Sample Problem Statement from Ohio SMP

Ohio is the sixth ranking state in the nation in number of Medicare beneficiaries.\(^1\) Residents 65 and over make up 16.2% of Ohio's total population, which is one percent higher than the national average of 15.2%.\(^2\) Scripps Gerontology Center at Miami University also estimates that seniors 65 and over will constitute about 16% of the United States population by the year 2020 and about 18% by the year 2025. Ohio is aging faster than the national average, however, because Scripps estimates that seniors 65 and over will constitute about 18% of the Ohio population by 2020 and about 21% by the year 2025.\(^3\) Ohio also has a small population of Hispanic/Latino (3.7%) and Asian (2.2%) residents that Ohio SMP is equipped to serve with pre-made resources.

Ohio also has a growing population of Medicare Part A and B beneficiaries who are under 65, which presents the challenge of reaching this population who often are disabled. In 2014, the number of Medicare Part A and B beneficiaries that were under 65 in the United States was 8,500,917 and by 2015 that number rose to 8,576,164. Ohio also had an increase in Medicare Part A and B beneficiaries under 65 from 2014 where there were 340,748 to 2015 where there were 345,917. This results in about a 9% and 1.5% change respectively.\(^4\) This shows that Ohio is not only aging faster than the national average, but is also accruing Medicare beneficiaries at a faster rate than the national average.

Along with a growing population of beneficiaries and residents over 65, Ohio is largely rural which leads to a larger population of hard to reach beneficiaries. Thirty-two out of Ohio’s eighty-eight counties are Appalachian. According to the Appalachian Regional Committee (ARC), 16.3% of the Appalachian community is over 65 and 9.5% of adults live under the poverty level. This type of population is hard to reach and requires different strategies for communication and education than urban and suburban populations. Ohio SMP at Pro Seniors is located on the southwestern edge of Ohio with great access to the regions in southern Ohio considered “distressed” by the ARC.\(^5\)

Fraud, scams, and identity theft are a rampant problem in the United States. The Federal Trade Commission reports that it received 1.1 million fraud reports in 2017 and estimates that out of those reports $905 million dollars were lost to fraud. In 2017 there were 69,764 reports filed with the Ohio FTC, which puts Ohio at number fourteen in the nation for these reports with 598 reports filed per 100,000 residents.\(^6\)

Ohio SMP puts a high priority on educating Medicare beneficiaries about identity theft and how it relates to the Medicare program. In 2017, 9,121 Ohio residents reported identity theft, which ranks Ohio twenty-ninth in the nation with 78 reports per 100,000 residents.

The Federal Trade Commission also records data on the types of fraud reported in each state. In Ohio the top five reported scams were: debt collection (26%), identity theft (12%), imposter scams (12%), bank/lender scams (6%), and fraudulent sweepstakes, prizes, or lotteries (6%). The dollars lost to consumer fraud in Ohio alone is estimated to be

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\(^1\) Total Number of Medicare Beneficiaries. https://www.kff.org/medicare/state-indicator/total-medicarebeneficiaries/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Total%20Medicare%20Beneficiaries%22,%22sort%22:%22desc%22%7D

\(^2\) United States Census Bureau Quick Facts Ohio. https://www.census.gov/quickfacts/OH


$14.7 million dollars in 2017.\textsuperscript{7} Ohio SMP also sees numerous types of possible Medicare fraud including durable medical equipment, marketing violations, hospice, rehabilitation care, and enrollment/disenrollment.

As the number of Medicare beneficiaries continues to grow so will the Medicaid population, which currently covers one out of four Ohioans. Because of this growing number of Medicaid recipients, Ohio is home to one of the nation’s best Medicaid Fraud Control Units (MFCU). The Ohio Medicaid program costs about $26 billion a year and is the fifth largest program in the nation. With the Medicaid population being so large in Ohio the Ohio Medicaid Control Fraud Unit has processed 5,200 complaints, posted 780 indictments, 744 criminal convictions, and recovered more than $214 million in restitution and penalties in the last five years.\textsuperscript{8} Ohio SMP is connected with the Ohio MCFU and continually refers clients and is educated by their staff.

Organizational Capacity Sample from New Jersey SHIP

The NJ SHIP program is housed in the Division of Aging Services (DoAS) which is part of the NJ Department of Human Services and directed by Nancy E. Day. Organizational charts for the division are found as Attachment #2 and #3. SHIP is part of a unit which is the designated State Unit on Aging overseeing Title III funds for the Area Agencies on Aging, Aging and Disability Resource Connections; Wellness Grants (such as Chronic Disease Self-Management Program and A Matter of Balance) and Caregiver Programs such as Statewide Respite. In addition our unit administers the current MIPPA grant under direction of Dennis McGowan, supervisor the Community Resources, Education and Wellness Unit. DoAS also determines clinical eligibility for a Medicaid Waiver Program called Managed Long-Term Services and Supports (MLTSS), operated the Community Choice Program, oversees PACE, and administers two state pharmaceutical assistance programs, PAAD and Senior Gold.

DoAS has been successfully administering the SHIP program since 1986. As evidenced by the 40% increase in client contacts over the last five years, our division has the capacity to educate and assist the maximum number of eligible residents about their choices regarding Medicare and other insurances. Through our state-wide network of 436 certified counselors based in 21 local SHIP agencies, we have the ability to recruit, train and manage counselors, both volunteers and paid staff, to impart unbiased information to assist beneficiaries in navigating the maze of plan choices, to screen for programs to assist in affording coverage, and to assist with enrollment and claims problems. Because of our role as State Unit on Aging, our division already has a relationship with the AAAs/ADRCs and can easily work with these agencies to contract for SHIP services. Our relationship with five RSVP SHIP contracts also gives us access to their expertise in volunteer recruitment, screening and management.

All of the staff within our SHIP Unit and SHIP Hotline have been with the program for at least ten years and have the Medicare knowledge and experience to both oversee training of counselors and provide the needed on-going assistance to counselors and beneficiaries. Vitae for the three SHIP Unit staff are attached: Mary McGeary, Frances Cancro, John Siwczak. There are six additional SHIP certified counselors who are cross-trained and working in our Wellness and SPAP units who are called used as back-up staff for training and hotline assistance when needed.

\textsuperscript{7} Id.  
\textsuperscript{8} 8 Lloyd Early, Special Agent-in-Charge, Medicaid Fraud Control Unit, Office of Ohio Attorney General