DYNAMICS OF WISCONSIN’S DISABILITY AND ELDER BENEFIT SPECIALIST SERVICES:

STRUCTURE, PROCESSES AND OUTCOMES

Prepared for:
Office for Resource Center Development
Bureau of Aging and Disability Resources
State of Wisconsin

Submitted by: Analytic Insight, LLC
May 2013
Acknowledgements

The researchers would like to thank all of the research participants that gave their time, experience and insights to make this report possible. The Benefit Specialists, ADRC and Aging Unit Directors and Program Attorneys participated in group interviews and offered their perceptions of the program and their own work with clarity and wisdom. Benefit Specialist customers participated in interviews and survey research, also offering their perspective on the programs and their experience. Lastly, State staff were instrumental in refining interview guides and survey instruments and providing guidance throughout the research process.

“Funding for this publication was made possible by Grant number HHS-2009-AoA-DR-1915 from the Administration on Aging (AoA). The views expressed in written materials or publications and by speakers do not necessarily reflect the official policies of the Department of Health and Human Services nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.”
# TABLE OF CONTENTS

- **INTRODUCTION** ........................................................................................................................................... 1
- **THE BENEFIT SPECIALIST ROLE** .................................................................................................................. 4
- **THE BENEFIT SPECIALIST-PROGRAM ATTORNEY RELATIONSHIP** ....................................................... 10
- **THE CUSTOMER EXPERIENCE** .................................................................................................................. 13
- **DYNAMICS OF CUSTOMER SATISFACTION WITHIN THE BENEFIT SPECIALIST PROGRAM** ........ 21
- **DEFINITIONS OF SUCCESSFUL OUTCOMES** .......................................................................................... 23
- **LESSONS LEARNED AND OPPORTUNITIES FOR PROGRAM IMPROVEMENTS** ............................. 24
INTRODUCTION

The purpose of this study is to explore the dynamics of the customer experience within Wisconsin’s Disability and Elder Benefit Specialist programs. Disability and Elder Benefit Specialist programs help answer questions and solve problems related to Social Security, Medicaid, Medicare, health insurance and other public and private benefits for older adults and people with disabilities.

Services are offered at county aging units and Aging & Disability Resource Centers (ADRCs) throughout the state. The Benefit Specialist services are provided by lay advocates who receive training, technical assistance and case oversight from contracted program attorneys. The Elder Benefit Specialist (EBS) program for people age 60 and older began as a pilot in 1977, expanding statewide in 1988. The program’s success triggered efforts to create a similar program for people with disabilities. The Disability Benefit Specialist (DBS) program for people ages 18 to 59 began in 2000 as an ADRC service; it will be available statewide by the end of 2013. In 2011, the programs served nearly 38,000 people statewide.

METHODOLOGY

The methodology of this research was designed around several principles and challenges. First, protecting the privacy of the respondents was paramount. Second, the exploratory nature of the process-oriented research elements called for a large number of in-depth qualitative interviews. Lastly, previous research regarding Wisconsin’s Aging and Disability Resource Centers (ADRCs) has shown very high levels of customer satisfaction, skewing data toward the positive and making detailed statistical analysis inconclusive. The customer satisfaction survey was designed with a battery of outcome questions in order to provide data from which a scale could be constructed with a more normal distribution.

This research was conducted in four phases:

- Interviews with directors and staff at fifteen agencies where Benefit Specialist services are offered.
- Interviews with Program Attorneys from all four of the agencies contracted by the EBS and DBS programs.
- Customer interviews with individuals from selected areas of the state.
- Customer satisfaction survey distributed statewide.

RESEARCH QUESTIONS

The primary objective of this study was to better understand the dynamics of customer service within the context of the Disability and Elder Benefit Specialist programs. In addition, more detailed questions were formulated. The specific objectives of this research were:

- Provide baseline measures of customers’ perceptions of the quality of Benefit Specialist services including initial contact, quality of interactions with the Benefit Specialist, materials and follow-up, comprehension of issues central to customers’ benefits;
- Compare and contrast Elder Benefit Specialists’ processes, customer dynamics and outcomes with those of Disability Benefit Specialists;
- Assess the impact of elements such as home visits, information and informational handouts, informal influence, follow-up and other factors that impact satisfaction and the likelihood of positive outcomes;
- Explore the dynamics underlying relationship-building and trust within the Benefit Specialist-customer relationship.
Assess the role of process in customer satisfaction, including the impacts of regional or single agency organizational structure, information sharing, skills and training systems, case handling, data entry and benefits processes.

Gather input from the staff, agency directors and program attorneys regarding customer satisfaction and customer service, the processes within their own agencies, and between themselves and the State.

STUDY DESIGN

This research was conducted in four phases: interviews with directors and staff, interviews with program attorneys, customer interviews and a customer satisfaction survey.

INTERVIEWS WITH DIRECTORS AND STAFF

Interviews were conducted with directors and both Disability and Elder Benefit Specialists at fifteen ADRCs and Aging Units. At the time of this study, there are a total of 40 operational ADRCs in Wisconsin (with one additional application approved), serving a total of 71 counties. There are 72 Aging Units and 11 Tribal Aging offices in the state.

Interviews averaged 65 minutes, with the shortest interview spanning 30 minutes and the longest interview spanning one hour, forty-five minutes. The interview guide covered eight areas:

1. Workload
2. Information Sharing
3. Skills and Training
4. Case Handling Process
5. Benefits Process
6. Program Attorneys
7. Data Entry
8. Customer Outcomes (Conclusions)

INTERVIEWS WITH PROGRAM ATTORNEYS

Six interviews were conducted with attorneys at each of the four agencies contracted to provide training, technical assistance and case oversight to disability and elder benefit specialists. Interviews were conducted among groups of attorneys at each agency, with one to eight attorneys. The length of the interviews varied between 20 and 80 minutes.

The Program Attorneys who were interviewed provide training and technical assistance to either Elder or Disability Benefit Specialists, including the EBS and DBS staff serving 11 tribes. The attorney interviews covered three areas:

1. Benefit Specialist Needs and Skills
2. Training and Technical Assistance
3. Outcomes and Conclusions

CUSTOMER INTERVIEWS

Qualitative interviews were conducted with 50 customers by telephone. Interviews ranged from less than 10 minutes to 40 minutes in length. The length of an interview was occasionally limited by a customers’ health or ability to articulate over the telephone.
In order to protect customers’ privacy and confidentiality, and in order to avoid any unwelcome contact by the researchers, a sample of customers was mailed a description of the study with an invitation to participate. If a customer was interested in participating in the research, they filled out and returned a brief form with their contact information. A researcher then contacted the customer and made an appointment for an interview. Customers who participated in the interviews received a ten dollar incentive.

The customer interviews were organized as follows:
1. Program Outreach
2. The Initial Meeting
3. The Benefit Specialist
4. Decision Making
5. Time
6. Materials and Follow-Up
7. After Working with the Benefit Specialist
8. Conclusions

CUSTOMER SATISFACTION SURVEY

The survey methodology was designed to protect customer confidentiality and assure that participants’ relationships with the Benefit Specialist would not be affected by survey participation. As with the customer interviews, customers were mailed an invitation to participate in the study. Only those customers who responded to the written invitation and granted us permission to contact them were included in the survey sample.

Benefit Specialists distributed customer survey invitations to their current and recent customers. Benefit Specialists who work in more than one location received just one package of invitations for use with clients at any/all locations. ADRC and agencies with multiple Benefit Specialists stationed at different branch offices received a package for each branch office. Although the packets were coded to distinguish between EBS and DBS customers, the ADRC or agency was not recorded on the package.

Benefits Specialists were instructed to distribute the survey invitations to every client with whom they had an interaction during the previous three months, whether over the phone or in person, continuing until all of the enclosed invitations had been distributed. A client interaction included an interaction with someone recognized as a client of the Benefit Specialist. Invitations were not issued to individuals who received information-only services from a Benefit Specialist. Survey invitations were provided to clients regardless of whether their cases were active or closed. Benefit Specialists were asked not to give multiple invitations to a single client.

A total of 842 cards were returned. Of those customers who returned cards, 427 completed a survey, for an overall ‘response rate’ of 48%. Survey respondents included 276 customers of the Elder Benefit Specialist program and 151 customers of the Disability Benefit Specialist program.

The customer survey was designed for quantitative data and hypothesis testing. The structure consisted of a majority of close-ended questions with pre-coded response categories. The questionnaire was organized into the following sections:
1. Customer Profile
2. Initial Meeting
3. The Benefit Specialist
4. Materials and Follow-Up
5. After Working with the Benefit Specialist
6. Outcomes
THE BENEFIT SPECIALIST ROLE

Benefit Specialists provide free advocacy and assistance to Wisconsin residents. Elder Benefit Specialists (EBS) assist those age 60 and older and Disability Benefit Specialists (DBS) serve residents between the ages of 18 and 59 who have a physical or a developmental disability, a mental illness or a substance abuse disorder. Benefit Specialists help their customers with a broad range of issues related to public and private benefits such as Medicare, Medicaid, Social Security retirement and disability benefits, Supplemental Security Income, FoodShare, SeniorCare and private insurance. They provide information on benefit eligibility criteria and help with benefit applications and appeals. Benefit Specialists also offer information and assistance with consumer debt, landlord/tenant disputes, and private insurance issues.

Benefit Specialists are employed at 72 County Aging Units and multiple ADRCs throughout Wisconsin. Additional benefit specialists are employed at Tribal Aging Units and the Great Lakes Inter-Tribal Council (GLITC) to work with tribal members. One Disability Benefit Specialist is employed by the State Office for the Deaf and Hard of Hearing to reach out to deaf and hard of hearing individuals throughout the state. Benefit Specialists receive training and support from teams of program attorneys contracted at the state level. EBS program funds are administered by Area Agencies on Aging. DBS program funds are administered directly by the Department of Health Services as part of the State’s contracts with ADRCs.

BENEFIT SPECIALIST KNOWLEDGE AND SKILLS

The Benefit Specialist position involves a unique and somewhat contradictory set of skills and knowledge. These include the softer, people skills required to work with customers who are often in difficult emotional, physical, economic and logistical circumstances and who often are unwell. In addition, Benefit Specialists need detailed knowledge about a wide range of benefit programs, and the ability to apply the rules and requirements to a unique circumstance. They must also be able to explain complex processes and options to customers, who are often overwhelmed by their own circumstances and have difficulty comprehending.

For both Disability Benefit Specialist (DBS) and Elder Benefit Specialist (EBS) staff, the virtues of listening well, problem-solving, learning quickly, and excellent communication are needed to serve customers. Most of the Program Attorneys that were interviewed focused on traits such as organizational skill, analytical ability and ability to advocate for clients.

BENEFITS CHECK UPS

In providing benefits checkups, most Benefit Specialists provide some form of follow-up response to customers. Generally, if there is a returning customer with no new eligibility or a new customer who does not qualify for Social Security benefits, follow-up is probably unnecessary. For returning or new customers with a new application for a benefit, Benefit Specialists follow up in a variety of ways.

- Placing a phone call to the customer to “check up” or schedule a follow-up appointment;
- Checking systems to see if applications have been submitted or if decisions have been made;
- Sending a closing letter along with contact information, and encouraging the customer to call back with any questions;
- Customers take it upon themselves to call the Benefit Specialist with updates, questions, or concerns.

Benefit Specialists reported that they usually follow up by making the call to the customer, rather than having the customer call them. Benefit Specialists were divided on whether those customers who call back are usually calling about a new issue or the same issue.
WORKLOAD

The workload for Benefit Specialists is variable on several levels; the number of cases and types of cases are unpredictable. Fluctuations in the number of new or returning customers contacting the Benefit Specialist, two emergencies at once, or a drop-in with a complicated need can dramatically impact the workload of an Elder or Disability Benefit Specialist. In addition, the annual enrollment period brings an expected increase in workload that can still be difficult to manage. Most Benefit Specialists agreed that workload, particularly for Elder Benefit Specialists, is increasing as the population ages and more older people require help.

A Benefit Specialist's workload is affected by the geography, population density and seasonal conditions of the area served. Benefit Specialists who serve rural areas often drive long distances for home visits. This consumes a substantial amount of time. Although home visits were found to be important to overall customer satisfaction for Information and Assistance (I&A) services, home visits from Benefit Specialists appear to be less important to most customers, perhaps due to the nature of applications and appeals cases. For some Benefit Specialists who have clients without telephone access, simply contacting a customer in a rural area can be a challenge.

Several Benefit Specialists mentioned that, when things are overwhelming, clients take priority and “paperwork” and “data entry” are the tasks that are put off, or sometimes completed during weekends or evenings.

Several factors complicate the workload of a Benefit Specialist:

- Unpredictability of day-to-day work flow;
- Predictable but large seasonal/annual increases in work flow;
- Steadily increasing caseloads;
- Driving distance and ability to contact customers;
- Data entry and paperwork requirements.

Like the Benefit Specialists, the Program Attorneys described a busy workload. However, the flow of the workload seemed to be more consistent for the Program Attorneys than for the Benefit Specialists. Most attorneys said they felt insulated from the seasonal fluctuations in workload commonly reported by Benefit Specialists.

DATA ENTRY AND USE OF DATABASE SYSTEMS

Benefit Specialists were often ambivalent about the various data entry systems used to track customer data. While they overwhelmingly acknowledge the value and importance of reporting in terms of tracking outcomes, providing efficient service to customers and obtaining funding -- and as such are heavily invested in reporting consistently and accurately -- they also felt very strongly that the various systems are redundant and time-consuming.

Redundancy between multiple, similar-but-isolated systems is a source of frustration on several levels: the time taken away from working with clients was the most frequently cited, but there are other challenges inherent in repeated data entry in multiple online systems:

- Sometimes data entry needs conflict with client interaction time and other requirements;
- Disability Benefit Specialists were generally very positive about their database;
- Unique agency characteristics can make an easy-to-use database challenging. For example, a Tribal DBS who does not have a regular office and spends a lot of time traveling can find data entry difficult.

The three main challenges to using the databases in providing customer service were:
Reports are predefined and not as flexible as some might like;  
Databases do not "talk" to each other in terms of service coordination between a Benefit Specialist and, for example, an I&A Specialist;  
Reporting in different databases is not parallel - that is, what is tracked in one database might be "counted" differently in another, precluding some useful comparisons between staff in reports to outside sources.

THE ADVOCACY ROLE

Benefit Specialists had different experiences when it came to how prepared they felt in their role as advocates, and how they became prepared to advocate for clients. Many Benefit Specialists have previous employment experience that prepared them very well to be advocates in this role. For others, it took time in their position as a Benefit Specialist to grow into the advocacy role.

Not all Benefit Specialists had such a strong background in other types of advocacy, and felt they had to learn on the job and grow into the role of an advocate. Those who were new to the advocacy role often cited it as one of the more challenging aspects of their position. They relied on their relationship with their Program Attorney and the training process to help acclimate them to this role.

Trainings were cited as an important piece of the learning process for Benefit Specialists learning to become stronger advocates. It was noted that the advocacy role is focused on advocating for individual client needs however, and that advocacy on a larger scale for systematic change is not encouraged.

Some Benefit Specialists felt that relationships with other agencies were important in advocating for their customers.

HOME VISITS

Most of the Benefit Specialists interviewed, by their own informal counts, conducted about 10-25% of their visits in customers' homes with the remainder split between telephone and in-office visits.

Although ADRC customer satisfaction research has shown a strong correlation between home visits and customer satisfaction with I&A services, an enrollment counseling study found no significant differences in satisfaction between customers who had a home visit and those who did not. This may be related to the different needs of the enrollment counseling customer, who, like the Benefit Specialist customer, may have more focused and less generalized needs.

The services provided by the Benefit Specialist are less oriented toward determining a customer's limitations - as in a functional screen - and more geared toward helping the customer organize paperwork, complete applications, file appeals, and connect with other agencies. These services require more technological resources such as 3-way calling and access to databases. Indeed, many customers in the qualitative interviews said three-way calls with other agencies in the Benefit Specialist's office were very helpful to them. Thus, the home visit holds a less prominent position in the Benefit Specialist's services and may even compromise their ability to provide important services.

Some customers, it should be noted, cannot leave their homes due to mobility or transportation issues. For these customers the home visit is a crucial component of applying for and obtaining benefits. Many customers who cannot
go to the office to meet the Benefit Specialist would not receive the necessary assistance without the home visit. In such cases, Benefit Specialists do not hesitate to schedule a home visit.

Several customers in the qualitative interviews mention the accommodations made by Benefit Specialists in the format of their interactions - either over the phone, via email, or in the home. These customers expressed great appreciation for the Benefit Specialists' efforts to regularly connect with them in their preferred format. Benefit Specialists do see advantages to both home and office visits, but most were careful to conduct home visits only when necessary for several reasons.

1. Necessary tools such as a laptop, scanner, an internet connection, a speaker phone may not be available in the customer’s home.
2. Distance is an issue for many Benefit Specialists who would spend a great deal of time driving between meetings if many were home visits.
3. Home visits, even when closer to the office, are more time-consuming than visits over the phone or in the office and limit caseload volume; high caseloads limit the number of home visits one can do.
4. The home is a more distracting environment for many clients, making it difficult to convey complex benefits information and gather complex customer information.

Tribal Benefit Specialists perform a large number of home visits for several reasons. A lack of office space, and serving a rural, historically underserved population presents additional challenges that other agencies do not face in serving their counties. The Tribal DBS serve their customers by adapting their practices, conducting more home visits, and working cooperatively with other professionals and agencies.

TARGETED OUTREACH

All of the agencies whose staff and directors were interviewed conducted targeted outreach for both DBS and EBS programs. This took many forms, but often included:

- Speaking to local groups, clubs, churches and schools
- Producing and distributing brochures and flyers at events, senior centers and other locations
- Booth or a table at fairs, expositions and events
- Conducting educational meetings and seminars

Most EBS and DBS do multiple forms of outreach and are well-known throughout their communities.

The Benefit Specialists at some aging units or ADRCs do not engage in outreach activities because the workload is at capacity. Because they know that the Benefit Specialists would not be able to accommodate the additional customers that outreach would attract, they refrain from those activities.

Other agencies that do engage in targeted outreach restrict their activities because of the existing caseload. Still others have a dedicated (non-Benefit Specialist) staff person conduct outreach activities.

BALANCE OF INFORMATION

Benefit Specialists expressed awareness that the amount of information that must be understood by customers can be overwhelming. In qualitative interviews, Benefit Specialists had a number of approaches to ensure they don’t overwhelm customers with too much information. These include:

1. Limiting time to one hour, then setting additional appointments if information runs over the allotted time.
2. Writing reminder notes for things customers need to keep in mind or follow up on;
3. Watching for the body language of confusion such as glazed eyes, inattentiveness, closed posture; any of which are an indication to stop and continue at a later appointment;
4. Prefacing a meeting by giving the customer "homework" to gather the necessary materials to shorten time spent on applications;
5. Asking customers to bring another person to the meeting.

COMMUNICATION AND COLLABORATION

The handoff of customers from Information and Assistance (I&A) Specialists to Benefit Specialist is generally seen as a smooth process. Several factors impact the handoff between I&A Specialist and Benefit Specialist:

- Whether the customer is new or returning;
- The system for connecting callers with a Benefit Specialist;
- Physical proximity of staff, including whether EBS and DBS are co-located within the ADRC;
- Receptionist or I&A staff familiarity with basic benefits issues and the role of the Benefit Specialist.

Elder and Disability Benefit Specialists reported that they enjoy the limited time they spend sharing information and resources with their colleagues. Most sharing occurs between Benefit Specialists within their own program. For example, an EBS is most likely to consult with another EBS. However, some information sharing does occur across the two Benefit Specialist programs, particularly with regard to case-specific advisement.

Sharing of information between Benefit Specialists and other staff in their agencies, such as I&A Specialists and agency directors, is often limited by client confidentiality requirements, and is therefore limited to sharing program information and resources. Case-specific information is generally only shared in instances where the case is about to be handed off, and only with the customer's permission.

The types of best practices and resource sharing that typically occur are:

- Information sharing between Benefit Specialists within the same program
- Information sharing across the two Benefit Specialist programs
- Information sharing between Benefit Specialists and I&A Specialists

The Program Attorneys within an agency tend to work closely with each other. As one described, "every day, multiple times a day, we’re always consulting with each other". For the most part however, Program Attorneys rarely, if ever cross agencies to consult with each other.

REGIONAL VS. SINGLE COUNTY MODELS

Benefit Specialists shared some of the pros and cons of working within a regional or single county ADRC or aging unit. The benefits of the regional model included having peers with whom a Benefit Specialist can share information and resources. In addition, many regional model agencies have expanded resources available to staff.

One of the advantages of the single county model was that a smaller agency often results in more consistent practices. For the most part however, most Benefit Specialists and Aging or ADRC Directors saw the single vs. regional model as largely a function of geography and minimized the impact of consolidation.
on either work processes or customer outcomes. Indeed, as shown in the chart above, the customer satisfaction survey results showed that the perceived usefulness of customers’ experience with the Benefit Specialist programs was not impacted by the regional or singular characteristic of the agency.

Information and resources are regularly shared between counties within a regional ADRC. Benefit Specialists see advantages to having regular interaction with peers in other counties.

Advantages of the regional model extend into the provision of services, where the more complex division of labor is considered an asset from training to outreach, and situations in between. The additional staff adds a cushion for staffing and scheduling difficulties. The regional model is not without its challenges, however. A larger staff often results in more variability in how tasks are performed.
THE BENEFIT SPECIALIST-PROGRAM ATTORNEY RELATIONSHIP

Disability Benefit Specialists (DBS) had overwhelmingly positive feedback about their Program Attorneys. Almost all the DBS that were interviewed rated their Program Attorney as "excellent" in terms of availability, guidance, technical assistance, and timely communication.

Elder Benefit Specialists were also generally positive about the guidance and technical assistance provided by Program Attorneys, but were less satisfied in some cases than the majority of Disability Benefit Specialists. About three-fourths of the EBS interviewed rated their Program Attorney as "excellent."

A number of Benefit Specialists feel that a high turnover rate of Program Attorneys and low level of expertise of new attorneys creates a gap in the quality of technical assistance they are able to receive. Many Benefit Specialists have been in their roles for from 5 to 20 or more years, and indicated having high turnover in their Program Attorney. This can lead to Benefit Specialists with greater expertise in benefit programs than their Program Attorney, and a high level of frustration.

MEETING FREQUENCY

Disability Benefit Specialists' meetings with their Program Attorneys varied, depending on how geographically distant their attorneys are, how large the agency is, and whether issues were emergencies or ongoing cases. Typically, meetings were monthly and either over the phone or in person, with a few meeting more often.

There was a similar amount of variation for EBSs' meetings with Program Attorneys. Some met monthly, others met semi-monthly. Whether the attorneys meet with the EBS face-to-face seemed to vary from agency to agency moreso than for DBSs and their attorneys.

TRAINING CONTENT

Several areas of the initial training for newly hired Benefit Specialists can be challenging for new specialists. Program Attorneys discussed the volume of information as the main challenge, but also mentioned the legal standards of eligibility, ethical guidelines and program-specific information as hurdles within the training process.

Volume of Information. Despite their concerns about the sometimes overwhelming amount of information imparted during the initial training, most Program Attorneys said that the initial training that is provided offers the right amount of information in about the right amount of time. Overall, Benefit Specialists agreed with this assessment and expressed a preference for more graduated system of training that would avoid repetition for more seasoned staff.

Need for Flexibility. Several Program Attorneys said that they would prefer more flexibility in scheduling trainings to coincide with changes in benefit programs or needed updates. Benefit Specialists tended to agree with this assessment and noted the lag in updates due to the timing of regional training sessions.

Webcast Limitations. Due to winter conditions and travel distances some of the ongoing trainings are conducted via webcast. The attorneys reported some drawbacks to this format, but generally accepted it as necessary, and ultimately useful under the circumstances. The objections to this format were primarily that it denies the Benefit Specialists the opportunity to interact with each other and that it leaves the Program Attorneys without visual clues as to when the participants are overwhelmed or confused.

Advocacy Role. Those who were new to the advocacy role often relied on their relationship with their Program Attorney and the training process to help acclimate them to this role, often cited as one of the more challenging.
aspects of the Benefit Specialist position. It was noted that the advocacy is focused on individual client needs however, and that advocacy on a larger scale for systematic change is not encouraged.

In addition to imparting information and offering assistance, Benefit Specialists have an important role as advocates for the customer with other involved parties, programs and resources and even in administrative hearings. Program Attorneys expressed some doubts about the preparation the Benefit Specialists receive for this role. Benefit Specialists generally agreed that their training for the advocacy portion of their position came largely from previous experience. This may be an area to consider potential improvements to the training format.

HIRING DECISIONS AND PERFORMANCE REVIEWS

Most of the Benefit Specialist staff and Directors said that the Program Attorneys had limited, if any, influence on hiring decisions for either EBS or DBS, but most do have input on performance reviews. Two of the fifteen agencies interviewed for this project do consult the attorneys on hiring decisions; one consults sometimes if input is desired. One agency consults the attorneys for hiring DBS because the program is still new, but does not consult on EBS hires. The remaining twelve agencies interviewed did not consult the attorneys on hiring decisions, but occasionally request input on interview questions.

Several directors noted that they do not consult attorneys for hiring decisions because of the small amount of interaction Benefit Specialists have with their Program Attorneys in that area, and the high degree of turnover among attorneys.

Within the EBS program, Program Attorneys perform routine performance evaluations of the Elder Benefit Specialists, whereas in the DBS program, performance evaluation is the responsibility of the ADRC. Beyond these policy differences, the process for completing performance reviews also varies from agency to agency. The following points demonstrate some variations on how reviews are conducted and shared. Unless otherwise noted, each method was described by a single agency.

- A regional ADRC where one county's DBS is reviewed by the director with attorney input, and the EBS review is done by the attorney and handed to the director;
- The EBS review is done by the attorney, and the director conducts an additional review;
- The DBS and EBS are both reviewed by the attorney, and only the DBS review is shared with the director;
- Director used to receive EBS reviews from attorneys, but no longer sees reviews; has never seen reviews for a DBS;
- Three agencies reported that the attorney does the review for the Benefit Specialists and shares all reviews with the director once completed;
- No reviews of any kind (reported), only case reviews and best practices discussions;
- EBS and DBS are reviewed by the attorney with some input from the director.

PRO BONO ATTORNEY REFERRALS

Benefit specialists did not have a consistent method for making referrals for pro bono attorney services when the issue fell outside of the scope of Benefit Specialist services. This seemed to be due to a lack of attorneys across the state who are willing or able to provide free legal services outside of Judicare. Despite this shortage of attorneys available for pro bono referrals, Benefit Specialists did have ways of helping customers find an attorney at low or no cost when needed. Some referred customers directly to Judicare or other advocacy agencies. Others provided customers with a toll free number or a list of area attorneys that may be available, but refrained from making a specific recommendation or endorsement of any particular attorney.
Some of the Program Attorneys refer cases to a variety of local volunteer attorney organizations, depending on their county. Others however, do not make such referrals or refer customers to the Wisconsin State Bar Referral and Information service, where they may speak to a legal assistant and receive a referral that includes an initial consultation for a fee of no more than $20. Any work beyond the initial consultation is then charged at the attorney’s normal fees.

### PROGRAM ATTORNEYS’ RELATIONSHIP WITH THE STATE

The Program Attorneys generally reported that they had an excellent working relationship with the State through their EBS or DBS liaison. Most felt that the State expectations for them were appropriate to their position in the program. One Program Attorney did however, express the desire that the state could promote the program for the purpose of increasing public support for funding, and another suggested expanded education efforts to inform other state programs and staff about the Benefit Specialist programs.

The Program Attorneys had several recommendations for statewide efforts to help improve Benefit Specialist services. These included increased staffing and focused on three positions:

1. EBS and DBS staff
2. An advanced EBS or DBS position to serve as a consultant for other less experienced EBS/DBS staff
3. Administrative support, particularly for training materials and logistical organization.

In addition, increasing the compensation of DBS, EBS, and their Program Attorneys was suggested. Two Program Attorneys from separate agencies mentioned that the Program Attorneys would like to have greater decision making power over the program and be involved in more state-level functions.
THE CUSTOMER EXPERIENCE

CUSTOMERS’ ISSUES AND CONCERNS

Benefit Specialists encounter a wide variety of customer concerns, and a single customer often brings multiple concerns to their meeting. The largest portion of EBS and DBS customers were seeking help with an application for a new program or benefit (25.7% of EBS customers and 31.8% of DBS customers). The next most frequently cited reason for contacting an EBS was reaching retirement age (20.8%) and the second most frequently cited reason for contacting the DBS was being no longer able to work due to a disability (24.3%). DBS customers were more likely to cite having been wrongly denied a new benefit (10.8% DBS compared with 1.1% EBS). A few EBS customers reported discussing being unable to work due to a disability (5.2%) and a few DBS customers reported discussing reaching the age of retirement with the Disability Benefit Specialist (2.0%).

Survey respondents reported discussing a wide range of issues with the Benefit Specialist. Over two in three DBS customers discussed Social Security Disability benefits, whereas EBS customers were more widely dispersed among benefits such as Medicare (40.6%), prescription drug coverage (15.2%), Medicaid (8%) and Social Security retirement (8%).

<table>
<thead>
<tr>
<th></th>
<th>DBS</th>
<th>EBS</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare</td>
<td>11.9</td>
<td>40.6</td>
<td>30.4</td>
</tr>
<tr>
<td>Social Security Disability</td>
<td>68.9</td>
<td>6.2</td>
<td>28.3</td>
</tr>
<tr>
<td>Prescription Drug coverage</td>
<td>0.7</td>
<td>15.2</td>
<td>10.1</td>
</tr>
<tr>
<td>Medicaid</td>
<td>7.9</td>
<td>8.0</td>
<td>8.0</td>
</tr>
<tr>
<td>Social Security Retirement</td>
<td>3.3</td>
<td>8.0</td>
<td>6.3</td>
</tr>
<tr>
<td>Other</td>
<td>3.3</td>
<td>7.6</td>
<td>6.1</td>
</tr>
<tr>
<td>Food Share /Stamps</td>
<td>0.7</td>
<td>7.6</td>
<td>5.2</td>
</tr>
<tr>
<td>Private insurance</td>
<td>2.6</td>
<td>4.3</td>
<td>3.7</td>
</tr>
<tr>
<td>Homestead Tax Credit</td>
<td>0.7</td>
<td>2.2</td>
<td>1.6</td>
</tr>
<tr>
<td>Consumer debt</td>
<td>0.0</td>
<td>0.4</td>
<td>0.2</td>
</tr>
</tbody>
</table>

* Note that the data collection period was during a short period of time and does not account for annual trends such as seasonal changes such as Part D enrollment season.
Although just one in three customers knew “a lot” about their primary benefit before meeting with the Benefit Specialist, over half (58.4%) reported that they knew a lot after meeting with the Benefit Specialist. Although 7.1%, almost one in ten customers started out knowing “nothing at all”, after meeting with the Benefit Specialist just 1.2% said they knew nothing about their primary benefit of concern.

Among DBS customers who knew at least “a little” about the benefit, one in three had learned about it through experience with another agency or Social Security. School, the courthouse, the Department of Transportation (21.4%) and the Internet (15.5%) were also frequent sources of information for DBS customers.

Among EBS customers, who knew at least “a little” about the benefit, brochures and newsletters were the most frequently mentioned source of information about it (33.1%). Other agencies (25.7%) and the newspaper or other media (20%) were also frequent sources for EBS customers.

Many customers felt they learned a great deal about their benefits and the process of applying for those benefits after working with the Benefit Specialist.

I had no understanding [of these benefits] before, now I understand how it works!
In previous research conducted for the Wisconsin Department of Health Services customer guidance, the act of helping the customer navigate the process has consistently been among the top drivers of customer satisfaction.

The vast majority of Benefit Specialist customers said that their Benefit Specialist did an excellent (84%) or good (13.4%) job of helping them navigate the process. Less than 3% of customers said that the Benefit Specialist did a fair (2.1%) or poor job (0.5%, or two out of 427 respondents).

There were no significant differences between EBS and DBS customers in their perceptions of their Benefit Specialist helping them navigate the process. The Benefit Specialist survey data do reaffirm the strong, positive relationship between customer guidance and overall satisfaction, usefulness of the experience and all other outcome measures.

In particular, guidance had a strong impact on the Benefit Specialists’ ability to exceed expectations. Given the high level of satisfaction among customers and the high percentage of customers who learn of the programs through word of mouth, it is likely that customer expectations generally run high.

Among those customers who said the Benefit Specialist did an excellent job of helping them navigate the process, the majority (70.4%) said the Benefit Specialist exceeded their expectations and none of these respondents said the Benefit Specialist failed to meet their expectations. In contrast, among those respondents who rated the Benefit Specialist’s job of helping them navigate as being “good”, just 25% said the Benefit Specialist exceeded expectations and one in approximately 13 (7.1%) said they failed to meet expectations. A very small number of respondents rated their Benefit Specialist’s job of helping navigate as being “fair” (9 respondents) or “poor” (1 respondent).

Most respondents (86.2%) said that the Benefit Specialist helped them fill out paperwork as needed, however about one in seven respondents (13.8%) said they did not receive help when needed. EBS customers were more likely to say that help was not available as compared with DBS customers (16.6% of EBS customers vs. 9.0% of DBS customers did not feel help was available.)

Helping to fill out paperwork, like helping to navigate the process, was also a strong driver of satisfaction outcomes and exceeding expectations.
She was very good about explaining the process of it, and what our next steps would be.

I got some relief that maybe this process wasn’t going to be as complicated as I was afraid it was going to be.

Although the majority of customers knew what would happen next at the conclusion of their first meeting with the Benefit Specialist, a substantial percentage (16.3%) did not. There were no differences between EBS and DBS customers with regard to their being prepared for what to expect after their first meeting.

Those customers who knew what would happen next after the first meeting were far more likely to rate their overall experience with the programs highly. Nine out of ten respondents (91%) who knew what to expect said their overall experience was excellent, as compared with seven out of ten (68.7%) who did not know what to expect after the first meeting. A higher percentage of customers who did not know what to expect rated their experience as merely “good” (26.9% vs. 8.1%). A very small number of customers rated the programs as being fair (4 respondents) or poor (2 respondents out of 427).
CUSTOMER PERCEPTIONS OF THE BENEFIT SPECIALIST

Customer perceptions of the Benefit Specialists were very favorable, with averages ranging from very good to excellent. Using a 4-point scale, customers rated the Benefit Specialists highly on all aspects of their working relationship. On a rating scale of 1 (poor) to 4 (excellent), Benefit Specialists' ratings ranged from 3.35 to 3.73, which indicates they were rated consistently between "good" and "excellent". Customers rated their experience with the Benefit Specialist on individual factors, which made up four key areas of their overall experience: time, ensuring comprehension, relationship building, and knowledge.

Time. Benefit Specialist were rated very highly on all 4 questions that, taken together, demonstrate whether the Benefit Specialist demonstrated respect for the customer's time. In particular, customers rated the Benefit Specialists highest on the amount of time the Benefit Specialist spent with them (3.69). In fact, it is the second most-highly rated aspect of customers' experience with the Benefit Specialist. Customers also felt the Benefit Specialist called them back right away, was easy to get ahold of, and not too busy to help with the details.

Ensuring Comprehension. Customers felt very strongly that Benefit Specialists ensured comprehension in several ways, and did so fairly consistently. Of all the areas of the customers' experience, their ratings of the three aspects of ensuring comprehension were most consistent with each other, ranging from 3.58 to 3.65. Customers were especially satisfied with the Benefit Specialists' ability to make sure the customer understood one thing before moving onto the next.

Relationship Building. In the qualitative interviews with customers, one trait that customers felt was important among Benefit Specialists was treating customers with respect and courtesy. Benefit Specialists were rated highest on this aspect of their interactions with customer, above all other factors. Customers also felt that the Benefit Specialist listened carefully, accommodated their special needs, and kept promises.

Knowledge. Two questions indicated whether clients felt their Benefit Specialists were knowledgeable about benefit programs and gave out correct information. Benefit Specialists were rated highly on their knowledge of benefits.

MATERIALS AND WRITTEN INFORMATION

Most customers (86.4%) received a brochure or other form of written information from the Benefit Specialist. About one in eight respondents (13.6%) did not. Customers who received written information were significantly more likely to find their experience with the programs to be very useful. Among those who received written materials, 90.3% said the help they received was very useful, as compared with 80.8% of those who did not receive written information to take with them. Those who received written information or brochures were also more likely to rate their overall experience as excellent. There were no significant differences between EBS and DBS customers with regard to the receipt of written materials.

The vast majority of those who received written materials found them to be very (75.1%) or somewhat (22.9%) helpful. A very small minority who received written materials found them to be not very or not at all helpful (7 respondents in total).
Almost nine out of ten customers surveyed (87.4%) said that their Benefit Specialist provided information that would help them handle issues that may come up in the future. There were no differences between EBS and DBS customers on this issue.

Those customers who felt prepared by their Benefit Specialist to handle issues that may come up in the future were more likely to rate their overall experience with the programs as excellent than those who did not feel prepared to handle future issues themselves (90.4% vs. 64.7%). Almost all of those who rated their experience as fair or poor (7 out of 8 respondents) reported that they did not feel prepared by their Benefit Specialist to handle future issues.

Although customers have a need to be prepared for what may come in the future, and it impacts satisfaction positively, customers in qualitative interviews emphatically expressed the desire to return to the Benefit Specialist rather than handle such an issue themselves.

The ease of knowing she was there and could answer any question for us, or if she didn’t know she could find out and get back to us.

It is so helpful to know that that person is there if I’m overwhelmed or struggling with something. It’s just nice to know that resource is available to us.

The customer survey results also indicate that the majority of customers (89.3%) would prefer to return to their Benefit Specialist for help rather than handle it themselves (8.3%) or see someone else such as a different Benefit Specialist (2.4%).

The minority of customers who would like to handle a future issue themselves were more likely to rate the help they received from the Benefit Specialist as very useful (97.1%) than either those customers who would like to go back to the Benefit Specialist for help (89.6%) or those who would see someone else (50%).

This finding, that the better prepared a customer is to handle future issues the more useful they will find their experience, independent of their preference to return to the Benefit Specialist for help, confirms the beliefs expressed by many Benefit Specialist during the qualitative Director/Staff interviews.
Most respondents said there was nothing a Benefit Specialist could do to help them feel confident in their ability to handle future issues (74.1%). All but 3 respondents (99.3%) said they would feel comfortable calling their Benefit Specialist again.
Customer perceptions of the Benefit Specialists were very favorable, with averages ranging from very good to excellent. Attributes of the Benefit Specialists were measured using a 4-point scale. Interviewers asked if a respondent agreed or disagreed, then whether strongly or somewhat, to a list of statements about the Benefit Specialist. The scale from 1 to 4 represents “strongly disagree” to “strongly agree”.

For comparison purposes, the following table shows the range of similar ratings for I&A staff at 32 Wisconsin ADRCs in 2010. Four of the six domains have an average below 3.2 and the highest rated domain averages 3.52.

<table>
<thead>
<tr>
<th>Domain</th>
<th>Sample Size</th>
<th>Mean</th>
<th>Lowest ADRC Rating</th>
<th>Highest ADRC Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personalization</td>
<td>2223</td>
<td>3.11</td>
<td>2.95</td>
<td>3.33</td>
</tr>
<tr>
<td>Accessibility</td>
<td>2081</td>
<td>3.14</td>
<td>2.89</td>
<td>3.36</td>
</tr>
<tr>
<td>Culture</td>
<td>2242</td>
<td>3.13</td>
<td>2.98</td>
<td>3.32</td>
</tr>
<tr>
<td>Knowledge</td>
<td>2243</td>
<td>3.13</td>
<td>2.98</td>
<td>3.29</td>
</tr>
<tr>
<td>Guidance</td>
<td>2303</td>
<td>3.26</td>
<td>3.08</td>
<td>3.46</td>
</tr>
<tr>
<td>Empowerment</td>
<td>2274</td>
<td>3.19</td>
<td>3.00</td>
<td>3.34</td>
</tr>
</tbody>
</table>

The Benefit Specialist ratings in this study range from 3.35 to 3.73, and the overall average of all items is 3.57. The very strong ratings of the Benefit Specialists is consistent with the comments of the Program Attorneys and Directors.

She was very knowledgeable, very understanding, very heartfelt, of the hardships we were going through. To have him lose everything to a medical care center, which thank God it's there, but still it's very sad. She was very understanding and caring, I just couldn’t ask for anything more.

I would say that I felt she was really in my corner, that I wasn’t going through this alone, and that meant an awful lot to me.

I couldn’t have done it at all without her help.

The average ratings of the Benefit Specialist attributes are strong throughout. Items are shown in descending order in order to identify opportunities for improvement. It must be noted however, that even the lowest rated items are well within the good to excellent range.
DYNAMICS OF CUSTOMER SATISFACTION WITHIN THE BENEFIT SPECIALIST PROGRAM

Four variables were used to assess customer satisfaction with the Benefit Specialist programs. Customers rated the programs based on their overall experience, the usefulness of the help they received, the Benefit Specialist’s ability to rise above expectations and willingness to recommend the programs.

OVERALL EXPERIENCE

The vast majority of customers found the Benefit Specialist programs to be excellent (87.1%) or good (11%). Just 1.9%, or a total of 8 individuals out of 427, found the programs to be fair (1.2%), or poor (.7%). It is important to note that almost half of respondents overall (43.2%) had not received benefits as a result of working with the Benefit Specialist at the time of the survey.

The average rating for overall experience is 3.85. There are no significant differences between EBS and DBS programs.

USEFULNESS

The usefulness of the help received through the programs was also rated very favorably. Nine in ten respondents (89.2%) rated the Benefit Specialist programs as very useful. 1.2% of respondents, or 5 individuals rated the programs as not very useful. An additional category included in the survey interview, “not useful at all” was not selected by a single respondent.

On a four-point survey scale, usefulness received an average rating of 3.88. There are no significant differences in perceptions of usefulness between EBS and DBS programs.

EXPECTATION

Almost one in three customers (62.6%) reported that the Benefit Specialist exceeded their expectations, and just over one in three (35.5%) said their expectations were met. Thus, the Benefit Specialists met or exceeded the expectations of 98.1% of their customers.

There are no significant differences between EBS and DBS programs with regard to expectations.
CUSTOMER SATISFACTION AND LONG TERM OUTCOMES

The high level of customer satisfaction seen in the overall results extends to customers who finished working with the Benefit Specialist and received no benefits.

Among customers who had finished working with the Benefit Specialist at the time of the survey (117 respondents), 87.3% of those who had received benefits as a result of Benefit Specialist services rated their experience as excellent.

Among those who had not received benefits (46 respondents), three out of four respondents (76.1%) rated the experience as excellent. Although customers who received benefits appear to have rated the experience slightly more favorably, this difference is not statistically significant.

OTHER LONG TERM OUTCOMES

About one in three customers contacted the Benefit Specialist to discuss multiple benefits or issues (24.4% cited two issues or benefit programs of interest, 8.9% cited more than two). Even beyond their multiple issues of concern, many customers left with added value.

The vast majority of respondents (91.7%) said they got peace of mind as a result of their interaction with a Benefit Specialist. Although the financial impact of peace of mind may be unclear, its value is clear to anyone who has ever found themselves lacking peace of mind.

Nine out of ten respondents (86.5%) learned more about their benefits. Increased understanding of their benefit is a long term value that customers will retain many years after completing their work with a Benefit Specialist.

Over half of the customers surveyed had more money to pay bills (58.3%), received medical care or medication they would not have been able to otherwise obtain (57%). Three out of four customers experienced the outcome of obtaining food (76.5%) either for themselves (55.2%) or their families (21.3%).

The impact of the Benefit Specialist programs extends beyond Medicare, Medicaid, Foodshare and other benefits which they help customers to access. Benefits specialist services have a far-reaching impact on the lives of customers. The impact includes things as abstract as “peace of mind” and as concrete as money to pay bills and for food or medication.
DEFINITIONS OF SUCCESSFUL OUTCOMES

BENEFIT SPECIALIST PERCEPTIONS OF SUCCESS

Benefit Specialists felt that a variety of factors define a successful customer outcome. The variety in responses reflects the diverse nature of the issues that customers present when talking to a Benefit Specialist, and regional variations in population diversity, geography and the availability of resources. Challenges in reaching a successful conclusion may lie in what other agencies or departments are able to do for a given customer as well. In general, Benefit Specialists felt the following outcomes signify success for them and for their customers.

- The customer gains knowledge and understanding (of their benefit or why they were denied);
- The customer receives educational material/information (when not applying for benefits);
- The customer's unmet needs are identified;
- The customer is connected to other resources in the community;
- The customer receives a favorable decision upon an appeal;
- The customer receives the benefit(s) sought;
- The customer develops an increased ability to self-direct and self-advocate;
- The customer returns with future issues and questions;
- The customer refers others to the Benefit Specialist.

PROGRAM ATTORNEY PERCEPTIONS OF SUCCESS

From the perspective of the Program Attorneys interviewed, a successful customer outcome within the Benefit Specialist programs involves imparting appropriate and accurate information, independently of whether or not they receive benefits. Although the goals of the program include ensuring that customer receive the benefits they are entitled to receive, when it turns out that the customer is not entitled to those benefits, the goal is to help the customer understand why he or she is ineligible and explore other options.
LESSONS LEARNED AND OPPORTUNITIES FOR PROGRAM IMPROVEMENTS

The Benefit Specialist programs have very high levels of customer satisfaction. Through interviews with staff and Program Attorneys, several themes emerged that revealed areas for potential improvements to the programs in six areas:

- The programs’ existing strengths and challenges
- Statewide efforts needed to improve services;
- The Benefit Specialists’ role and relationship with regard to the ADRC or agency in which they are situated;
- Marketing materials and assistance;
- The Benefit Specialist training processes;
- The State database systems.

PROGRAM STRENGTHS AND CHALLENGES

What are the key strengths of the Benefit Specialist programs? Asked to identify the characteristics that most contribute to successful client outcomes, Program Attorneys credited the Benefit Specialists themselves. They also emphasized their own role in training and technical assistance. These statements demonstrate the value of a relationship between Benefits Specialists and Program Attorneys based on close communication and mutual respect.

Discussions of the processes or characteristics of the Benefit Specialist programs that pose challenges to successful customer outcomes focused mainly on funding limitations, especially with regard to staffing of Benefit Specialists and other staffing needs.

STATEWIDE EFFORTS TO IMPROVE BENEFIT SPECIALIST SERVICES

Benefit Specialists and Agency Directors offered many suggestions regarding statewide efforts that would help them improve the services they provide. These included, but were not limited to:

1. Provide a platform to help coordinate Benefit Specialist services with other local and regional agencies.
2. Reduce data entry requirements and eliminate duplicative entries through database consolidation, communication or other systems changes.
3. Provide trainings or resources to help coordinate Benefit Specialist services with other agency staff, such as I&A Specialists.
4. Reduce EBS program attorney turnover to promote consistent, long-term legal backup.
5. Dovetail Benefit Specialists’ on-the-ground marketing and outreach with coordinated county- or state-wide marketing to increase awareness among potential customers and other agencies.

BENEFIT SPECIALIST’S ROLE WITHIN THE ADRC

- The types of situations that require the attention of a Benefit Specialist are not always well understood by receptionists and other staff in the ADRCs or agencies that house the Benefit Specialists. As a result, many Benefit Specialists feel they receive referrals that are not appropriate or work with clients that could be better and more efficiently served by an I&A Specialist.
- Several Benefit Specialists called for additional backup staff. Clerical assistants who are able to provide indirect casework assistance with paperwork or data entry would clear up a great deal of time for additional clients in the caseload.
MARKETING ASSISTANCE

- Effective marketing materials can be expensive and difficult to create, and many Benefit Specialists report creating their own materials about a particular benefit program, such as Medicare or BadgerCare. Statewide materials could be developed as templates that individual agencies could use to broaden the reach of benefit program-specific information. This would save a great deal of time and expense for the program overall by removing duplicative material development efforts.

TRAINING IMPROVEMENTS

- The initial training was overwhelming for new hires and needed some context that could only be understood from working in the field. Starting the initial training with a broad overview, including a short period of field work or shadowing, then following with increasingly specific training sessions might be preferable to the intensive training currently in place.
- Both Program Attorneys and Benefit Specialists expressed a desire for more flexibility in the frequency and type of trainings. They both wanted to be able to respond more quickly to changes or updates without waiting for the next scheduled, formal training.
- Additional training on advocacy requirements and best practices would be helpful to many Benefit Specialists.
- Both Benefit Specialists and Program Attorneys agreed that increased flexibility in the scheduling of trainings and the separation of advanced staff from new-hire topics would help to strengthen trainings.

DATABASE IMPROVEMENTS

Two suggestions emerged with regard to the Benefit Specialist program databases that apply to both the EBS and DBS systems:

1. Increased flexibility in the composition of reports to maximize their usefulness at the Benefit Specialist level;
2. Improve compatibility between databases used by Benefit Specialists, I&A Specialists and other ADRC and Aging Unit staff to the extent possible. In particular, consider making the units and measures within each database comparable between EBS, DBS and other agency data.