

GEORGIA CARES PROGRAM GUIDELINES AND STANDARDS

§100	General
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§101 Purpose

GeorgiaCares, administered by the Georgia Department of Human Resources' Division of Aging Services (DAS), is a volunteer-based program that provides free, unbiased and factual information and assistance to Medicare beneficiaries and their caregivers about Medicare and related health insurance issues including long term care insurance, prescription drug programs and Medicare fraud, error and abuse. GeorgiaCares serves to:

1. Educate disabled and older Medicare beneficiaries, their families and caregivers about health insurance coverage, benefits, consumer rights and healthcare fraud.
2. Provide in-depth information and assistance to consumers in order to increase their understanding of Medicare and other health insurance issues; help Medicare beneficiaries resolve problems related to their health insurance coverage; inform them about the eligibility criteria for various health insurance programs and help them enroll when applicable.
3. Protect consumers from health care fraud, error and abuse by educating them on prevention and how to report potential claims.
4. Empower consumers to make informed decisions concerning health insurance options, exercising their appeal and grievance rights.
5. Demonstrate the effectiveness of recruiting and training volunteers to teach, educate and assist Medicare beneficiaries.

§102 History

GeorgiaCares began in 1992 when the Division of Aging Services (DAS) received a Health Information, Counseling and Assistance Grant from the Health Care Financing Administration (now known as the Centers for Medicare and Medicaid Services, or CMS). In the early years the program was named HICARE (Health Insurance Counseling, Assistance and Referral for the Elderly) and operated in only six regional Planning and Service Areas (PSA's). In SFY 1998 HICARE expanded to statewide coverage. From the beginning, Certified Coordinators and volunteers conducted community education to prevent Medicare and Medicaid fraud, waste and abuse.

A grant in 1999 from the U.S. Administration on Aging expanded program efforts in this area and launched the Senior Medicare Patrol (SMP). On July 1, 2002, the HICARE program was expanded again and renamed GeorgiaCares. With additional state funds and in collaboration with many partners including pharmaceutical companies, pharmacies, hospitals, Schools of Pharmacy, and other organizations, GeorgiaCares set out to enroll every eligible Medicare beneficiary in Georgia in all available low-cost prescription assistance programs. Through the years GeorgiaCares has educated thousands of Georgians about Medicare and related health insurance issues. More importantly, GeorgiaCares has provided the state's Medicare beneficiaries with increased opportunities to save millions of dollars in health care costs.

§103 Funding & Organization

The GeorgiaCares program is funded through grants from the Centers for Medicare and Medicaid Services (CMS), the U.S. Administration on Aging (AoA) and state funds appropriated by the Georgia General Assembly. In addition to administering the program, the DHR Division of Aging Services operates the statewide GeorgiaCares hotline and contracts with all twelve Area Agencies on Aging (AAA) for the provision of GeorgiaCares services locally. The AAAs operate the GeorgiaCares program directly or subcontract with a service provider for program service delivery.

§104 Program Activities

Program activities include various methods of providing health insurance information, counseling and assistance services to persons with Medicare, their families and their caregivers. Although Planning and Service Area's (PSA's) have considerable flexibility in pursuing various methods of providing health insurance information, counseling, and assistance services, each must, at a minimum, adequately perform all of the following:

1. Provide counseling and assistance to eligible individuals in need of health insurance information including:
 - a. Information that may assist individuals in obtaining benefits and filing claims under Titles XVIII and XIX of the Social Security Act;
 - b. Policy comparison information for Medicare supplemental policies (as described in section 1882(g)(1) of the Social Security Act, as amended) and accurate information that may assist individuals in filing claims under such Medicare supplemental policies;

- c. Information to consumers on how to read the Medicare Summary Notice and distinguish between error, fraud and abuse;
 - d. Reporting Medicare or other health insurance fraud, error or abuse by making a referral on behalf of the individual on the Harkin Grantee Fraud and Abuse Referral forms with the appropriate Benefits Integrity Unit;
 - e. Information regarding long-term care insurance;
 - f. Information about the Medicare-endorsed drug Discount card program, the Medicare Drug Benefit;
 - g. Information regarding other types of health insurance benefits including prescription low-cost and no-cost prescription drug assistance programs;
2. Conduct outreach programs to provide health insurance information, counseling, and assistance to eligible individuals;
 3. Make appropriate referrals to State or local departments or agencies for assistance with problems related to health insurance coverage using the referral processes established by the DAS GeorgiaCares program;
 4. Provide for a full-time coordinator and sufficient number of volunteers to deliver the services of the GeorgiaCares program;
 5. Assure that staff members and volunteers have no conflict of interest in providing information, counseling and assistance services (see Section 303 Conflict of Interest);

§200	Local Program Staffing
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§201 General

GeorgiaCares is a community-based program of trained Volunteer Counselors and Community Educators working under the direction of the Certified Coordinator. At this regional level, a full-time Certified Coordinator recruits, trains, places and supervises a corps of volunteers in a variety of communities and settings to provide public education, outreach, and assistance to older persons and their families with an emphasis on reaching vulnerable, isolated and non-English-speaking beneficiaries. Each volunteer will have responsibilities that are pursuant to his/her training. Efforts

will be made to have regularly scheduled GeorgiaCares volunteer staffing at alternative sites throughout the PSA.

§202 Minimum Qualifications for a GeorgiaCares Certified Coordinator

The recommended qualifications for a GeorgiaCares Certified Coordinator are:

1. an undergraduate degree from a four-year college or university; and
2. the equivalent of three (3) years of full-time work experience with at least two years in aging, Medicare, Medicaid, Insurance, Volunteer Coordination or related fields. At least one year in a consultative or supervisory capacity is desirable.

Comparable experience and/or graduate education maybe substituted at the discretion of the Area Agency on Aging.

§202.1 Certified Coordinator

Each Area Agency on Aging will assure that a full-time Certified Coordinator is employed locally to administer the GeorgiaCares program. The DAS GeorgiaCares program is responsible for certifying and training the Coordinator. At the time the Coordinator is certified, the DAS GeorgiaCares program will issue an identification card. Each Coordinator must be re-certified every two (2) years by the DAS GeorgiaCares program as continuing to meet the Division's standards for a GeorgiaCares Certified Coordinator.

§203 Certified Coordinator Responsibilities

The Certified Coordinator directly administers all local GeorgiaCares program components including the State Health Insurance Assistance Program (SHIP), the Low-Cost Prescription Assistance initiative and the Senior Medicare Patrol program.

Primary job responsibilities of the Coordinator position include, but are not limited to:

1. Recruit volunteers and public/private partners through means such as, but not limited to: press releases, public forums, newsletter articles and other media contact.
2. Provide training programs for volunteers using the DAS GeorgiaCares-approved curriculum.

3. Provide quarterly in-service training on timely and accurate information for volunteer counselors and community educators (at least 12 hours annually) and provide technical assistance to volunteers as needed.
4. Assure that there is volunteer coverage in each county in the PSA. The volunteer is not required to reside in the county assigned.
5. Establish and meet a maximum standard of promptness of two (2) business days for initial callback on all telephone inquiries. If the caller cannot be reached on the first callback, a second attempt must be made within 4 business days of the time of the initial incoming call. If there is no response to the second callback, the standard of promptness will be deemed as met.
6. Hold quarterly SMP Advisory Committee meetings and submit SMP Advisory Committee meeting minutes with SMP semi-annual reports.
7. Utilize Internet based counseling and enrollment tools.
8. Recruit and train one bi-lingual volunteer in the language, other than English, most commonly spoken in the area.
9. Organize at a minimum one (1) outreach/education event to a Faith Based Organization each month and one (1) outreach/education event to either a diverse population group or rural population group each month;
10. Stay abreast of current Medicare and other health insurance related information.
11. Assist in the development and revision of publications and training materials to be distributed.
12. Coordinate special events as appropriate (e.g., Services2Seniors, Drug Card Enrollment, etc).
13. Attend all quarterly Coordinators meetings; each Coordinator must attend statewide Coordinator meetings/training currently held quarterly. Training and information provided during these meeting will provide Coordinators with tools and information needed to train their local volunteers on timely topics

of interest and need. Additional training on unforeseen changes and developments will be provided when necessary. Responding to counselors' and volunteers' needs is a top priority for paid staff.

14. Assure the provision of counseling and assistance to Medicare beneficiaries and any other consumer on the toll-free counseling line from 9:00 am through 3:00 pm, Monday through Friday, at a minimum.
15. In consultation with and under the direction of the AAA, assure that accurate information from GeorgiaCares Volunteer Activity Reports is entered into the computerized Aging Information Management System (AIMS);
16. Maintain an adequate supply of up-to-date literature and promotional materials available through the DAS GeorgiaCares program, the CMS publications website, the AoA and the pharmaceutical assistance programs. These materials will also be used for continuing education training for Certified Coordinators and volunteers.
17. Participate in mandatory DAS-sponsored GeorgiaCares conferences.
18. Form and maintain partnerships with various agencies and organizations on the federal, state and local level.
19. Assure that the program satisfactorily accomplishes the goals and objectives reflected in the Area Plan on Aging;
20. Participate actively on the elder rights team in the PSA.

§203.1 Refusal to Certify/Re-Certify or Implementing Action to De-Certify an Individual as a GeorgiaCares Certified Coordinator

The DAS GeorgiaCares program may refuse to certify/re-certify or may take action to de-certify a GeorgiaCares Certified Coordinator for reasons including but not limited to the following:

1. Failure of the individual to meet and/or maintain minimum qualifications for certification;
2. Existence of any conflict of interest or appearance of a conflict of interest;

3. Deliberate failure of the individual to disclose any conflict of interest or appearance of a conflict of interest;
4. Violation of confidentiality or HIPAA requirements;
5. Failure to provide adequate and appropriate services to Medicare beneficiaries;
6. Falsifying records;
7. Failure to follow the standards, policies and procedures of the DAS GeorgiaCares program;
8. A change in employment duties which is inconsistent with GeorgiaCares duties;
9. Separation from the GeorgiaCares program. Examples include but are not limited to: Termination of employment with the provider agency, an extended absence from the program preventing fulfillment of job responsibilities, termination or non-renewal of a provider agency's contract for any reason, etc.

§203.2 DAS GeorgiaCares Program Responsibilities

The DAS GeorgiaCares program provides overall statewide leadership for GeorgiaCares and is responsible for management, planning and direction of the statewide GeorgiaCares program, including but not limited to:

1. Evaluating statewide GeorgiaCares performance through monitoring and site visits;
2. Developing, implementing and maintaining policies, procedures and standards for administration of the GeorgiaCares Program;
3. Certifying GeorgiaCares Coordinators;
4. Maintaining and promoting awareness of current issues and trends with Medicare, Prescription Assistance, Medicare fraud, waste and abuse;
5. Inter-agency coordination with protection and advocacy systems, community partners, elder rights programs, wellness programs and other appropriate agencies;
6. Developing and maintaining a liaison or key contact person in each of the following agencies and organizations for referral and assistance to Medicare beneficiaries with problems; Medicare fiscal intermediaries, Durable Medical Equipment Regional Carrier (DMERC), Peer Review Organizations (PRO), Quality

Improvement Organization (QIO), Medicare carriers, State Insurance Departments and Social Security (SSA).

7. Maintaining, in collaboration with the Division of Aging Services (DAS), a statewide uniform reporting system to collect and analyze data and submit such data to appropriate entities as required by CMS, AoA, the Georgia General Assembly, the Department and/or DAS;
8. Preparing annually the GeorgiaCares components of *Just the Facts*;
9. Preparing and distributing a monthly volunteer newsletter;
10. Providing information and referral to the general public, AAA's, community organizations and other agencies;
11. Providing technical assistance, specialized training and resources to the GeorgiaCares Coordinators, provider agencies, AAAs and DAS related to the operation of the GeorgiaCares program;
12. Conducting certification training and ongoing training in accordance with the Certification Requirements for GeorgiaCares Coordinators;
13. Annual development, revision and/or timely review, comment and approval of the GeorgiaCares component of the annual Area Plan on Aging;
14. Providing information and resources to assist the AAA in promoting the GeorgiaCares Program in its PSA;
15. Assisting the AAAs with arrangements for temporary provision of GeorgiaCares services during transition to a new Coordinator or provider agency;
16. Assisting the AAAs or provider agencies in screening applicants for certification requirements;
17. Participating in interviews of applicants as a member of an interviewing team or assisting in job performance review at the provider agency's request;
18. Developing and maintaining a Web site including basic SHIP information with at least one link to Medicare.gov and other CMS Web sites and related Internet sites;
19. Participating in regional teleconferences, SHIP and SMP national conferences and advising our key liaison of local coalition building activities.

§203.3 Area Agency on Aging Responsibilities

The Area Agency on Aging is responsible for assuring the provision of GeorgiaCares services in its planning and service area, either through subcontract with a provider agency or by serving as the provider agency itself.

When subcontracting with a provider agency, the AAA shall:

1. Properly administer the subcontract for the GeorgiaCares program in its planning and service area;
2. Monitor the local GeorgiaCares program's progress toward meeting its goals and objectives as reflected in the Area Plan;
3. Assist in the development of resources for the operation of the local GeorgiaCares Program, including financial and human resources;
4. Expend an adequate level of funding to support a full-time GeorgiaCares Coordinator;
5. Assure that the Certified Coordinator:
 - a. Has no duties in the agency outside the scope of the GeorgiaCares Program
 - b. Is employed full-time
 - c. Maintains certification
6. Provide opportunities for the local GeorgiaCares program and other aging and social service organizations to collaborate to promote the health, safety and welfare of people with Medicare;
7. Assure that each GeorgiaCares counseling site has at a minimum basic dial-up internet access (a high-speed connection is preferred);
8. Promote awareness of GeorgiaCares services to consumers and the general public within the service area;
9. Participate in the GeorgiaCares SMP Advisory Council;
10. Assure the GeorgiaCares data is provided to the DAS GeorgiaCares program in the format required by DAS in a timely manner;

11. Provide a transition plan to minimize disruption in GeorgiaCares services when the Coordinator position is vacant or when the contract for the program is terminated or not renewed;
12. Request a waiver from DAS if, due to demonstrable and unusual circumstances, it anticipates it will be unable to comply with any of the responsibilities.
13. Evaluate the program annually and conduct a volunteer satisfaction survey.

§203.4 Provider Agency Requirements

A provider agency (either the Area Agency or its subcontractor) shall:

1. Operate the GeorgiaCares Program in the designated planning and service area in accordance with the provisions of its contract with the AAA or DAS, whichever is applicable;
2. Require that the GeorgiaCares Coordinator submit an Annual Plan to the AAA, if applicable, and/or to the DAS GeorgiaCares program;
3. Generate and maintain all required records, reports and documentation of program and volunteer activities including but not limited to:
 1. Volunteer registrations, agreements, signed code of ethics, Documentation of training completed, signed time sheets reflecting actual volunteer hours;
 2. Required program narratives;
 3. Copies of all training agendas, curriculum and sign-in sheets.
4. Assure that the Coordinator:
 - a. Is assigned no duties in the agency other than those within the scope of the GeorgiaCares Program Coordinator;
 - b. Is employed full-time;
 - c. Maintains certification;
 - d. Provides GeorgiaCares program and fiscal data to the DAS GeorgiaCares program in the format and timeframe required by the DAS; or to the Area Agency on Aging, whichever is applicable;
 - e. Attends certification training and all statewide GeorgiaCares training required by the DAS GeorgiaCares program

§204 Volunteers

§204.1 Recruitment

Local programs will initiate an ongoing process of volunteer recruitment. Recruitment can be accomplished by publicizing in newsletters, local media publications, open house events, volunteer fairs, local college groups, senior centers, or other locations as the Certified Coordinator deems appropriate. If potential volunteers are referred to the local program by the DAS GeorgiaCares program or by a GeorgiaCares partner, the Coordinator will contact the prospective volunteer within two (2) working days with the goal of involving the individual in the program as quickly as possible.

§204.2 Number of Recruits

Every local program will maintain a corps of volunteers sufficient to meet the needs of the GeorgiaCares program activities in the PSA. The Coordinator will assure that there is volunteer coverage in every county of the PSA. It is desired that each region have 10 active volunteers at all times who have committed to a minimum of 4 hours per month of service for a six-month period.

§205 Volunteer Activities and Documentation

The local programs will recruit volunteers to perform a variety of activities in accordance with the needs of that program to ensure information, one-on-one counseling and assistance services and community education services are provided throughout the PSA. In addition, GeorgiaCares volunteer activities may include administrative tasks such as data entry, volunteer scheduling or other support duties.

Materials needed include the CMS Train the Trainer Manual, the Medicare Rights Center Let's Learn Medicare (LLM) Manual, the GeorgiaCares Manual, Computer access, Volunteer applications and descriptions, Referral forms, CMS/other publications, Standards, Handouts (including transparencies and CD's of PowerPoint presentations), and other materials as the DAS may require.

Provider agencies will establish and maintain sufficient documentation on the activities of each GeorgiaCares volunteer, to include at a minimum:

1. A written signed job description
2. A signed GeorgiaCares Volunteer Agreement
3. Documentation of training completed
4. Signed time sheets reflecting actual hours worked
5. Signed GeorgiaCares Code of Ethics

§206 Types of Volunteer Opportunities

The volunteer and the Coordinator will agree upon the scope of each individual volunteer's activities. A written volunteer job description will be provided to the volunteer, signed and maintained in the individual's file.

§206.1 Lead Volunteer

A Lead Volunteer Counselor is a person who has opted to take a leadership role to assist the Certified Coordinator in performing GeorgiaCares duties. This individual has received extensive training and understands how to provide health insurance assistance and information for persons with Medicare.

The Coordinator will provide training, which will include comprehensive initial and regular in-service training from the state approved curriculum on all program activities, including but not limited to the following:

1. State Health Insurance Program (SHIP)
2. Senior Medicare Patrol (SMP)
3. Prescription Assistance
4. Volunteer recruitment
5. Counseling skills
6. Presentation skills
7. Health Insurance Portability and Accountability Act of 1996 (HIPAA). (See section 211 Privacy and Confidentiality)
8. Georgia's aging network

Other Lead Volunteer training activities will include attending quarterly meetings and, when possible, Coordinator meetings, community presentations, training and coordinating volunteers, filling in for Coordinator when necessary, returning calls from hotline, organizing outreach events to include skits, brown bags events, health fairs, and face-to-face and phone counseling.

§206.2 Volunteer Counselor/Community Educator

Volunteer Counselors/Community Educators are trained and kept abreast of current Medicare and other health insurance related information through quarterly in-services trainings. They understand how to conduct outreach efforts such as speaking to community groups and attending health fairs and/or providing telephone/face-to-face counseling to Medicare beneficiaries and other consumers.

Training and resources will include all those shown for the Lead Volunteer in section 206.1.

Activities may include phone and face to face counseling, presentations, returning calls from hotline, providing backup for hotline volunteer, participating in outreach events, brown bag, skits, and health fairs

Materials needed include LLM Manual; CMS Train the Trainer Manual, GeorgiaCares Manual, forms, standards, computer access, and CMS/other publications.

§206.3 Volunteer Reader

Volunteer Readers are persons who are willing to participate in Senior Medicare Patrol skits, vignettes and plays.

§206.4 Prescription Assistance Volunteer

Volunteers who wish to provide only Prescription Assistance counseling will be furnished training consisting of the four (4) hour state-approved curriculum that includes GeorgiaCares Overview, Medicare-Endorsed Prescription Drug Discount Card, Various Low-Cost Prescription Assistance Programs (e.g., Pfizer Share Card, Lilly Answers card, Together Rx Card, etc.), and Patient Assistance/No-cost Programs (e.g., as found in ESP, www.medicare.gov, www.rxassist.org, www.needymeds.com, www.benefitscheckuprx.org, etc.) and Medicare Savings Program eligibility information. Training will include reporting requirements of the three (3) program components (SHIP, SMP and Prescription Assistance).

§206.5 Senior Medicare Patrol Volunteer

Volunteers who wish to participate only in Senior Medicare Patrol will receive training consisting of the state-approved curriculum that includes GeorgiaCares Overview, basic Medicare, basic Medicaid, and detailed Medicare fraud information including past and current trends. Training will include reporting requirements.

§206.6 Volunteer Administrative Support

The Administrative Support Volunteer serves as an assistant to the Local Certified Coordinator and provides general support such as:

1. Maintaining the AIMS database, which stores information about Volunteer Counselors, counseling, outreach, and calls received on the toll-free consumer Line;
2. Answering and directing calls from the local telephone line;
3. Mailing materials for Volunteer Counselors, Certified Coordinators, and consumers;

4. Performing clerical support duties; and
5. Assisting clients/beneficiaries who visit the local office.

Training will include an overview of the GeorgiaCares program; telephone etiquette, computer skills including Internet access/AIMS; HIPAA and general office procedures. Bi-lingual skills are a plus.

Materials needed are the AIMS Manual, copies of forms, CMS/other publication, Standards and computer access and/or other office machines as necessary.

§206.7 Student Intern/Volunteer

Students from various colleges and universities may receive service learning hours or internship credits with the GeorgiaCares program. This program enables students to become personally involved with the aging network. The experience reinforces communication skills and gets students involved in the community. The amount of volunteer training each student receives will be determined on a one-on-one basis by the local GeorgiaCares Certified Coordinator, based on the functions the volunteer will be performing.

§207 Volunteer Commitment

Due to the extensive training provided to each GeorgiaCares volunteer, a commitment of six (6) months of active service is expected. Volunteers will sign the GeorgiaCares Volunteer Agreement to assure compliance with program standards and that there is no conflict of interest. An original of this completed form must be maintained at the local GeorgiaCares office, with one copy retained by the volunteer.

§208 Active Volunteer

To maintain an active status with the program, a volunteer must provide a minimum of four (4) hours of service per month for a six-month period of time to GeorgiaCares. Waivers may be granted at the local Coordinator's discretion for those volunteers who are unable to fulfill this obligation due to travel, illness, etc.

§209 Advocacy

Identifying advocacy issues is an important program activity for both GeorgiaCares Coordinators and volunteers. Issues identified should be communicated to the DAS GeorgiaCares program.

Volunteers are free to express their individual opinions to their elected officials, but are prohibited from speaking for or on behalf of the GeorgiaCares program in any public venue without prior approval

from their program Coordinator, the AAA Director or the Director of the DAS GeorgiaCares program.

§210 Volunteer Dismissal

GeorgiaCares maintains the right to dismiss any member of the Volunteer staff who does not follow established policies and procedures. Justifiable causes for dismissal include, but are not limited to:

1. Providing counseling on a topic about which the volunteer did not successfully complete GeorgiaCares training;
2. Expressing opinions to clients or other inquirers, either positive or negative, on companies offering insurance products, pharmaceuticals and/or any health related service;
3. Creating a discriminatory environment based on gender, race, nationality, age, disability, religion, or sexual orientation;
4. Representing GeorgiaCares in an unfavorable or unprofessional manner;
5. Profiting, in any way, from providing GeorgiaCares services and/or engaging in activities that could be considered a conflict of interest;
6. Acting inappropriately based on substantiated reports of misconduct by clients/beneficiaries or other persons involved in GeorgiaCares activities;
7. Failing to attend quarterly in-service meetings and other mandatory sessions without reasonable cause (e.g., travel, illness, family crisis);
8. Refusing to help a Coordinator with counseling or outreach more than five (5) times in a year without reasonable cause, unless the volunteer has otherwise consistently met the monthly commitment of four hours of service;
9. Knowingly providing consistently inaccurate or outdated information to clients/beneficiaries;
10. Failing to document activities and/or file necessary reports by the established deadline;
11. Failing to adhere to GeorgiaCares, DAS and/or Department policies and standards and/or state and federal law and regulations;
12. Providing legal or financial advice to GeorgiaCares clients.

The AAA and/or contractor will develop policies on notifying volunteers on the possible grounds for corrective action or termination from the program. If the decision is to terminate the volunteer, a copy of this action must be sent to the DAS GeorgiaCares program.

§211 Liability

GeorgiaCares volunteers are covered by the state law, including O.C.G.A. §49-6-63(g) and the DOAS Employee Liability Agreement for actions within the scope of GeorgiaCares volunteer activities.

§211.1 Vehicle Insurance Liability

GeorgiaCares volunteers shall not transport clients in any vehicle regardless of its ownership.

§212 Privacy & Confidentiality

GeorgiaCares staff and volunteers shall maintain the privacy and confidentiality of information disclosed to them in the course of carrying out GeorgiaCares activities pursuant to state and federal law, regulations and Department and Division policies. They shall protect the privacy and confidentiality of information and medical records disclosed to them in the course of their duties, pursuant to state and federal law and regulations, and DHR and DAS policies pertaining to privacy and confidentiality, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Volunteers may share information on counseling activities only with DAS GeorgiaCares program staff and designated staff at the local program. Volunteers shall inform clients regarding confidentiality and privacy practices. Signed Consent for Release of Information forms are required to disclose information to outside sources and clients must authorize GeorgiaCares to discuss their information with others, unless otherwise required by law. Documents used to assist the client are to be returned to him or her.

§300 Roles and Responsibilities
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§301 General

The Division of Aging Services GeorgiaCares program will provide overall program development, management, guidance, and

promotion. DAS GeorgiaCares program staff will provide local GeorgiaCares programs with program direction, training materials and assistance, technical assistance, and access to the toll-free telephone line.

§302 Quality Assurance

The DAS GeorgiaCares program staff will review and analyze report data, provide technical assistance regarding complex case situations and make scheduled site visits to monitor local programs to assure high quality services are provided to program clients. Monitoring may include reviewing the number of active volunteers, number of volunteer hours, outreach activities, and financial accounting records.

The DAS GeorgiaCares program staff will evaluate statewide program outcomes and effectiveness at least annually and implement improvements indicated based on analysis of programmatic data and feedback from the Area Agencies on Aging, Coordinators, GeorgiaCares volunteers and consumers.

AAA's and Provider Agencies shall evaluate the effectiveness of the local GeorgiaCares program at least annually and make adjustments in activities and/or budget items to meet the needs of the program. They will also conduct a volunteer satisfaction survey annually.

Entering data into the Aging Information Management System from the client counseling form, outreach and training calendars is critical. Reporting and tracking this information accurately and timely is required by the state and federal fund sources.

§303 Conflict of Interest

In accordance with state and federal law, regs and DHR/DAS policies all GeorgiaCares DAS and local staff, including volunteers, will refrain from engaging in any activities that could cause a conflict of interest or the appearance of a conflict of interest. Volunteers and staff may not sell or endorse, directly or indirectly, any related products or services including those related to insurance. Volunteers and staff may not engage in activities to promote any particular products and services.

§304 Advisory Committee

The DAS GeorgiaCares Director will be responsible for selecting members of a state advisory committee, scheduling committee meetings, setting the agenda and facilitating each meeting. The advisory committee will provide a forum for identifying systemic issues related to health insurance, make recommendations on related consumer issues, will address trends in healthcare fraud and advocate on behalf of people with Medicare. The composition of the Committee will be AAA staff, consumers, representatives of PhRMA, pharmacies, hospitals, state universities, DCH, Rural Health, volunteer organizations and other interested community partners.

§305 Elder Rights Teams

The DAS GeorgiaCares program staff shall promote a statewide elder rights system and coordinate with the State Long-term Care Ombudsman (LTCO), the Elderly Legal Assistance Program (ELAP), the DAS Legal Services Developer, the Elder Abuse Prevention Program, the Senior Adult Victims' Advocate (SAVA), Adult Protective Services (APS) the Wellness program, and other pertinent entities.

§306 Resource Development

The DAS GeorgiaCares Director will develop additional financial and volunteer resources for the program, either directly or through delegation to state level staff or local Certified Coordinators. Financial donations will be directed to the Thanks Mom & Dad Fund earmarking funds specifically for GeorgiaCares. The DAS GeorgiaCares Director will authorize the use of these donated funds as needed and available. When donors restrict their Thanks Mom and Dad Fund contributions to specific activities or expenditures, DAS and local GeorgiaCares program staff will expend such restricted funds accordingly. In addition, the DAS GeorgiaCares Director will seek volunteer support from statewide organizations to augment local recruitment efforts.

§306.1 Partnership Development

The DAS GeorgiaCares program will develop partnerships with organizations that will enhance the GeorgiaCares program. Program updates and activities will be disseminated to local Coordinators and Area Agencies on Aging. Each local program will maintain regular contact with the DAS GeorgiaCares program, support its partnership efforts and develop cooperative relationships within their region with GeorgiaCares' partner agencies. The Coordinator will report any issues and concerns that arise in working with partners immediately and directly to the DAS GeorgiaCares program director. The Coordinator will advise the DAS GeorgiaCares program director of all significant local partnership activities or local coalition-building activities.

§307 Coordination

The DAS GeorgiaCares program shall provide for the coordination of information between state, local, and other agencies and local programs on health insurance issues. This includes timely dissemination of information on Medicare, Medicaid, Medicare Supplemental, Long Term Care Insurance and other health related issues.

§308 Records Retention

Local GeorgiaCares programs shall maintain all original client records and volunteer reports at their site. Records will be maintained for the length of time required by the fund sources, generally for six (6) years.

Certified Coordinators will maintain copies of training agendas, curriculum and sign-in sheets. Individual volunteer files will include at a minimum an original Orientation Packet, training records and waivers.

§400 Training & Technical Assistance

§401 General

The DAS GeorgiaCares program will provide initial certification training to Coordinators. Included in the training will be materials that Coordinators will use for volunteer training to ensure that up-to-date, accurate information concerning health insurance issues is provided to Medicare beneficiaries, their caregivers, and the community. Additionally, the DAS GeorgiaCares program will assure that local Coordinators receive information and training to assist them in the entire volunteer management process.

The DAS GeorgiaCares program will provide ongoing in-service training in the form of quarterly meetings and other mandatory sessions as required.

§402 New Certified Coordinator Training

The DAS GeorgiaCares program will provide training to all new coordinators beginning within their first thirty days of employment. Methods may include classroom, Internet, satellite, self-study, conferencing, videotape, teleconferencing, videoconferencing and/or other appropriate methods. The certification examination will be administered to new coordinators following six months of employment.

§402.1 Certification Examinations

The DAS GeorgiaCares program will provide to the coordinator a written “take home” examination that is designed to assess the trainee’s ability to apply Medicare information in assisting consumers with health insurance questions. The coordinator must complete and return the written examination within 2 months of its receipt. The written examination will be evaluated on a pass/fail basis by the DAS GeorgiaCares program staff within 30 calendar days. If the coordinator does not receive a “pass” rating, the DAS GeorgiaCares program will provide technical assistance, may identify additional work to be done on the exam or other activities or training needed to

obtain a “pass” rating. Coordinators may submit the written examination no more than three times. If the coordinator fails to receive a “pass” rating after three attempts, it will be up to the hiring agency to decide the individual’s job responsibilities and to appoint a new coordinator. When the written exam is given a “pass” rating, the DAS GeorgiaCares program will administer an oral examination, which will include a short presentation on a program component. The purpose of this examination is to evaluate the following:

1. Knowledge of basic Medicare and Medicaid programs;
2. Basic Knowledge of Volunteerism;
3. Demonstration of the skills necessary to provide adequate services to Medicare beneficiaries and their families;
4. Knowledge of how to identify and report Medicare Fraud, Error and Abuse;
5. Knowledge of Long Term Care Insurance, Managed Care, Medicare Supplemental Insurance and Medicare Advantage;
6. Knowledge of Prescription Assistance programs, the Medicare Drug Discount Card Program and the Medicare Drug Benefit.
7. Demonstration of knowledge of computer skills including Microsoft applications such as Word, Excel and Powerpoint.
8. Knowledge of required reports and the collection of program Data.

§402.2 Training Curriculum For Volunteers and Coordinators

Training will consist of the state approved curriculum which includes but is not limited to:

1. Medicare eligibility, enrollment, fraud and abuse, claims, appeals and Medicare secondary payer.
2. Medicare Advantage disenrollment, plan feature comparisons, non-renewal, grievances and appeals.
3. Medicare supplemental Insurance, standard plans, pre-existing conditions, premiums, claims filing and guarantee issue rights.
4. Long Term Care Insurance, appropriateness, underwriting, tax qualified/non tax qualified and underwriting.
5. Medicaid Qualified Medicare Beneficiary (QMB), Supplemental Security Income (SSI), spend down, eligibility and program benefits.

§402.3 Materials

Each local program will have five (5) handbooks for counseling, training and reference, including: the Medicare Rights Center *Let's Learn Medicare* Manual, CMS's *Train the Trainer* Manual, the GeorgiaCares Manual, the Senior Medicare Patrol Manual and the Readers Theater Manual as provided by the DAS GeorgiaCares program. Each local program is responsible for keeping an adequate supply of current CMS publications for referencing. Each Coordinator will have access to a computer with Internet capability.

§402.4 Training

All volunteers shall complete applicable training modules and be proficient in the information prior to conducting counseling sessions or community education sessions. Failure to meet in-service training requirements may result in dismissal as a GeorgiaCares volunteer.

§402.5 Mentoring

Each new volunteer will observe another volunteer or the Coordinator prior to handling cases alone. It is the responsibility of the GeorgiaCares Coordinator to determine when the new volunteer is ready to provide counseling without direct assistance.

§402.6 Statewide Training

Active Volunteers will attend the Statewide Volunteer Recognition and Training provided by the DAS GeorgiaCares program. All Volunteers will complete HIPAA training.

§500 Access to Services

§501 General

GeorgiaCares will establish and maintain counseling sites in the community that are locally accessible to all beneficiaries in the PSA including low-income, rural and hard-to-reach populations. These sites include but are not limited to: public libraries, Community Health Centers, Public Health Offices, Cooperative Extension Offices, retail pharmacies, grocery stores, malls, public housing facilities, senior centers, churches and schools.

§502 Telephone Access

Each local program will provide a local telephone number where client calls will be received. The greeting and message will clearly indicate that the phone number is for the GeorgiaCares program.

To assure that the statewide system remains operational, all requests for changes with the toll free hotline must go through the Director of the DAS GeorgiaCares program. This includes changing the local telephone routing number or location of the telephone.

§502.1 Business Hours Coverage

The GeorgiaCares telephones at both the DAS and local levels will be answered live, during normal business hours (normally 9:00am-3:00pm, Monday-Friday), as is practical, and a call answering system will be provided on each line that has a capacity of collecting at least five (5) messages to ensure calls are intercepted while assisting other clients.

§502.2 After Hours Coverage

Each local program will provide an answering machine or system that will collect at least five (5) messages received after normal business hours. The recorded greeting will state that messages are for the GeorgiaCares program.

§503 Personal Appointments

Clients may request personal appointments for counseling sessions. Volunteers, with the guidance of Coordinators, shall make reasonable efforts to accommodate the requests and meet with clients in public locations which are safe, accessible, and convenient and which afford protection of privacy.

§504 Outreach to Hard to Reach Populations

Each local program will assure outreach to the under-served Medicare population. The hard-to-reach Medicare population includes, but is not limited to, those persons with Medicare who encounter barriers to accessing health information and services due to language, literacy, location, disabilities, low-income (including residing in rural areas) and/or culture.

§504.1 Electronic Access

The DAS GeorgiaCares program will maintain information on the DAS website (<http://aging.dhr.georgia.gov/portal/site>) to make basic information available to people with Medicare, family members, caregivers and advocates via the Internet. The website information will be accessible to the population with disabilities as resources and technology allow. Local offices with websites shall have reciprocal links with the state site.

§601 General

Community education sessions provide an opportunity to provide free, unbiased and factual health insurance information to people with Medicare and others in a group setting. These may be arranged by the local GeorgiaCares program or conducted in response to a request from a local organization. Outreach events are efforts to inform individuals/the public about the available Medicare information channels, as well as general, factual information on health benefits, consumer rights and protections and about GeorgiaCares and/or specific health insurance related issues including low-cost prescription assistance programs and preventing Medicare fraud, error and abuse. Each local GeorgiaCares program 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. Each local GeorgiaCares program will use resources from national, state and local partners to provide outreach to under served populations.

§ 602 Education Events

Local GeorgiaCares programs 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. Local GeorgiaCares programs will conduct community education and outreach events throughout the year to targeted populations.

§602.1 Materials

Information and outreach materials disseminated at outreach and community education sessions are at the discretion of the Coordinator (i.e., material should be relevant to the subject matter of the event). It is recommended that no more than one promotional item should be distributed at each event due to the availability of materials. However, this does not include brochures or informational handouts.

§602.2 Calendar

Each local program will submit to the DAS GeorgiaCares program monthly a calendar of outreach and community education events planned for the next month. This calendar will be submitted by the 15th working day of the month prior to the event. If the Area Agency on Aging subcontracts the operation of the local GeorgiaCares program, the service provider agency will submit the event calendar to the Area Agency on Aging on the date the AAA requires. The AAA will submit the report to the state office by the due date.

§603 Locations

Local events may be conducted in a variety of settings including senior centers, local health fairs, local service organizations, religious organizations, business locations of the GeorgiaCares partners (may include pharmacies, grocery stores with pharmacies, hospitals, clinics, or other locations) and local libraries as well as any other locations deemed appropriate.

§700 Referrals to the Elderly Legal Assistance Program (ELAP)
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§701 General

GeorgiaCares Coordinators and volunteers may encounter beneficiaries who need legal information, advice and/or representation. The Elderly Legal Assistance Program (ELAP) provides legal representation, information and education in civil legal matters to Georgians aged 60 or older. ELAP services are available statewide. This section addresses the Case Referral Policy that GeorgiaCares staff should use to make referrals to ELAP.

§702 Cases Kept by GeorgiaCares

GeorgiaCares Coordinators and volunteers are to be prepared to assist beneficiaries in appealing adverse decisions and/or complaints when cases are at the following stages:

1. Initial Decisions
2. Reconsiderations
3. State Hearing Officer

Cases being appealed to the State Hearing Officer may sometimes need to be referred to the ELAP depending upon the facts of the situation. Such cases must involved amounts substantially more than \$100.00.

§703 Automatic Referrals to ELAP

Cases involving appeals to an Administrative Law Judge (ALJ) for hearing should always be referred to the appropriate ELAP for evaluation of their merit to proceed with representation.

Cases involving Court Deadlines should always be referred to the appropriate ELAP.

§704 ELAP Referral Process

Referrals from GeorgiaCares to the ELAP provider should flow substantially as follows:

1. Both the ELAP and GeorgiaCares staff should agree upon a format for a referral form, or the GeorgiaCares staff person should complete the form provided by the State Legal Services Developer. A sample referral form is included in the GeorgiaCares manual. Also included is a sample form that a client may sign asking a GeorgiaCares staff member to contact the Elderly Legal Assistance Program on his or her behalf.
2. Cases deemed appropriate for referral should not be held for continued work by the GeorgiaCares staff without first making the referral.
3. Once the referral is made, if the GeorgiaCares staff believes that the problem can be resolved before a hearing, the ELAP should be informed that the GeorgiaCares staff will continue to try to resolve the problem. If the GeorgiaCares staff continues to work on the problem, the ELAP should be apprised and notified of the progress and the results.
4. At a minimum, the referral form should include the following information:
 - a. The deadline to appeal if there is one;
 - b. The client's name, age, address and telephone number;
 - c. The condition or capacity of the client (i.e., alert; communicative; noncommunicative; forgetful; adjudicated incompetent; mentally incapacitated);
 - d. The reason for the proposed action/referral;
 - e. The name of the person who is requesting assistance (i.e., the client; the client's legal representative; a family member or other interested party);
 - f. An indication of what steps have already been taken in this matter on behalf of this client;
 - g. A copy of the notices from CMS and/or the SSA (Social Security Administration)
5. The ELAP will as soon as possible, inform the referring GeorgiaCares staff whether or not it has been accepted to

provide representation and if not, the reason that the case has been rejected.

6. If either or both entities determine the need for additional information on the referral form, they will communicate in advance and agree to whatever additional information will be provided.
7. Once the referral has been received by the ELAP, the appropriate staff person should follow the ELAP provider's internal procedure for addressing referrals from the GeorgiaCares program.
8. A legal worker should review the referral for deadlines and for a determination whether or not immediate action needs to be taken.
9. If the legal worker needs additional information, the legal worker will contact the GeorgiaCares staff.
9. It is imperative that there be close and ongoing communication between the ELAP and the GeorgiaCares staff whenever GeorgiaCares staff remains active in the case after referring to the ELAP.

§800 Reporting

§801 General

GeorgiaCares is responsible for administering a statewide reporting system mandated and standardized by CMS and the United States Administration on Aging (AoA). Data collection is required at all levels from staff to Volunteer Counselors and must be submitted in a timely manner. The Aging Information Management System (AIMS) is the official reporting system for the GeorgiaCares program. All required data must be captured in that system for official recognition of activity. Data collected is reported to funding sources including CMS, AoA and the State of Georgia.

Additional reporting requirements are spelled out in the contracts between the Division of Aging Services and the Area Agencies on Aging. These additional reports, required by GeorgiaCares' public and private fund sources, may include narrative descriptions of program activities, case examples, minutes of advisory committees, copies of Memoranda of Understanding, or other items and shall be submitted by the required due dates.

§802 Forms

Volunteers shall complete the forms for individual counseling services and community education.

§803 Due Dates

All due dates for data required by the DAS GeorgiaCares program are stipulated in the contract with the AAA.

§804 Local Management

Local programs are expected to generate and use management reports from AIMS to assist the Coordinators in GeorgiaCares program management.

§805 DAS Management

The DAS GeorgiaCares program will generate management reports to monitor local programs and meet federal and state reporting requirements.

§806 Training

Appropriate staff will be trained so they efficiently and accurately enter required client and outreach data into AIMS. Division of Aging Services, AAA or provider staff knowledgeable about the system may conduct this training.

§806.1 Curriculum

The DAS GeorgiaCares program will provide a training module to enable the Coordinators to train local volunteers on reporting requirements to assure that accurate and consistent data are reported in a timely manner.

§807 Significant Events

Each local program will submit a narrative report to the DAS GeorgiaCares program semi-annually. This report will contain case studies from the previous reporting period and any significant events that were conducted. This report will be filed by the Area Agencies on Aging by the due dates stipulated in the contracts.