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**PROGRAM MEMO**

TO: AREA AGENCIES ON AGING DIRECTORS	NO.: PM 08-02 (P)
SUBJECT: Health Insurance Counseling and Advocacy Program, Mental Health Initiative	DATE ISSUED: January 28, 2008
REVISED:	EXPIRES: July 1, 2010
REFERENCES: PM 07-09(P)	SUPERSEDES:
PROGRAMS AFFECTED: <input type="checkbox"/> All <input type="checkbox"/> Title III-B <input type="checkbox"/> Title III-C1/C2 <input type="checkbox"/> Title III-D <input type="checkbox"/> Title III-E <input type="checkbox"/> Title V <input type="checkbox"/> CBSP <input type="checkbox"/> MSSP <input type="checkbox"/> Title VII <input type="checkbox"/> ADHC <input checked="" type="checkbox"/> HICAP <input type="checkbox"/> Other: _____	
REASON FOR PROGRAM MEMO: <input type="checkbox"/> Change in Law or Regulation <input type="checkbox"/> Response to Inquiry <input checked="" type="checkbox"/> Other Specify: CMS requirements	
INQUIRIES SHOULD BE DIRECTED TO: Carol Berul, (916) 419-7590, e-mail cberul@aging.ca.gov	

The purpose of this Program Memo (PM) is to notify Area Agencies on Aging (AAA) and Health Insurance Counseling and Advocacy Program (HICAP) service providers of changes to HICAP services for State Fiscal Year (FY) 2007-08 and beyond. Effective with the acceptance of 2007-08 Contract Amendment 1, AAAs and HICAP service providers must use a minimum of five percent of the annual federal State Health Insurance and Assistance Program (SHIP) grant funding to promote activities in support of one-on-one pharmaceutical benefits (Part D) counseling to dual eligible beneficiaries with mental illness (Grant No. 11-P-20196/9-15; 2007-08). When calculating the five percent, use all federal funds, including the rural funds.

Federal Mental Health Initiative

On April 6, 2007, the California Department of Aging (CDA) received from the Centers for Medicare and Medicaid Services (CMS) the SHIP grant for the FY 2007 federal period April 1, 2007, through March 31, 2008. Special Grant Terms and Conditions require CDA to use at least five percent of the annual federal SHIP funding to provide support for one-on-one pharmaceutical benefits (Part D) counseling to dual eligible beneficiaries with mental illness.



CDA sent the 2007 SHIP Mid-Term Progress Report to CMS on November 9, 2007, with a copy by e-mail to AAA Directors. This report summarized the progress-to-date on the goals outlined in the 2007-08 SHIP Grant Application. Your assistance is needed to determine and report HICAP service provider activities that supported outreach to, and the education of, mental health providers or associations. Additionally, HICAP providers need to reach out and counsel dual beneficiaries with mental disabilities. This can often be done through close cooperation with local, county, and state mental health providers and associations. The 2008-09 Service Unit Plan and 2007-08 End-of-Year Report instructions will be modified to accommodate targeting these clients and reporting these activities as required by CMS.

The next SHIP grant application is due to CMS during the second week of February 2008. The Department will conduct a survey of AAAs in January to determine that qualifying activities of this initiative were conducted in support of dual eligible beneficiaries with mental illnesses in 2007-08. CDA will also survey AAAs for their planned future efforts to serve this population.

Background

CMS is working with CMS regional offices, SHIP, and mental health organizations to reach out to Medicare beneficiaries with mental illnesses. CMS encourages partnering with community mental health providers and associations to assist CMS in providing Medicare and Medicaid counseling for these clients. CMS defines mental illness as including: ". . . health conditions that are characterized by alterations in thinking, mood, or behavior . . . associated with distress and/or impaired functioning."

According to CMS, data from the 2004 Medicare Beneficiary Survey demonstrate that:

- 53 percent of people with Medicare who are under 65 years of age and disabled report having been told that they have a mental or psychiatric disorder; and
- 12 percent of people with Medicare who are over 65 years of age and not disabled report having been told that they have a mental or psychiatric disorder.

This data suggests that people who counsel beneficiaries about their Medicare benefits are likely to encounter clients with mental illness among all beneficiaries they assist. This could be particularly true of younger, disabled beneficiaries.

People with mental illness, who live within the community, may need extra support in making decisions about the Medicare Program and health plans. Social stigmas and a lack of understanding and sensitivity to issues associated with mental illness can make this population more vulnerable and susceptible to being underserved.

The House Appropriations Committee recognized the serious vulnerability of people with mental illness and encouraged CMS to do more to provide one-on-one community-based counseling to low-income dual eligible (Medicare and Medicaid) beneficiaries with mental illness. In support of increased outreach and educational efforts to serve people with mental illness, CMS worked with external partners to create a technical assistance program (TAP) that focuses on building bridges and expanding the network of help for people with a mental illness who are eligible for Medicare. CMS designed the TAP and a Toolkit, referred to as the SHIP-TAP, for use by SHIP Counselors working with people with mental illness. You can obtain these documents by going to

http://www.cms.hhs.gov/Partnerships/18_Mental.asp.

As a preliminary step, the State HICAP Office sponsored a two-day training for HICAP Managers on June 28- 29, 2007, which focused on mental health awareness, personal accounts of mental illness, and building relationships with local community-based mental health services organizations. Attendees represented all of the California HICAP service providers and various mental health advocacy groups. Some of the groups who presented included:

- California Alzheimer's Association
- Heritage Clinic Center for Aging Resources
- National Alliance on Mental Illness
- Mental Health Services Oversight and Accountability Commission
- Mental Health Directors Association
- Mental Health Association in California
- Alameda County Behavioral Health Care Services
- California Council of Community Mental Health Agencies.

Budget Changes

Five percent of the SHIP grant has been "set aside" for training HICAP Counselors in mental health sensitivity and awareness; the outreach to, and education of, beneficiaries with mental disabilities in the community; and partnerships with mental health providers, organizations, and associations.

Effective with Contract Amendment 1, AAAs and HICAP providers must use at least five percent of the local annual federal funding to support efforts related to serving clients with mental illnesses or disabilities. The required changes to budget forms and fiscal instructions are explained in PM 07-20 (P), released December 7, 2007, along with your 2007-08 Contract Amendment # 1.

Questions about this Mental Health Initiative may be directed to Carol Berul, State HICAP Office, (916) 419-7590; e-mail cberul@aging.ca.gov .



Lynn Daucher
Director