

Executive Summary

**INFORMATION DISSEMINATION ACTIVITIES IN
IMPLEMENTING THE NATIONAL MEDICARE & YOU
EDUCATION PROGRAM (NMEP): Fall 1998 – Fall 2001**

Centers for Medicare & Medicaid Services (CMS)

Executive Summary

This report summarizes the information dissemination activities undertaken by the Centers for Medicare & Medicaid Services (CMS) in implementing and conducting an assessment of the National Medicare & You Education Program (NMEP). The report summarizes each of the NMEP information channels, and includes information regarding the assessment and cost of the NMEP. A description of the National Media Campaign is also included.

The Balanced Budget Act of 1997 mandated the most significant changes to Medicare since its inception. One of these changes was the expansion of health insurance options by the creation of Medicare + Choice. To support the new program and to help people with Medicare make more informed health care decisions, CMS initiated the NMEP. The NMEP employs numerous specific information channels to educate people with Medicare and help them make more informed decisions concerning: Medicare program benefits; health plan choices; supplemental health insurance; beneficiary rights, responsibilities, and protections; and health behaviors.

A pilot program of specific NMEP activities afforded us an opportunity to study and monitor the way these specific information channels function. Two key NMEP components implemented and tested in five pilot states (Oregon, Washington, Arizona, Florida and Ohio) prior to the planned nationwide implementation in Fall 1999, were the new *Medicare & You* Handbook and 1-800-MEDICARE toll-free line. This phased implementation allowed CMS to improve new NMEP activities through performance monitoring and assessment prior to the nationwide implementation.

CMS is taking a multifaceted approach to testing our overall strategy in educating beneficiaries about Medicare. We have developed a performance assessment system for all elements of NMEP to use for continuous quality improvement. The channel-specific assessments cover the following: print materials; toll-free telephone services (1-800-MEDICARE); the Internet (www.medicare.gov); Regional Education About Choices in Health (REACH); National Alliance Network; national training and support for information givers; and enhanced beneficiary counseling from the State Health Insurance Assistance Programs (SHIPs). These assessment activities identify what is working well and what needs to be improved for each of the activities for communicating information about Medicare and Medicare + Choice.

Additionally, we are conducting case studies in five communities in the original five pilot states (Dayton, OH; Eugene, OR; Olympia, WA; Sarasota, FL and Tucson, AZ) and in one community (Springfield, MA) which was outside the original five pilot states. We are

studying these in order to describe the evolution of the NMEP in these six communities and identify “best practices” that could be used in other areas. The case studies add to our other assessment activities by providing information about how all of the activities related to the NMEP work together at the local level. We are continuing to monitor the case study sites over time.

To evaluate the impact of the NMEP at the national level, we added a supplement to the winter round of the 1999 Medicare Current Beneficiary Survey (MCBS). This supplement gathered information about the ability of people with Medicare to obtain Medicare information when they need it, and about their awareness and understanding of Medicare and Medicare + Choice messages. We have repeated this supplement annually.

CMS’ monitoring activities have provided the Agency with feedback on the progress of the NMEP efforts and on potential areas for improvement. Over the three years, the activities have provided a deeper understanding of the complexities of information and educating people with Medicare.