

Project Narrative

Mrs. P, a Spanish-speaking, 75-year-old woman with an annual income of about \$10,000, walks into her local senior center in Brooklyn because she can't afford her diabetes supplies. She asks a caseworker if Medicare will help pay for her care. He refers her to 1-800-MEDICARE because he has no information available to address her question. He doesn't tell her about Medicare coverage of diabetes supplies, the two organizations nearby that offer low cost diabetes treatment, a community health fair next week on managing diabetes, or about the Medicare low-income assistance program she qualifies for that helps pay for Medicare. Mrs. P leaves the office— without the help she needs.

Mrs. P is one of the 1,015,650 New Yorkers with Medicare, the federal program that provides health insurance to adults over 65 and to people with disabilities. In New York City, the percentage of older adults with Medicare with incomes below \$10,000 is higher than the national average.¹ In addition, many of them have low literacy,² are undereducated, or have limited or no English proficiency. Thus, many New Yorkers with Medicare, especially those with low incomes, face numerous barriers to accessing affordable, stable, and high-quality health care services. The greatest and almost insurmountable barrier keeping people with Medicare from the benefits they are entitled to is the mind-boggling complexity of the Medicare program.

In trying to manage their health care and avoid exorbitant medical costs, New Yorkers with Medicare often rely heavily on counselors in community-based organizations to help them navigate the Medicare maze. New York City, like most urban areas, has a wide network of organizations that help older adults and people with disabilities with their Medicare concerns through counseling, advocacy, referrals, and other forms of assistance. The experience and training of their counselors varies widely. Some are well versed in Medicare, while others struggle with the basics. Regardless of their level of expertise, ongoing support and training is vital in order to keep them abreast of ever-changing Medicare regulations and benefits.

Since 1998, the Medicare Rights Center (MRC) has developed and led the innovative City Network, Education, and Training program (CityNET) in order to assist counselors to help people understand their Medicare benefits and access affordable, high-quality healthcare services (a description of CityNET and list of participating organizations can be found in the Appendix pp. 9-11). After conducting focus groups of CityNET agency staff, MRC identified barriers in each community to providing Medicare education and to accessing benefits. MRC then provided staff with training sessions, consumer education materials and back-up technical assistance on Medicare basics, options, and consumer rights and protection.

¹ Thirty-four percent (34%) of seniors on Medicare in New York have incomes below \$10,000, in comparison to 30% of seniors in the U.S. "Medicare Beneficiaries and HMOs: A Case Study of the New York City Market," Mathematica Policy Research, Inc., January 1998.

² PRNewswire/American Medical Association Foundation. December 2000. Research indicates that about one-third of older adults do not have the health literacy skills needed to understand basic health information.

The success of CityNET and the existence of other stand-alone Medicare assistance services is not enough to meet the ever-increasing need. MRC's experience in answering over 75,000 hotline calls annually from people with Medicare and in operating CityNET has demonstrated that the Medicare assistance system is overtaxed and fragmented. In a survey MRC recently conducted, CityNET agencies reported that agency staff need regularly updated information, frequent "refresher" trainings and training on demand for new hires so that they can meet their clients' needs. Further, because their staff are juggling a myriad of duties and complaining about the complexity of Medicare, they cite the need for a comprehensive, one-stop tool that will help them navigate the Medicare maze quickly for their clients and provide information tailored to their client's needs. Clearly, the current Medicare assistance delivery system is inefficient:

- New York City lacks a single place to access Medicare and local health care information that is tailored to an individual client's needs
- Most clients face multiple barriers to accessing health care and therefore may need service coordination involving multiple agencies
- Staff turnover and the constantly changing Medicare program require a comprehensive, accessible, and easily updated Medicare information tool and catalogue of related health care resources so that staff can provide clients with individualized information, without having to learn complicated regulations or gain extensive experience with the service provision "landscape"
- There is no tracking of emerging issues faced by people with Medicare so it is impossible to respond quickly to these issues or to assess whether responses are effective.

The Solution

Broadband Education and Empowerment for People with Medicare (BEEP'M) will create a comprehensive, streamlined Medicare counseling and assistance system that will help New Yorkers with Medicare quickly and easily access the Medicare benefits and health care services they need. BEEP'M will link at least 9 CityNET agencies at 24 sites serving 3500 people with Medicare every month over a broadband virtual private network (VPN) and allow CityNET client access to user services over the VPN through consumer kiosks located in each participating CityNET agency as well as public access to user services over the World Wide Web (see Appendix, pp.11-13 for a list of CityNET organizations participating in BEEP'M and their organizational descriptions. Letters of support are found at Appendix pp. 23-35).

BEEP'M will be designed primarily for counselors and will provide users with high-speed, broadband access to these four components and services:

- MedicareHealth Screen – an interactive client screening and intake tool
- ReferralEase – a searchable database of resources
- MedicareU—an online, interactive training program
- MediBo ard—a bulletin board and chat room that enables users to share information and benefit from the experiences of their colleagues.

MedicareHealth Screen: An interactive client screening and intake tool that will provide staff with a "virtual guided tour" to information and services that can help their clients.

After inputting data on a client's income, residence, ethnicity, age, language, health care problems and expenses, the program will identify problems and then provide individualized Medicare information to solve those problems. This case management database will track activities and outcomes of each client's case. For the first time, all member agencies will enter client encounter and outcome information into a shared system, enabling development of efficient and effective case resolution strategies.

ReferralEase: ReferralEase will provide state-of-the-art assistance in finding the right healthcare services or public benefits advocacy services. ReferralEase will consist of an on-line, searchable database of no- or low-cost healthcare service providers, disease-specific service organizations, and public benefits advocacy organizations. A case worker will be able to search for information using interactive decision trees based on a client's topic of interest, location and operation hours preferences, language, ethnicity, income restrictions, and other factors. The database will find all the latest diabetes information, for example, including upcoming diabetes events and programs, community resources and organizations that specialize in this disease, materials in the client's language, and community groups for diabetics. ReferralEase content will be updated by CityNET agency staff so that all BEEP'M users have access to the latest information in real time.

MedicareU: MedicareU will consist of multi-media presentations of the eight *Let's Learn Medicare* training modules developed by MRC, containing consumer education presentations. These on-demand training videos, accessible via broadband Internet connection, will enable CityNET agencies to conduct more community outreach, train more staff and assist more people with Medicare in their community. On-demand training enables new staff to quickly develop a solid understanding of Medicare issues and enables experienced staff to get "refresher" courses as needed, without losing time traveling to off-site trainings.

MediBoard: This electronic bulletin board will enhance direct communication within the CityNET network. Staff members will be able to post concerns, questions and answers, and other requests. For instance, a CityNET counselor who is having trouble with staff at a local welfare office regarding application for a program for those with low-incomes would be able to share that information with other agencies.

Consumer BEEP'M: The final phase of this project will provide CityNET clients access to computer kiosks at CityNET sites to find information about Medicare utilizing touch screen technology. And, the general public will have access through the Internet. Parts of this Consumer BEEP'M will be available in English and Spanish and will include the following:

MedicareInteractive: A public user version of BEEP'M available on the Web, which will enable any user to get individualized Medicare benefit information using a self-assessment tool and interactive decision trees.

ReferralEase: User-friendly, accessible information on the complete array of services that can help people with Medicare access Medicare and other health care benefit information.

MediBoard and **MediChat:** Chat rooms and bulletin boards for older adults and people with disabilities to post their concerns or needs to a wide network of agencies and people with Medicare who may have similar questions.

Outcomes

The anticipated outputs and outcomes of BEEP’M are listed below:

Goal	Anticipated Outcomes and Outputs
<ul style="list-style-type: none"> ● Enhance Communication and Services within CityNET Network 	<ul style="list-style-type: none"> ● Increased efficiency in serving clients with streamlined intake, screening, and eligibility process ● Increased linkage and coordination between our 9 organizations ● More outreach to consumers ● Increased knowledge of health care problems of New Yorkers with Medicare ● More up-to-date, comprehensive information available to clients ● More appropriate referrals ● Improved staff training and support ● Increased awareness of community events and resources ● Increased ability to handle multiple needs of clients
<ul style="list-style-type: none"> ● Provide the Public with Tailored Medicare Resources 	<ul style="list-style-type: none"> ● Improved access to health care services and information ● Better quality and more individualized services ● Increased consumer awareness and enrollment in Medicare Assistance Programs and prescription drug assistance programs ● Better consumer understanding of Medicare rights, benefits, and options ● Increased access to user-friendly health care resources on the Internet

Innovation

BEEP’M will use broad band technology to enable CityNET agency staff to interact with a linked continuum of Medicare consumer information, community healthcare resources and Medicare training materials, with community information regularly updated by CityNET agency staff. Unlike other Medicare Internet information, BEEP’M’s interactive tools will provide information and referrals tailored to individual needs, facilitating problem-solving and speeding casework. For example, if the counselor assisting Mrs. P had used BEEP’M, he would have been prompted to advise her about the Medicare Assistance Programs and could print out take-away information providing eligibility guidelines, a map of where to go to apply, a list of what documents to bring, as well as an example of the form that is used in applying for the program. The screen would also then remind the staff member after a period of time to follow-up with Mrs. P to learn whether she needed additional assistance in accessing the program. (See Appendix pp. 14-15 for prototype)

Additionally, agencies serving people with Medicare will be able to provide Medicare training on-demand to their staff and glean service and outcome information from a

shared database in order to identify and implement best practices. CityNET agency clients will use emerging touch screen technology to navigate Consumer BEEP'M.

BEEP'M both builds on the success of past TOP awardees like Portland Area Housing Clearinghouse and improves upon the efforts of other TOP awardees like the New York State Aging Services Network and the existing Medicare.gov website by providing interactive individualized Medicare information that includes local resources. BEEP'M places content development at the outermost layer, with the community-based organizations that best serve their clients and present culturally and linguistically relevant services and materials. These aspects complement and build on what we have learned over the past three years of our CityNET project:

- The importance of overcoming cultural, ethnic and language barriers to help clients access services and counseling
- Making information relevant to the individuals within that population, and
- Using community-based organizations to deliver information the last mile to vulnerable subpopulations

BEEP'M will demonstrate a new way to meet client needs that requires less counselor time and intervention to achieve better outcomes.

Diffusion Potential and Dissemination Plan

BEEP'M will serve CityNET agencies in the four most populous boroughs of New York City. Since Medicare information is consistent throughout the region and suburban consumers frequently access health care and other resources located in the city, as well as those within their particular community, BEEP'M will ultimately provide a city-wide and regional system that will assist Long Island and the lower Hudson Valley.

BEEP'M can be replicated in communities nationwide because Medicare is a federal Medicare screening, service, information and training components can be used in every community. Further, BEEP'M's design will enable it to be easily adapted to reflect different state and local conditions. Medicare consumer service agencies across the country will be interested in BEEP'M because it offers small, underfunded agencies with overworked staffs the same opportunity as better-equipped organizations to help clients without costly training sessions and materials. This system will ultimately result in better coordination of services, referrals, and the identification and sharing of best practices between partners.

BEEP'M has a regional and national diffusion plan. The Project Director at MRC will recruit other CityNET partner organizations and suburban Medicare services agencies for BEEP'M and identify funding to sponsor their participation. Nationally, the Project Director will attend major aging services and health care conferences, including the Biennial SPRY conference and the annual American Society on Aging/National Council on the Aging joint annual conference to demonstrate BEEP'M success and gain exposure for the project and its applicability in other communities. The Project Director will also produce an article about BEEP'M for MRC's Communications Associate to place in professional journals and other media outlets.

Project Feasibility

Technical Approach and Interoperability

The technical approach to BEEP'M relies on accepted standards and existing network hardware (See Appendix pp. 16-17 for Technical Specifications Chart and System Diagrams). Our approach builds on existing technology that is already deployed like Internet Browser programs to view content, Adobe Acrobat to download and view static documents, and various media playing software to view streaming multi-media content. In selecting the platform and standards, MRC conducted a thorough analysis of alternatives.

The provider applications will be available to BEEP'M agency users over a virtual private network (VPN) hosted by an Internet service provider. Thus, the BEEP'M system will leverage the existing infrastructure of the Internet as well as the connectivity already in place at a few partner agencies.

We will equip each BEEP'M partner with Windows 2000 PC with a high-bandwidth connection to the Internet via newly installed Asynchronous Digital Subscriber Line (ADSL) connections. BEEP'M agency clients will use computer kiosks with touch screen technology at BEEP'M partner community centers to access Consumer BEEP'M Medicare information.

The BEEP'M system will employ several well-established technology standards. The database will be a traditional SQL-compliant relational database. This format is compatible with existing legacy data sources that will serve as the primary source of data for the system. The network protocol will be TCP-IP, the public standard for communication in an Internet environment. The server will be Windows NT, and the information search and input tools will be programmed in Java and Active Server Pages.

Maintenance

By using a web-based architecture, maintenance will be significantly simplified and future installations and upgrades will be efficiently managed through the centralized server. Further, all contractors will be required to be available to troubleshoot, add new user accounts and maintain system components for which they have responsibility.

Scalability

BEEP'M will serve as a prototype environment for several innovative communication strategies. Each of these strategies – centralized case management, effective Web-based distance learning, and web-based communication and information exchange – were selected because they are easily scalable beyond the initial environment to other boroughs or other cities. These strategies all promote management and maintenance of communications from a centralized office, while at the same time providing cost effective tools for distributing access to public information.

Applicant Qualifications

The Medicare Rights Center (MRC) is the leading national nonprofit organization exclusively dedicated to ensuring that older and disabled Americans with Medicare get the health care they need. Since 1989, MRC has directly helped over a million people receive good, affordable health care. MRC has a strong and successful record of grants and program management with governmental and private funding entities.

MRC and its CityNET agency partners have considerable experience in serving all people with Medicare in New York City. Each BEEP'M CityNET partner has particular expertise in serving one or more vulnerable sub-populations in New York.

SomethingDigital, an Internet design and development firm with significant long-term work experience with public institutions and non-profit organizations, has broad experience in developing and implementing digital network technology projects. For a full description of qualifications of MRC and SomethingDigital, along with biographies of key staff, see Appendix pp. 18-21. For descriptions of CityNET BEEP'M partners, see Appendix pp. 11-13.

Budget, Implementation Schedule, Timeline and Sustainability

BEEP'M will be implemented over a three year timeline, with a total project budget of \$1,431,269. Budget details are provided in the Budget Narrative. A detailed timeline is in the Appendix, pp. 22.

Given our experience in developing Medicare education and service projects, MRC is confident that BEEP'M will be sustainable with (1) local resources and (2) revenue received from corporations and unions which will want to use BEEP'M components for Web-based staff training and employee/member interactive Medicare counseling, once a sound track record is developed.

Privacy and Security

BEEP'M will ensure client privacy and efficient and controlled transmittal of information from the project. BEEP'M plans to employ several robust security strategies such as SSL encryption, proprietary VPN access, and a unique username and password logon with user-based security and data access roles. Other security features, such as firewall technology, would be implemented as part of the physical infrastructure.

Partnerships and Staff Turnover

We do not anticipate any change in the BEEP'M partnership structure during the course of the project, except that we may add other community-based organizations as we raise additional funding to connect them to the BEEP'M network. We will guard against the consequences of BEEP'M project staff turnover by cross-training staff to take on various responsibilities. Further, the highest level of project responsibility will rest with a senior manager at MRC who has worked over six years at MRC.

Community Involvement

MRC has worked with and sustained relationships with the BEEP'M CityNET partners over the past three years and with SomethingDigital over the last 18 months. With the

support of Something Digital as technology leader and the BEEP'M partners as project implementers, MRC will function as the project coordinator, organizing and securing funding for the BEEP'M project. MRC will hold regular meetings of the BEEP'M Planning Group/Advisory Committee for all partners to ensure constant input and feedback as the project is implemented. BEEP'M partners will address specific issues such as accessibility, usability, and effectiveness in the development and implementation stages of the project. BEEP'M partners will serve as consultants on culture and language issues that face their client populations.

BEEP'M partners have agreed to contribute 5% FTE staff time for a Project Coordinator at each BEEP'M site. The BEEP'M Project Coordinators will be responsible for ensuring that BEEP'M is being utilized and to provide feedback to MRC and the independent evaluators on BEEP'M's effectiveness. They will also participate in content development for the network by updating information in the ReferralEase database. Letters of support from CityNET agencies participating in BEEP'M are included in the Appendix, pp. 23-35.

BEEP'M partners will be intimately involved in the design of the technology and will be thoroughly trained during implementation. Navigation will be designed with the most basic user in mind, using buttons and automated help options to guide users to requested information. BEEP'M also calls for the project staff to play the role of traffic cop, directing people to the tools and information that will solve their problems. Technical support for BEEP'M Project Coordinators will always be available from the MRC Project Assistant through the MRC HelpDesk. Technical support for users of the public website will also be available through email from the HelpDesk.

Reducing Disparities

The direct beneficiaries of BEEP'M will be low-income New Yorkers with Medicare who are African-American, Asian-American, disabled or Spanish-speaking. The services provided by BEEP'M partner agencies through BEEP'M will reduce disparities by increasing access to affordable health care and increasing agency and community access to broadband technology.

Evaluation

The primary purpose of the evaluation of BEEP'M is to provide formative feedback on the development of the various technologies and the effectiveness of their diffusion to community sites. Some of the key evaluation questions include the following: How we can improve the comprehensibility, navigability and usability of the products offered through BEEP'M? What factors hinder and support the adoption of new technologies by agencies serving older Americans? How effective are the training and technical support provided to community sites, in terms of their knowledge, their attitudes toward the use of technology, and their expectations of benefits from that technology for themselves and their clients? What are the trends in use over time? What issues influence initial and sustained adoption?

The independent evaluator will collect data to address these questions through a mix of methods and sources. These include: expert review of website content; participation in the design of usability tests to be conducted by the software developers; observations of advisory committee meetings using a formal observation protocol; a series of in-depth key informant interviews using a semi-structured protocol with senior managers, staff, and trainees associated with community sites; abstraction of data collected by the computer systems to assess frequency and nature use of various elements; tracking of the MediBoard and MediChat services; and closed-ended surveys of CityNET agency staff and client users of BEEP'M. Qualitative data will be analyzed using standard methods including transcription and coding of interviews, and observation reports. Wherever possible, coding and interpretation will be validated through the use of multiple reviewers. This data will be aggregated using standard descriptive statistics, including trend analysis.

All data provided to the evaluators will be stripped of information that would identify individual respondents. Data collected by the evaluators will not be collected in a manner that could identify respondents. Prisoners, children, and pregnant women will not participate in this research. All survey instruments will be designed to ensure that responses cannot be attributed back to individuals.

Evaluation findings will be shared with the MRC BEEP'M staff on an ongoing basis. Discussions will aim to sharpen interpretations, identify additional issues to address, and brainstorm the implications of findings for project refinement. In addition, written reports will be developed at the end of each year.