

## CHAPTER 14

### STATE HEALTH INSURANCE ASSISTANCE PROGRAM (SHIP)

#### 14-1 DEFINITIONS

For the purposes of this Chapter, the following definitions of key words or concepts shall apply:

**CMS CO** – Centers for Medicare and Medicaid Services, Central Office (Baltimore, Maryland)

**CMS RO** – Centers for Medicare and Medicaid Services, Regional Office (Region IV, Atlanta, Georgia)

**Conflict of Interest** – Any employment or connection to the private health insurance industry on the part of a SHIP paid or volunteer staff member or any member of the staff person's immediate family constitutes a conflict of interest that prohibits that person from working with, or representing, the SHIP.

**Endorsement or Appearance of Endorsement** – Per Congressional mandate, SHIPs may not endorse or appear to endorse any insurance company, product or agent in the delivery of services.

**Free and Objective** – Per Congressional mandate, SHIP shall provide services without consideration of consumer financial status and in such a manner as to thoroughly inform the consumer about all viable Medicare and other related health insurance options in order that the consumer may make an informed decision.

**SHIP/SMP Advisory Board** – An advisory body for the State Health Insurance Assistance Program and Senior Medicare Patrol (SMP) collaboration that is comprised of the SHIP and SMP directors, the Director of the State Department of Commerce and Insurance, Consumer Insurance Division, representatives from the Tennessee Bureau of Investigation, a representative from the University of Tennessee Extension Service, one SHIP and SMP Coordinator, representatives of the SHIP/SMP volunteer workforce, representatives of the Public Guardianship Program for the Elderly, Long-Term Care Ombudsman Program and Title III-B Legal Assistance Program, a representative of the TennCare Advocacy/Health

Assist Tennessee Program, a representative of the statewide Legal Aid network and other interested parties.

### **SHIP Staffing**

**State SHIP Director (TCAD)** – The Aging Program Coordinator employed by TCAD to organize, plan and implement the statewide SHIP according to CMS grant instructions and guidelines.

**State SHIP Volunteer Program Coordinator (TCAD)** – The Aging Program Specialist employed by TCAD to organize, plan and implement the statewide SHIP Volunteer Program; individual in this position is responsible for working closely with the SHIP Director and Supervisor to provide technical assistance and guidance to the Regional SHIP Volunteer Program Coordinators and the Regional SHIP Coordinators on the volunteer program operation.

**Regional SHIP Coordinator (AAAD)** – The individual employed by the AAAD who is responsible for organizing, planning and implementing a regional SHIP on a full-time, dedicated (not having any other AAAD duties) basis, in accordance with TCAD instruction and guidelines.

**Regional SHIP Volunteer Program Coordinator (AAAD)** – The individual employed by the AAAD to work collaboratively with the Regional SHIP Coordinator, as well as the TCAD SHIP Volunteer Program Coordinator, to implement and keep records for the SHIP Volunteer Program; individual in this position is responsible for the recruitment of new volunteers, arranging volunteer trainings, maintaining regular support contact with volunteers, scheduling of volunteers to assist at senior centers and other SHIP Counseling Sites, volunteer recognition events, etc..

**Regional SHIP Back-Up (AAAD)** – The individual employed by the AAAD assigned responsibility for learning and maintaining current knowledge of Medicare “basics,” as determined by the State SHIP Director, who serves in the Regional SHIP Coordinator’s stead in that person’s absence.

**Regional SHIP Counselor (AAAD)** – Any person (paid, in-kind or volunteer) who has completed the SHIP/SMP Training Program, has become a Certified SHIP Counselor and actively serves as a SHIP Counselor.

**Regional SHIP Volunteer (AAAD)** – Any person who has completed the appropriate SHIP/SMP Training Program (whether for Level I, Level II or Level III volunteer work) and actively serves in a volunteer capacity (*see Attachment 2 for information on Levels I, II and III SHIP/SMP Volunteer training requirements, roles and responsibilities*).

### **SHIP Training Program**

**SHIP/SMP Initial New Counselor Training** – Per 2001 National SHIP Standards (*see Attachment 1, 2001 SHIP Program Standards*), a minimum of eighteen (18) hours of initial training are required for new counselors on, at a minimum, the following topics: Medicare; Medicare Advantage; Medicare Supplement Insurance (Medigap); Medicare's Prescription Drug Benefit (Part D) and the accompanying Low-Income Subsidy (LIS); Long-Term Care Insurance and Long-Term Care Planning; Medicaid (including TennCare, Medicare Savings Programs, Nursing Home and Home and Community-Based Services Medicaid Waiver); Employer and Retiree Insurance; VA and Retired Military Insurance; Counseling Techniques; current federal and state laws governing health insurance (COBRA, ERISA, HIPAA), etc. Initial training will be provided by the SHIP/SMP Directors, with the exception of instances where the Regional SHIP Coordinator requests of and is granted permission by the State SHIP Director to conduct the training. Only Coordinators who are meeting overall program requirements will be granted permission to conduct trainings.

**SHIP/SMP Annual Update Training** – As per 2001 SHIP Program Standards (*see Attachment 1, 2001 SHIP Program Standards*), a minimum of twelve (12) hours of training on the above-listed topics and current issues are required of each SHIP Counselor (includes Regional SHIP Coordinators and paid and in-kind Regional Volunteer Counselors). Update trainings may be provided in face-to-face, teleconference and other settings (as approved by

the State SHIP Director), in cooperation with the Regional SHIP Coordinators.

**SHIP/SMP Monthly Teleconference** – Monthly teleconference conducted by the State SHIP Director, with the support of the Regional SHIP Coordinators, to provide update information on and opportunity for discussion of current issues affecting Medicare enrollees – participation is required for Regional SHIP Coordinators and is encouraged for other Regional SHIP staff and volunteers – participation at each teleconference counts as 1.5 hours toward the minimum annual update training requirement of twelve (12) hours – the Regional SHIP Coordinator is responsible for passing information provided at monthly teleconferences to other Regional SHIP staff members.

**SHIP Security Plan** - required by CMS to address conflict of interest, confidentiality and other program security issues (*see Attachment 3, TN SHIP Security Plan*)

**SMP – Senior Medicare Patrol** – Administration on Aging program established to raise awareness about and teach consumers how to identify and report suspected waste, fraud and abuse in the Medicare and Medicaid programs. In Tennessee, the SHIP and SMP began a partnership in July 2003 and since that time collaborate for training and volunteer program development in all of the AAADs.

## **14-2 AUTHORITY**

The State Health Insurance Assistance Program or SHIP (formerly the Information, Counseling and Assistance or ICA Grants Program) was created under Section 4360 of the Omnibus Budget Reconciliation Act (OBRA) of 1990 (Public Law 101-508). This Act authorizes the Centers for Medicare and Medicaid Services (CMS), the federal Medicare agency, to make grants to states for health advisory services' programs for people with Medicare. There are SHIPs in all 50 states, plus Washington, DC; Guam; Puerto Rico; and the Virgin Islands, for a total of 54 programs.

### **14-3 HISTORY & PURPOSE**

SHIP is a national program that offers one-on-one counseling and assistance to people with Medicare, potential Medicare consumers, their families and other advocates. Per Congressional mandate, SHIPs provide free and objective counseling via telephone and face-to-face interactive sessions, public education presentations and programs and media activities. The program was established by Congress in the early 1990s to address the confusion caused by the increase in choices of Medicare Supplement Insurance, or Medigap. Since the program's inception, the role of the SHIP has expanded to include providing information, counseling and assistance on Medicare and Medicaid (and TennCare in Tennessee), Medigap, enrollment in Medicare prescription drug plans (Part D) and the accompanying Low-Income Subsidy, finding help with the cost of prescription drugs during coverage gaps and access to drugs not covered under Part D, Medicare Advantage options, long-term care planning and insurance, claims and billing problem resolution, information and referral on public benefit programs, employer and retiree health insurance options for those with Medicare and VA benefits and other military health insurance for those with Medicare. As the Medicare and Medicaid/TennCare programs grow and change, the responsibilities of the SHIP grow and change, as well. Effective January 1, 2008, the Tennessee program will be known as "TN SHIP – Medicare Information and Counseling."

### **14-4 MISSION, GOALS AND OBJECTIVES**

#### **14-4.01 Mission**

The mission of the Tennessee SHIP is a) to help all Medicare enrollees, regardless of financial status, obtain the health care they need and to which they are entitled; b) to be the "last stop" for consumers who, by the time they reach a SHIP Counselor, report feelings of frustration and hopelessness after having tried to navigate the Medicare system on their own and c) to facilitate consumer access to other available Tennessee Aging and Disability Network programs and public benefits whenever possible.

#### **14-4.02 Goals and Objectives**

The primary goals of the Tennessee SHIP are to help consumers understand their benefits in order that they may make optimal use of those for health promotion and treatment of illness or injury, to assist consumers in navigating the complex Medicare and related health insurance systems and to advocate for those who are unable to advocate effectively for themselves in accessing benefits or resolving coverage and/or billing issues. Secondary goals include providing guidance to legislators and other policymakers on consumer issues and areas of consumer concern in the Medicare and Medicaid programs.

To achieve the above-stated goals, the Tennessee SHIP shall:

- a) Raise the awareness of the Medicare population, as well as that of the general public, of the availability of SHIP's free and objective services through public and media activities;
- b) Educate consumers and their communities on current Medicare issues through media campaigns and presentations to community groups;
- c) Provide accurate and timely information, counseling and assistance to current and potential Medicare consumers, their adult children and other family members, health care providers and other advocates throughout the State; and
- d) Build the SHIP workforce through the addition of trained, SHIP-certified volunteers in order that the program can effectively reach, counsel and assist consumers with Medicare in every county of Tennessee.

#### **14-5 SHIP and SMP COLLABORATION**

In July 2003, SHIP (sponsored by the Centers for Medicare and Medicaid Services) and SMP (sponsored by the Administration on Aging) initiated the current collaboration that joined the two programs for the primary purpose of recruitment, training, support and retention of volunteers. It had been found that SMP volunteers needed to develop an understanding of Medicare in order to intelligently counsel and assist consumers who felt that they had identified waste, fraud or abuse and desired to report the same. At the same time, SHIP volunteers needed to become familiar with the guidelines for the SMP in order to appropriately assist consumers in responsibly handling their Medicare accounts.

The Tennessee SHIP and SMP continue to function successfully as volunteer program development and maintenance partners.

**14-6 TENNESSEE COMMISSION ON AGING AND DISABILITY  
RESPONSIBILITIES**

TCAD SHIP administrative staff shall:

- a. Operate the statewide SHIP to provide information, counseling and assistance on Medicare, Medicaid and all other related health insurance issues for persons with Medicare, persons nearing Medicare eligibility, their adult children and other caregivers, their health care providers and other advocates; TCAD shall assure that SHIP has a presence in each of the State's 95 counties.
- b. Conduct all activities required by the current CMS-sponsored SHIP grant, as well as those activities required by other grants secured by TCAD to enhance the program's capacity to serve consumers (e.g., TCAD AmeriCorps\*VISTA Medicare Part D/LIS Project);
- c. Assure that the district SHIPs function in concert in order that all of the State's Medicare enrollees have equal access to accurate and timely information, counseling and assistance from properly trained SHIP staff;
- d. Assure that the statewide SHIP performs effective outreach and education to all of the State's people with Medicare through presentations to groups and media campaigns designed to reach even the most difficult-to-find and reach consumers;
- e. Assure that the statewide SHIP reports its activities in the manner prescribed by CMS in such a way as to completely and appropriately capture all of the program's endeavors;
- f. Assure that the statewide SHIP maintains awareness of CMS schedules and activities required of SHIPs (e.g., three year phase-in of funding awards based on program performance);
- g. Provide the highest quality training for the statewide SHIP staff;

- h. Keep the statewide SHIP staff apprised of current issues in Medicare and the other related health insurances, national and local (state or regional) health insurance issues for people with Medicare;
- i. Act as information liaisons between CMS and other federal and state governmental agencies in order that SHIP staff can respond timely and appropriately to issues;
- j. Provide guidance, training and support to Regional SHIP Coordinators to help them create and maintain viable counseling, outreach and volunteer programs within their districts;
- k. Assure that all SHIP staff, including back-up, in-kind and volunteer, have completed the minimum of eighteen (18) hours of New Counselor Training on Medicare, as per the 2001 SHIP Program Standards (*see Attachment 1, 2001 SHIP Program Standards*), within their first six (6) months of employment and a minimum of twelve (12) hours of Update Training annually.

**14-7 RESPONSIBILITIES OF THE AREA AGENCIES ON AGING AND DISABILITY (AAADs)**

The AAADs shall:

- a. Operate a district-wide SHIP to provide information, counseling and assistance on Medicare, Medicaid and all other related health insurance issues for persons with Medicare, persons nearing Medicare eligibility, their adult children and other caregivers, their health care providers and other advocates. The district SHIP shall be required to have a presence in each county within the district by a means approved by the State SHIP Director (e.g., volunteer placement at senior centers or other similar facilities frequented by people with Medicare).
- b. Conduct all activities required by the current CMS-sponsored SHIP grants, as well as by other grants secured by TCAD to enhance the program's capacity to serve consumers, as follows:
  - 1) Assure that SHIP-certified staff performs district-wide one-on-one counseling for consumers and others as delineated in "a" above;



- 2) Provide district-wide Part D/LIS and Medicare Savings Program (QMB, SLMB and QI-1) counseling and enrollment assistance to Medicare enrollees, making access to qualified/certified counseling staff readily available to difficult-to-reach consumers;
  - 3) Perform public and media education and outreach activities to disseminate information to all communities within the district;
  - 4) Develop and maintain a district-wide volunteer program,
  - 5) Report all program performance data thoroughly, accurately and timely, as required by CMS, TCAD and other grantee organizations;
  - 6) Cooperate with CMS, TCAD and other grantee organization requests for information and/or support;
  - 7) Participate in CMS and TCAD-sponsored trainings and in CMS-sponsored education and communication activities, and
  - 8) Participate in other than CMS-sponsored grant activities intended to enhance the capacity of the SHIP to perform the above-required functions.
- c. Advertise throughout the district the availability of SHIP counseling and assistance through the toll-free TN SHIP, Medicare Information and Counseling Help Line (1-877-801-0044).
  - d. Maintain an appropriate, State SHIP Director-approved, outgoing message on SHIP staff members' telephones.
  - e. Staff the district-wide SHIP with at least one (1) dedicated (having no other AAAD duties), full-time position with an individual who will serve as the Regional SHIP Coordinator for the district.
  - f. Ensure that the Regional SHIP Coordinator and all other regional staff members (paid, in-kind or volunteer) who provide counseling to consumers have completed the SHIP/SMP initial and update trainings and are certified competent by the SHIP/SMP Training Program to provide SHIP counseling to consumers.
  - g. Ensure that the Regional SHIP Coordinator and other regional staff members (paid, in-kind or volunteer) who perform public and media activities on behalf

of the SHIP are certified competent by the SHIP/SMP Training Program to provide accurate and timely information to the public.

- h. As part of providing effective counseling to consumers, mail selected informational materials to SHIP consumers. As part of providing effective education and outreach to groups, distribute relevant CMS, State of Tennessee Medicaid/TennCare, TCAD and Tennessee SHIP education materials at SHIP public and media activity events.
- i. Develop and maintain a component of the district-wide program dedicated to reaching and educating persons not yet eligible for Medicare (persons between 40 and 65 years of age) about the importance of planning for their long-term care needs. Provide one-on-one counseling to consumers making inquiry on the topic and distribute informational materials on the components of long-term care planning at outreach and education events.
- j. Develop and maintain partnerships with district government offices (e.g., Department of Human Services, Social Security Administration, Department of Health, Department of Mental Health and Developmental Disabilities, etc.) and private sector organizations and agencies that also interact with people with Medicare to facilitate problem-solving for SHIP consumers and to promote awareness of the SHIP and its offerings. Examples of such agencies/organizations include, but are not limited to, the following:
  - 1) County and city governments;
  - 2) State and Federal legislators and their staffs;
  - 3) Subsidized housing facilities for the elderly and disabled;
  - 4) Community councils on aging, county commissions on aging;
  - 5) County or regional health councils;
  - 6) Senior centers, civic organizations, retirement groups and other organizations or clubs that attract people with Medicare;
  - 7) Educational institutions, including Historically Black Colleges and Universities;
  - 8) Churches, synagogues, or religious organizations;
  - 9) Federal operating agencies or departments;

- 10) State operating departments or agencies;
  - 11) Hospitals, nursing homes, home health agencies, community mental health centers;
  - 12) Local, regional and statewide associations of health care providers and pharmacists, and
  - 13) Local businesses, corporations and other employers (e.g., to provide pre-retirement planning workshops).
- k. Consult with the State SHIP Director for guidance on complex counseling issues and for coordination of outreach activities. Keep the State SHIP Director apprised of emergent consumer and program issues so that those may be promptly addressed and/or referred to CMS for resolution.
  - l. Provide locally based individual counseling services to Medicare consumers who are unable to access other channels of information (e.g., due to having no telephone, no Internet access, a physical or mental disability, low education, etc.) or who live in hard to reach areas.
  - m. Build the volunteer workforce to include counselors whose demographic characteristics are reflective of those of the district and by adding counseling locations in hard-to-reach areas.
  - n. Target outreach on Medicare Part D to low-income beneficiaries who will be eligible for the Part D Low-Income Subsidy (LIS) and the Medicare Savings Programs (QMB, SLMB, QI-1) and to enrollees who, regardless of income, lack prescription drug coverage.
  - o. Target SHIP outreach and counseling to Medicare enrollees with mental illness and intellectual disabilities on the availability of SHIP services and report on outreach and counseling to persons in these categories per specific instruction from CMS.

## **14-8 RECORDS AND REPORTS**

### **Required Reporting**

The Regional SHIPs shall submit program data and program reports as required by CMS and TCAD. At present, CMS requires quarterly submission of Client

Contact and Public and Media Activity Data to the SHIP National Performance Report database at [www.SHIPtalk.org](http://www.SHIPtalk.org) within 30 days of each CMS fiscal year quarter end (July 31 for quarter ending June 30; October 31 for quarter ending September 30; January 31 for quarter ending December 31, and April 30 for quarter ending March 31). CMS also requires semi-annual submission of SHIP Resource, or staff support, data within 60 days following the end of each six month period (November 30 for the six months ending September 30 and May 31 for the six months ending March 31). Regional SHIPs are required to submit Resource Report information to TCAD no later than two full weeks prior to the Resource Report due dates of November 30 and May 31.

When the SHIP receives grants in addition to the SHIP Basic Grant Award, the Regional SHIPs shall submit program data and reports as requested or required by TCAD and the primary funding entity.

#### **14-9 BACKGROUND CHECKS**

Due to the sensitive nature of the information necessary for SHIP Counselors to obtain from consumers in order to assist them with Medicare and other related health insurance issues (e.g., SSN and Medicare Numbers) and the possibility that SHIP Counselors may counsel/assist consumers in their homes, the TCAD shall require its SHIP contractors, grantees and subcontractors to verify individual background information for newly hired SHIP employees and volunteers.

##### **14-9.01 Scope**

The TCAD and AAAD shall maintain personnel files on all SHIP employees, whether hired or volunteer. Each personnel file shall contain an application, date of hire and two personal references. For newly hired SHIP employees or volunteers, the file shall also contain verification, by the employer, of a search of the following registries and the results thereof:

- 1) National Sex Offender Registry (<http://www.nsopr.gov/>);
- 2) Tennessee Felony Offender Registry  
([https://www.tennessean+anytime.org/foil/foil\\_index.jsp](https://www.tennessean+anytime.org/foil/foil_index.jsp));

- 3) Tennessee Abuse Registries  
(<http://health.state.tn.us/Boards/disciplinary.htm> and  
[http://tennessee.gov/dmrs/protection/abuse\\_reg.html](http://tennessee.gov/dmrs/protection/abuse_reg.html)), and
- 4) A local or state law enforcement background check.

For the newly hired SHIP employee or volunteer who has less than 24 months' residency in the State of Tennessee, the employer shall conduct a search of the abuse, sexual abuse and felony registries of the state of prior residence and acquire a background check from the city and state where the potential worker or volunteer resided previously.

#### **14-9-.02 Criminal History**

Past criminal history shall be considered in the hiring process of an employee or volunteer. Applicants with criminal histories shall be evaluated in consultation with appropriate professionals and the following factors:

- (1) The relationship between the incident and the type of employment or service that the applicant will provide;
- (2) The applicant's employment or volunteer history before and after the incident;
- (3) The applicant's efforts and success at rehabilitation;
- (4) The likelihood that the incident would prevent the applicant from performing his or her responsibilities in a manner consistent with the safety and welfare of the consumers served by the agency;
- (5) The circumstances and/or factors indicating the incident is likely to be repeated;
- (6) The nature, severity, number, and consequences of the incidents disclosed;
- (7) The circumstances surrounding each incident, including contributing societal or environmental conditions;
- (8) The age of the individual at the time of the incident;
- (9) The amount of time elapsed since the incident occurred;

(10) A written justification, signed by service provider director, including these considerations, shall be included in any newly hired employee or volunteer's personnel file.

#### **14-9-.03 TBI and FBI Background Checks**

The provider may require TBI and FBI background checks. A TBI or FBI criminal background check may not be requested without the potential worker submitting a sample of fingerprints. The provider may require the prospective employee or volunteer to bear the cost of the background check.

#### **14-9-.04 Appeals**

The applicant who is denied employment or volunteer status on the basis of a negative report may appeal to the provider. The provider shall provide the applicant a copy of the negative report and allow him to appeal within 10 days of the mailing date. The only appealable issues are:

- (1) He/she is not the person identified in the record,
- (2) The record is not correct. The applicant may not litigate the facts of the record, except to show that any charges in the record were dismissed, nolleed or resulted in acquittal.

#### **14-10 RETENTION OF RECORDS**

All records shall be retained for a period of three years beyond case closing, plus the current year, with the qualification that records shall be retained beyond the three year period if an audit is in progress or exceptions have not been resolved.

#### **14-11 CONFIDENTIALITY**

Every SHIP staff member shall observe the requirements for confidentiality and HIPAA compliance as specified by CMS for SHIPs and AAAD contracts (*see Attachment 3, SHIP Security Plan*).

#### **14-12 EVALUATION**

TCAD SHIP staff shall conduct semi-annual evaluations of the program's progress based on the CMS grant performance measures. Evaluation results shall be submitted semi-annually, in the form of a written report, to the SHIP/SMP Advisory Board. The SHIP/SMP Advisory Board shall review evaluations and make recommendations for improvements in performance, as well as for expanding or otherwise modifying program goals. The following elements of program operation shall be used in preparing the Evaluation Report:

- a. The extent to which the program is meeting CMS performance goals;
- b. The extent to which the program is reaching and assisting Medicare enrollees who are hard to reach by virtue of disabilities, cultural or language barriers, geographic location, social isolation, etc.;
- c. The extent to which the program is meeting staffing requirements set by TCAD, and
- d. The extent to which the program is meeting its partnership goals.

**Attachment 1**  
**State Health Insurance Assistance Program (SHIP)**  
**Standards Area: Access**

**Definition:**

**Access:** Providing access to SHIP services for a people with Medicare, their advocates, family members and caregivers is an active process that includes anticipating, identifying and reducing or eliminating any and all barriers that individuals seeking information about Medicare and related health care issues might encounter.

Standard	Minimum Indicator	Self-Assessment
<p><b>#1</b>  <b>Each SHIP will work to make SHIP services accessible to all people with Medicare including persons eligible by virtue of age, disability or End Stage Renal Disease (ESRD), other special populations, family members, caregivers and advocates.</b></p>	<p>Each SHIP will initially identify barriers to services within their state. The SHIP will address these barriers by developing an action plan to:</p> <ul style="list-style-type: none"> <li>• Expand and improve access to services for people with Medicare, including those with:               <ol style="list-style-type: none"> <li>a. hearing or vision impairment,</li> <li>b. language differences and/or illiteracy,</li> <li>c. personal physical challenges, facility limitations or limitations from being homebound,</li> <li>d. cultural and ethnic differences, or</li> <li>e. other</li> </ol> </li> <li>• Track the plan's progress; and</li> <li>• Show outcomes.</li> </ul>	<p>Exceeded    Met    Not Met  <input type="checkbox"/>            <input type="checkbox"/>            <input type="checkbox"/></p>
<p><b>#2</b>  <b>Each SHIP will maintain a customer oriented and user-friendly toll-free telephone number for use by people with Medicare, family members, caregivers and advocates for SHIP-related inquiries according to the standard terms and conditions for SHIPs.</b></p>	<p>Each SHIP will maintain a <b>statewide</b> customer oriented and user-friendly toll-free telephone number and TTY telephone number and maintain a maximum limit of two (2) business days for initial call back. These numbers are for use by people with Medicare, family members, caregivers and any person with an inquiry about Medicare and/or related issues.</p>	<p>Exceeded    Met    Not Met  <input type="checkbox"/>            <input type="checkbox"/>            <input type="checkbox"/></p>



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<p><b># 3</b> <b>Each SHIP will establish a vehicle to make basic information available to people with Medicare, family members, caregivers and advocates via the Internet.</b></p>	<p>Each SHIP will establish a web site, including basic state SHIP information and at least one link to Medicare.gov, other CMS web sites and related Internet sites. The web site can be a part of a larger state web site. The SHIP web site information will be accessible to the population with disabilities as resources and technology allow.</p>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
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# State Health Insurance Assistance Program (SHIP)

## Standards Area: Outreach and Education

**Definitions:**

**Outreach:** Outreach is conducted with the goal of informing the public by providing details regarding the available information channels as well as general, factual information on health benefits, consumer rights, and protections.

**Education:** Education is any presentation forum or seminar where in-depth knowledge is transferred by oral or visual means from the presenter to those attending the event. The goal of this education is to insure that people with Medicare and their caregivers are able to make informed health coverage decisions and understand related rights and protections.

(Note: A SHIP activity may involve both education and outreach efforts at the same time.)

Standard	Minimum Indicator	Self-Assessment
<p><b>#1</b>  <b>Each SHIP will participate in the Centers for Medicare and Medicaid Services (CMS) national education effort.</b></p>	<p>Each SHIP will, in cooperation with national, state and local partners, participate in and/or sponsor Medicare outreach events and public education presentations as a part of the CMS national education effort.</p>	<p>Exceeded    Met    Not Met  <input type="checkbox"/>        <input type="checkbox"/>        <input type="checkbox"/></p>
<p><b>#2</b>  <b>Each SHIP will participate in outreach and promotion efforts.</b></p>	<p>Each SHIP will assess, plan, and participate in outreach events for the purpose of informing the public about the available Medicare information channels, as well as general, factual information on health benefits, consumer rights and protections.</p>	<p>Exceeded    Met    Not Met  <input type="checkbox"/>        <input type="checkbox"/>        <input type="checkbox"/></p>

STANDARD	Minimum Indicator	Self-Assessment
<p><b># 3</b>  <b>Each SHIP will participate in educational efforts.</b></p>	<p>Each SHIP will assess, plan, and provide education to insure that people with Medicare, their advocates, family members and caregivers are able to make informed health coverage decisions and understand related rights and protections.</p>	<p>Exceeded    Met    Not Met  <input type="checkbox"/>        <input type="checkbox"/>        <input type="checkbox"/></p>
<p><b>#4</b>  <b>Each SHIP will provide printed literature and promotional materials in English and other languages, as resources allow.</b></p>	<p>Each SHIP will have up to date literature and promotional materials available at outreach and educational events and for the purpose of mail outs at direct request.</p>	<p>Exceeded    Met    Not Met  <input type="checkbox"/>        <input type="checkbox"/>        <input type="checkbox"/></p>
<p><b># 5</b>  <b>Each SHIP will assure outreach to under served populations.</b></p>	<p>Each SHIP will use resources from national, state and local partners to provide outreach to under served populations.</p>	<p>Exceeded    Met    Not Met  <input type="checkbox"/>        <input type="checkbox"/>        <input type="checkbox"/></p>

# State Health Insurance Assistance Program (SHIP)

## Standard Area: Partnership Development

Standard	Minimum Indicator	Self-Assessment
<p><b>1. Establish a system of referral to appropriate federal and/or state departments/agencies for assistance with health insurance issue resolution and coordinate the exchange of health insurance information between SHIP staff and applicable state and federal government staff.</b></p>	<p>Develop a liaison or key contact person in each of the following agencies and organizations for referral and assistance to people with Medicare problems. Appropriate agencies include, at a minimum: Medicare carriers, Medicare fiscal intermediaries, the Durable Medical Equipment Regional Carrier (DMERC), Peer Review Organization (PRO), Medicaid state agency, state insurance department, and the Social Security Administration.</p> <p>Develop cooperative partnerships with the key person in each of the primary agencies referenced in the minimum standard for joint facilitation of outreach, education, and access to people with Medicare, their families, caregivers and services providers.</p>	<p><b>Exceeded</b>   <b>Met</b>   <b>Not Met</b></p> <p><input type="checkbox"/>   <input type="checkbox"/>   <input type="checkbox"/></p>
<p><b>2. Share information concerning health care consumer issues and complaints to appropriate state and federal government departments to help facilitate changes in regulations or policies to assist people with Medicare.</b></p>	<p>Consolidate and address issues and concerns that are identified and arise in working with partners and people with Medicare. Share this with the appropriate federal or state agencies for consideration in future review of the Medicare program and related programs, like Medicaid and insurance. Maintain an ongoing dialogue with key persons to ensure that clients receive the best service possible.</p>	<p><b>Exceeded</b>   <b>Met</b>   <b>Not Met</b></p> <p><input type="checkbox"/>   <input type="checkbox"/>   <input type="checkbox"/></p>

<p><b>3. Maintain regular contact with CMS Regional Office and support its partnership efforts.</b></p>	<p>Develop a working relationship with the CMS Regional Office SHIP liaison. Participate in regional teleconferences. Assist with regional events planned in the State. Advise the SHIP liaison of significant special state partnership activities or local coalition-building activities.</p>	<table border="0"> <tr> <td><b>Exceeded</b></td> <td><b>Met</b></td> <td><b>Not Met</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	<b>Exceeded</b>	<b>Met</b>	<b>Not Met</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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# State Health Insurance Assistance Program (SHIP)

## Standard Area: Reporting

Standard	Minimum Indicator	Self-Assessment		
<p><b>1. The local SHIP shall collect the required performance reporting data and any state required data as prescribed by the State Program Director, for reporting to the state SHIP.</b></p>	<p>The State Program Director shall analyze the data submitted by the local SHIP on an ongoing basis to assure consistency and reliability and, when necessary, offer technical assistance.</p>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
<p><b>2. Where funds are disbursed to the local level, the state SHIP shall establish a system of financial reporting that the local SHIP can use to report to the state SHIP.</b></p>	<p>The local SHIP shall use this system of financial reporting to the state SHIP in a way that accounts for funds consistent with grants or contracts - federal state or private.</p> <p>The state SHIP shall analyze this report upon submission of the funding form to determine the necessity for technical assistance to the local SHIP.</p>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
<p><b>3. The state SHIP shall train local staff, including volunteers, on the use of the above reporting systems.</b></p>	<p>The state SHIP shall provide this training to new coordinators and volunteers and as needed to seasoned coordinators and volunteers.</p>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

# State Health Insurance Assistance Program (SHIP)

## Standard Area: Staffing

**Definitions:**

**Program Director:** This individual is responsible for the overall management of the program in a given state (may also serve as a counselor).

**Counselors:** Individuals who have received SHIP counselor training and have signed a SHIP counselor agreement or Memorandum of Understanding. Ship *Counselors* may include volunteers, paid and in-kind staff, toll-free help-line counselors, local coordinator/sponsors, etc.

**Staff:** Staff includes the program director, counselors and other staff (volunteer, paid and in-kind) who contribute to the SHIP.

Standard	Minimum Indicator	Self-Assessment		
<p><b>1. Each SHIP Program Director shall have an understanding of Medicare, senior health insurance issues and program management techniques, and continually update his/her knowledge.</b></p>	<p>A new SHIP program director will attend the state's new counselor training.</p>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
	<p>The SHIP program director, or designee, will attend the national SHIP director's conference, CMS sponsored national teleconferences and up to two other events designated by CMS or the Program Director as critical to SHIP training and informational needs (such as the national REACH training).</p>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
<p><b>2. The SHIP shall provide a framework and mechanisms for program and personnel management and administration that guarantee the continuity and consistency required for effective service delivery.</b></p>	<p>The SHIP framework shall address:</p> <ul style="list-style-type: none"> <li>• Counselor training &amp; updates</li> <li>• Volunteer management</li> <li>• Outreach/education</li> <li>• System of communication and reporting among all SHIP staff</li> </ul>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

<p><b>3. The SHIP shall establish a sufficient number of staff positions (including volunteers) necessary to provide the services of a health insurance information, counseling and assistance program.</b></p> <p><b>4. SHIP Counselors shall commit to providing insurance information, counseling and assistance relating to the procurement of adequate and appropriate health insurance coverage to eligible individuals, or other program responsibilities.</b></p>	<p>Each SHIP shall have:</p> <ul style="list-style-type: none"> <li>• A program director</li> <li>• A counselor that can be accessed by a person with Medicare within all areas of the state.</li> </ul> <p>SHIP counselors shall contribute:</p> <ul style="list-style-type: none"> <li>• Four hours of volunteering per month, when in state, providing services are needed.</li> <li>• At least a six-month commitment to the program, allowing for adjustments agreed to by the Program Director.</li> </ul>	<p>Exceeded <input type="checkbox"/></p> <p>Exceeded <input type="checkbox"/></p>	<p>Met <input type="checkbox"/></p> <p>Met <input type="checkbox"/></p>	<p>Not Met <input type="checkbox"/></p> <p>Not Met <input type="checkbox"/></p>
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# State Health Insurance Assistance Program (SHIP)

## Standard Area: Counselor Training/Quality Assurance

Standard	Minimum Indicator	Self-Assessment		
<b>#1</b> <b>SHIPs will keep current on federal and state regulatory changes and other health insurance issues.</b>	<ul style="list-style-type: none"> <li>● Participation in conference calls and conferences</li> </ul>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
	<ul style="list-style-type: none"> <li>● State SHIP will have a system to distribute information to all staff paid and volunteer, in a timely fashion</li> </ul>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
	<ul style="list-style-type: none"> <li>● Establish a contact person, with the appropriate state and federal agency (Medicare contact partners including but not limited to Medicare intermediary and carrier, Durable Medical Equipment Carrier, Peer Review Organization, Insurance Department, Aging Department, Health and Human Services Department, Social Security and Veterans Services), to provide SHIP with updated information.</li> </ul>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>
	<ul style="list-style-type: none"> <li>● SHIP will allow for self-study and research of new regulations and issues.</li> </ul>	Exceeded <input type="checkbox"/>	Met <input type="checkbox"/>	Not Met <input type="checkbox"/>

Standard	Minimum Indicator	Self-Assessment
<p><b>#2</b> Each SHIP will have an initial training program for new counselors</p>	<p><b>General counselor training will be 18 hours in length. Training must include minimum subject matter listed under indicator number three. Training methods may include:</b></p> <ul style="list-style-type: none"> <li>• Classroom</li> <li>• Internet</li> <li>• Satellite</li> <li>• Newsletter</li> <li>• Self Study</li> <li>• Conferencing</li> <li>• Videotape</li> <li>• Teleconferencing</li> <li>• Videoconferencing</li> <li>• Other appropriate methods</li> </ul>	<p>Exceeded    Met    Not Met</p> <p><input type="checkbox"/>            <input type="checkbox"/>            <input type="checkbox"/></p>
<p><b># 3</b> New counselor training will cover specified subject matter.</p>	<p>At the completion of training a volunteer needs to be prepared to counsel on the following topics. <b>Each state SHIP will determine the degree of training for each topic.</b></p> <p><b>Medicare</b></p> <ul style="list-style-type: none"> <li>• Eligibility</li> <li>• Enrollment</li> <li>• Fraud and Abuse</li> <li>• Claims</li> <li>• Appeals</li> <li>• Medicare Secondary Payer</li> </ul>	<p><b>Medicare</b></p> <p>Exceeded    Met    Not Met</p> <p><input type="checkbox"/>            <input type="checkbox"/>            <input type="checkbox"/></p>
	<p><b>Medicare + Choice</b></p> <ul style="list-style-type: none"> <li>• Original Medicare Vs. Medicare + Choice</li> <li>• Enrollment</li> <li>• Disenrollment</li> <li>• Eligibility</li> <li>• Plan Feature/Comparisons</li> <li>• Non Renewal/ Plan changes</li> <li>• Appeals/Grievances</li> </ul>	<p><b>Medicare + Choice</b></p> <p>Exceeded    Met    Not Met</p> <p><input type="checkbox"/>            <input type="checkbox"/>            <input type="checkbox"/></p>

Standard	Minimum Indicator	Self-Assessment
	<p><b>Medicare Supplement Insurance</b></p>	<p><b>Medicare Supplement Insurance</b></p>

	<ul style="list-style-type: none"> <li>● Standard plans/ Plan Benefits</li> <li>● Medicare Select</li> <li>● Pre-Standardized Plans</li> <li>● Open Enrollment</li> <li>● Guarantee Renewability</li> <li>● Pre – existing Conditions</li> <li>● Guarantee Issue Policies</li> <li>● Guarantee Issue Protections</li> <li>● Crossover/Automatic file</li> <li>● Premiums</li> <li>● Claims filing</li> <li>● Appeals</li> <li>● State specific laws and regulations</li> </ul>	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">Exceeded</td> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Exceeded	Met	Not Met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<p><b>Long Term Care Insurance</b></p> <ul style="list-style-type: none"> <li>● Appropriateness</li> <li>● Features/Benefits</li> <li>● Enrollment</li> <li>● Underwriting</li> <li>● Tax Qualified/ Non Tax Qualified</li> <li>● Benefit Triggers</li> <li>● Long Term Care Partnership Programs (if available in state)</li> <li>● State specific laws and regulations</li> </ul>	<p><b>Long Term Care Insurance</b></p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">Exceeded</td> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Exceeded	Met	Not Met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<p><b>Medicaid; SSI, QMB, SLMB, QDWI, QI1, QI2, Spend Down (health insurance and nursing home)</b></p> <ul style="list-style-type: none"> <li>● Eligibility</li> <li>● Program Benefits</li> <li>● Referrals and Resources</li> </ul>	<p><b>Medicaid; SSI, QMB, SLMB, QDWI, QI1, QI2, Spend Down (health insurance and nursing home)</b></p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">Exceeded</td> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Exceeded	Met	Not Met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<b>Standard</b>	<b>Minimum Indicator</b>	<b>Self-Assessment</b>						
	<p><b>Other Health Insurance Options</b></p> <ul style="list-style-type: none"> <li>● Employer Health Plans</li> <li>● Specified Disease Plans</li> <li>● Indemnity Policies</li> </ul>	<p><b>Other Health Insurance Options</b></p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">Exceeded</td> <td style="text-align: center;">Met</td> <td style="text-align: center;">Not Met</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Exceeded	Met	Not Met	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<ul style="list-style-type: none"> <li>State specific laws and regulations</li> </ul>	
	<p><b>Counseling</b></p> <ul style="list-style-type: none"> <li>Counseling techniques</li> <li>Confidentiality</li> <li>Reporting</li> </ul>	<p><b>Counseling</b></p> <p>Exceeded <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/></p>
<p><b># 4</b> Each SHIP will have a counseling handbook for training and reference.</p>	<p><b>Content will include all subject matter listed in Standard #3, new topics as they develop and the following:</b></p> <ul style="list-style-type: none"> <li>Special enrollment and entitlement situations e.g. federal employees prior to 1984, military demonstration projects, etc.</li> <li>Medicare + Choice choices not currently available in state</li> <li>Marketing of plans</li> <li>Application and appeal assistance with Medicaid Programs</li> <li>Military Health Benefits</li> <li>Federal Employee Health plan</li> <li>Railroad Employee Health Plan</li> <li>Consolidated Omnibus Budget Reconciliation Act (COBRA)</li> <li>Prescription assistance</li> <li>Employee Retirement Income Security Act (ERISA)</li> </ul>	<p>Exceeded <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/></p>

Standard	Minimum Indicator	Self-Assessment
<p><b># 5</b> Each SHIP will have a continuing education training plan for counselors to assure accurate information and counseling.</p>	<p>Counselors will receive 12 hours of continuing education training annually, covering new developments as well as review of basic concepts. Additional</p>	<p>Exceeded <input type="checkbox"/> Met <input type="checkbox"/> Not Met <input type="checkbox"/></p>

	<p>training on unforeseen changes and developments offered when necessary. Training methods may include:</p> <ul style="list-style-type: none"> <li>● Classroom</li> <li>● Internet</li> <li>● Satellite</li> <li>● Conferences</li> <li>● Newsletter</li> <li>● Self Study</li> <li>● Conferencing</li> <li>● Videotape</li> <li>● Teleconferencing</li> <li>● Videoconferencing</li> <li>● Mentoring</li> <li>● Other appropriate methods</li> </ul>	
<p><b># 6</b>  <b>The Ship will provide one-to-one education, information and assistance when needed by a counselor.</b></p>	<p>Responding to counselors and volunteers needs is a top priority for paid staff.</p>	<p>Exceeded    Met    Not Met  <input type="checkbox"/>        <input type="checkbox"/>        <input type="checkbox"/></p>

## **Tennessee SHIP/SMP Volunteer Classifications**

The classifications below were developed by a committee consisting of several members of the statewide SHIP/SMP staff and were finalized in October 2009.

### **Level I**

In-kind professionals, people with limited time and limited knowledge on Medicare/Medicaid.

- \*One to two hour initial training required (program overview)
- \*Attend quarterly updates, meetings and/or trainings as requested
- \*Limited reporting required; no access to confidential information
- \*Disseminate SHIP flyers, SMP brochures, and general Medicare information
- \*Refer clients to SHIP/SMP for counseling
- \*Office assistance
- \*Suggested contribution of four hours of time monthly

### **Level II A**

In-kind professionals and others with more time and a better understanding of Medicare/Medicaid

- \*Two to four hour initial training required
- \*Attend quarterly meetings, update trainings
- \*Reporting required per event; limited access to confidential information
- \*Attend community events such as health fairs and presentations
- \*Disseminate SHIP flyers, SMP brochures, and general Medicare information
- \*Refer clients to SHIP/SMP for counseling
- \*Minimum Contribution of four hours monthly
- \*Recruit other volunteers

### **Level II B (Specialized or Seasonal)**

Seasonal Volunteers or those working with a Topic Specific with emphasis on specified subject matter; includes individuals having an overview of Medicare and training in a specialized area

- \*Four to six hour training sessions (Medicare 101 3-4- hours, specialized training 2-3 hours)
- \*Participate in quarterly meetings, update trainings
- \*Attend community events such as health fairs and presentations
- \*Disseminate SHIP flyers, SMP brochures, and general Medicare information
- \*Refer clients to SHIP/SMP for counseling if not trained in subject matter
- \*Suggested contribution of four hours monthly
- \*Recruit other volunteers

### **Level III (Certified)**

Dedicated knowledgeable individuals who are trained to counsel on multiple Medicare/Medicaid subjects

- \*Eighteen hours initial training required

## SHIP Policy Chapter – Attachment 2

- \*Participate in quarterly meetings, update trainings
- \*Monthly reporting required
- \*Provides one-one-one counseling and case work
- \*Attend community events such as health fairs and presentations
- \*Disseminate SHIP flyers, SMP brochures, and general Medicare information
- \*Possible access to Unique ID
- \*Minimum contribution of four hours monthly
- \*Recruit other volunteers

**Tennessee**  
**State Health Insurance Assistance Program (SHIP)/Senior Medicare Patrol (SMP)**

**Security Plan**

**Keeping Client Information Safe**

Because SHIP counselors help Medicare beneficiaries handle billing problems, claims disputes, and in making important health insurance decisions, it is not only important that we protect their personal information, but it is also the law!

The Health Insurance Portability and Accountability Act of 1996 (HIPAA, Title II), directed by the US Department of Health and Human Services, was developed to meet the growing need for stronger safeguards for maintaining an individual's health privacy. Included among the many procedural standards is the "Privacy Rule" which bans the release of certain individually identifiable health data without prior written authorization. In general, the HIPAA Privacy Rule requires that states ensure that individually identifiable health care information remains confidential and secure.

Failure to comply subjects the state to civil and criminal penalties, as well as loss of federal matching funds.\*

**Securing Computer and Paper Records**

All client information should be protected, both on computer files and in paper files.

Documentation of counseling sessions and/or interactions with beneficiaries should be saved onto a secure system. Each sponsoring agency should have in place written procedures to protect electronic data.

Paper files should be kept in locked filing cabinets. When leaving a work station for any length of time, files should be closed and locked with the key kept in separate place.

When leaving a work station, documentation containing personal client data should not be left out in open view. Place client documents in a file and lock them inside.

**Sharing Information**

*When is it okay to share personal client information?*

Sometimes sharing information is necessary to resolve problems. In this case, the counselor **must have permission from the Medicare beneficiary.** There are three ways this can happen:



- 1) The beneficiary (or legal representative) is physically present with the counselor while discussing personal information with other entities, and the beneficiary grants verbal permission;
- 2) The beneficiary is present while on a 3-way conference call and gives verbal permission to discuss personal information, or
- 3) The beneficiary gives written permission for the counselor to discuss personal information to resolve problems being discussed with counselor.

In addition, SHIP counselors with “Unique ID numbers” (a CMS-developed system) may access specific health insurance information from certain agencies for the purpose of assisting individual consumers.

### Enforcement Measures

Each sponsoring agency for SHIP and SMP programs is responsible for training staff, monitoring, and enforcing security and safety procedures and policies established specifically for the individual agency.

### Why is this so important?

[www.firstgov.gov](http://www.firstgov.gov), May 23<sup>rd</sup>, 2006

The Department of Veterans Affairs (VA) has recently learned that an employee, a data analyst, took home electronic data from the VA, which he was not authorized to do. This behavior was in violation of VA policies. This data contained identifying information including names, social security numbers, and dates of birth for up to 26.5 million veterans and some spouses, as well as some disability ratings. Importantly, the affected data did not include any of VA’s electronic health records nor any financial information. The employee’s home was burglarized and this data was stolen. The employee has been placed on administrative leave pending the outcome of an investigation.

**Keeping our clients safe and secure is of UTMOST IMPORTANCE!**