Administration for Community Living

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Beyond Medicare:

Integrating SHIP-MIPPA and Benefits Enrollment Centers for Improving Economic Security

national council on aging®

Gabriel Smith and Ryan Ramsey
Center for Economic Well-Being

SHIP State Health Insurance Assistance Program
Navigating Medicare

SMP Senior Medicare Patrol
Preventing Medicare Fraud

Introduction



Gabriel Smith

- Current Point of Contact for the Midwest Region of the Benefits Enrollment Center Network
- At NCOA for over 3 years



Ryan Ramsey

- Current Point of Contact for the State MIPPA Directors
- At NCOA for 2 years

Agenda

1. Overview of MIPPA
2. Overview of the Benefits Enrollment Center Network
3. Partnerships between SHP/MIPPA Programs and Benefits Enrollment Centers
4. NCOA Resources

Overview of MIPPA

Explanation of MIPPA



Purpose of MIPPA

- MIPPA was enacted to improve Medicare access and expand financial assistance for eligible beneficiaries.
- MIPPA funds outreach, education, and enrollment assistance, helping beneficiaries navigate healthcare programs through counseling and helplines.
- MIPPA focuses on three critical areas that directly affect low-income Medicare beneficiaries:
  - ❑ Medicare Savings Programs
  - ❑ Low-Income Subsidy (LIS)/Extra Help Benefits
  - ❑ Preventive Services Access

MIPPA Program Focus

Medicare Savings Programs

- MIPPA improves access to Medicare Savings Programs that assist with Part A and B premiums and reduce out-of-pocket costs for low-income beneficiaries.

Low-Income Subsidy Program

- MIPPA strengthens the Extra Help program, lowering prescription drug costs by covering premiums, deductibles, and copayments under Medicare Part D.

Access to Preventive Services

- MIPPA expands coverage of preventive services like screenings and annual wellness visits without additional cost-sharing to improve health outcomes.

Explanation of MIPPA

- Funding is available to all states and territories annually.
- Most states have all their funding granted through the state's SHIP Program for all three priority areas.
- SHIPs typically subcontract those funds out to AAAs and/or ADRCs to further carry out MIPPA work.
- Some states have one or all priority areas which is granted to a Community Based Organization.

Impact and Importance of MIPPA



- The MIPPA program, backed by federal funding, provides essential support to low-income Medicare beneficiaries, with the MIPPA Resource Center serving as a hub of information and assistance.
- This combined effort ensures that eligible individuals can access the financial support and healthcare services they need, making Medicare more affordable and accessible for vulnerable populations.
- MIPPA programs across the country potentially saves people money paid in healthcare costs, saves money spent on staffing SSA/Medicaid offices to complete applications, and helps remove long wait times or callback lists to get assistance completing these applications.

National Center for Benefits Outreach and Enrollment (NCBOE)

- ACL also awards a grant to the National Council on Aging (NCOA) to fund support for the NCBOE.
- NCOA has served as the NCBOE for 18 years, since MIPPA's inception.
- Also known as the MIPPA Resource Center.
- The center is dedicated to improving access to critical Medicare-related benefits for low-income individuals and its primary functions include providing outreach, education, and technical assistance to MIPPA grantees, community organizations, and state agencies.
- The center also offers training and resources to local agencies, enabling them to better serve the Medicare population.

Benefits Enrollment Centers (BECs)

- NCOA further subgrants and supports a network of Benefits Enrollment Centers (BECs) around the country to help low-income people with Medicare access programs that pay for healthcare, food, and more.

- Through the current round of funding, 90 community-based organizations across 40 states and territories will get support to continue (or begin) this work.

- The funding helps local benefits counselors reach out to older adults and people with disabilities, walk them through the benefits process, and help them apply for programs that make health care, prescriptions, and food more affordable.

- A full list of Benefits Enrollment Centers by state and territory is available here: https://www.ncoa.org/article/meet-our-benefits-enrollment-centers/.

Overview of the Benefits Enrollment Center Network

Benefits Enrollment Centers

BECs connect eligible individuals to federal, state, and local benefits programs that help them afford daily expenses or help them reduce their expenses.



Supplemental Nutrition Assistance Program (SNAP)
(food assistance)



Medicare Low-Income Subsidy
(assistance with prescription drug costs)



Medicare Savings Programs (MSP)
(assistance with Medicare premiums)



Medicaid
(health coverage program for low-income individuals)

Benefits Enrollment Centers

- Medicare Eligible
- Older Adults 65+
- Social Security Disability Income
- Minimum of 24 months
- End Stage Renal Disease (ESRD)
- Amyotrophic Lateral Sclerosis (ALS)

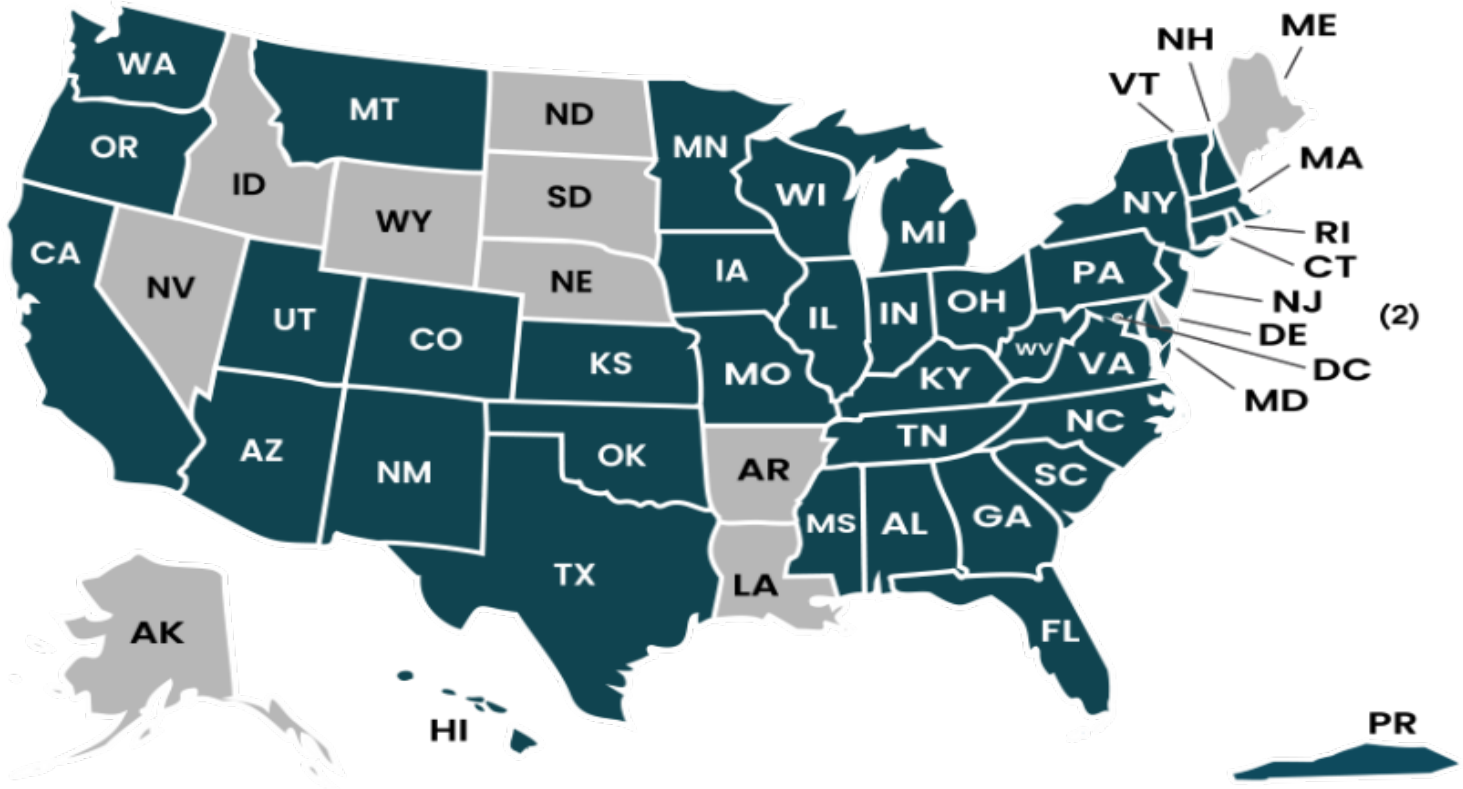


Older adults



Adults with disabilities

Benefits Enrollment Centers



Benefits Enrollment Centers

- Value of Benefits calculated
- Potentially $36,875 in savings per older adult
- Unclaimed benefits
  - 60-70% of older adults are not enrolled in SNAP
  - 2.5 million nationally not enrolled in MSP any given time



SNAP
$2,256 / year



LIS
$5,700 / year



MSP
$2435 / year



Medicaid
$26,484 / year

Partnerships between SHIP/MIPPA Programs and Benefits Enrollment Centers

Strategic Alignment: (SHIP/MIPPA + BEC)

SHIP/MIPPA Strength	BEC Strength	Combined Value
Medicare expertise	Multi-benefit focus	**Full-spectrum assistance**
Counseling & trust	Application completion	**Higher conversion rates**
Outreach infrastructure	Community partnerships	**Expanded reach**
Federal reporting	Single-Point Data System	**Targeted service delivery**

Result: An "Integrated Benefits Access" ecosystem: meet people where they are, solve multiple needs at once.

The Integration of Full MIPPA Network

Integrated Access to Services

- A state specific framework to streamline benefits access to services and supports
- Key elements:
  - Coordinated entry points for multiple programs
  - Universal Screening for needs
  - Integrated eligibility pathways

Application in SHIP/MIPPA + BEC partnerships:

- Every client interaction = screen for all benefits and ask about needs not identified
- Warm handoffs instead of referrals
- Shared data and coordinated intake

Best Practices for Integrated Service Delivery

1. **Universal Screening**
   - Screen every Medicare client for:
     - LIS
     - Medicaid
     - SNAP
   - Required in MIPPA workflows

2. **Co-Location & Warm Hand-offs**
   - Embed BEC staff as volunteers or within SHIP/MIPPA or AAA offices
   - Immediate enrollment assistance vs. referral drop-off

3. **Shared Tools & Technology**
   - Align data reporting to ensure no duplication of services provides

4. **Person-Centered Counseling**
   - Start with **"Could you also benefit from..?"**, not program silos

5. **Staff Cross-Training**
   - BECs provide non-Medicare benefits screening basics to SHIP counselors
   - SHIP/MIPPA Counselors provide Medicare fundamentals to BEC staff and potential volunteer certifications for Medicare counseling

Real-World Outreach Examples

1. **Mobile & Community-Based Access**
   - Mobile enrollment units and pop-up events at:
     - ❑ Food banks
     - ❑ Faith-based organizations
     - ❑ Rural clinics
     - ❑ Helps overcome transportation and trust barriers

2. **Cross-Sector Partnerships**
   - Collaborations with: SNAP agencies, Medicaid offices, Health systems
   - Enable co-location or co-referrals

3. **Data-Driven Targeting**
   - Use participation maps (e.g., MSP/SNAP gaps)
   - Focus outreach where eligible but unenrolled populations are highest

4. **Integrated Campaigns**
   - Flyers, social media, and multilingual materials promoting:
     - ❑ “Help paying for Medicare costs, premiums, prescriptions, and food”

5. **Seasonal Handoffs to Enable Focus of Applicable Services**
   - During AEP allowing BECs to coordinate MIPPA applications to enable Medicare staff to focus on plan comparison and enrollments

Real-World Integration Impact

Why Integration Matters

- Medicare alone does not address:
  - ❑ Food insecurity
  - ❑ Transportation barriers
  - ❑ Long-term services
- Programs like SNAP and Medicaid directly influence health outcomes

Key insight:

- Coordinated enrollment improves:
  - ❑ Medication adherence
  - ❑ Preventive care utilization
  - ❑ Further financial stability

Measuring Impact and Outcomes

What Success Looks Like

- Increased:
  - ❑ LIS/MSP enrollments
  - ❑ SNAP participation among Medicare beneficiaries

- Improved:
  - ❑ Application completion rates
  - ❑ Outreach penetration in rural areas

- Stronger and more accurate reporting of MIPPA, through:
  - ❑ MIPPA performance metrics (contacts, outreach reach, applications submitted)

Key Takeaways for Agencies

- **Partnership = scale + impact**
- **Move from program-specific assistance to whole-person support while increasing capacity for each organization**
- **Create No Wrong Door entry points across systems**
- **Use data + outreach + trust to reach underserved populations**
-
- **Align mission with full MIPPA picture of value-of-benefits from total benefits application submissions**

Call to Action

- **Build or strengthen SHIP–BEC partnerships in your state**
- **Identify high-need geographies using data tools**
- **Pilot integrated intake workflows**
- **Invest in community-based outreach**

NCOA Resources

Resources

- Benefits Participation Map
  Benefits Participation Map (NCOA)

- BenefitsCheckUp®
  BenefitsCheckUp | Money-Saving Programs for Healthy Aging

- Center for Economic Well-Being
  About NCOA's Center for Economic Well-Being

- MIPPA Resource Center
  For Professionals | MIPPA Resource Center

Contact Information

Ryan Ramsey

Associate Director, Health Coverage and Benefits
Center for Economic Well-Being
Ryan.Ramsey@ncoa.org
(571) 527-3944

Gabriel Smith

Program Associate
Center for Economic Well-Being
Gabriel.Smith@ncoa.org
(571) 527-4010

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