

# INFORMATION AND REFERRAL/ASSISTANCE'S (I&R/A) ROLE IN CONNECTING CLIENTS TO BENEFITS

## Executive Summary

Individuals reach out to Information and Referral/Assistance (I&R/A) programs for assistance for many needs. Public benefits, such as Medicaid and the Medicare low-income subsidies, the Supplemental Nutrition Assistance Program (SNAP), and the Low-Income Home Energy Assistance Program (LIHEAP), help individuals access healthcare, food, and home heating and cooling. Benefits play a critical role in providing assistance with financial needs. I&R/A agencies and professionals serve as a gateway to state and local aging and disability services. As needs are changing and growing, the roles of I&R/A specialists are expanding to include screening, application assistance, outreach, and other functions. This brief shares results from a national survey of I&R/A agencies and provides an opportunity to learn about benefits screening, assistance, and outreach within I&R/A aging and disability networks. Around half of agencies in the survey reported screening and providing application assistance for these benefits. Agencies use a variety of tools to assist with screening and education.

## Background and Methodology

The National Association of States United for Aging and Disabilities (NASUAD), with support from the National Council on Aging (NCOA), works to further Medicare Improvements for Patients and Providers Act (MIPPA) education and outreach to increase enrollment into the Medicare low-income subsidies.

In 2018, the National I&R Support Center at NASUAD, in partnership with the National Council on Independent Living (NCIL), conducted a national survey to assess the state of I&R/A systems serving older adults, persons with disabilities, and caregivers. The results from the survey highlight trends and developments in the provision of I&R/A services.

A web-based survey instrument known as Survey Gizmo was used to collect survey responses. The I&R Support Center at NASUAD and NCIL distributed the survey through several dissemination channels. The survey was distributed to NASUAD's state members, who were requested to forward it to the I&R/A lead staff at their agencies, as well as to agencies within their networks, such as Area Agencies on Aging (AAAs) and Aging and Disability Resource Centers (ADRCs). The I&R Support Center also disseminated the survey through its email distribution list comprised of over 1,900 aging and disability I&R/A professionals in national, state, and local agencies across the country. Additionally, the I&R Support Center disseminated the survey through the AIRS Networker, which reaches close to 7,000 I&R professionals. NCIL distributed the survey to its Centers for Independent Living (CILs) distribution list comprised of CILs across the country. The survey was in the field in April 2018 with follow up data gathered in May 2018.

*With support from:*

A total of 355 respondents completed this survey, including representatives from Area Agencies on Aging (AAA) (131 respondents), Centers for Independent Living (CILs) (93 respondents), other non-profits organizations (56 respondents), state agencies on aging and disability (39 respondents), and Aging and Disability Resource Centers (ADRC) (36 respondents). While respondents could only select one agency type for their organization, some respondents likely work in organizations that include more than one type of agency.

Forty percent of respondents indicated that their agency serves a rural area; significantly above any other type of geographical area. Twenty-one percent of respondents work in agencies that serve a large urban area and 18 percent work in agencies that serve a small urban area. Given that respondents include state agencies on aging and disability, it is not surprising that 19 percent of respondent agencies serve a statewide area. Under two percent of respondent agencies serve either national or frontier areas. Sixteen percent of respondents further described that their agency serves a multi-county area or a large county or region that includes different geographical areas such as urban and rural areas, or suburban and rural areas.

In collaboration with the I&R Support Center, the 2018 National I&R/A Network Survey included questions to gather data about the role that I&R/A specialists and agencies

play in connecting individuals with public benefits. Survey questions gathered information about benefits screening, application assistance, and outreach efforts for the Medicare low-income subsidies, SNAP, and LIHEAP. This brief is a summary of the survey results related to I&R/A agencies and specialists connecting individuals with public benefits.

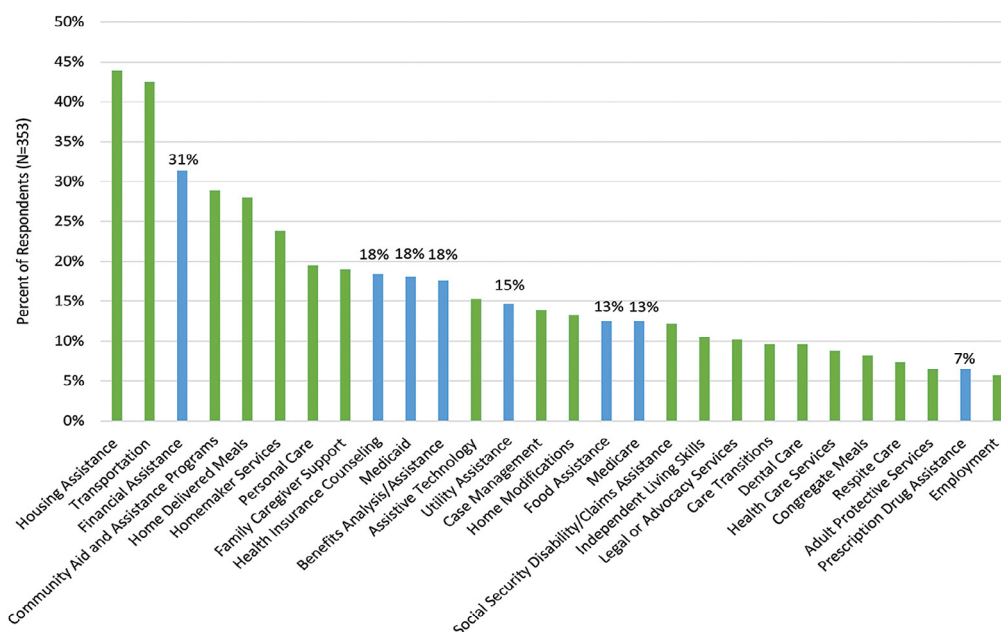
## General Survey Results

### Frequently Requested Services and Unmet Service Needs

Data on the needs and unmet needs of inquirers is useful in understanding community needs, service gaps, and trends over time. The I&R/A process—which includes assessing an individual’s needs; providing information, service referrals, and/or assistance; and follow-up—offers a window into the service needs and unmet service needs of inquirers. I&R/A encounters and follow up generate rich data on the service needs and unmet needs of communities and populations. The 2018 survey asked respondents to identify most frequent service requests and most frequent unmet service needs to provide a national snapshot of the service needs and unmet needs of inquirers served through aging and disability I&R/A networks.

Among responses for most requested services were several services associated with benefits outreach, access, and enrollment, including financial assistance, health insurance

**Figure 1: Most Frequently Requested Services**



\*Most requested services associated with benefits outreach, access, and enrollment are highlighted in blue.

counseling, Medicaid, benefits analysis/assistance, utility assistance, food assistance, Medicare, and prescription drug assistance (see Figure 1).

Along with asking respondents to identify most frequently requested services, the survey also asked respondents to select the most frequent unmet service needs identified in the past year. In the I&R field, unmet needs may reflect both system-level and individual barriers to accessing services. For example, system-level barriers can include long waitlists for services, a lack of providers, and gaps in transportation options. Individuals may fail to qualify for services based on detailed eligibility assessments or be unable to meet cost share requirements. I&R data on unmet needs is a valuable indicator of gaps and limitations within the service delivery system.

As with frequently requested services, several unmet needs were associated with benefits outreach, access, and enrollment including financial assistance, utility assistance, prescription drug assistance, food assistance, health insurance, benefits analysis/assistance, and health insurance counseling (see Figure 2).

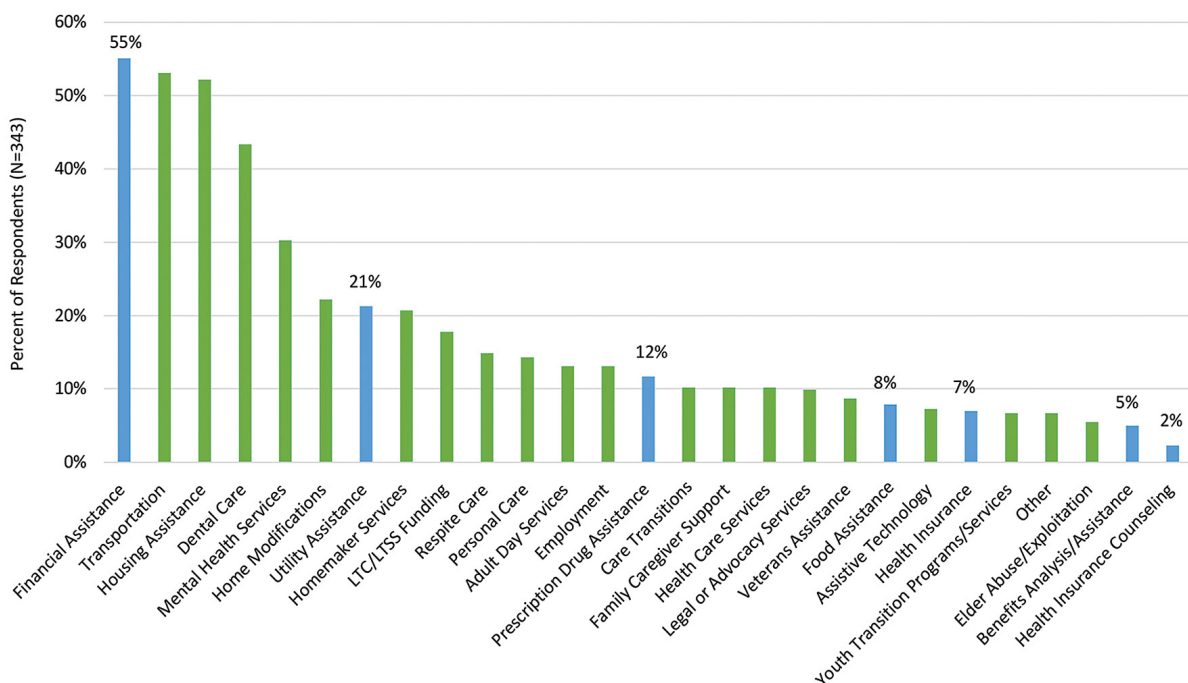
The survey data on frequently requested services and unmet service needs demonstrates that benefits related to utility assistance, Medicare low-income subsidies, and food assistance are frequently requested services, but that

sometimes these needs are going unmet. In some cases, this finding reflects systemic service gaps. For example, the utility assistance data reflects the fact that programs often run out of funds and cannot serve all individuals who might qualify for help. At the same time, this demonstrates an opportunity for I&R/A programs, through efforts such as screening, application assistance, and outreach, to connect individuals to other benefits that may help address household financial needs.

### Growing Needs and Changing Roles

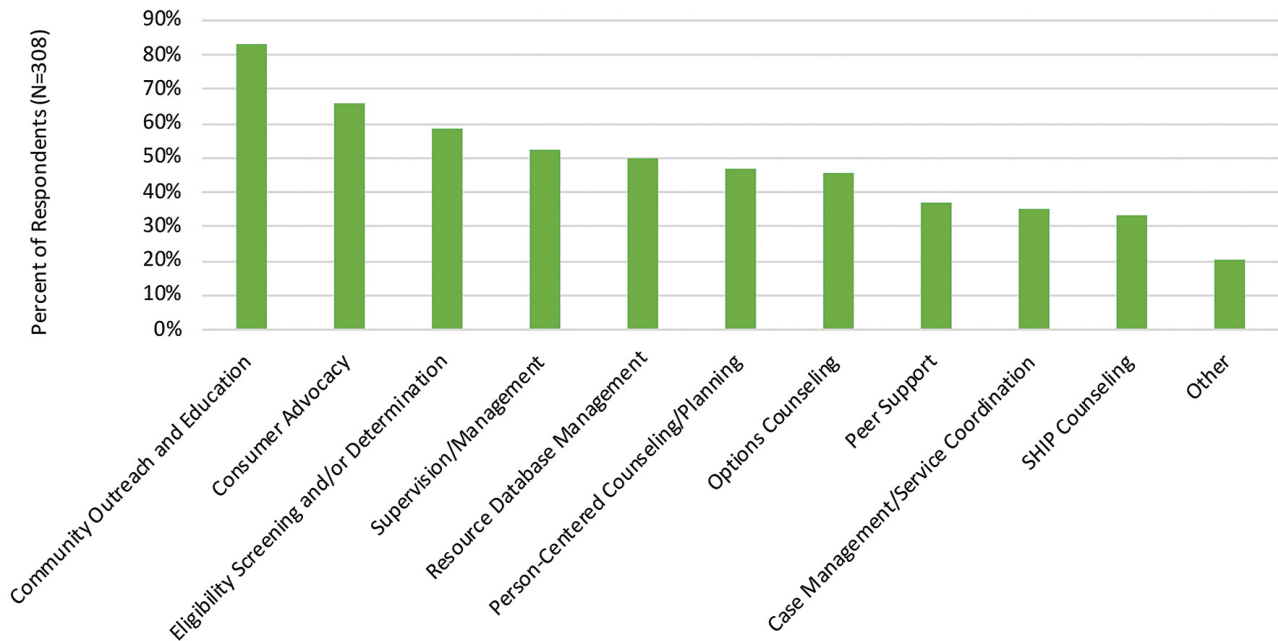
Throughout the survey, respondents identified that their agencies are serving more individuals with multiple and complex needs, and that the role of I&R/A specialists is changing and job responsibilities are expanding. Trend data indicates that I&R/A specialists are taking on more responsibilities with regards to community outreach and education, and eligibility screening to help connect clients to benefits and services (see Figure 3). Related to growing needs, 64 percent of survey respondents reported that the number of calls is increasing. One respondent shared that their agency had an, “Increased volume of calls and more complex calls. Assessments required for screening have also increased.” Related to the role of I&R/A specialists, one respondent stated that, “Job responsibilities have greatly

**Figure 2: Most Frequent Unmet Service Needs**



\*Most frequent unmet service needs associated with benefits outreach, access, and enrollment are highlighted in blue.

**Figure 3: Job Responsibilities in Addition to I&R/A**



increased in application assistance for public benefits due to office closures and automated phone lines.” As a result of demographic trends and other factors, the need for consumer assistance has continued to increase. However, federal funding has not kept pace with this growing demand. Many survey respondents reported serving more individuals with fewer resources.

Similarly, the Alliance of Information and Referral Systems (AIRS), the professional membership organization for I&R/A providers, surveyed over 500 Certified I&R Specialists-Aging/Disability (CIRS-A/D) professionals in the Spring of 2018. This survey found that screening and application assistance are increasingly becoming a part of an I&R/A specialist’s role. For example, 82 percent of survey respondents said that eligibility screening, and 49 percent said that eligibility determination is a part of their work as an I&R/A specialist. Additionally, 60 percent of respondents said that they assist clients with applications.

In other words, the trend is that I&R/A specialists are providing enhanced information and referral. As needs are growing, job responsibilities are changing. As a result, this is increasing I&R/A involvement with benefits screening, application assistance, and outreach efforts to connect individuals with benefits.

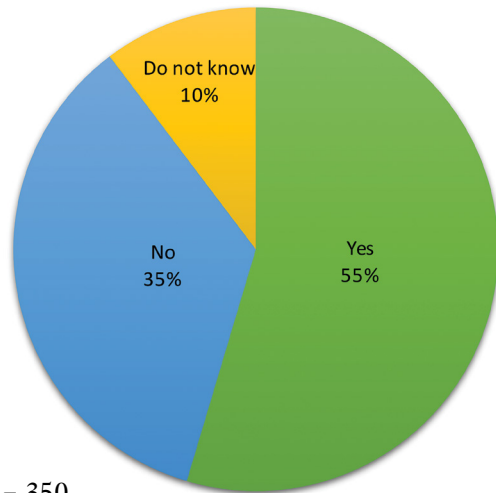
## Medicare Low-Income Subsidies

The Medicare low-income subsidies are a set of federally and state funded programs that help make Medicare more affordable for low-income Medicare recipients. These programs include the Medicare Savings Programs (MSPs) and the Medicare Part D Low-Income Subsidy (LIS/Extra Help). The MSPs include the Qualified Disabled Working Individual (QDWI) program; the Qualifying Individual (QI) program; the Specified Low-Income Medicare Beneficiary (SLMB) program; and the Qualified Medicare Beneficiary (QMB) program. Each program has different income and resource eligibility limits. There are federal criteria for these limits, though states may choose to be less restrictive. For instance, states may increase asset limits, eliminate asset tests, have higher income limits, and/or have higher standard income disregards. There are two levels of LIS/Extra Help; full help and partial help. The Social Security Administration handles LIS/Extra Help applications and eligibility determination.

### Screening for Medicare Low-Income Subsidies

The survey asked respondents if I&R/A specialists in their agency screen for potential eligibility for the Medicare low-income subsidies, including the MSPs and LIS/Extra Help. Over half, 55 percent, of respondents said yes; 35 percent said no; and 10 percent said that they did not know (see Figure 4).

**Figure 4: I&R/A Specialists that Screen for Medicare Low-Income Subsidies**



Agencies that said their I&R/A specialists screen for potential eligibility for Medicare low-income subsidies described the tool that their specialists use. The type of screening tool ranged widely across respondents. Common responses included:

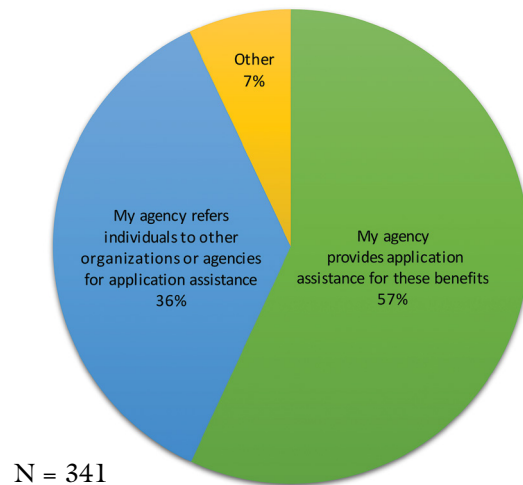
- agency specific tools;
- state assessments and state tools;
- having a conversation with the individual about program eligibility standards and the individual's income;
- State Health Insurance Assistance Program (SHIP) tools; and
- program specific tools.

#### **Application Assistance for Medicare Low-Income Subsidies**

The survey also asked participants if their agency provides application assistance to individuals applying for Medicare low-income subsidies. Note that the questions that asked about screening specifically asked if I&R/A specialists screen, whereas questions that asked about application assistance were kept broader and asked if the agency, rather than specifically I&R/A specialists, provides application assistance.

Fifty-seven percent said that their agency provides application assistance; 36 percent said that their agency refers individuals to other organizations; and seven percent said other (see Figure 5). The most common referral was

**Figure 5: I&R/A Agencies that Provide Application Assistance for Medicare Low-Income Subsidies**



to State Health Insurance Assistance Programs (SHIPs). Among survey respondents, AAAs and ADRCs said that they tend to provide application assistance rather than refer; and CILs, state agencies, and other non-profit organizations said that they tend to refer rather than provide application assistance. This data reflects the trend that AAAs tend to provide SHIP counseling, and many ADRCs are also connected to AAAs. For example, one state agency said that, "Our agency contracts with the Area Agencies on Aging for SHIP counseling and MIPPA counseling. The Centers for Independent Living are also MIPPA ADRC contractors." Some respondents selected other because they did not know; they did not provide application assistance; or they both completed applications and provided referrals. For instance, a state agency shared that, "We complete applications as well as refer to other organizations."

This data demonstrates that a fairly large percentage of agencies refer to other organizations. As a result, agencies should ensure that I&R/A specialists are equipped with strong referral resources so that individuals are referred to the most helpful resources possible. Additionally, more organizations could explore the possibility of providing application assistance for the Medicare low-income subsidies. There are a variety of administrative practices that can facilitate application assistance. NASUAD has tip sheets available as education and reference tools for aging and disability professionals. Visit NASUAD's website for more information: [www.nasuad.org/mippa](http://www.nasuad.org/mippa).

### Training for Medicare Low-Income Subsidies

The survey also asked if I&R/A specialists are given training on the Medicare low-income subsidies. Sixty-two percent said yes; 26 percent said no; and 12 percent said they did not know. With growing numbers of Medicare beneficiaries, agencies that do not provide training may wish to consider how training on these programs could benefit the individuals that they serve.

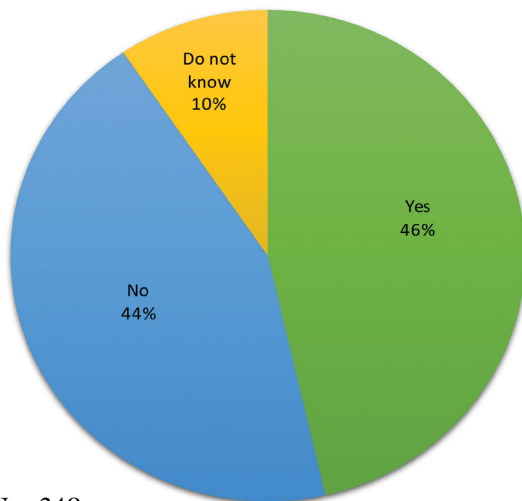
## Supplemental Nutrition Assistance Program

The Supplemental Nutrition Assistance Program (SNAP) is a program to help participants afford their food costs. SNAP is a federally funded program that is administered through the states. There are federal criteria for income and resource limits, though states can set more liberal income and resource limits or eliminate asset tests altogether.

### Screening for SNAP

The survey asked participants if I&R/A specialists in their agency screen for potential eligibility for SNAP. Forty-six percent of respondents said yes; 44 percent said no; and 10 percent said that they did not know (see Figure 6). Even though some agencies reported that they did not screen, they still provided variations of support. For example, one CIL said that they did not have a formalized screening process for SNAP, but that they will bring up SNAP as a resource if lack of food is brought up during the I&R contact. An ADRC also shared that they provide applications and assistance completing the applications, but they refer for eligibility screening.

**Figure 6: I&R/A Specialists that Screen for SNAP**



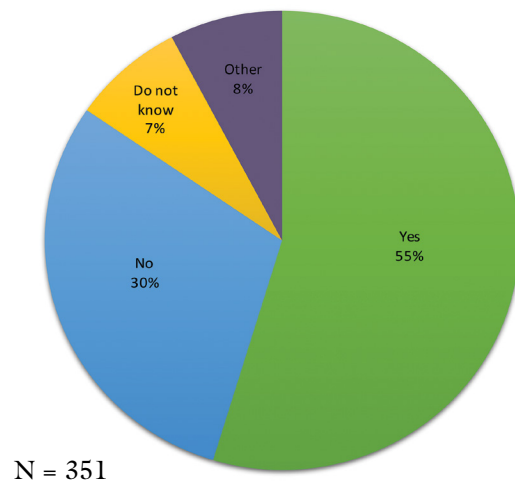
Agencies who said that their I&R/A specialists screen for potential eligibility for SNAP also described the tool that their specialists use. The type of screening tool utilized ranged widely across respondents, though common responses included:

- knowledge of the SNAP program guidelines and eligibility criteria;
- agency specific tools; and
- intake forms.

### Application Assistance for SNAP

Fifty-five percent of respondents said that their agency provides application assistance to individuals applying for SNAP; 30 percent said no; eight percent said other; and seven percent said they did not know (see Figure 7).

**Figure 7: I&R/A Agencies that Provide Application Assistance for SNAP**



Among survey participants, ADRCs, AAAs, and CILs said that they tend to provide application assistance for SNAP; and other non-profit organizations and state agencies said that they tend to not provide application assistance. Many respondents who selected other said that they will sometimes, occasionally, or if needed provide application assistance. For instance, one AAA said that they will only provide application assistance for SNAP when filling out a full application for Medicaid or the MSPs.

Overall, just under half of agencies reported that they provide eligibility screening for SNAP, and just over half said that they provide application assistance. I&R/A organizations are implementing innovative practices to increase the number of older adults applying for SNAP. For example, one state agency shared that they are part of a federal demonstration project in which they developed a Simplified Elderly Food Assistance Form, which significantly decreased the number of pages in the SNAP application. One AAA also described how they have a grant from NCOA to assist with SNAP applications. The agency has a SNAP counselor who is trained in all legitimate income deductions, and they submit and track applications in their state's data system. If problems are encountered, they will troubleshoot immediately rather than wait for consumers to be mailed their notices. This AAA reported that, "The average award a recipient receives is significantly higher than the statewide average when we assist callers to complete the applications."

While not all agencies screen or provide application assistance for SNAP, lessons can be learned from agencies who do provide this type of assistance to clients. Additionally, while some organizations may not focus on, or have the capacity to provide SNAP assistance, some organizations still educate their staff about the basics of SNAP so that they can provide referrals or basic assistance if the need for food assistance arises.

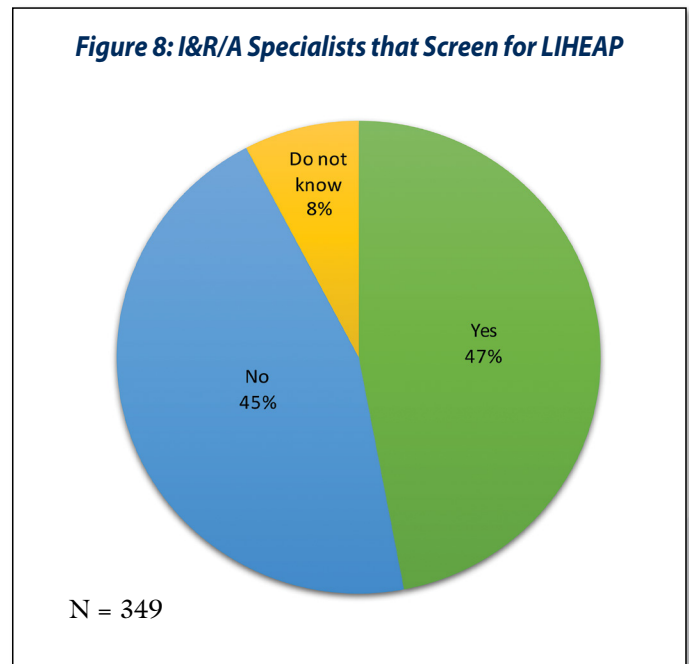
## Low-Income Home Energy Assistance Program

The Low-Income Home Energy Assistance Program (LIHEAP) is a federally-funded program that helps beneficiaries with energy costs. This program helps with home heating and cooling costs, and it may also help with weatherization improvements and some emergency situations. LIHEAP is a block grant to states, and Community Action Agencies typically administer the grant locally. Oftentimes, funding for this program runs out.

## Screening for LIHEAP

Forty-seven percent of survey respondents said that I&R/A specialists in their agency screen for potential eligibility for LIHEAP; 45 percent said no; and eight percent said that they did not know (see Figure 8). As funds can run out for LIHEAP, some organizations reported that they will only see if a client qualifies for LIHEAP if funds are available at that time. Additionally, several participants who do not screen, said that will provide information about LIHEAP as a resource.

**Figure 8: I&R/A Specialists that Screen for LIHEAP**



Agencies who said that their I&R/A specialists screen for potential eligibility for LIHEAP described the tool that their specialists use. The type of screening tool ranged widely across respondents, though, common responses included:

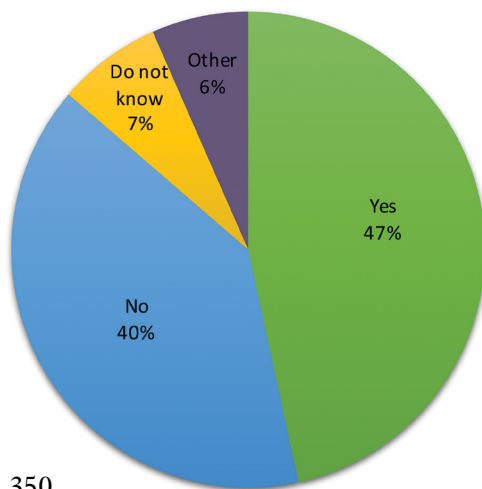
- knowledge of the program's eligibility guidelines and the individual's income and assets;
- agency-specific tools; and
- intake forms.

### Application Assistance for LIHEAP

When it comes to providing application assistance to individuals applying for LIHEAP, 47 percent of respondents said yes; 40 percent said no; seven percent said they did not know; and six percent said other (see Figure 9). Among survey respondents, ADRCs, AAAs, and CILs said that they tend to provide application assistance for LIHEAP; and other non-profit organizations and state agencies said that they tend to not provide application assistance for LIHEAP.

A number of participants who selected other, said that they refer for application assistance for LIHEAP. Many respondents also talked about the role of Community Action Agencies. For instance, an ADRC said that application assistance for LIHEAP, “Is mostly done at the local Community Action Agency, however we will help if needed.” Furthermore, one AAA said that, “Our county’s Community Action Agency runs the LIHEAP program; we can refer individuals to call for an appointment or help them use the online tool for screening and to be assigned an appointment.”

**Figure 9: I&R/A Agencies that Provide Application Assistance for LIHEAP**



Overall, while Community Action Agencies administer LIHEAP in many local communities, I&R/A agencies still provide eligibility screening and application assistance, and they have relationships with or knowledge about, their local Community Action Agency.

### BenefitsCheckUp®

BenefitsCheckUp® is an online tool from NCOA that connects older adults with benefits they may qualify for. It can be used to screen for many benefits including the Medicare low-income subsidies, SNAP, and LIHEAP. This is a tool that is free and publicly available.

Fifty-two percent of respondents said that their agency did not use BenefitsCheckUp® to screen individuals for potential eligibility for benefit programs; 19 percent said they did not know; 18 percent said yes; and 11 percent said other. Many respondents who selected other said that they occasionally use the tool. A state agency also shared that they use BenefitsCheckUp® as a training tool to help ADRC and other AAA staff who need the experience. Additionally, one AAA reported that they will provide BenefitsCheckUp® to individuals or family members for self-screening. Overall, survey participants indicated that they may use BenefitsCheckUp® for a variety of reasons, whether it be to train staff, to screen clients for benefits, or to provide to clients for self-screening. BenefitsCheckUp® is another education and reference tool available to assist aging and disability professionals, clients, and caregivers.

*The MIPPA initiative at NASUAD focuses on identifying and disseminating promising practices for MIPPA outreach at the state and local levels. For more information, including resource guides, tips sheets, and outreach materials, please visit [www.nasuad.org/mippa](http://www.nasuad.org/mippa). To learn more about MIPPA, visit NASUAD’s online learning center to access the free course on “The Role of MIPPA: Helping Older Adults and Individuals with Disabilities Afford their Medicare Costs”. For more information, please visit: [www.nasuadiq.org](http://www.nasuadiq.org).*

### FOR MORE INFORMATION:

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