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# PROGRAM MEMO

TO: <b>AREA AGENCIES ON AGING DIRECTORS HICAP Program Managers</b>	NO.: <b>PM 09-02(P)</b>
SUBJECT: Health Insurance Counseling Advocacy Program - Guidance for Area Agencies on Aging on Area Plan Service Units for New Federal Performance Measures and Benchmarks	DATE ISSUED: March 17, 2009
REVISED: N/A	EXPIRES: June 30, 2010
REFERENCES: PM 08-26 (P) and Area Plan Guidance 2009-2012, Part Two, Service Unit Plans	SUPERSEDES: N/A
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: Policy Guidance on Federal Performance Measures and Benchmarks	
INQUIRIES SHOULD BE DIRECTED TO: Xochi Prock, (916) 928-2289, e-mail <a href="mailto:xprock@aging.ca.gov">xprock@aging.ca.gov</a> ; or Mark Meis, (916) 928-2290, e-mail <a href="mailto:mmeis@aging.ca.gov">mmeis@aging.ca.gov</a> .	

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 new program performance measures required by the federal Centers for Medicare and Medicaid Services (CMS). Identified in this PM are eight (8) new federal performance measures and benchmarks that were incorporated into the Three-Year (July 1, 2009 to June 30, 2012) Area Plan Guidance document issued with PM 08-26 (P), November 18, 2008. This PM provides guidance and instructions on how to incorporate these measures into your Service Unit Plans (SUP) for HICAP. **There will be no changes to the data local HICAPs are currently collecting in order to meet these performance measures.** The data which is currently reported to California Department of Aging (CDA) will provide the information necessary to report performance measures to CMS.

## Background

In January 2009, CMS issued Performance Measures for each State covering the period 2004-2008. CMS now requires each State Health Insurance and Assistance Program (SHIP) to be accountable for meeting or exceeding certain benchmark performance measures. Each SHIP is placed in a cluster of several similar States and measured to the median performance of the entire cluster.



California's SHIP performance cluster includes: Michigan, Illinois, Ohio, Pennsylvania, Florida, New York, Massachusetts, and New Jersey.

In past years [and for the remainder of this State Fiscal Year (SFY), ending June 30, 2009] CDA received target performance measures from the Area Plan SUPs for the following SFY as a part of the annual Area Plan Update due May 1. These targets were negotiated locally between the AAA and the HICAP provider and then sent to CDA for approval in the Area Plan Update.

Starting July 1, 2009, the new federal performance targets (benchmarks) will be used as a minimum starting point for developing the eight new measures in the SUPs. Performance targets may be at or above the minimums, but not lower.

In order to make these State level performance measures and benchmarks more useable for local providers, CDA has modified the measures to conform to local factors and converted the SUP section of the Three-Year Area Plan Guidance (Section 4, page 46) to reflect the same measures applied to State SHIPs. A copy of this part of the Guidance is Attachment B for your convenience. This PM and attachments will help AAAs and HICAP providers become familiar with these federal measures and benchmarks and assist in setting the 2009-12 SFY SUPs for HICAP.

### **Federal Definitions Pertinent to this Program Memo**

- *Performance Measure* – A quantitative or qualitative measure to help assess progress towards an outcome or goal.
- *Benchmark* - a measure of best practice performance. Benchmarking is generally used to see how an organization compares to others engaged in a similar business or activity. It involves learning about and adopting best practices to bring about improvements in performance. Benchmarking involves qualitative or quantitative comparison of performance with other parts of an organization, in this case, comparison of one SHIP against others or comparison of one SHIP against itself at a previous point in time to indicate whether or not improvement has been made. Benchmarks should be set at a high, but attainable level.
- *Performance Target* - A quantifiable goal to reach for performance improvement. For example, a target could be set at a certain percentage above the nationwide or cluster median, or within a certain quartile.

### **Guidance for AAAs on Area Plan Service Units for New Performance Measures**

Beginning with Grant Year 2009-10, CDA will begin requiring these additional HICAP Service Units. These Service Units coincide with the new CMS Performance Measures for States. CDA will use the eight performance measure to evaluate HICAP performance. For this first year of implementation, targets in the SUP should be set *at or above* the numbers listed in the last column of Attachment A for this time period (SFY 2009 – 2010). CDA is attempting to establish a baseline in 2009-10 for future annual adjustments for individual HICAP providers.

In subsequent years, CDA may ask AAAs and providers to adjust these targets incrementally (perhaps in 5 percent increments) over several years so that the State's overall performance is more equitably shared by all AAAs and HICAP providers. This process adjustment will be addressed at the March 24-27, 2009, HICAP Conference in Anaheim.

## List of Performance Measures and Definitions for Individual Planning and Service Areas (PSA)

Performance Measure	Definition	Formula
Performance Measure #1 (4.1 in SUP) Beneficiaries Reached per 10K Beneficiaries in State	Total number of Medicare Beneficiaries reached through one-on-one contacts (in-person home/site location and Quick Calls) <u>and</u> outreach (education and enrollment events) efforts per 10,000 beneficiaries in PSA	Total Closed Intake Forms + total of Quick Calls + estimated number of attendees at Public and Public & Media (PAM) events (Interactive, booths, InfoVan, and enrollment only)  <u>Divided by</u>  Number of beneficiaries in State per 10,000 beneficiary population
Performance Measure #2 (4.2 in SUP) One-on-One Counseling per 10K Beneficiaries in State	Total number of Medicare Beneficiaries that were reached through one-on-one contacts per 10,000 beneficiaries in PSA	Total Closed Intake Forms + total of Quick Calls  <u>Divided by</u>  Number of beneficiaries in state per 10,000 beneficiary population
Performance Measure #3 (4.3 in SUP) Beneficiaries with Disability Contacts per 10K Beneficiaries with Disability in State	Total number of Medicare Beneficiaries with a disability that were reached per 10,000 beneficiaries with a disability in PSA	Total Closed Intake Forms that indicated the beneficiary as disabled  <u>Divided by</u>  Number of beneficiaries with disability in state per 10,000 disabled beneficiary population
Performance Measure #4 (4.4 in SUP) Low Income Contacts per 10K Low Income Population in State	Total number of Low-Income Medicare Beneficiaries reached per 10,000 low-income beneficiaries in PSA	Total Closed Intake Forms that indicated the beneficiary's monthly income is below 150% of Federal Poverty Level  <u>Divided by</u>  Number of low-income people in state per 10,000 low-income total population

Performance Measure	Definition	Formula
<p>Performance Measure #5 (4.5 in SUP)</p> <p>Enrollment Contacts and Assistance per 10K Beneficiaries in State</p>	<p>Total number of Medicare Beneficiaries that discussed enrollment, enrollment assistance, eligibility, benefits, and/or benefit comparisons topics under Medicare Part A and B, Medicare Health Plans, Medicare Prescription Drug Coverage, Medicaid (Medi-Cal) and Medi-gap and other My Health Topics per 10,000 beneficiaries in PSA</p>	<p>Total Closed Intake Forms on which topics discussed include: Medicare Prescription Drug Coverage plan eligibility, benefit comparisons; Medicare Prescription Drug Coverage enrollment/application assistance; Medicare (Parts A and B) enrollment, eligibility, benefits; Medicare Health Plans enrollment, disenrollment, eligibility, comparisons; Medicaid QMB/SLMB/QI; Other Medicaid; Medigap/Supplement/SELECT enrollment, eligibility, comparisons; Other, Other: MyHealth + number of beneficiaries enrolled during a PAM event</p> <p><u>Divided by</u></p> <p>Number of beneficiaries in state per 10,000 beneficiary population</p>
<p>Performance Measure #6 (4.6 in SUP)</p> <p>Part D Enrollment Contacts and Assistance per 10K Beneficiaries in State</p>	<p>Total number of Medicare Beneficiaries that discussed Medicare Prescription Drug Coverage enrollment assistance as a topic per 10,000 beneficiaries in PSA</p>	<p>Total Closed Intake Forms on which Medicare Prescription Drug Coverage plan eligibility, benefit comparisons; Medicare Prescription Drug Coverage enrollment/application assistance topics were discussed + number of beneficiaries enrolled in Part D during a PAM event (Activity Type A, B, F)</p> <p><u>Divided by</u></p> <p>Number of beneficiaries in state per 10,000 beneficiary population</p>
<p>Performance Measure #7 (4.7 in SUP)</p> <p>Total Counselor Full Time Equivalents per 10K Beneficiaries in PSA</p>	<p>Total number of local and field ACTIVE SHIP/HICAP Counselor per 10,000 beneficiaries in PSA</p>	<p>Total local and field volunteer counselor hours + number of local and field SHIP-paid counselor hours + number of local and field in-kind counselor hours.</p> <p><u>Divided by</u></p> <p>2,000 hours x number of state Medicare beneficiaries per 10,000 beneficiary population</p>
<p>Performance Measure #8 (4.8 in SUP)</p> <p>Percent of Active SHIP Counselors that Participated in Update Trainings</p>	<p>Percent of total ACTIVE Counselors participating in Update Trainings in Program</p>	<p>Total HICAP Counselors attending update trainings x 100</p> <p><u>Divided by</u></p> <p>The total number of active SHIP counselors</p>

CDA will determine the percentage of expected increases in performance from the benchmark on an individual AAA basis over the ensuing years. In developing these targets, keep in mind there are certain times in a year when counseling demand is lower, and when resources can be shifted to additional outreach and education efforts. Use your data trends over the past twelve months to conduct this analysis for resource planning.

Please direct questions about this Guidance to Xochi Prock, (916) 928-2289, e-mail [xprock@aging.ca.gov](mailto:xprock@aging.ca.gov); or Mark Meis, (916) 928-2290, e-mail [mmeis@aging.ca.gov](mailto:mmeis@aging.ca.gov).

A handwritten signature in blue ink that reads "Lynn Daucher". The signature is written in a cursive style.

Lynn Daucher  
Director

Attachments:

- Attachment A - HICAP Performance Measures/Benchmarks by PSA
- Attachment B - HICAP SUP of Area Plan pages 44 through 47