name	
Agency Name	
County of Counselor Location	
ZIP Code of Counselor Location	

Date of Contact _ _ / _ _ / _ _ _ _

How Did Client Learn About SHIP	
	Previous Contact
	CMS / Medicare
	Presentations
	Mailings
	Another Agency
	Friend or Relative
	Media
	State Website
	Other
	Not Collected

First vs Continuing Contact	
	First Contact for Issue
	Continuing Contacts for Issue

Method of Contact	
	Phone Call
	Face to Face at Counseling Location or Event Site
	Face to Face at Client's Home or Facility
	E-Mail
	Postal Mail or Fax

Client Age Group	
	64 or Younger
	65-74
	75-84
	85 or Older
	Not Collected

Client Gender	
	Female
	Male
	Not Collected

Client Race-Ethnicity - Check all that Apply	
	Hispanic, Latino, or Spanish Origin
	White, Non-Hispanic
	Black, African American
	American Indian or Alaska Native
	Asian Indian
	Chinese
	Filipino
	Japanese
	Korean
	Vietnamese
	Native Hawaiian
	Guamanian or Chamorro
	Samoan
	Other Asian
	Other Pacific Islander
	Some Other Race-Ethnicity
	Not Collected

Client Primary Language Other Than English	
	Primary Language Other Than English
	English is Client's Primary Language
	Not Collected

Client Monthly Income	
	Below 150% FPL
	At or Above 150% FPL
	Not Collected

Client Assets	
	Below LIS Asset Limits
	Above LIS Asset Limits
	Not Collected

Receiving or Applying for Social Security Disability or Medicare Disability	
	Yes
	No
	Not Collected

Dual Eligible with Mental Illness / Mental Disability	
	Yes
	No
	Not Collected

PRESCRIPTION DRUG ASSISTANCE

Medicare Prescription Drug Coverage (Part D)

- [ ] Eligibility/Screening
- [ ] Benefit Explanation
- [ ] Plans Comparison
- [ ] Plan Enrollment/Disenrollment
- [ ] Claims/Billing
- [ ] Appeals/Grievances
- [ ] Fraud and Abuse
- [ ] Marketing/Sales Complaints or Issues
- [ ] Quality of Care
- [ ] Plan Non-Renewal

Part D Low Income Subsidy (LIS/Extra Help)

- [ ] Eligibility/Screening
- [ ] Benefit Explanation
- [ ] Application Assistance
- [ ] Claims/Billing
- [ ] Appeals/Grievances

Other Prescription Assistance

- [ ] Union/Employer Plan
- [ ] Military Drug Benefits
- [ ] Manufacturer Programs
- [ ] State Pharmaceutical Assistance Programs
- [ ] Other _____

MEDICARE (Parts A & B)

- [ ] Eligibility
- [ ] Benefit Explanation
- [ ] Claims/Billing
- [ ] Appeals/Grievances
- [ ] Fraud and Abuse
- [ ] Quality of Care

MEDICARE ADVANTAGE (HMO, POS, PPO, PFFS, SNP, MSA, Cost)

- [ ] Eligibility/Screening
- [ ] Benefit Explanation
- [ ] Plans Comparison
- [ ] Plan Enrollment/Disenrollment
- [ ] Claims/Billing
- [ ] Appeals/Grievances
- [ ] Fraud and Abuse
- [ ] Marketing/Sales Complaints or Issues
- [ ] Quality of Care
- [ ] Plan Non-Renewal

MEDICARE SUPPLEMENT/SELECT

- [ ] Eligibility/Screening
- [ ] Benefit Explanation
- [ ] Plans Comparison
- [ ] Claims/Billing
- [ ] Appeals/Grievances
- [ ] Fraud and Abuse
- [ ] Marketing/Sales Complaints or Issues
- [ ] Quality of Care
- [ ] Plan Non-Renewal

MEDICAID

- [ ] Medicare Savings Programs (MSP) Screening (QMB, SLMB, QI)
- [ ] MSP Application Assistance
- [ ] Medicaid (SSI, Nursing Home, MEPD, Elderly Waiver) Screening
- [ ] Medicaid Application Assistance
- [ ] Medicaid/QMB Claims
- [ ] Fraud and Abuse

OTHER

- [ ] Long Term Care (LTC) Insurance
- [ ] LTC Partnership
- [ ] LTC Other
- [ ] Military Health Benefits
- [ ] Employer/Federal Employee Health Benefits (FEHB)
- [ ] COBRA
- [ ] Other Health Insurance
- [ ] Other _____

Total Time Spent on This Contact Date			
	Hours		Minutes

Comments

Status	
	General Information and Referral
	Detailed Assistance - In Progress
	Detailed Assistance - Fully Completed
	Problem Solving / Problem Resolution - In Progress
	Problem Solving / Problem Resolution - Fully Completed

Nationwide and CMS Special Use Fields (Circle only one)			
01	1 - MIPPA LIS	2 - MIPPA MSP	3 - MIPPA LIS & MSP

State and Local Special Use Fields									
01	02	03	04	05	06	07	08	09	10

HEALTH INSURANCE INFORMATION, COUNSELING AND ASSISTANCE EVALUATION

Thank you for participating in the New York State Health Insurance Information, Counseling and Assistance Program.

We are very interested in maintaining a high standard of service to clients. Because of this, we would like to know how you feel about the service you received today. Please take a few moments to complete the evaluation form below regarding today's counseling session. The information you provide is strictly confidential and will help us to continue to provide quality services to our clients.

1. I believe that the health insurance counselor(s):		**(Circle your answers)**	
was correct	**Yes**	**No**	**Somewhat**
was informative	**Yes**	**No**	**Somewhat**
understood my problem(s)	**Yes**	**No**	**Somewhat**
helped to resolve my problem(s)	**Yes**	**No**	**Somewhat**
2. I would recommend this service to my family or friends:	**Yes**	**No**	**Maybe**
3. I will return for further counseling if I have a similar problem in the future:	**Yes**	**No**	**Somewhat**

4. My biggest concern regarding health insurance is:

_____

_____

5. Your comments are appreciated:

_____

_____

Please place this evaluation in the attached envelope, seal the envelope, and return it to your health insurance counselor today. Please **do not** sign your name.

THANK YOU! Feel free to call on us again if we can assist you in the future.

_____ _____

Counselor Signature **Date**

SHIP Unique Identification

Customer Service Representative Rights (CSR) is a system that is set up between CMS and the 1-800-Medicare contractors and private insurance plans through a Unique ID system to allow State and local SHIP staff to discuss a beneficiary's Medicare claim without the beneficiary being present.

In order to obtain a SHIP Unique ID, you must be registered with SHIPtalk. Once registered with SHIPtalk, click on the "Edit my Profile" tab. Scroll to the bottom of the "Edit my Profile" page and look for the "Request Unique ID" link. Click on that link to request an ID.

Your request will automatically be sent to the State SHIP Director for approval. Once approved, you will receive an email with your new Unique ID.

The below confidentiality agreement is for people who are requesting Unique IDs for the first time.

CONFIDENTIALITY AGREEMENT FOR RECEIPT OF UNIQUE ID

I hereby agree and understand that I am accountable in protection of the privacy and confidentiality of the information that is disclosed to me pursuant to my use of the SHIP unique ID which has been assigned to be by the Centers for Medicare & Medicaid Services. This ID, along with other identifying information will allow a Medicare Fiscal Intermediary and Carrier Customer Service Representative (CSR) to disclose certain beneficiary eligibility and claims payment-specific information to me for the purpose of assisting the beneficiary. I further understand this unique ID is to be confidential and I am not to disclose this ID to anyone other than the CSR.

_____

Counselor Name – Please Print Clearly

_____ _____

Counselor Signature Date

_____ _____

SHIP Director Signature Date

Original to File
Copy to Volunteer

FAX TO NYS HIICAP OFFICE AT: 518-486-2225