

**GERIATRIC SERVICES
CAPACITY ASSESSMENT**

**DOMAIN 6 – BENEFITS AND
RESOURCES**

ASSESSING YOUR RESULTS

Domain 6: Benefits and Resources

6.1 Insurance Coverage

QUESTION	RESPONSE (ALWAYS, USUALLY, SOMETIMES, RARELY, NEVER)	NOTES
6.1.1 Does the IDT understand what is meant by dual eligible coverage and the demographics of this population, and in particular the older consumer within this distinct group?		
6.1.2 Is staff knowledgeable generally of the different types of Medicare eligibility and the various eligibility categories for Medicaid?		
6.1.3 Is staff knowledgeable of whom and where to refer Medicare-Medicaid enrollees for explanations and understanding of their Medicare coverage as well as their Medicaid policy?		
6.1.4 Is staff knowledgeable at a general level about how supplemental insurance options help provide coverage for older consumers?		

6.2 Benefits, Services, and Programs Available to Medicare-Medicaid Beneficiaries

QUESTION	RESPONSE (ALWAYS, USUALLY, SOMETIMES, RARELY, NEVER)	NOTES
6.2.1 Is staff generally knowledgeable about Medicaid benefits, regardless of what state administers the program?		
6.2.2 Is staff able to refer older consumers to resources to assist them in understanding Medicaid benefits specific to your state?		
6.2.3 Can providers help older consumers understand which services may not be covered under your state's Medicaid programs?		

6.3 Managed Care, Incentives and Value-Adds

QUESTION	RESPONSE (ALWAYS, USUALLY, SOMETIMES, RARELY, NEVER)	NOTES
6.3.1 Does the provider understand the role of managed care and how to work with the managed care organization to facilitate optimal care and services for the older consumer?		
6.3.2 Is the provider knowledgeable about 'value-adds' available to his/her older consumer from the consumer's managed care companies?		
6.3.3 Is the provider aware of incentives available from managed care companies for their members?		

6.4 Pharmaceutical Assistance

QUESTION	RESPONSE (ALWAYS, USUALLY, SOMETIMES, RARELY, NEVER)	NOTES
6.4.1 Do providers understand what pharmaceutical assistance is provided under Medicare and Medicaid?		
6.4.2 Do providers consider Medicare Part D drug coverage when developing treatment plans?		
6.4.3 Do providers optimize therapeutic strategies that do not rely on pharmaceuticals?		
6.4.4 Does the provider know of, and facilitate the knowledge by the older consumer of, additional financial assistance available from pharmaceutical companies?		