

State Health Insurance Assistance Program Technical Assistance Program

Sensitivity and Awareness Training Activities

Overview

The purpose of this document is to provide trainers who will implement the Sensitivity and Awareness training including in the State Health Insurance Assistance Program Technical Assistance Program (SHIP TAP) developed by the Office of the Medicare Ombudsman. The purpose of SHIP TAP, and these training activities, is to improve the provision of information on Medicare benefits to people who are Medicare eligible with a mental illness.

General Instructions for Role Plays:

1. Present the scenario.
 - a. Invite members of the audience to present the scenario.
 - b. Provide them with a few minutes to read through the script.
 - c. Ensure that the scripts are presented as written. Because both of the role plays provided for this training are examples of negative interactions they should initially be presented as written, even if it would not be the way they would actually choose to counsel a beneficiary.
2. Select a follow-on activity from the two listed below for each role play.
 - a. Ask the role players to do an impromptu role play. The person playing the counselor should use the tips included in the tip/fact sheet to change how she or he interacts with the person with Medicare (the Beneficiary) and/or the Beneficiary's caregiver or family member. You may want to stop the role play at various junctures, ask for input from the attendees, and then ask the person playing the counselor to apply those suggestions.
 - b. Lead a group discussion on what could be improved. Refer to the tip/fact sheets related to each role play.

Role Play 1: Conversing with a Person with Medicare and a Family Member

Tip Sheet

- Dementia

Purpose

This role play emphasizes the importance of speaking with respect to people and directing conversation to the person with Medicare, whenever possible, even if there is a caregiver or family member with the person. This scenario often occurs when the beneficiary has a diagnosis of, or symptoms related to dementia.

Script

Counselor: “Good morning, I’m <give name>. How are you today?”

Beneficiary and son or daughter: <at same time> “Fine.”

Counselor: “How can I help you today?”

Son or daughter: “I’m <give name> and this is <give name of parent>. We need to get my <mother/father> set up for Medicare.”

Counselor <speaking to son or daughter>: “I can certainly help with that. Is your mother enrolled in a Medicare plan?”

Beneficiary: “I don’t know.”

Son or daughter: “No, <he/she> is not yet. That’s why we are here today.”

Counselor <speaking to son or daughter>: “OK, let’s start with which medications your <mother/father> takes.”

Son or daughter: “The last time I went to the pharmacy to get the medications, they turned me away. It is important that we get this worked out today.”

Counselor <speaking to son or daughter>: “That’s what I’m here for, let’s get started.”

Beneficiary: <getting up and walking out> “I’m leaving. I’m tired of being talked around like I’m not in the room.”



Role Play 2: Counseling an Anxious Beneficiary

Tip Sheets

- Counseling People with Mental Illness
- What Should you Do in a Difficult Conversation?
- Anxiety

Purpose

This role play highlights some of the difficulties that behaviors associated with anxiety may create during a counseling session. Counselors in the room can use their experience as well as the information on the tip sheets to develop strategies after the first role play has been conducted.

Script

Counselor: “Good morning, welcome! How can I help you today?”

Beneficiary: <clearly confused and disoriented> “I don’t know. Someone said to come here. I need to get my medicine.”

Counselor: <Takes a deep, calming breath> “Okay. Do you have Medicare? Do you know which plan you are enrolled in?”

Beneficiary: “I don’t really know. I always go to the same pharmacy to get my medicine but this time they didn’t give me my pills.”

Counselor: “I am going to need some information in order to help you. Did you receive an auto-enrollment letter, or a letter on yellow paper?”

Beneficiary: <Growing increasingly anxious and upset> “No, I really don't know. Can you help me?”

Counselor: “Yes, but I need some information from you in order to do that. Do you have your Medicare card?”

Beneficiary: “No, I don’t think so.”

Counselor: “Well, give me your name, and we’ll see what we can find.”

Beneficiary: <Alarmed and raising voice> “I don’t think I should do that. I should have gone to my case worker right away instead of coming here.”

Counselor: “Maybe contacting your case worker is a good way to go. Unfortunately there isn't much I can do without any of your information.”

Beneficiary: <moves to leave>

Counselor: “Sorry I couldn't do more for you, <sir/ma'am>. If you get that information you could always come back and then we could help you better.”



Optional Activities

Tip/Fact Sheets

- All

Purpose

Should you desire to include more activities in the training, you may choose to use the following starter sentences to generate large or small group discussions.

Starter Sentences:

- “I haven’t seen my case worker in quite a few months, so I wouldn’t know how to answer that question.”
- “I wish people would just leave me alone.”
- “It’s going to be hard to call you again. I’m calling from the pay phone down at the drug store. I’m behind on rent, and I don’t know how much longer I’m going to be where I’m at.”
- “I can’t figure out what you are asking me to do. I know you’ve told me several times, but it’s not making sense....”
- “I’m afraid to go out. I used to get my medications delivered, but now I can’t. I have to get my medications, do you hear?”
- “Since my husband died, I don’t go out anymore.”

