Michigan Medicare/Medicaid Assistance Program

STATEWIDE OPERATING STANDARDS

BACKGROUND

MMAP is the Michigan State Health Insurance Assistance Program (SHIP). MMAP’s mission is to educate, counsel, and empower Michigan’s older adults, and individuals with disabilities, and those who serve them, so that they can make informed health benefit decisions. The program offers free health benefits counseling, unbiased information and assistance to individuals who reside in Michigan and are Medicare and/or dually eligible Medicare/Medicaid beneficiaries, which includes both older adults and people with disabilities. These services are also available to family members, caregivers and other individuals and groups that advocate or care for Medicare and dually eligible Medicare/Medicaid beneficiaries.

MMAP is implemented through a statewide grant with a private non-profit organization. MMAP cannot be operated by an agency which sells or markets insurance or insurance products. MMAP has a central office located in Lansing, Michigan, and operates throughout Michigan via sponsored sites. The purpose of these Operating Standards is to establish the minimum requirements to be met by the MMAP grantee, and its subcontractors and sponsored sites, for program implementation.

PROGRAM SCOPE

Funding flows from the Centers for Medicare and Medicaid Services (CMS) through the Michigan Office of Services to the Aging (OSA) to the MMAP grantee to provide State Health Insurance Assistance Program (SHIP) services. Funding also flows from the Administration on Aging (AoA) to the MMAP grantee to provide Senior Medicare Patrol (SMP) services. Funding flows from the MMAP grantee to local subcontractors.

The MMAP grantee administers a statewide program, which has two major components: 1) it is a volunteer program, and 2) a program of health benefit counseling services to Michigan’s older adult population and those on Medicare by way of disability. The MMAP grantee provides health benefit information and counseling supported by a statewide network of unpaid and paid skilled professionals. The MMAP grantee utilizes these highly trained paid and unpaid professionals to provide one-on-one health benefit counseling services to Michigan’s Medicare and dually eligible Medicare/Medicaid beneficiaries and their families, caregivers or representatives.

Through a grant award agreement and statement of work approved by OSA, the MMAP grantee serves as the administrative agency for subcontractors who receive CMS funds to carry-out MMAP functions at the local level. The MMAP grantee is the designated central organization responsible for implementing a statewide program, as approved by its Board of Directors, that at a minimum:
a. Advocates for beneficiaries at state, federal and local levels.
b. Sets policy for provision of MMAP services.
c. Ensures the consistency and quality of services provided through monitoring, feedback and corrective action.
d. Provides professional training and support to counselors, coordinators and partners.
e. Supports local volunteer coordinators with recruiting, screening, training and retaining volunteers.
f. Provides technical assistance to subcontractors.
g. Accurately reports on program activities to OSA and other funders.
h. Serves on workgroups, committees, etc., where issue areas impact Medicare and dually eligible Medicare/Medicaid beneficiaries.
i. Works in partnership with OSA on advocacy issues, program quality improvement projects, changes to program implementation and/or enhancements and on joint projects not specifically required by CMS funding, such as ADRC projects and ad hoc committees, etc.
j. Responds to requests from OSA and other state agencies, partner agencies, legislators and others on constituent issues.
k. Conducts outreach to inform the public, local, state and federal government about the program and services provided.
l. Identifies, applies for and administers other grants and projects as they occur.

In order to develop and support a statewide system that ensures that Michigan beneficiaries get high quality benefits counseling and assistance services, the grantee must excel in technical knowledge and expertise and must be highly skilled in the following areas:

a. Successful administration of volunteer programs
b. Curricula development, training manual preparation, training and education using adult learning methods
c. General program administration and project management
d. CMS and OSA reporting requirements
e. Quality Improvement methods and processes
f. Medicare/Medicaid eligibility, enrollment, coverage, claims and appeals processes
g. Health care billing statements and Medicare Summary Notices
h. Resources for prescription drug assistance
i. The Medicare Savings Program (Medicaid)
j. Medicare supplemental insurance including comparison of policies and pursuit of claims and refunds
k. Retiree health benefits
l. Health care options under managed care and Medicare Advantage plans
m. Long Term Care Insurance options
n. Medicare/Medicaid fraud and abuse
o. Quality Improvement Processes
p. Reporting systems and data analysis
q. Keep up to date regarding health care regulation changes
Operating Standards

A. PROGRAM ORGANIZATION

1. The MMAP grantee shall operate as a Michigan private, non-profit corporation and maintain tax-exempt status under Section 501 (c)(3) of the Internal Revenue Code.
2. The MMAP grantee shall not be operated by, or receive funds from, an organization which sells or markets insurance or insurance products.
3. The MMAP grantee (board of directors and staff) and subcontractors must have and utilize a practice of disclosure which will prevent individuals with any interest in the health insurance industry from becoming MMAP counselors.
4. The MMAP grantee shall have a board of directors with the authority and responsibility to conduct the business of the agency. The board of directors shall have adopted and operate according to written by-laws and in compliance with provisions of the Open Meetings Act.
5. MMAP services are to be provided through formal contractual agreements between the MMAP grantee and local agencies. Subcontractors of the MMAP grantee shall have written agreements with each sponsored MMAP site, whether funded or not. These sponsored site agreements must provide assurance that MMAP volunteers at a minimum will be offered mileage reimbursement for MMAP related activities.
6. The MMAP grantee shall employ personnel competent to perform required duties. The MMAP grantee shall be able to demonstrate an organizational structure, including established lines of authority, and must operate under principles of affirmative action and be non-discriminatory in employment practices. The MMAP grantee shall assure that subcontractors have an appropriate organizational structure (established line of supervision) for implementing the program.
7. The MMAP grantee shall have its own written personnel policies, which have been adopted by the board of directors, and include at a minimum:
   a. Requirements for performance evaluations for all staff
   b. Grievance procedure
   c. A Statement prohibiting political patronage and lobbying
   d. Language outlining unacceptable political activities
   e. Language addressing drug free workplace requirements
   f. Language that prohibits workplace harassment, which is defined as “unwelcome verbal or physical conduct based on race, color, religion, sex (whether or not of a sexual nature and including same-gender harassment and gender identity harassment), national origin, age (40 and over), disability (mental or physical), sexual orientation, or retaliation.”
   g. General conditions of employment
8. The MMAP grantee shall assure that subcontractors have a written procedure governing recruitment, training, testing and supervision of volunteers. Program volunteers must be competent as determined by testing and performance evaluation to perform required duties.
9. The MMAP grantee shall assure that subcontractors provide opportunities for outreach assistants, coordinators and counselors to expand their knowledge base, at least annually. Topics may be identified from performance evaluations.

10. The MMAP grantee shall assure that subcontractors establish procedures for performance evaluations to be conducted of outreach assistants, counselors and coordinators, whether paid, unpaid or in-kind. Performance evaluations must determine whether minimum job requirements have been met. Minimum job requirements are determined by the MMAP grantee and include:

   a. A criminal background check prior to involvement with beneficiaries.
   b. Participation in scheduled MMAP Update trainings.
   c. An established minimum number of contact hours with beneficiaries performing MMAP related activities.
   d. Regular, consistent and accurate reporting of MMAP activities using MMAP specified reporting instruments.

11. MMAP grantee staff must be proficient in the following health benefit and program administration areas:

   a. Volunteer Program Administration
   b. Medicare
   c. Medicaid
   d. Medigap Insurance
   e. Long Term Care Insurance
   f. Health Insurance (including retiree health benefits)
   g. Preventive Services offered under Medicare
   h. Older adult learning and training methods
   i. Public outreach and education methods
   j. Leadership development methods
   k. Demographics of Michigan’s Medicare and Medicaid population
   l. Knowledge of local, state, and federal government processes

12. The MMAP grantee shall collect and disseminate timely and accurate health insurance information for subcontractors to share with their program staff and volunteers.

13. The MMAP grantee is responsible for statewide program oversight and evaluation under the direction of OSA. MMAP grantee staff must be available, as necessary, to provide technical assistance to MMAP subcontractors. The MMAP grantee must assure that subcontractors provide outreach assistants, site coordinators and counselors with access to program coordinators while they are assisting beneficiaries.

14. MMAP grantee staff must receive:

   a. Orientation to MMAP program, policies and procedures
   b. Snapshot of MMAP structure (funders, board, etc.)
   c. Job description and expectations
   d. Must get resources, including who are MMAP internal and external partners.
15. The MMAP grantee must assure that each subcontractor provides volunteers, coordinators, and outreach assistants:

   a. Orientation to MMAP program
   b. Snapshot of MMAP structure (funders, board, etc.)
   c. Job description and expectations
   d. Must get resources, including who are MMAP internal and external partners.

B. PROGRAM FUNCTION

Requirements for MMAP Grantee

1. The MMAP grantee operates according to a budget approved by OSA.
2. The MMAP grantee operates according to the grant award agreement and statement of work approved by OSA.
3. The MMAP grantee shall permit OSA access to any books, documents, papers or other records of the contractor that are pertinent to the contract. Access shall also be granted to OSA to observe the operation of the program at local program sites.
4. The MMAP grantee must employ mechanisms approved by OSA for obtaining the views of service recipients about the quality of services received and for evaluating the effectiveness/impact of the program including future needs and demands on the program.
5. The MMAP grantee shall conduct an annual event recognizing persons involved in the MMAP program.
6. The MMAP grantee must develop contract standards, review applications for local MMAP sites, and the contracts must spell out how to run the program and service delivery targets.
7. The MMAP grantee must monitor for program compliance. The MMAP grantee must conduct a formal on-site assessment of the performance of each MMAP subcontractor each year. A report to OSA should be submitted that covers: findings, corrective action plans, timelines for corrections, resolution of findings and follow-up conducted.
8. The subcontractor assessment tool must be approved by OSA and address, at a minimum:

   a. CMS grant requirements and established benchmarks
   b. Compliance with MMAP Statewide Operating Standards
   c. Compliance with the terms of the grant.
   d. Program accessibility (i.e., language, location, facilities, beneficiary special needs)
   e. Targeting plan for underserved populations
   f. Training and technical assistance needs
   g. Progress on resolving corrective action required by prior assessments.

9. The MMAP grantee shall coordinate the exchange of health insurance information between the staff of state departments/agencies, other pertinent federal agencies, including CMS, and grantee and subcontractor staff, including volunteers.
10. The MMAP grantee shall advocate for and make recommendations for improvement concerning consumer issues and complaints, related to the provision of health care, to agencies and departments of the state and federal government responsible for providing or regulating health insurance.

Requirements for MMAP Grantee and Subcontractors

11. The MMAP grantee, and subcontractors, shall maintain a financial management system that fully and accurately accounts for the use of all funds administered for MMAP.
12. The MMAP grantee, and subcontractors, shall maintain sufficient insurance to indemnify loss of federal, state or local resources due to casualty, fraud, or employee theft.
13. The MMAP grantee, and subcontractors, shall comply with all programmatic and fiscal reporting requirements established by OSA.
14. The MMAP grantee, and subcontractors, shall have written procedures to protect the confidentiality of information about persons collected in the conduct of its responsibilities. The procedures must ensure that no information about a person is disclosed in a form that identifies the persons without the informed consent of that person or of his or her legal representative. All client information shall be maintained in controlled access files. It is the responsibility of the MMAP grantee to determine if they are a covered entity with regard to HIPAA regulations and establish appropriate procedures for the use of protected health data and information.
15. The MMAP grantee, and subcontractors, shall have a procedure in place to address complaints from individual recipients of services.
16. The MMAP grantee, and subcontractors, shall publicize services by the means most effective in reaching the target population, especially to those in greatest economic or social need with particular attention to low-income minority individuals.
17. The MMAP grantee shall assure that subcontractors offer translation and interpretive services upon request, and as needed.
18. The MMAP grantee, and subcontractors, shall locate MMAP service sites in collaboration with senior centers and other community agencies to the maximum extent feasible.
19. The MMAP grantee, and subcontractors, shall implement systems of referral to appropriate local, state and federal departments or agencies that provide assistance with problems related to health insurance coverage, including legal problems.

Approved by the Michigan Commission on Services to the Aging on December 17, 2010