



# Calhoun County Senior Services

## Minimum Service Standard

### SERVICE NAME: BENEFITS COUNSELING

**DEFINITION:** The benefits counseling program provides assistance to individuals in understanding their eligibility and applying for available health and prescription benefits through Medicare (Medicare Part D prescription plans and Medicare Advantage programs), Medicaid, and screen for eligibility for any community-based health and prescription programs. The service provider acts as the single point of entry for immediate needs and long-term solutions for health and prescription benefits acquisition for the recipient while fostering close collaborative relationships with other service providers of complimentary services. These Benefit Counseling services are to be provided throughout the county, with trained, certified benefit counselors.

**UNIT OF SERVICE:** Reimbursement will be made on a line item basis.

**INCOME REQUIREMENT:** No income requirement applies.

**DESIRED OUTCOME:** Seniors preserve their financial resources by accessing prescription and health insurance benefits for which they may qualify, and developing community-based benefits specialists. Conduct outreach to recruit and train enough certified, trained volunteer and in-kind benefit counselors to meet the need for Medicare/Medicaid counseling in Calhoun County.

### MINIMUM SERVICE STANDARD:

**A. Recipient Eligibility Criteria** – The recipient eligibility criteria contained in the “ALL SERVICES” standard shall apply.

### B. Staffing/Supervision/Training

1. Staff and volunteers providing service shall complete training and/or experience in how Medicare, Medicaid, and other community benefits programs work including 60 hours of face-to-face counseling with clients per year.
2. The staff and volunteers providing service shall have the desire and ability to work with seniors.
3. The staff and volunteers providing service shall have some basic knowledge of Social Security and how to obtain extra help for eligible seniors in paying for Medicare Part D costs.
4. The staff and volunteers providing service shall be trained to use available computerized tools provided on [www.medicare.gov](http://www.medicare.gov) and [www.ssa.gov](http://www.ssa.gov).
5. A qualified program coordinator shall be appointed and accessible to all staff and volunteers as needed.
6. It is expected that the service provider will be responsive to training requests from collaborative partners to facilitate offering this service at as many sites as possible throughout Calhoun County. Training will be offered to partners in the aging network on how to make appropriate referrals.



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### **C. Program Activities**

1. Staff and/or volunteers will provide assistance with applying for recipient benefits.
2. Staff and/or volunteers will review Medicare Summary Notice for proper payment.
3. Staff and/or volunteers will verify income and assets in order to apply for benefits based on these factors for the Low-Income Subsidy (LIS), Medicaid Subsidy Program (MSP) and the Medigap Subsidy.
4. Referrals to other services, as needed, shall be provided to seniors.

The service provider must provide services at various locations around the County including regular, periodic coverage of rural townships especially during open enrollment from October 15 to December 5 each year. Regular scheduled times for service delivery must be established at appropriate locations in Battle Creek, Marshall, and Albion.