

**Administration on Community Living (ACL) No Wrong Door System
Person-Centered Counseling (PCC) Training Program**

**Course Title: Person-Centered Access to Long-Term Services and Supports
Lesson Number & Title: 6 The Influence of Health Insurance on Long-Term
Services and Supports**

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Course Title: Person-Centered Access to Long-Term Services and Supports

Lesson Number & Title: 6 The Influence of Health Insurance on Long-Term Services and Supports

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Narration:

Welcome to the lesson on The Influence of Health Insurance on Long-Term Services and Supports. This lesson is part of the course on Person-Centered Access to Long-Term Services and Supports in the Person-Centered Counseling Training Program. Please review the information on this screen and go to the next page when you are ready.

Text:

Welcome!

Here is a description of the lesson you are starting:

Health insurance has the potential to be a critical asset to overall health and well-being. It can be a part of support for a return to community living after a hospitalization. Accessing benefits can help people reduce the likelihood of return to health crisis or loss of functioning. Some people may need support to fully understand these options. They may need support to access and advocate for benefits through their health insurance. Due to the Affordable Care Act, health insurance is becoming more accessible to many people. However, people have more choices and information to sort out than ever before. This lesson will help the Person-Centered Counseling (PCC) professional understand the most common aspects of insurance as it relates

to supporting people with LTSS needs.

Learning Objective

After completing this lesson:

You will be able to support the person in effectively accessing benefits through their health insurance in ways that support their person-centered goals.

To view course information, including On-the-Job Training Assessments, Portfolio Assignments, and a list of Activities, click on the “Menu” tab and then click Lesson Information.

This course is one of the six foundational courses in the No Wrong Door System Person-Centered Counseling (PCC) Training Program meant to provide basic skill and knowledge related to the identified competencies for a PCC professional. Click on the box below to learn about how person-centered thinking approaches are infused throughout these courses.

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Narration:

Health insurance is something most people should have access to given recent changes in coverage availability. When people have long-term service and support needs, they will do better if they have insurance and are knowledgeable about their coverage. Health insurance can provide access to helpful ongoing treatments and short-term but intensive treatment for recovery. People are not always knowledgeable about what insurance they are eligible for and what it covers. Supporting people in managing the intersection between insurance and their long-term services and support needs can be a valuable role for the Person-Centered Counseling professional. Review the information on this page. Go to the next page when ready.

Text:

Common Challenges or Misunderstandings

Insurance coverage is not always clear when it comes to services and supports needed for long-term conditions. In fact, health insurance is not meant to cover long-term services and supports(LTSS). However, it does provide benefits that are helpful to people with chronic conditions and in periods of recovery from acute conditions. The list below describes some of the common challenges people may face when it comes to understanding health insurance coverage. This can have an impact on their lives and influence their LTSS. The PCC professional should be aware of these and have strategies for supporting people.

- <bullet> People may not have health insurance coverage yet. They don't know how, when, or where to apply for health insurance coverage.
- <bullet> They may have coverage that is not well suited to their overall situation, especially if it has changed (e.g. high premiums, inadequate coverage, etc.).
- <bullet> They don't know that their insurance will pay for things that could be helpful to their situation (this may include therapy, treatments, equipment, or short-term personal care).
- <bullet> They believe insurance will pay for things it will not and plan poorly for these expenses (this can include long-term personal care or stays in nursing facilities).
- <bullet> They are having trouble accessing benefits and don't know how to make special requests, appeal decisions, or advocate for themselves when turned down for coverage.
- <bullet> They don't know how to navigate the intersection between health care and LTSS systems and therefore experience gaps in services during transitions.

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Narration:

Although health insurance does not pay for long-term services and supports directly, it can still help to support someone with these needs.

Understanding the basics of health insurance and how it can impact a person's overall life can be important in developing a person-centered response to their goals. Being willing to help people understand, connect to, and evaluate coverage options can be a helpful role for a Person-Centered Counseling professional. Changes in our health care systems are ensuring that more people have insurance coverage. However, more than ever, people must be able to sort through many options and make good choices. Review the information on the page. When you are ready, go to the next page.

Text:

Health Insurance Coverage that Supports Long-Term Needs

Health insurance is used to cover preventative and treatment related medical costs. Everyone (with few exceptions) is required to have health insurance under the Affordable Care Act or pay a fee. It is not designed to pay for long-term services and supports (LTSS). However, some things covered by health insurance can be helpful to people with LTSS needs. These can include a number of things, such as:

- <bullet> Developmental screening for children
- <bullet> Mental health, learning disability, or other diagnostic assessments

- <bullet> Purchasing durable medical equipment, for example, walkers, power chairs, and SAD lights
- <bullet> Access to short-term home health or personal care services (usually in a skilled care facility)
- <bullet> Preventative care to maintain health and screening/assessments
- <bullet> Acute care (hospitalization including psychiatric crisis)
- <bullet> Transitional and recovery-based care (partial hospitalization, residential treatment centers, acute and sub-acute rehab, nursing facilities, etc.)
- <bullet> Some treatments to support recovery or restore or improve functioning such as occupational therapy, speech therapy, mental-health therapy (including Cognitive Behavioral Therapy or Dialectical Behavior Therapy), chemical dependency treatments, physical therapy. Note that coverage may vary: for example cognitive rehabilitation therapy may be paid for if a person has a stroke or brain injury, but not for schizophrenia
- <bullet> Medications
- <bullet> Access to allied professionals (such as, a nutritionist)

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Narration:

People who are managing long-term services and supports will have variable access to health care and treatments. Some will have private pay insurance through their own or someone else's employer benefits. Some will be on Medicaid or Medicare health insurance plans. Some will have Veteran's benefits for coverage, and others will purchase health insurance through the Health Insurance Marketplace. Insurance benefits are variable from plan to plan. Many things are changing right now in regards to coverage and benefits from health insurance. More than ever, people may need help with sorting through how insurance can help them live better and meet their unique needs. Review the information on this page. When you are ready, go to the next page.

Text:

Supporting Best Use of Insurance

People should be encouraged to think about insurance and be clear about benefits and limits. Supporting people to use their health insurance effectively (for example, to obtain a needed assessment or treatment) can prevent undesirable situations. Otherwise, people may miss out on potentially helpful options. They may experience a decline in health or well-being. They may end up using resources that are much more costly, such as acute care or institutional care, because they did not realize they had other benefits to support community living or could not effectively organize them. Working with the person to understand insurance coverage will create a

more seamless and coordinated experience. It can help them avoid problems caused by lack of effective coordination of care. The following are basic roles for Person-Centered Counseling (PCC) professionals in supporting best use of health insurance.

- <bullet> Learn about eligibility criteria and the application process for any public program, including critical windows for open enrollment. Learn about and support people in considering private insurance as well.
- <bullet> Stay informed about health insurance changes as the Affordable Care Act rolls out in your community. Here is a helpful website for more information: <http://www.hhs.gov/healthcare/rights/index.html>
- <bullet> Become knowledgeable about local resources that can help fill gaps while people wait for health insurance coverage, such as sliding fee or free clinics or free or reduced cost access to supportive technology (cell phones, adaptive equipment, etc.).
- <bullet> Offer to walk with the person through the process of applying for insurance, paying for/arranging services, exploring coverage, working with insurance programs, and appealing denials as needed (filling out applications, assisting in contacting insurers/care coordinators/gatekeepers, and advocating on behalf of the person as requested).
- <bullet> Become knowledgeable about the basics of insurance options and how they intersect with long-term support and services (LTSS) needs. Specifically, know what benefits are possible, the providers associated, and the timelines for coverage.
- <bullet> Be familiar with the common transition periods from acute care (medical coverage) to LTSS and be able to help people proactively prepare for these periods (such as after injury or illness, to rehab/recovery, to potential LTSS). Help make these transitions transparent and support people as they work with any transition professionals to ensure care aligns with their goals.
- <bullet> Inform people of the potential consequences of choices. For example, tell them how choosing a certain Medicare Advantage plan, choosing not to sign up for a plan, or ignoring paperwork might impact their goals. A benefits specialist can help by explaining options in depth. You can also see if the person would like to contact an insurance specialist through the State Health Insurance and Assistance Program (SHIP).

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Narration:

Remember that you don't need to know everything about health insurance. You should broadly understand how health care insurance can support and enhance community living for people with long-term services and support needs. You should always offer to involve a benefits specialist as people are exploring options. Benefits specialists are great resources and will know a lot about insurance and how to organize it. Review the information on the page. When you are ready, go to the next page.

Text:

The Person-Centered Counseling (PCC) Professional's Roles

Activity: Health Insurance and LTSS

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Narration:

Many factors can influence the availability and structure of health insurance. The Affordable Care Act will be rolling out over the next several years, shaping and changing many aspects of health insurance. Keep in mind it is implemented differently in each state. It is important to stay informed about how the changes impact health insurance in your local community. Keeping up-to-date on policy changes will help you provide streamlined access and person-centered support to people as they navigate long-term services and support options. Review the information on the page. When you are ready, go to the next page.

Text:

Affordable Care Act and Its Impact

The Affordable Care Act (ACA) will create many changes in health care coverage. In general, for people who need access to long-term services and supports (LTSS) or similar services these changes should enhance coordination and lead to better outcomes. There is also more information about the influence of the ACA on specific programs and processes later in the lesson. Here is a basic overview of ACA:

<bullet> Everyone must have coverage or pay a fee (there are certain exceptions for religious reasons, hardships, or tribal members). Healthcare.gov can direct you to the federal health insurance exchange or your state's marketplace. It can also connect you to brokers and navigators who assist

with the process of enrolling and choosing the best plan.

<bullet> Most employers must provide coverage to full time employees.

<bullet> Health-care options, including Medicare and Medicaid, are shifting from fee-for-service coverage to coverage that bundles and coordinates care. Some examples of bundled care might be managed care organizations (MCOs), accountable care organizations (ACOs), and health homes, such as behavioral health homes.

<bullet> The Medicare Part D coverage gap between what Medicare will pay for and what medications cost (called the “donut hole”) will close by 2020.

<bullet> Eligibility requirements are changing (income, citizenship status, age), and in many states poorer adults and children have increased access to Medicaid health benefits.

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Narration:

There are a wide variety of publically funded health insurance programs that may apply to people you support. Publically funded programs typically have considerable limits around who is eligible. They also have variable types of coverage. Both will often be scrutinized closely to ensure people only access benefits they have a right to access. The Affordable Care Act will influence these programs as it continues to roll out. Goals will include simplifying processes around publically funded health insurance programs and expanding coverage. Review the information on the page. When you are ready, go to the next page.

Text:

Publicly Funded Health Insurance

It can be difficult to keep up with all the nuances of various public programs. Many of them also vary considerably from state to state. However, having at least a basic understanding of the larger programs will help you do better at supporting people in this area.

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Narration:

Just like Medicare and Medicaid insurance, private health insurance may be able to cover certain medical costs. However, it will not pay for long-term services and supports directly. People can make the best choice among private options when they take into account their needs and how likely they are to use the insurance. They can also use their insurance in the most helpful way when they know what it covers and can maximize that benefit. Review the information on the page. When you are ready, go to the next page.

Text:

Private Health Insurance

People can obtain private insurance through an employer, or the Health Insurance Marketplace. People can compare premiums, deductibles, and out-of-pocket costs before deciding to enroll. Previous employers typically provide Consolidated Omnibus Budget Reconciliation Act (COBRA) coverage, which is a temporary continuation of group health coverage that otherwise might be terminated. COBRA health insurance is typically expensive.

Just like Medicare and Medicaid, private insurance may help pay for costs related to long-term services and supports (LTSS) needs but will not pay for LTSS needs specifically. Looking at the out-of-pocket/premium costs can be a helpful part of budgeting.

When someone has access to more than one insurance program, there are issues to consider that can help avoid problems:

- <bullet> They must check whether the private insurance can be used with public insurance -- there are rules around the types of coverage a person can have.
- <bullet> They must monitor their bills to ensure that both companies are not billed for the full amount of the same services or item.
- <bullet> There can be dispute among providers over who will cover a service that then leaves it uncovered.

Sometimes it's best to just have one insurance plan.

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Narration:

Filing health insurance appeals is one more area where you may be able to support a person. Health insurance providers turn down applications for a variety of reasons. When this happens, the person will receive a letter of denial. This letter will typically explain how to submit an appeal. People's right to appeal decisions made by health insurance providers was enhanced by the Affordable Care Act. Review the information on the page. When you are ready, go to the next page.

Text:

Health Insurance Appeals

Health insurance providers might turn down a person's application for a variety of reasons. The Affordable Care Act (ACA) has enhanced a person's right to appeal these decisions. When a person has applied for a service, treatment, or payment toward durable equipment to support their long-term service and supports (LTSS) needs, they may need or want support to help understand how to appeal a denial of these services. Many states have set up an ACA consumer assistance program to help people with appeals. The following are basic things a Person-Centered Counseling (PCC) professionals should know:

- <bullet> People should have been given information about appeals when they signed up for insurance. You can remind them or help them look this up if they no longer have it or it is not clear on the denial letter.
- <bullet> They have a right to an internal appeal first. If this does not work

they can also go to an external review process (people outside of the health insurance company).

- <bullet> If a person uses an older program initiated before a certain date, the company may not have to comply with the ACA. They may still have established appeals processes that can be helpful.

- <bullet> Keep good records of the process in order to help the person progress through each stage seamlessly. Help the person stay organized as needed and desired.

- <bullet> There may be special assistance available for people who speak a language other than English.

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Narration:

Congratulations! You have now finished the lesson. Let's take a few moments to review the key ideas and learning objectives.

Health insurance does not cover long-term services and supports but it can help pay for short-term care and treatments that prevent crisis and enhance quality of life. There are many types of health insurance options including public programs and private insurance options. Person-Centered Counseling professionals should have a basic understanding of these options and how health insurance can help people meet their person-centered goals.

Please review the information on this page. You can also review the content as needed by using the "Left Arrow" icon at the bottom of the screen. This will take you back through the lesson. You may take the test now, later, or as requested by your employer. Good luck and thanks for completing the lesson!

Text:

Conclusion and Lesson Review

<bullet> Using health insurance effectively can help the person reach their goals and improve quality of life.

<bullet> Preparing the person for the process can help minimize their frustration, expense and waiting periods. Person-Centered Counseling (PCC) professionals can help with organizing paperwork around eligibility and appeals.

<bullet> The Affordable Care Act will have an effect on all health insurance options as it continues to roll out. You should be aware of changes in major public programs such as Medicare, Medicaid, and the Children's Health Insurance Program (CHIP). You should also have resources for helping people learn more (such as State Health Insurance Assistance Programs).

Reflection on Learning Objectives

Directions: Review the objective(s) on this page. When you are done click on the "My Notes" icon at the top of the screen to use the electronic journal or use your own notebook. Write down your answers to the following questions.

1. What did you learn in this lesson that you felt was important?
2. What will you do differently because of the content in this lesson?

Learning Objectives

After completing this lesson, you will be able to support the person in effectively accessing benefits through their health insurance in ways that support their person-centered goals.

If you are ready to take the test, click on the "Take Test" tab. You can also take the test later: It will be available from your "Personal Page." To access it, click on the "My eLearning Lessons View" button. Choose the lesson title from the list of assignments, and then click on the "Start the Lesson" button at the bottom of the screen. Click the "Take Test" tab to start the test.

We recommend that you complete the On-the-Job Training Assessments and Portfolio Assignments for this lesson. They will help you demonstrate competencies for the ideas presented. To view On-the-Job Training Assessments, Portfolio Assignments, and a list of Activities, click on the "Menu" tab and then click "Lesson Information."

Again, congratulations and good luck!