

Anchor-Age Center

Benefits Enrollment Center Best Practices Report

2019

Introduction

Anchor-Age Center (“the Center”) is a non-profit 501(c)(3) corporation, incorporated August 31, 1981 with the goal of serving senior Alaskans to promote their health, fitness, wellness, and social interaction. We currently serve —1750 members with a growth rate of —1 member per day. Our programs focus on our mission of promoting independence and overall wellness among older Alaskans. In addition to our service to our members we offer space rentals, catering through our full-service restaurant, and a variety of special events including series lectures on topics of interest for seniors and general interests of the community. All events and programs are open to the community and this is an important part of our outreach for the center and the benefits our services offer.

Proposed Benefits Enrollment Center Model

The Center is very fortunate to host a Medicare Information Office (MIO), which served as the launch point of our Benefits Enrollment Center (BEC). With the growing senior population needing more professionals to assist with information and applying for various benefits we recognized our unique position of being able to offer comprehensive Medicare support with the overlap of state and other benefits offered through our BEC. The BEC allows us to provide greater assistance to our target population of Medicare eligible seniors and those at risk, including those with social, financial, physical, and circumstantial barriers to living independent and healthful lives.

We have an outreach and enrollment program in place for membership in our center and the MIO features the necessary promotional tools that allow us to integrate our BEC as an added resource/service. We conduct several monthly outreach activities both inside and outside our center as a means of creating greater awareness of benefits available at our agency among our target populations and the overall Anchorage community. We also serve as a site for distribution of food programs serving at-risk participants for whom BEC screening is an available, promoted, and executed service resource.

We work to identify additional benefits and assist with applications based upon eligibility for all current and new participants in our need-based programs, including our income-based sliding scale membership option. In addition, our partnerships with other agencies who serve the target populations for whom BEC screening is valuable continue to be a source of ongoing referrals and raised awareness. Our model includes the roles of our MIO counselors, BEC counselors, our Center membership team and volunteers promoting awareness and offering screenings for benefits during all programs, events, and off-site outreach in addition to regularly scheduled benefits screening appointments.

Our BEC model is centered around the following objectives:

1. Enroll Medicare-eligible individuals in additional benefits in concordance with qualifications.
2. Offer screening and enrollment to programs benefitting at-risk and low-income senior and disabled individuals.
3. Offer screening and enrollment to program participants and/or agency partners serving veterans, LGBTQ, Limited English Proficient (LEP) individuals and other disproportionately impacted members of the Alaskan community.

There are several pros and cons related to situating our BEC within our senior center:

Pros

- Having our BEC within our center along with an on-site MIO is an incredible advantage and blessing as one of our primary target populations—Medicare-eligible seniors—are aware of and able to take advantage of our assistance with a wide array of benefits, resources, and information designed to specifically help with their needs.
- Warm referrals from clientele to friends, family, and other community members.
- Other advantages for us include the tools for outreach in place for our membership growth and MIO efforts allow us to implement BEC outreach simultaneously and in tandem with off-site events, publications featuring articles about the benefits of the BEC and MIO (and the Center), and access to multiple business partners who work with us to raise awareness of the availability of this service.

Cons

- The current marginalization by public assistance and governmental policy for at-risk populations including seniors and individuals with disabilities. We must advocate and continually raise awareness of the importance of our elders, their care and the integrity and esteem that comes with aging well vs. facing challenges to health, physical mobility, and general independence.
- It can be a challenge to maintain all the services, programs, and other administrative and operations details in support of our center and members while still conducting BEC screenings within a relatively small non-profit. This presents challenges with smaller staff required to operate in multiple capacities vs. having the ability to focus on just one thing, such as assisting clientele with screening and applications for benefits. We meet this challenge by recruiting and training capable volunteers to assist our staff.

Challenge #1

The diversity of our Anchorage community includes many Limited English Proficiency (LEP) individuals unable to read, write, speak, or comprehend spoken English. This barrier can be difficult to overcome and presents a challenge to our inclusion of some at-risk and disproportionately impacted individuals for BEC screening and other need-based programming. Translation services can be very expensive and not conducive to the timeframe necessary for a comprehensive benefits screening. In addition, coordinating and scheduling follow-up translation assistance for clientele is difficult. This overall language barrier challenge is two-fold for us when considering there may be multiple dialects of a particular language, i.e., Tagalog, making identification of volunteers to assist more difficult.

Best Practice #1

As many LEP individuals with whom we interact have family or friends who are able to translate for them and offer assistance, we attempt to recruit as volunteers any associates of participants to accompany them to screening and follow-up appointments. Occasionally, only small pieces of information need translation during benefits explanation and assistance; using available online technology, we are able to utilize basic text translation to offer assistance in some cases. We are also working to continually educate our-selves on what various dialects of different languages exist in order to more effectively identify, recruit, and work with on-call volunteers for translation assistance.

Challenge #2

For some programs operated or coordinated through the State of Alaska, such as Low-Income Home Energy Assistance Program (LIHEAP), access to Medicaid information and some housing assistance programs, there is a lack of appropriate infrastructure including counselors and support staff to accommodate the need of the volume of applicants. This results in significant delays in receipt of information and delays of processing applications that negatively impact our BEC clientele. In addition, Alaska features two programs that can have adverse effects on benefit recipients: Alaska Senior Benefit and Permanent Fund Dividends (PFD). The former is a need-based program that inversely reduces SNAP benefits relative to the Senior Benefit payment tier. The latter is based upon state-level legislative process and must be included for recipients in their reported annual, monthly, and weekly income limits if they apply for and receive a PFD. As a result, many at-risk clients for whom these funds could be incredibly valuable in small and large ways choose not to apply for fear of losing other important benefits that offer food security and medical support.

Best Practice #2

While the impacts of state-based programs will be different and vary from state to state, we feel that the best practice of advocacy, developing relationships with senators and representatives on the national and state levels, and partnering with agencies whose ongoing advocacy for seniors and at-risk populations is their focus, such as ADRC, AGE-Net, and AARP, translates to any location. As a senior center our role in the community is one of advocacy in many directions as we strive to support programs, services, and agencies that offer seniors and those at-risk assistance, support, and benefits. We participate in legislative call-in sessions and communicate regularly with our political leaders.

Client Stories

Three brief case studies to date illustrate both the exceptional value of our having a BEC within our center:

- A single female client, age 65, has income below \$10K annually; she was already connected to some benefits but not receiving income assistance. Screening and application submission resulted in an increase to her income of more than \$600 per month. This represented a significant life change for this individual—the benefits applied for and received included assistance with medical expenses, utilities, and cash assistance.

- Another female client, who is married but living separately, aged 66, has income below \$12K annually. This client was unaware of the Alaska Senior Benefit, LIHEAP, and food assistance programs. We were able to process applications for Commodity Supplemental Food Program (CSFP), LIHEAP, Senior Benefit, and legal services, all of which represented significant assistance for her. We were also able to provide a referral to a dentistry program for those in need along with the Aging and Disability Resource Center of Alaska for other needs. This client reported that the BEC screening was a life changing experience for her and helped her become more aware of what is available and how to get additional help.
- A homeless, disabled male client, age 68, with income below \$5000 was referred to our BEC by his counselor at the Alzheimer's Resource Center of Alaska. We were able to apply for housing assistance, General Assistance, Senior Benefit, Veteran's services, and referred him to additional food support services.

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