

Chapter Two – Appendix A – Excerpt from Service Definitions for Area Agencies on Aging

LEGAL ASSISTANCE – 60 years and older

Advice or representation by an attorney, including assistance by a paralegal or law student under the supervision of an attorney, or counseling or representation by a non-lawyer **such as a certified Benefits Counselor**, where permitted by law, to older individuals with economic and social needs. Legal assistance activities include the following:

- Advice/Counseling - a recommendation made to an older individual regarding a course of conduct, or how to proceed in a matter, given either on a brief or one-time basis, or on an ongoing basis. May be given by telephone or in person.
- Document Preparation - personal assistance given to an older individual which helps the preparation of necessary documents relating to public entitlements, health care/long term care, individual rights, planning/protection options, and housing and consumer needs.
- Representation - advocacy on behalf of an older individual in protesting or complaining about a procedure, or seeking special considerations by appealing an administrative decision, or representation by an attorney of an older individual or class of older individuals in either the state or federal court systems.

Services identified as “Legal Assistance Services” are: Benefits Counseling, Money Management, Representative Payee, and Guardianship.

Unit of Service: One Hour. Record units (hours) of service for *all* individuals who are 60 or older in the consumer’s case narrative, regardless of funding source.

and

Unit of Service: One Contact. When the AAA receives Centers for Medicare and Medicaid Services (CMS) funds, Contacts must be reported through the Individual Client Contact (ICC) form for allowable CMS services. Record one Contact per person per day. Record Contacts only when the individual is 65+ *and* is a Medicare beneficiary; *or* a new to Medicare enrollee; *or* a Dual Eligible Medicare beneficiary; *or* a beneficiary who is disabled as determined by SSA criteria and the individual receives legal assistance related to a CMS issue. *The ICC form also requires reporting of total time spent.*

or

Unit of Service: One Contact. When the AAA receives Medicare Improvements for Patients and Providers Act (MIPPA) funds through CMS, Contacts must be reported through the Individual Client Contact (ICC) form. Record one Contact per person per day. Record Contacts only when the individual is 65+ *and* is a Medicare beneficiary; *or* a new to Medicare enrollee; *or* a beneficiary who is disabled as determined by SSA criteria; *and* the individual receives legal assistance related to Low Income Subsidy (LIS) or Medicare Savings Program (MSP) issues. *The ICC form also requires reporting of total time spent.*

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly, subcontracted or authorized by a certified benefits counselor on behalf of an eligible individual for purchase through an enrolled vendor.

Reimbursement Methodology by AAA: Fixed Unit Rate per Hour.

NAPIS: “Legal Assistance”
Units – 1 Hour

QPR: **Units**
Unduplicated Persons Count – Client Intake Required

LBB: **Non-Key Performance Measure**

ALLOWABLE FUNDS: **Title III-B**
Title III-E
Title III-E GOECSC
Title VII-EAP
CMS
Disaster Relief as approved by DADS
State General Revenue
State General Revenue Additional Other

LEGAL ASSISTANCE – less than 60 years of age

Legal Assistance provided to Medicare enrollees and eligible disabled (as determined by the Social Security Administration) Medicare pre-enrollees who are under age 60. This service may be provided by the AAA only if it receives funding through the Centers for Medicare and Medicaid Services (CMS).

Unit of Service: One Hour. Record units of service for all individuals who are less than 60 years of age served through CMS funds in the consumer’s case narrative. Title III funds may not be expended for this service.

and

Unit of Service: One Contact. Contacts must be reported through the Individual Client Contact (ICC) form for allowable CMS services. Record one Contact per person per day. Record Contacts only when the individual under age 65 *and* is a Medicare beneficiary; *or* a new to Medicare enrollee; *or* a Dual Eligible Medicare beneficiary; *or* a beneficiary who is disabled as determined by SSA criteria and the individual receives legal assistance related to a CMS issue. *The ICC form also requires reporting of total time spent.*

or

Unit of Service: One Contact. When the AAA receives Medicare Improvements for Patients and Providers Act (MIPPA) funds through CMS, Contacts must be reported through the Individual Client Contact (ICC) form. Record one Contact per person per day. Record Contacts only when the individual is under age 65 *and* is a Medicare beneficiary; *or* a new to Medicare enrollee; *or* a beneficiary who is disabled as determined by SSA criteria; *and* the individual receives legal assistance related to Low Income Subsidy (LIS) or Medicare Savings Program (MSP) issues. *The ICC form also requires reporting of total time spent.*

Direct Service Waiver Required: No.

Method of Service Provision: This service may be provided directly, subcontracted or authorized by a certified benefits counselor on behalf of an eligible individual for purchase through an enrolled vendor.

Reimbursement Methodology by AAA: Fixed Unit Rate per Hour.

QPR: **Unduplicated Persons Count – Client Intake Required**

ALLOWABLE FUNDS: **CMS**
Disaster Relief as approved by DADS

