

Medicare Improvement for Patients and Providers (MIPPA)

FY2024 Semi-Annual Report

Project Period Dates	09/1/2023 - 08/31/2024
Reporting Activity Dates	09/01/2023 - 02/29/2024
Grant Award Number	2201TXMIAA
AAA Name:	
AAA Number:	
Date:	

Please follow the instructions below to complete the report.

- Provide answers in Times New Roman 12pt font.
- A response must be provided for each question.
 - Not Applicable (N/A) is not an acceptable answer.
 - If you do not have an answer, please provide a justification.
- Questions are to be answered based on activities completed and planned from **September** 1, 2023, through February 29, 2024.
- Although the report is due prior to the end of the reporting period, please include activities planned until the end of February.
- Use the following email **Subject Line** nomenclature:

Agency ID#- Agency Name - MIPPA FY24 Semi-Annual Report

• Save the file as a Word document and rename it using the same email nomenclature.

Complete by February 21, 2024, and return to: AAA Reports Desk, <u>aaa.reports@hhsc.state.tx.us</u>

Question #1

Discuss accomplishments during this reporting period and how they impacted the objectives below. At minimum, provide at least one detailed example, the outcome of your efforts, and significant project partners (name of partner) and their role to meet each one of the objectives.

Objective #1

Outreach and assistance efforts for all Medicare beneficiaries potentially eligible for Medicare Savings Plan (MSP) and/or Low-Income Subsidy (LIS) programs with a focus on rural, limited income, and areas identified by Social Security Administration (SSA) that have a higher percentage of eligible beneficiaries.

• Response to Objective #1

Objective #2

Proposed/completed activities to reach people who are eligible for LIS or MSP and provide oneon-one applications assistance, development of procedures to escalate network issues and questions related to Medicaid (dual eligible and MSP).

• Response to Objective #2

Objective #3

Outreach related to preventing disease and promoting wellness with a focus on Medicare Preventive Benefits awareness. Include the number of events attended and the total number of attendees (potential Medicare beneficiaries).

• Response to Objective #3

Question #2

What, if any, challenges did you face during this reporting period and what actions did you take to address these challenges? Please note in your response changes, if any, to your project goal(s), objective(s), or activities that were made because of challenges faced.

• **Response to Question #2**

Question #3

Describe the actions you have taken to expand your measurable outcomes (i.e., MIPPA related outreach and benefits counseling efforts during this reporting period)? How did this expansion include rural, low-income populations, and non-English speaking populations? Provide a detailed response.

• Response to Question #3

Question #4

What MIPPA related activities did you complete during the previous Medicare Open Enrollment period? Provide specific event details including other organizations involved, the topic focus of the events, etc.

• Response to Question #4

Question #5

What new partner collaborations have been engaged and developed over this project period that specifically supported your efforts to conduct MIPPA related work throughout your community? In addition to a detailed description, provide a general timeframe of the collaborative work you have conducted with each new partner.

• Response to Question #5

Question #6

Describe the relationship with your local Health and Human Services Commission (HHSC) Local Access and Supports – Community Access. If no relationship exists, what barriers have prevented this relationship, and what steps have or will be taken to improve it?

• **Response to Question #6**

Question #7

What key publications and outreach materials were developed? Give an estimate of how many were disseminated in the community? Publications may include articles, issue briefs, fact sheets, newsletters, paid advertisements, Public Service Announcements, etc. Note: All materials should have the approved logos and disclaimer to be included in your report.

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Submit pictures of events, advertisements, educational materials, and outreach items that can be used to highlight activities in the state's federal report. Be sure to include a description or explanation in all attachments.

• Response to Question #7