

State Health Insurance Assistance Program (SHIP)

Report to Congress
GY 2018

Prepared by
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Community Living
Office of Healthcare Information and Counseling

Contents

Executive Summary.....	3
Introduction	4
History.....	4
Growing Population and Increasing Service Needs	4
2018 Program Performance.....	5
SHIP Performance Data.....	5
Challenges Frequently Reported by People with Medicare	8
SHIP Innovations	10
Administration Overview	12
2018 Program Initiatives.....	12
Conclusion.....	15
Appendix A: 2018 State Health Insurance Assistance Program Grant Awards	16
Appendix B: SHIP Performance Measures & Likert Ratings.....	17

Executive Summary

The State Health Insurance Assistance Program (SHIP) provides Medicare beneficiaries with information, counseling, and enrollment assistance. Its mission is to empower, educate, and assist Medicare-eligible individuals, their families, and caregivers to make informed health insurance decisions that optimize access to care. SHIPs provide unique, personal, free, and in-depth assistance that is not replicated under any other Federal program.

The SHIP program was created in 1990 under Section 4360 of the Omnibus Reconciliation Act (OBRA) (Pub. L. 101-508) and is administered by the Administration for Community Living (ACL). In Grant Year (GY) 2018, ACL received a discretionary appropriation for \$49.1 million. ACL invested these dollars in 54 grants to states to provide local service to Medicare beneficiaries, staff to support and monitor grantees, and administrative support contracts and grants to provide technical assistance, support, and continuous improvement for the program.

During 2018:

- SHIPs had nearly **2.7 million contacts with Medicare beneficiaries, their families, and caregivers**, accounting for **1.57 million hours of one-to-one assistance**.
- On average one-on-one counseling sessions covered **three** complex Medicare topics and took **35 minutes**.
- SHIPs hosted **64,300 outreach events**, including interactive presentations, participation in community and health fairs, and over **12,500 enrollment events**.
- During the enrollment events, SHIPs assisted roughly **185,000 Medicare beneficiaries, their families, and caregivers** with plan comparisons.

This report details SHIP program activities and their impact on beneficiaries during the 2018 grant year (April 1, 2018 to March 31, 2019), including a brief history of SHIP, highlights from the 54 SHIP state grantees, challenges people with Medicare report to SHIP, and program innovations. Additionally, a brief description of administrative initiatives for the 2018 fiscal year (October 1, 2018 to September 30, 2019) is included.

Introduction

The State Health Insurance Assistance Program (SHIP) is a national program that offers one-on-one assistance, counseling, and education to Medicare beneficiaries, their families, and caregivers to help them make informed health benefits decisions. The U.S. Department of Health and Human Services' Administration for Community Living (ACL) provides Federal grants to states to fund local SHIPs and establish community-based networks of counselors who assist in-person and by phone, make group presentations, and use a variety of media sources to educate people with Medicare. SHIPs provide unique, personal, free, and in-depth assistance that is not replicated under any other Federal program.

The SHIP 2018 fiscal year (FY) actual appropriation was \$49.1 million, with \$44.9 million provided to states and territories for the SHIP State Base Grants and the remainder funds administrative initiatives to support the work of the grantees. There are 54 SHIP grantees – one in each state, the District of Columbia, Puerto Rico, Guam, and the U.S. Virgin Islands. Two-thirds of grant recipients are State Units on Aging and the other one-third are State Departments of Insurance.

History

The SHIP program was created under Section 4360 of the Omnibus Reconciliation Act (OBRA) of 1990 (Pub. L. 101-508), which authorized the Secretary of the U.S. Department of Health and Human Services (HHS) to make grants to States to establish and maintain health insurance advisory service programs for Medicare beneficiaries. The grants fund SHIPs to provide direct, local assistance with Medicare (including the Original Medicare (Parts A and B) program, Medicare Advantage (Part C), and the Medicare Prescription Drug (Part D) program), Medicaid, and other health insurance options, including Medicare supplement insurance (also called Medigap), long-term care insurance, and managed care options.

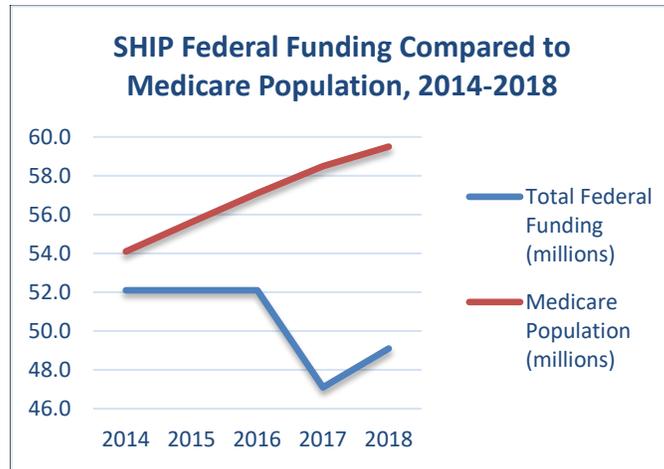
Growing Population and Increasing Service Needs

Over the last decade, the Medicare beneficiary population grew nearly **31%**, from 45.4 million (2008) to 59.5 million (2018). Meanwhile, Federal funding for the SHIP program grew roughly **15%**, from \$42.6 million (2008) to \$49.1 million (2018). The table below depicts annual Federal funding levels since 2014, and steady growth in the Medicare population (which is expected to continue to grow).

Medicare Population and SHIP Discretionary Appropriation Comparison, 2014-2018

	2014	2015	2016	2017	2018
Total Federal Funding (millions)*	\$52.1	\$52.1	\$52.1	\$47.1	\$49.1
<i>Funding to State Grantees (millions)</i>	<i>\$48</i>	<i>\$48</i>	<i>\$48</i>	<i>\$43.5</i>	<i>\$44.9</i>
Funding Growth Rate Since 2014		0%	0%	-10%	-6%
Medicare Population (millions)	54.1	55.6	57.1	58.5	59.5
Medicare Population Annual Growth Rate		3%	3%	2%	1.7%

*Excludes Medicare Patients and Providers Act (MIPPA) funding designated for the SHIPs as that work is outside the scope of this report.



A full list of SHIP grantees and the 2018 Grant Year funding amounts can be found in Appendix A.

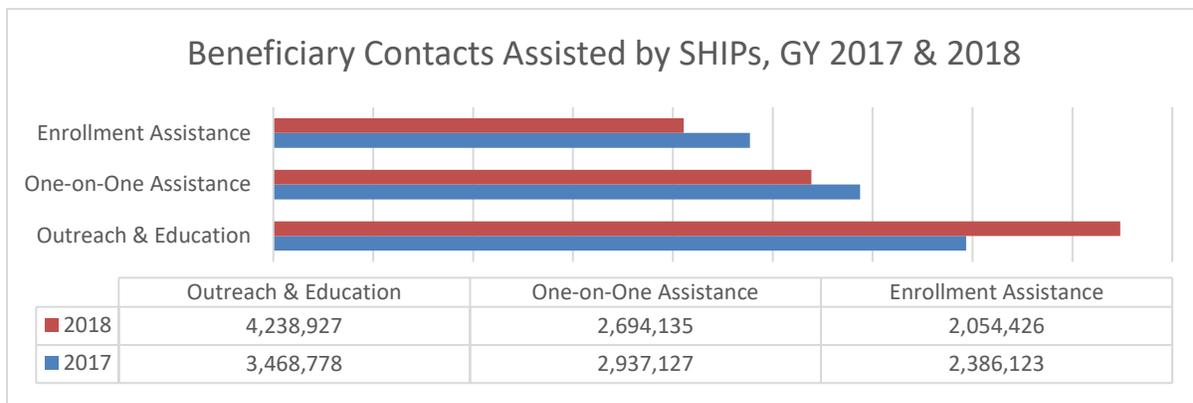
2018 Program Performance

SHIPs provide Medicare beneficiaries unbiased information to empower them to make the best health care choices for themselves. This section highlights SHIP grantee performance from the 2018 grant year.

SHIP Performance Data

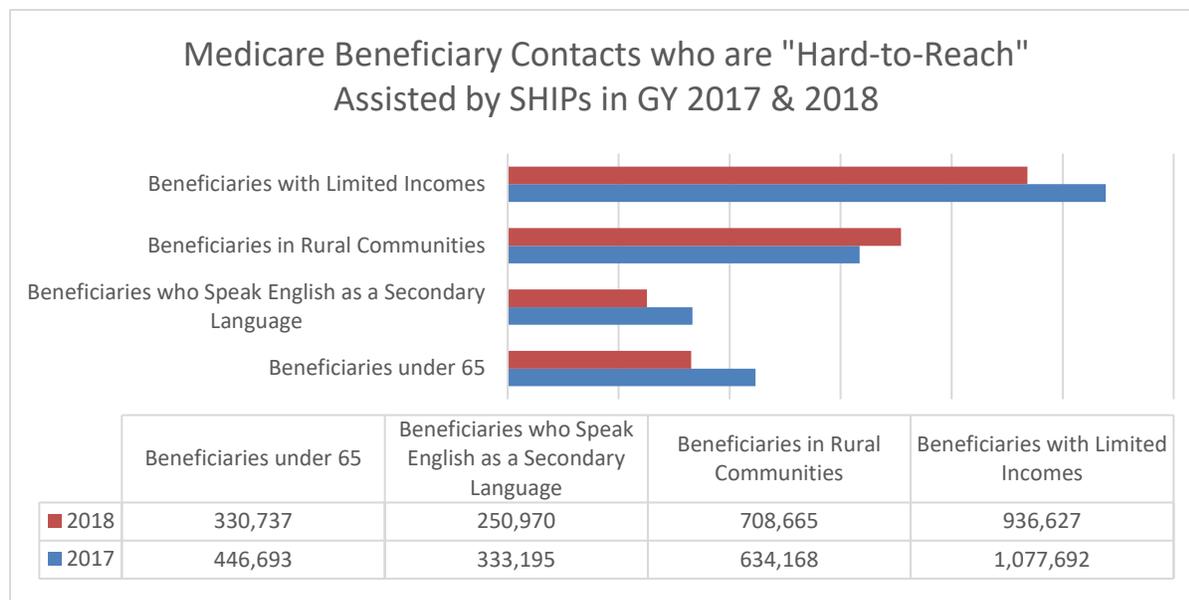
SHIPs serve as the main source for Medicare information and assistance in the community. They do so in two ways: 1) conducting outreach activities to inform the public about Medicare and other related health coverage options; and 2) providing individualized personal assistance to people with Medicare, their families, and caregivers (including enrollment assistance).

SHIPs report a decrease in the number of beneficiaries assisted due to unstable funding and difficulty training staff on the new SHIP Tracking and Reporting System (STARS), which the network transitioned to in Grant Year 2018. Due to this transition, the performance data may be under representative of the work performed. More information on this transition can be found in the 2018 Program Initiatives section of this report. The data that follows is from the SHIP Tracking and Reporting System (STARS) for Grant Year 2018 (April 1, 2018 – March 31, 2019).



Source: SHIP Performance Measures 1 (Client Contacts), 2 (Outreach Contacts), and 5 (Enrollment Contacts). See Appendix B for background on the SHIP Performance Measures.

SHIPs provide education and counseling to all Medicare beneficiaries, with a special focus on beneficiary groups considered “hard-to-reach.” These groups include beneficiaries who are low income, who reside in rural communities, and/or are non-native English speakers. Additionally, SHIPs target outreach and assistance to beneficiaries under age 65.



Source: SHIP Performance Measures 3 (Under 65 Contacts) and 4 (“Hard-to-Reach” Contacts as compared to Summary Data in STARS). See Appendix B for background on the SHIP Performance Measures.

In Grant Year 2018, 12,518 SHIP team members (nearly half of whom were volunteers) spent more than 2.8 million hours helping Medicare beneficiaries understand and make educated choices about their healthcare coverage. Every SHIP is required to thoroughly screen, train, and certify each team member,

*Over **12,500** SHIP team members (nearly half of whom were volunteers) spent more than **2.8 million hours** helping Medicare beneficiaries*

including volunteers. Screening, training, and certification must happen before a SHIP counselor can work with any Medicare beneficiary. SHIPs are required to use ACL’s Volunteer Risk & Program Management Policies¹ to support their program management. Each SHIP determines how they will create training to meet these standards. The SHIP Technical Assistance Center has an Online Counselor Certification Tool which many of the states use for their training and certification.

Outreach & Education Activities

SHIPs conduct outreach activities throughout their local communities to educate the public about Medicare and help people make informed healthcare decisions. In the 2018 grant year, SHIPs educated almost 3.6 million people at more than 64,300 events including in-person presentations, health or senior fairs, and enrollment events. Over 12,500 of these events were Enrollment Events which focused on providing in-person, one-on-one assistance to help people compare Medicare plans and complete enrollment applications.

¹ ACL’s Volunteer Risk & Program Management Policies can be found at <https://acl.gov/programs/senior-medicare-patrol/volunteer-risk-and-program-management-vrpm-policies>

Presentations

SHIPs conducted approximately 36,000 interactive presentations that reached over 1.65 million people. These presentations are tailored to the audience and highlight important dates and timely details about Medicare, including the basics of Medicare enrollment, coordination of benefits, as well as coverage options and details. SHIPs seek free and low-cost venues for these events, which are often held in libraries, community rooms, senior centers, or church event spaces.

SHIPs educated almost 3.6 million people at more than 64,300 events

Health and Senior Fairs

SHIPs participated in over 15,700 fairs to raise awareness of their services for people with Medicare, their families, and caregivers. In addition to reaching people with Medicare, SHIPs often use these opportunities to meet new local partner organizations that can help expand the reach of the SHIP services.

Enrollment Events

SHIPs hosted over 12,500 enrollment events, reaching over 185,000 people with Medicare, their families, or caregivers. At an enrollment event, a SHIP counselor meets one-on-one with a beneficiary to enter their prescription drugs into the Centers for Medicare & Medicaid Services (CMS) Medicare Plan Finder, compare the available plan choices, and discuss the financial implications and coverage options. If a beneficiary would like to change plans, the SHIP counselor can complete an application on the beneficiary's behalf through the Medicare Plan Finder. However, if the beneficiary wants more time to consider the decision, then they can contact the SHIP counselor for enrollment assistance later or contact the insurance plan directly to enroll.

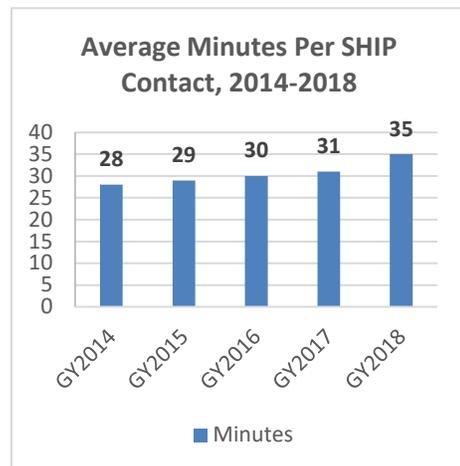
One-on-One Beneficiary Assistance

In 2018, SHIPs had over 2.7 million one-on-one contacts with Medicare beneficiaries, their families, and caregivers, providing in-depth information about Medicare benefits and other related healthcare questions or issues. These contacts often involve multiple subjects and require extensive counseling and assessment to properly address questions and issues.

The average time spent on one-on-one counseling continues to increase annually, reflecting the continuous need for and complexities of SHIP counseling. It was 28 minutes in 2014, 30 minutes in 2016, and 35 minutes in 2018.

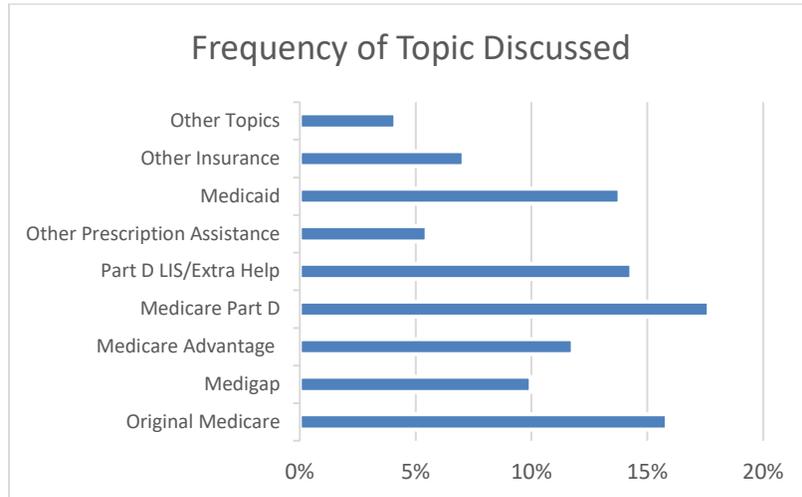
Beneficiaries contact SHIP with unique needs including but not limited to the following:

- Managing benefits when working beyond the age of Medicare eligibility;
- Coordinating Medicare benefits with employer, workers compensation, military, or retiree coverage;



- Completing applications for Medicare coverage or programs to help pay for Medicare costs;
- Assisting with claims denials and appeals; and
- Shopping for long-term care insurance.

On average one-on-one counseling sessions covered three complex Medicare topics. The chart below shows the frequency of topics discussed.



Challenges Frequently Reported by People with Medicare

SHIPs often counsel Medicare beneficiaries who report challenges with Medicare-related processes and policies. This section describes some of the challenges reported this Grant Year. In addition, per the authorizing statute, the SHIPs provided ACL with their recommendations for the challenges identified. Each of these issues and the associated recommendations are detailed briefly in the section below.

Medicaid and Medicare Coordination

According to CMS, in 2018 there were approximately 12.2 million people enrolled in Medicare and Medicaid (also known as dually eligible beneficiaries).² Beneficiaries who are dual eligible must coordinate their Medicare and Medicaid benefits which can be confusing. Additionally, Medicaid is administered on the state level and varies significantly across the country. The SHIPs reported the following systemic concerns from beneficiaries related to Medicaid. These are on-going concerns that the SHIPs have reported in prior years.

Medicaid to Medicare Transitions

The Affordable Care Act gave states the opportunity to expand Medicaid to the adult population aged 19 through 64 and a majority have done so. Expanded Medicaid eligibility guidelines do not align with the guidelines for traditional Medicaid or the Medicare Savings Programs. As a result, SHIPs report the need for additional information to support beneficiaries who are turning 65 and, therefore, transitioning from expanded Medicaid for the adult group to Medicare and may be faced with higher health care costs than they had in the past. Each state varies in how they process beneficiaries who are transitioning between these programs.

² https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Downloads/MMCO_Factsheet.pdf

SHIPs recommend ongoing education for consumers and health insurance counselors to help beneficiaries understand the impact of this transition and what actions they need to take.

Medicaid Managed Care

Medicaid managed care is designed to manage cost and utilization for the state Medicaid programs. The state Medicaid agencies contract with managed care organizations to provide services. The SHIPs have noted that it can be difficult for beneficiaries to navigate the options available to them. Many SHIPs work closely with the Medicaid agency and managed care organizations to ensure beneficiaries have the information they need to make an informed decision about their health care. However, more support is needed from the network to properly assist beneficiaries with these options.

SHIPs recommend in depth national discussion and education about managed care programs, and how SHIPs can better help dually eligible beneficiaries.

Formalized Partnership with State Medicaid Agencies

SHIPs assist beneficiaries with understanding their Medicaid coverage, as well as their Medicare coverage. They work closely with the State Medicaid agencies in this effort; however, the nature of these partnerships varies across states. For example, each state determines who may have access to their system for eligibility and benefit verification. If the SHIP is not able to access the state system for benefit verification, it can make it difficult for the SHIP to help beneficiaries who are unsure of their current Medicaid coverage. Additionally, in some instances, State Medicaid employees are not well versed in Medicare coordination or the SHIP program, which leaves the beneficiary struggling to navigate these systems with limited support.

SHIPs recommend national efforts to develop and maintain state level relationships with Medicaid agencies. This could include:

1. Educating team members at the State agencies on both programs (SHIP and Medicaid) to fully support beneficiaries.
2. A dedicated line for the SHIPs to use to connect with the Medicaid office to assist with eligibility and benefit verification and application processing.
3. Granting appropriate access to Medicaid systems so that SHIP team members can verify beneficiary benefit information.

Partnering with the Social Security Administration

The Social Security Administration (SSA) plays an important role by enrolling beneficiaries in Original Medicare (Parts A & B) and administering the Low-Income Subsidy for Medicare Part D/Extra Help. A stronger local partnership between the SHIPs and SSA offices would allow both SHIPs and SSA to better serve beneficiaries who are looking for Medicare information from SSA. Due to resource concerns, often SHIP team members are unable to reach SSA to troubleshoot beneficiary concerns. Additionally, SSA representatives are not appropriately trained on all aspects of Medicare or the SHIP program as a resource.

SHIPs recommend national efforts to develop and maintain local relationships with SSA offices. This could include:

1. Educating SSA team members about SHIP as a resource and partner to troubleshoot beneficiary questions and issues to more fully support beneficiaries.
2. A dedicated line for the SHIPs to use to connect with SSA to assist with individual beneficiary questions and issues.

Annual Medicare Plan Review

Since Medicare health and drug plan options change every year, it's important for Medicare beneficiaries to reevaluate their Medicare coverage and plan choices annually during the Medicare Open Enrollment Period (October 15 – December 7). Beneficiaries often report challenges with the plan review process – related to both understanding changes to their current plan and comparing the other options available in their areas.

Due to the challenges many beneficiaries experience with the annual plan review process, SHIPs spend the majority of the Medicare Open Enrollment Period helping people compare Medicare health and drug plans. SHIPs help beneficiaries make these comparisons by using the Medicare Plan Finder tool on Medicare's website. However, comparing plans and using the Medicare Plan Finder can be a confusing and overwhelming process, particularly for those with low health insurance literacy, limited technology skills, limited English proficiency, or who reside in rural areas with poor internet access. Often beneficiaries express relief at finding their local SHIP for the clarity the volunteers and staff provide to the process.

The SHIP network recommends helping beneficiaries better understand their options by:

1. Promoting SHIP services nationally, allowing beneficiaries to have unbiased assistance comparing options.
2. Enhancing and updating Medicare Plan Finder so that beneficiaries are more easily able to compare plans online on their own.
3. Simplifying Annual Notices of Change, which list the changes in plan coverage, service area and costs that will go in to effect the following plan year and to include SHIPs as a resource in the plan materials.

SHIP Innovations

SHIPs consistently seek efficiencies and reported these examples of innovative outreach strategies and team member training.

Education and Outreach

SHIPs continue to look for new ways to find, educate, and enroll beneficiaries. The following are a few innovative examples from the network this year.

Hawaii's Targeted Mail & Digital Campaigns

The Hawaii SHIP conducted an outreach campaign that included online and direct mail components.

- ***Direct Mail Campaign*** - The postcard content, design, layout, and printing were developed to align with the digital media campaign set to launch around the same time.

The postcard included the Help Line phone number, SHIP website, and dates of the Medicare Open Enrollment Period. Approximately 28,000 postcards were mailed in October to promote Hawaii SHIP services to beneficiaries who may not have email, access to a computer, or if they resided in a rural community with no Internet or Wi-Fi capabilities and were unable to see the ads or PSAs from the digital media campaign. An increase in calls and volunteer inquiries resulted from this wave of direct mailers.

- ***Digital Media Campaign*** - The digital campaign began in October 2018 and included multiple platforms and ad formats (including bonus free airtime). As of March 2019, the campaign has reached more than 2.65 million users and generated nearly 10,000 visits from interested users to the website. Each visit is purposeful, as they were generated by the ads and videos delivered in this campaign. The total overall Click Through Rate was 0.42%, which is much higher than the industry average of 0.15%. The best performing strategy has been the Targeted Email, which generated more than 50% of the total visits to the website but accounted for less than 20% of all ads delivered. The analytics were provided by Raycom/KHNL Hawaii News Now.

Pennsylvania’s “Making SENSE of your Medicare Part D Plan” Campaign

Pennsylvania SHIP developed a campaign targeting pharmacies entitled “Making SENSE of your Medicare Part D Plan.” Local programs provided this handout to pharmacies and encouraged them to ask consumers two questions regarding their Medicare Part D coverage when they pick up their prescriptions: “Are you in the right prescription drug plan for you?” and “Do you need help paying for your prescription drugs?” Additionally, pharmacy staff placed the handout in the bag with the prescription and encouraged consumers to call the APPRISE program to learn about plan options.

Staff Training and Resources

SHIPs spend hours developing and training team members on the complexity of Medicare. Highlighted below are a few examples of innovations on this topic from Grant Year 2018.

Rhode Island’s Resource Chart

Rhode Island’s SHIP developed a Resource Chart with all income and resource guidelines for common benefits for low-income Medicare Beneficiaries. The chart included Extra Help, Medicare Savings Programs, Medicaid, Supplemental Nutrition Assistance Program, Low-Income Heating and Energy Assistance Program, State Pharmaceutical Assistance Program, and Home Community Care Program. This Resource Chart was distributed to all SHIP Counselors to help determine if Medicare beneficiaries were eligible for any of these programs when conducting counseling appointments. This chart has helped to assist in reaching and targeting more low-income Medicare beneficiaries in Rhode Island.

Hawaii’s New Approach to Annual Statewide Re-Certification Training

Every January, Hawaii SHIP conducts a recertification training for volunteers, staff, partners, and SHIP trainers and/or data leads from each Area Agency on Aging. The training is conducted in a “Jeopardy” style format to make training fun, encourage networking among participants, and foster lesson retention. The three “games” feature 70 questions from the SHIP Technical Assistance Center’s Online Counselor Certification Tool that covers a wide range of Medicare-related topics. A Final Jeopardy question is posed at the conclusion of training. Attendees are divided into teams—seated at round tables—to discuss possible answers from the multiple-

choice questions. The event is held at the Kapiolani Community College—within the University of Hawaii system—to support the School of Culinary Arts. Culinary students gain experience preparing meal options for older adults that are tasty, visually appealing, and healthful. At the January 2019 training, SHIP recertified 48 counselors.

Administration Overview

The SHIP discretionary appropriation was \$49.1 million in 2018, with \$44.9 provided to 54 states and territories for the SHIP State Base Grants. The remainder was used to fund the following existing commitments, administrative costs, and the SHIP Technical Assistance Center used to support the SHIP network (more details on each is provided on the pages following):

- SHIP Technical Assistance Center: A single cooperative agreement awarded to the North East Iowa Area Agency on Aging to provide technical assistance, training, and resources to the SHIP grantees to support the national network. This grant is in Budget Year 2 of 3.
- SHIP/Senior Medicare Patrol (SMP) Joint Conference Logistics: Synergy Enterprises Inc. was contracted in FY 2016 to provide SMP/SHIP grantee training conference logistics for four years. The second year was awarded in FY 2018.
- SHIP/SMP Beneficiary Survey: The vendor, CG Strategies, provides oversight and management of a national survey used with Medicare beneficiaries served by SHIP and SMP programs to determine satisfaction and accuracy of the services provided. In 2018 this contract is in its second year.
- SHIP Tracking and Reporting System (STARS): Booz Allen Hamilton was contracted in FY 2016 to develop the new data system to support the SHIP and Medicare Improvement for Patients and Providers Act (MIPPA) programs. This contract is in its second year.
- SHIP National Performance Reporting (NPR) System: Technical Frontiers, Inc. provides the oversight and analysis of the SHIP data system, which expired November 2018.
- Administrative and Program Support Costs: salaries and benefits; overhead/rent; travel, training, and conferences; grant systems; and IT hosting.

2018 Program Initiatives

The SHIP Program is administered by ACL's Office of Healthcare Information and Counseling (OHIC), which also oversees the Senior Medicare Patrol (SMP) and Medicare Improvements for Patients and Providers Act (MIPPA) programs. The SMP program provides outreach and education to Medicare beneficiaries to prevent, detect, and report Medicare fraud, errors, and abuse. The MIPPA program provides grants to states and tribes to help older adults, individuals with disabilities, and their caregivers apply for special assistance through Medicare. Since many of the SHIP programs are co-located with SMP and MIPPA, often ACL Program Initiatives span all three programs.

This grant year, ACL continued with initiatives to support the work grantees are doing. This includes communications and stakeholder engagement; technical assistance to grantees; and program evaluation.

Communications and Stakeholder Engagement

The SHIPs provide detailed and in-depth one-on-one assistance to Medicare beneficiaries in local communities across the country. The successful continuation of these activities requires a strong partnership with the Centers for Medicare & Medicaid Services (CMS) to provide technical assistance, support, and communication to the SHIPs on Medicare, Medicare changes, and beneficiary issues and questions. ACL participates in a number of CMS, and other Federal partner workgroups to ensure SHIPs receive timely Medicare and other relevant healthcare related updates. These workgroups also provide an opportunity for ACL to share SHIP and Medicare beneficiary experiences and successes, as well as challenges that are brought to the SHIPs, which may help inform Federal partner decisions.

Since the transfer of the SHIP from CMS in 2014, ACL has worked closely with CMS to continue and strengthen this partnership. During Medicare's Open Enrollment Period in the Fall of 2018, ACL conducted a SHIP site visit for the Principal Deputy Administrators for CMS and ACL. The event included an in-depth Medicare 101 education session for 50 beneficiaries, one-on-one counseling sessions, and a round table with Medicare beneficiaries.

Technical Assistance to SHIP Grantees

ACL provides technical assistance to SHIP grantees through direct support from ACL staff and the award of grants and contracts that provide additional resources for grantees.

Support from ACL Staff

SHIP programmatic dollars fund ACL Project Officers to work closely with SHIP grantees to help them understand ACL's policies and priorities, as well as how to properly oversee and manage their federal grants. Project Officers communicate with SHIP grantees regularly via email, webinars, and monthly conference calls to discuss SHIP questions and concerns, talk through any challenges, and identify promising practices that could be shared with the broader SHIP grantee network. ACL staff consult with SHIPs to develop solutions to emerging issues, as well as review and provide feedback on programmatic progress reports.

In addition to collaboration and monitoring, ACL staff manage several projects aimed at enhancing availability of SHIP services, including the SHIP Technical Assistance Center, SHIP data system, SHIP customer satisfaction survey, and SHIP national training meeting (all described below).

SHIP Technical Assistance Center (SHIP TA Center)

SHIP programmatic dollars fund the SHIP TA Center, which serves as a central resource for disseminating knowledge and best practices to SHIP grantees. The SHIP TA Center also provides ongoing support and information for SHIPs on issues and trends in Medicare, Medicaid, and volunteer management; develops new products and tools for the national SHIP network, including fact sheets and training manuals; and provides technical assistance to SHIP grantees through webinars, one-on-one assistance, and written instructions. The SHIP TA Center draws upon wide-ranging resources to respond to a rapidly changing programmatic environment and the issues associated with the national network that provides services and supports to older adults and people with disabilities in their homes and communities, Medicare, and the broader health insurance industry affecting Medicare beneficiaries.

SHIP Data System

SHIP programmatic dollars fund the national reporting system, which was in transition in Grant Year 2018. In November, the SHIP National Performance Reporting (SHIP NPR) system was discontinued and all data was transferred to the new system - the SHIP Tracking and Reporting System (STARS). STARS provides more flexibility in reporting and data analysis, allowing ACL and the grantees to determine whether SHIPs are meeting the goals set forth by the agency and in the authorizing legislation. STARS also provides a connection with the Senior Medicare Patrol's (SMP) data system, so the systems can share data. This increases efficiencies at the local level, since the same grantees and counselors complete much of the work. The rollout of STARS began in Spring 2018 and concluded in November 2018, when all 54 SHIPs began solely using STARS for reporting.

ACL staff provided technical assistance to the SHIP state grantees throughout the roll out. As with any data system transition, it took some time to get all 12,500 team members trained on the system and proficient in data entry. As a result, the Grant Year 2018 performance data is unlikely to fully reflect all SHIP efforts for the year.

SHIP Customer Satisfaction Survey

SHIP programmatic dollars fund the administration of a SHIP Customer Satisfaction Survey. The goals of the survey are to measure satisfaction with SHIP Medicare counseling services, to assess how customers value the services and information they receive, to identify opportunities for continuous improvement, and to comply with regulatory requirements regarding data collection. Implementation of the survey began in FY 2017 and runs through FY 2020. Approximately one-third of the states will be surveyed during each year of implementation, with all covered by the project at the end of the 3-year cycle. The final report will provide an overview of the national results with state specific findings.

While the study is still under way, the years 1 and 2 preliminary results showed that 87% of respondents were satisfied with the counseling services they received. The chart below displays additional preliminary findings about customer satisfaction with SHIP counseling:

Question	Text	Average Score	Percent who "Agreed" or "Strongly Agreed"
Q4	I was able to find and contact SHIP in a timely fashion.	4.27	89%
Q6	The information provided to me was accurate.	4.27	87%
Q7	SHIP provided me with useful information.	4.30	88%
Q9	Overall, I was satisfied with my interaction with SHIP.	4.32	87%
Q10	I would contact SHIP again for assistance.	4.38	90%
Q11	I would recommend SHIP's service to others.	4.38	89%

SHIP National Training Meeting

ACL hosts a national training for SHIPs and SMPs annually. The purpose of the conference is to assist, support, and inform the program directors and their support staff nationwide. The meeting offers an opportunity to review core values and practices that define the programs, yet also hone new skills to strengthen the programs' outreach efforts and the involvement of volunteers. This meeting also allows states to network and share information related to best practices with SHIP and SMP grantees in other states. In addition to grantees from other states, attendees are provided an opportunity to meet ACL staff, national partners like CMS and the National Council on Aging, and the SHIP TA Center staff.

During this reporting period the conference was held in Chicago August 20 – 23, 2018. Over 300 people attended this conference. Presenters included staff from ACL, CMS, HHS-OIG, other national partners, and SHIP and SMP staff. Major topics included grants management, outreach, volunteer training, data reporting, reaching specific populations, and Volunteer Risk and Program Management policies.

Conclusion

SHIPs provide unique services to Medicare beneficiaries to help them make the best choice for their health care coverage. The 54 SHIP grantees serve as the main source for Medicare information and assistance in the community. They provide individualized personal assistance to people with Medicare, their families, and caregivers; and conduct outreach activities to inform the public about Medicare and other related health coverage options. Because of this service, beneficiaries often report relief after counseling sessions with the SHIP counselors. As the population of the United States grows older, SHIP services will continue to be a vital resource to help older Americans navigate the complexities of Medicare.

Appendix A: 2018 State Health Insurance Assistance Program Grant Awards

Project Period April 1, 2018 – March 31, 2019
Total Awards: \$44,860,719

State	Award Amount	State	Award Amount
AL	\$ 824,998	NE	\$ 401,891
AK	\$ 221,067	NV	\$ 397,943
AZ	\$ 817,906	NH	\$ 275,952
AR	\$ 583,404	NJ	\$ 1,011,472
CA	\$ 4,206,131	NM	\$ 417,406
CO	\$ 585,725	NY	\$ 2,282,101
CT	\$ 525,457	NC	\$ 1,433,248
DE	\$ 195,604	ND	\$ 242,516
DC	\$ 148,645	OH	\$ 1,697,497
FL	\$ 2,688,994	OK	\$ 588,793
GA	\$ 1,114,731	OR	\$ 562,143
HI	\$ 241,739	PA	\$ 1,910,334
ID	\$ 374,143	RI	\$ 260,330
IL	\$ 1,474,572	SC	\$ 740,815
IN	\$ 844,985	SD	\$ 302,849
IA	\$ 665,994	TN	\$ 1,040,962
KS	\$ 506,805	TX	\$ 2,543,370
KY	\$ 817,182	UT	\$ 342,597
LA	\$ 641,695	VT	\$ 232,952
ME	\$ 420,207	VA	\$ 972,552
MD	\$ 715,864	WA	\$ 856,547
MA	\$ 912,230	WV	\$ 454,254
MI	\$ 1,404,956	WI	\$ 880,950
MN	\$ 899,320	WY	\$ 280,646
MS	\$ 576,269	GU	\$ 46,345
MO	\$ 890,454	PR	\$ 800,316
MT	\$ 538,516	VI	\$ 46,345

Appendix B: SHIP Performance Measures & Likert Ratings

SHIPs are evaluated on the following Performance Measures (PM):

Performance Measure 1: Client Contacts - *Percentage of total one-on-one client contacts (in-person, by phone, by e-mail, postal mail, or fax) per Medicare beneficiaries in the State.*

This performance measure covers every one-on-one interaction SHIPs have with beneficiaries or on behalf of a beneficiary. It includes in-person counseling sessions (in the office or at the beneficiary's home); telephone conversations of all durations (including on-line call formats such as Skype); and email, postal mail and fax correspondence. It does not count unsuccessful attempts to reach beneficiaries (such as leaving messages); individuals reached through public events (unless the presenter has substantial individual interaction with a beneficiary after the event); contacts when the only purpose is to schedule a meeting; or mass emails.

Performance Measure 2: Outreach Contacts - *Percentage of persons reached through presentations, booths/exhibits at health/senior fairs, and enrollment events per Medicare beneficiaries in the State.*

This performance measure is the number of people reached through presentations (including webinars and tele-conferences), booths/exhibits at Health/Senior Fairs or Special Events, and Enrollment Events. The event must include the provision of Medicare or SHIP information to the public. In order to count outreach contacts SHIPs must have the ability to monitor attendance and provide an opportunity for participants to ask questions and provide clarification at the time of the presentation.

Performance Measure 3: Contacts with Medicare Beneficiaries under 65 - *Percentage of contacts with Medicare beneficiaries under the age of 65 per Medicare beneficiaries under 65 in the State.*

This performance measure includes the number of one-on-one contacts with Medicare beneficiaries who are under the age of 65. The beneficiary must be receiving or applying for Medicare and Social Security benefits due to a disability or; receiving Medicare because of the diagnosis of End-Stage Renal Disease. This does not include soon-to-be new to Medicare beneficiaries (i.e. those entering Medicare at age 65).

Performance Measure 4: Hard-to-Reach Contacts - *Percentage of low-income, rural, and non-native English contacts per total "hard-to-reach" Medicare beneficiaries in the State.*

This performance measure is based on the number of contacts made with any of the designated hard-to-reach populations divided by the total number of beneficiaries in that population. The designated hard-to-reach populations include:

- Low-income beneficiaries - all contacts with beneficiaries whose income is below 150% Federal Poverty Level;
- Rural beneficiaries - all contacts with beneficiaries that live in areas with a population fewer than 50,000 as designated by the Office of Management and Budget (OMB); and
- Non-native English-speaking beneficiaries - all contacts with beneficiaries where English is not the beneficiaries first language.

Performance Measure 5: Enrollment Contacts - *Percentage of unduplicated enrollment contacts (i.e., contacts with one or more qualifying enrollment topics) discussed per total Medicare beneficiaries in the State*

This performance measure is the total unduplicated enrollment contacts as reported on the SHIP client contact form. It includes eighteen possible enrollment topics, such as assistance with enrollment in Medicare Part D plans, Medicare Advantage, the Low-Income Subsidy and Medicare Savings Programs.

Below are the national performance measure results from April 1, 2018 – March 31, 2019:

PM 1: Client Contacts – 2,694,135 Beneficiary Contacts (4.53% of eligible population)

PM2: Public Media Outreach Contacts – 4,238,927 Beneficiary Contacts (7.09% of eligible population)

PM 3: Medicare Beneficiaries Under 65 Contacts – 330,737 Beneficiary Contacts (3.81% of eligible population)

PM 4: Hard-to-Reach Contacts – 1,896,262 Beneficiary Contacts (4.89% of eligible population)

PM 5: Enrollment Contacts – 2,054,426 Beneficiary Contacts (3.45% of eligible population)

Additionally, ACL creates a Likert Rating for the grantees to provide them with an understanding of how they compare with their peers. Each grantee receives a Likert rating for each PM based on last grant year’s performance and a target Likert rating for each PM to work towards in this year’s grant year. These ratings are shared with the SHIP network, which allows them to identify which states they can approach when they are looking for ideas for improvement.

The scale for each PM breaks down as follows:

Top 10% (5 States)	Excellent
Next 20% (11 States)	Good
Middle 40% (22 States)	Average
Next 20% (11 States)	Fair
Bottom 10% (5 States)	Low

The ratings for this grant year follow.

National SHIP Performance Measure 1 Ratings for April 1, 2018 – March 31, 2019 Grant Year

Excellent: Penetration Rate of 10.20% & Above
Guam
Iowa
Louisiana
Minnesota
Ohio

Good: Penetration Rate of 5.91% to 10.19%
Alabama
Alaska
Nebraska
Pennsylvania
Puerto Rico
Rhode Island
South Dakota
Tennessee
Washington
Wisconsin
Wyoming

Average: Penetration Rate of 3.19% to 5.90%
Connecticut
Idaho
Illinois
Indiana
Kansas
Kentucky
Maine
Maryland
Massachusetts
Michigan
Montana
Nevada
New Hampshire
New Jersey
New Mexico
New York
North Carolina
North Dakota
Utah
Vermont
Virgin Islands
West Virginia

Fair: Penetration Rate of 2.21% to 3.18%
Arizona
Arkansas
California
Colorado
Delaware
Mississippi
Missouri
Oklahoma
Oregon
South Carolina
Virginia

Low: Penetration Rate of 2.20% & Below
District of Columbia
Florida
Georgia
Hawaii
Texas

Performance Measure 1 – Total Client Contacts:

Percentage of total client contacts (in-person office, in-person home, telephone [all durations], and contacts by e-mail, postal, or fax) per Medicare beneficiaries in the State.

National SHIP Performance Measure 2 Ratings for April 1, 2018 – March 31, 2019 Grant Year

Excellent: Penetration Rate of 14.33% & Above
Montana
North Carolina
Pennsylvania
Puerto Rico
Rhode Island

Good: Penetration Rate of 7.12% to 14.32%
Alabama
Alaska
California
Indiana
Nebraska
Ohio
Oklahoma
Oregon
Tennessee
Utah
Washington

Average: Penetration Rate of 3.01% to 7.11%
Arkansas
Colorado
Connecticut
Guam
Hawaii
Idaho
Illinois
Iowa
Kansas
Kentucky
Louisiana
Maryland
Michigan
Minnesota
Missouri
Nevada
New Hampshire
New Jersey
New York
Texas
West Virginia
Wisconsin

Fair: Penetration Rate of 1.70% to 3.00%
District of Columbia
Georgia
Maine
Massachusetts
Mississippi
New Mexico
South Carolina
South Dakota
Vermont
Virgin Islands
Virginia

Low: Penetration Rate of 1.69% & Below
Arizona
Delaware
Florida
North Dakota
Wyoming

SHIP Performance Measure 2 – Outreach Contacts:

Percentage of persons reached through presentations, booths/exhibits at health/senior fairs, and enrollment events per Medicare beneficiaries in the State.

National SHIP Performance Measure 3 Ratings for April 1, 2018 – March 31, 2019 Grant Year

Excellent: Penetration Rate of 7.71% & Above
Iowa
Montana
Ohio
Rhode Island
South Dakota

Good: Penetration Rate of 4.84% to 7.70%
Alabama
Alaska
Connecticut
Guam
Idaho
Indiana
New Mexico
Tennessee
Utah
Vermont
Wisconsin

Average: Penetration Rate of 2.80% to 4.83%
California
Colorado
Delaware
Illinois
Kansas
Kentucky
Louisiana
Maine
Maryland
Michigan
Missouri
Nebraska
Nevada
New Hampshire
New York
Oregon
Pennsylvania
Puerto Rico
Virgin Islands
Washington
West Virginia
Wyoming

Fair: Penetration Rate of 1.59% to 2.79%
Arizona
Arkansas
District of Columbia
Florida
Massachusetts
Minnesota
New Jersey
North Carolina
North Dakota
Oklahoma
Virginia

Low: Penetration Rate of 1.58% & Below
Georgia
Hawaii
Mississippi
South Carolina
Texas

Performance Measure 3 – Medicare Beneficiaries Under 65: Percentage of contacts with Medicare beneficiaries under the age of 65 per Medicare beneficiaries under 65 in the State.

National SHIP Performance Measure 4 Ratings for April 1, 2018 – March 31, 2019 Grant Year

Excellent: Penetration Rate of 10.45% & Above
Iowa
Louisiana
Minnesota
Ohio
South Dakota

Good: Penetration Rate of 6.73% to 10.44%
Alabama
Kentucky
Nebraska
New Hampshire
Pennsylvania
Puerto Rico
Rhode Island
Tennessee
Utah
Washington
Wisconsin

Average: Penetration Rate of 3.57% to 6.72%
Alaska
Colorado
Connecticut
District of Columbia
Guam
Idaho
Illinois
Indiana
Kansas
Maine
Michigan
Missouri
Montana
Nevada
New Mexico
New York
North Carolina
North Dakota
Vermont
Virgin Islands
West Virginia
Wyoming

Fair: Penetration Rate of 2.25% to 3.56%
Arizona
Arkansas
Delaware
Maryland
Massachusetts
Mississippi
New Jersey
Oklahoma
Oregon
South Carolina
Virginia

Low: Penetration Rate of 2.24% & Below
California
Florida
Georgia
Hawaii
Texas

Performance Measure 4 – Hard-to-Reach Contacts: Percentage of low-income, rural, and non-native English contacts per total “hard-to-reach” Medicare beneficiaries in the State.

National SHIP Performance Measure 5 Ratings for April 1, 2018 – March 31, 2019 Grant Year

Excellent: Penetration Rate of 6.99% & Above
Iowa
Nebraska
Ohio
South Dakota
Tennessee

Good: Penetration Rate of 4.98% to 6.98%
Alabama
Alaska
Guam
Kansas
Massachusetts
Minnesota
Pennsylvania
Rhode Island
Washington
Wisconsin
Wyoming

Average: Penetration Rate of 2.55% to 4.97%
Arkansas
Connecticut
Delaware
Idaho
Illinois
Indiana
Kentucky
Louisiana
Maine
Maryland
Michigan
Montana
Nevada
New Hampshire
New Mexico
New York
North Carolina
North Dakota
Utah
Vermont
Virgin Islands
West Virginia

Fair: Penetration Rate of 1.69% to 2.54%
Arizona
California
Colorado
Mississippi
Missouri
New Jersey
Oklahoma
Oregon
Puerto Rico
South Carolina
Virginia

Low: Penetration Rate of 1.68% & Below
District of Columbia
Florida
Georgia
Hawaii
Texas

Performance Measure 5 – Enrollment Contacts: Percentage of unduplicated enrollment contacts (i.e., contacts with one or more qualifying enrollment topics) discussed per Medicare beneficiaries in the State.