



Trends and Innovations in the PSNT World

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True Link provides life-changing services for people with complex needs and the people who care for them.

We serve family and professional caregivers and the vulnerable older adults, people with disabilities, and people in recovery that they care for.

Dear Pooled Special Needs Trust Community,

It has always been an honor to work alongside the remarkable Pooled Special Needs Trust (“PSNT”) organizations that drive this field forward. Over the last 18 months as we all grappled with an unprecedented pandemic, we have only grown more impressed by the dedication, compassion, and determination we have seen.

Across PSNT organizations, there is an incredible diversity of approaches to doing the work of trust administration. Paired with this diversity is a profound commonality: the PSNT leaders we know have a fierce appetite for learning from each other and continuously improving. At True Link, we support these improvement efforts — through our caring and specialized team, through our technology built for PSNTs, and through sharing what we learn from the PSNT leaders with whom we work every day.

Our unique vantage point allows us to see data from a wide range of organizations and to hear stories of impact and innovation from all across the field. We want to share those findings with you in this whitepaper.

Here is an overview of what you can discover in the following pages:

- **The Core:** Common to PSNT organizations is the work of administering trusts for people with disabilities, namely **making disbursements from those trusts in service of beneficiaries and their overall well-being**. We’re sharing here anonymized disbursement data trends from dozens of trusts.
- **Beyond the Core:** For many PSNTs, focus on this core activity is the key to their success. Other PSNTs have developed additional offerings, found ways to help beneficiaries beyond trust administration, or expanded to new categories of beneficiaries. We hope these case studies can inspire organizations seeking **opportunities to enhance their services in creative ways**.

At the end of the day, this is all about the life-changing care you provide day in and day out. We are grateful for all that you do — and we consider ourselves lucky to be on this journey with you.

Please let us know what you think, and we hope you will reach out if you have more stories to share.

Warmly,
The True Link Team

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THE CORE:

Data On Trends Across PSNTs

The Core: Data on Trends Across PSNTs

A Study of Disbursement Patterns in PSNTs

We analyzed the disbursement patterns of dozens of pooled trusts, and focused on two trends:

1. The types of purchases trusts are making on behalf of their beneficiaries
2. The use of digital platforms to automate workflows and improve operational efficiencies

These findings are not necessarily representative of the PSNT industry as a whole, but rather a glimpse into trends we are seeing in how these PSNTs serve their beneficiaries. We hope that this data can help PSNTs understand how their disbursement practices compare within the industry and how to use this data to inform their processes.



23%

of funds disbursed are for housing-related payments

\$165

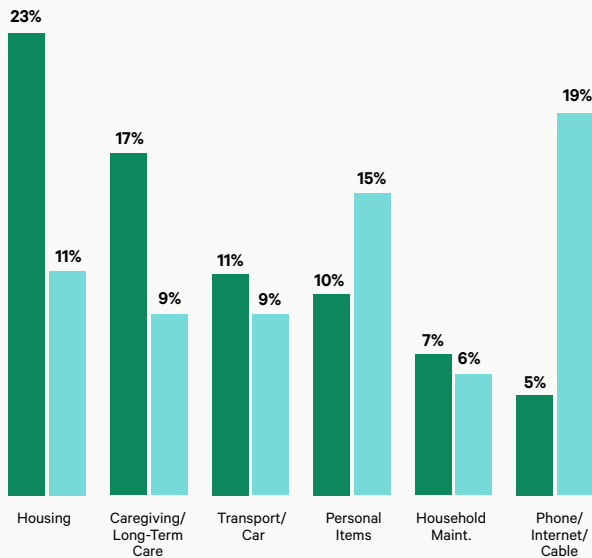
The average amount for phone, internet, and cable expenses

\$1,991

The average amount for housing-related expenses

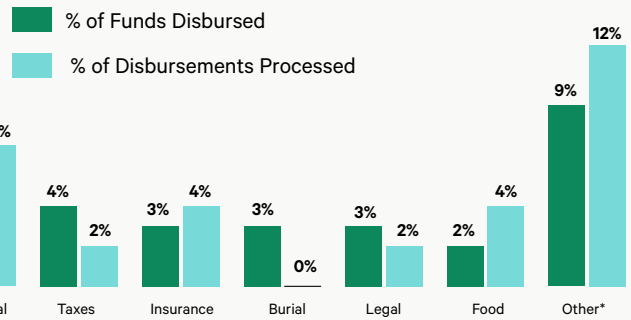
76%

of disbursements are under \$500



PSNT Disbursements by Category

*Other includes dental, utilities, electronics/technology, education, travel, case management, and entertainment expenses. Note: this analysis excludes fees paid for trust administration and investment management, as well as final sub-account disbursements made at the closing of a sub-account.



TREND 1:

What Trusts are Purchasing for Beneficiaries

PSNTs play an essential role in the lives of their beneficiaries – helping them access items and experiences that have a tremendous impact on their quality of life. Of the trusts we analyzed, beneficiaries are most frequently requesting funds to pay for everyday goods and services, ranging from rent to internet access to pet care.

The top categories of purchases made by PSNTs for their beneficiaries, by amount of funds disbursed in 2020:

- Housing
- Caregiving or long-term care
- Transportation (e.g., public transit, car payment, gas)
- Personal items (e.g., hygiene products, clothing, pet care)
- Household maintenance

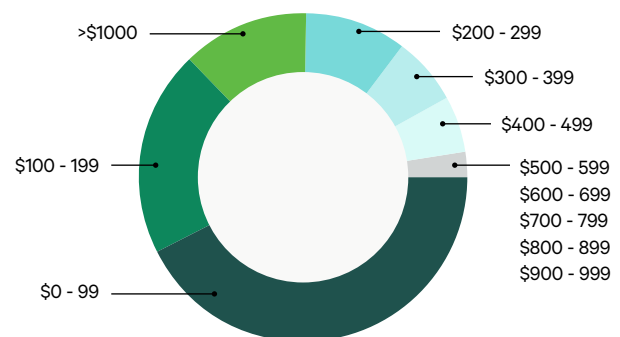
Payments made for beneficiary housing comprised almost a quarter of funds disbursed. These disbursements help beneficiaries to maintain quality living conditions and include payments for things like home purchases, mortgages, rent, and HOA fees.

When we look at the number of disbursements that PSNTs made in 2020, payments for phone, internet, cable, and media occur most frequently, although the total percentage of funds disbursed is low – 5% – because the size of each disbursement is relatively small in

comparison to categories like housing. We see PSNTs purchasing these services for beneficiaries on a monthly basis to ensure they can communicate and stay connected with family, friends, colleagues, and others in their lives.

Further, most disbursements are for small amounts to cover everyday purchases. Almost 40% of the disbursements processed by PSNTs were for less than \$100, and 90% were for less than \$1000. This indicates that PSNTs are focused on supporting purchases to enhance the quality of life of beneficiaries, not making large or exorbitant purchases. These funds enable beneficiaries to purchase gas for their car, visit the dentist, or receive support from caregivers.

Disbursements by Size



Note: This analysis excludes fees paid for trust administration and investment management, as well as final sub-account disbursements made at the closing of a sub-account.

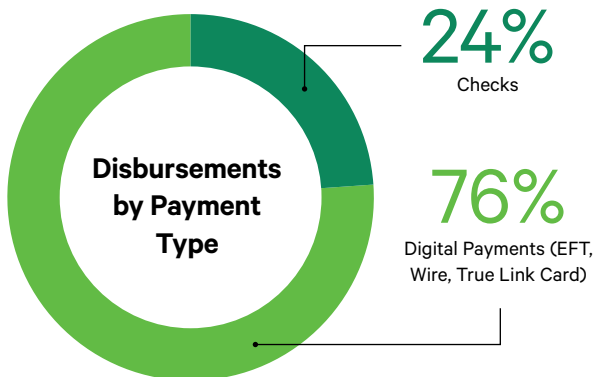
TREND 2:

Making the Switch to Digital

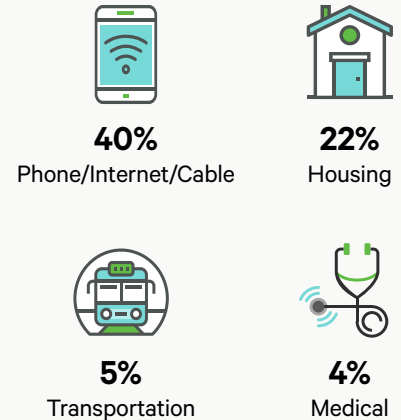
PSNTs are increasingly moving away from paper and manual workflows in their day-to-day processes. Especially in 2020, as businesses everywhere moved many operations online, transitioning to digital was critical for operational resiliency. One way we see this trend reflected is in the payment method used for disbursements.

Pooled trusts are relying less on paper checks – the primary method of disbursement a mere decade ago – and are making more of their disbursements electronically. In 2020 the trusts included in this study made over 75% of disbursements electronically via EFT or a True Link Visa Card. We expect that this percentage is higher than the industry average as not all pooled trusts have the tools to make electronic disbursements possible and simple.

We also see these PSNTs using recurring disbursements to automate workflows. By setting up a recurring disbursement on the True Link platform, a PSNT administrator can schedule a regular payment without having to manually enter the information every time the payment is due (or, the True Link system can be set up to automatically remind the administrator to process the payment for a bill where the amount varies monthly). The process is similar to setting up autopay with the added benefits of allowing trust administrators to review and approve the payments on a monthly basis. PSNTs most frequently use recurring disbursements to make payments for beneficiaries for phone/internet/cable bills and housing expenses like rent or mortgage.



Common Recurring Disbursements



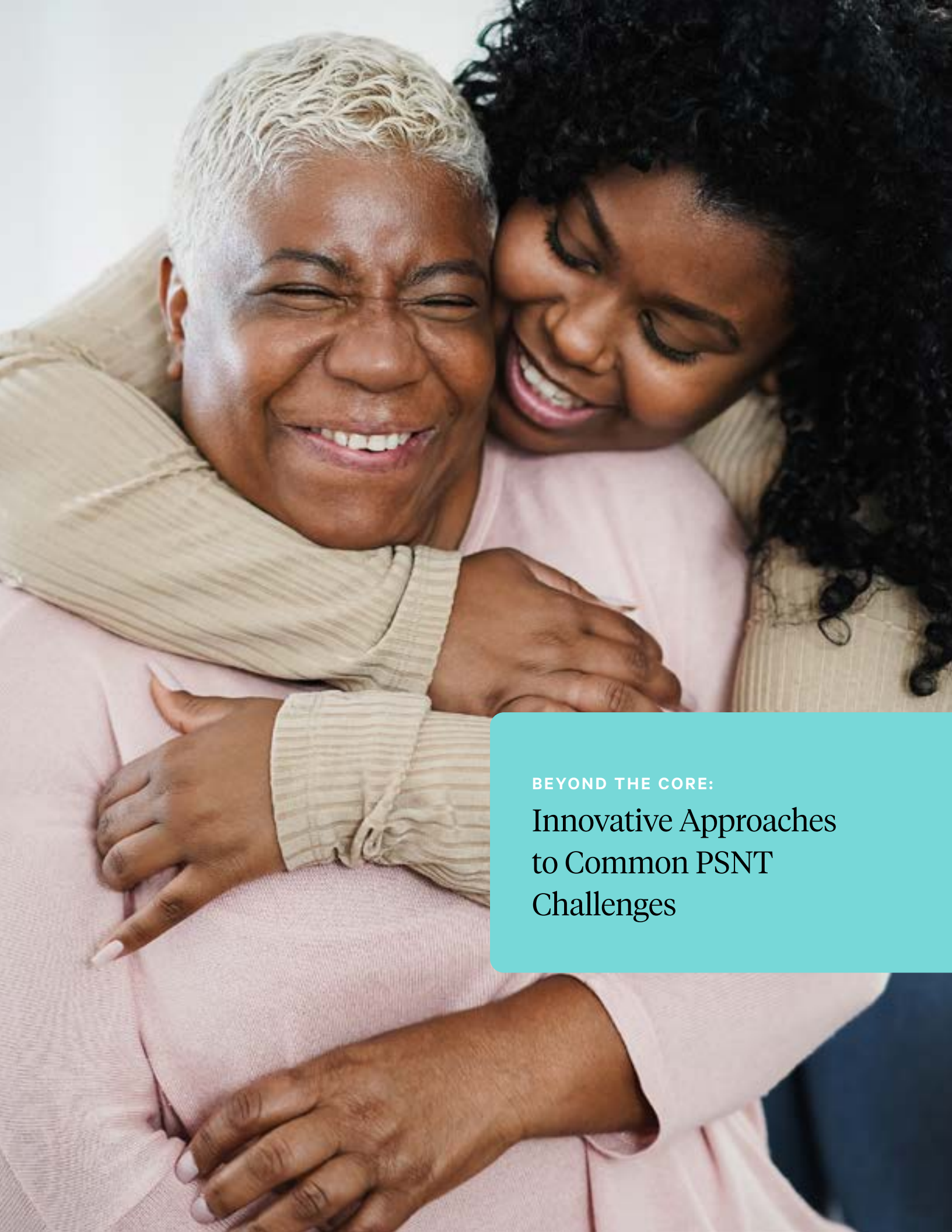
Note: This analysis excludes fees paid for trust administration and investment management, as well as final sub-account disbursements made at the closing of a sub-account.

Reflecting on Your Disbursement Patterns

If you are a pooled trust administrator, we hope this analysis helps you compare your disbursement patterns and processes to those of other PSNTs. We know each trust has its own approach to approving and processing disbursements, but here are some questions to consider as you evaluate your procedures:

- What information are you tracking about types of disbursement payments? Do you need more detail to track how funds are being used? Are you recording the information you would need for an audit?
- What types of disbursements do you make on a recurring basis? Would automating these payments save you time?
- What percentage of your payments are disbursed electronically? Is there room for you to gain efficiency by switching more payments to EFT or an administrator-managed prepaid card?

What surprised you the most about these trends? Our Director of Fiduciary Services, Peter Wall, would love to hear your thoughts: peter.wall@truelinkfinancial.com.



BEYOND THE CORE:

Innovative Approaches to Common PSNT Challenges



WISPACT CASE STUDY:

A Thoughtful, Clear Approach to Accepting Unique Assets in a Pooled Special Needs Trust

Unique assets can be complex to manage within a PSNT, but many beneficiaries and their families are looking for a trustee that offers this service. The most common unique assets that True Link sees placed in trusts are:

- Beneficiary-occupied real estate
- Auto liens
- Structured settlement annuities
- IRAs
- Commercial real estate¹

Establishing a clear policy

When Wispact established its PSNT in 2003, accepting unique assets was a key objective. But before Wispact partnered with Capital First Trust Company (“Capital First”) as their corporate trustee, getting everyone to the table was challenging – and even once the process began, it took time to go from a rough outline to a working draft to a final policy.

“It is a lot to ask a trustee to accept unique assets. While a corporate trustee like Capital First has final veto, it is ultimately

Wispact’s responsibility to develop the guidelines for accepting these assets. Establishing these requirements wasn’t a quick or easy process, but we knew there was a need out there we wanted to fulfill,” shared Eric DeGroot, Wispact’s Foundation Director.

When ironing out its Unique Asset Policy, Wispact first needed to agree on what types of assets would be accepted and what the requirements were for each type of assets. For example, for IRAs and life insurance there is a minimum value, and for residential properties there are conditions that vary depending on whether the property is being lived in by the beneficiary or held as an investment property.

As Eric DeGroot, Foundation Director, explained, “A rental property that costs more to maintain than it earns from rental income would not be accepted by the trust. This type of asset would be flagged as a potential money pit that doesn’t benefit the primary beneficiary and may violate our trustee’s fiduciary duties.”

Even with a clear policy in place, flexibility is key. Wispact was intentional about creating a policy that could meet the needs of a wide range of assets and beneficiaries.

“We designed our Unique Asset Policy to meet people where they are. We make sure Wisconsin practitioners understand that a case can be made for assets even if it doesn’t perfectly meet what’s outlined in our policy,” shared Kevin Hayde, Wispact’s Executive Director.

When Wispact and Capital First are deciding whether to accept a unique asset into a trust, one requirement must always be met, regardless of the asset type: the applicant must make the case that holding this asset benefits the beneficiary first and foremost.

As Hayde shared, “These pooled trust accounts are not intended for legacy planning or wealth transfers, so it’s very important you only take on an asset if it will benefit the primary beneficiary. If accepting an asset conflicts with your trust obligations, you simply shouldn’t accept it.”

“True Link’s platform helps us keep track of all the information. You can see every asset listed alongside investment holdings and other information. When we need to present information to our clients, True Link makes it easy for us.”

Tracking and managing unique assets

Wispact has found that managing unique assets for their beneficiaries is simpler when they can view all of the information in one place.

“True Link’s platform helps us keep track of all the information. You can see every asset listed alongside investment holdings and other information. When we need to present information to our clients, True Link makes it easy for us,” said Eric DeGroot, Foundation Director.

Once an asset has been accepted by the trust, Wispact also has a system for assessing whether retaining that asset continues to be in the beneficiary’s best interest. The policy establishes a schedule for regular review of life insurance policies, residential property conditions, other property value appraisals, and more.

The benefits of a Unique Asset Policy

Establishing a Unique Asset Policy has helped Wispact, its beneficiaries, their families, and referring attorneys in several ways.

“For starters, it helps us better communicate to families, beneficiaries, or attorneys which assets they can put into the trust,” Eric DeGroot, Foundation Director, shared. “They know what to expect when they come to us with a unique asset and how we will evaluate it. Our policy also makes reviewing these assets a more straightforward and organized process. It is easier to triage inquiries from new clients and avoid reviewing every asset on a case-by-case basis.”

Accepting unique assets also positions Wispact as a compelling option when a family or attorney is choosing where to place a beneficiary’s assets. Many of Wispact’s current clients chose to work with Wispact because it has a system in place to accept and effectively manage these assets.

Accepting and administering IRAs (the primary form of wealth for many Americans) is a particularly attractive offer for prospective clients. Many PSNTs avoid taking on the management of IRAs because the trustee is required to calculate Required Minimum Distributions (“RMDs”) and ensure that they are taken. This has become more difficult, especially when it comes to PSNTs and the SECURE Act.

“PSNTs are becoming more educated on how to accept and manage IRAs, but it still requires clear policies,” said Eric DeGroot, Foundation Director. In addition to requiring a minimum balance to accept an IRA (in most cases), if a beneficiary requests that Wispact withdraw more than the RMD, they must first consult with a tax professional to meet Wispact’s due diligence requirements.

Offering these unique (and often complex) services has enabled Wispact to reach more beneficiaries and help address more of their needs.

“Having these systems in place helps us stay aligned with our ultimate goal – are the decisions we are making demonstrably beneficial for the primary beneficiary? That is what matters,” shared Hayde.

¹ Wispact does not accept commercial real estate, but does work with other PSNTs that will.



SPRINGHILL CASE STUDY:

Supporting Beneficiaries with In-house Property Management Expertise

Deciding how to handle real property and homes for beneficiaries is a challenge for many PSNTs. The Springhill Pooled Accounts Trust (“Springhill”) has an advantage on this front because it’s part of the Community Housing Network, Inc. (“CHN”), a nonprofit based in Troy, Michigan.

CHN provides housing and housing resources for people who are homeless or facing homelessness, people with disabilities, people with low income, and other vulnerable residents of Southeast Michigan. This has enabled Springhill to rely on CHN to assess and manage real property for beneficiaries’ sub-accounts.

“Being a part of the Community Housing Network helps us provide specialized services above and beyond managing and distributing assets. By leveraging the resources and expertise of CHN, we can effectively meet the needs of our beneficiaries while maintaining a lean team at Springhill,” said Joanna Giglio, Director of the Springhill Pooled Accounts Trust.

An effective approach for managing real estate

Before Springhill will accept a beneficiary-occupied residence into the trust, CHN’s property manager will inspect the home with a licensed inspector and complete a Property Capital Needs assessment.

“We won’t accept just any property,” shared Giglio. “We need to understand what costs there will be over the next 15+ years and whether the sub-account will be able to maintain the property. Things like replacing the carpeting, repairing a roof, or installing new HVAC are big expenses we need to plan for. We also want

“Being a part of the Community Housing Network helps us provide specialized services above and beyond managing and distributing assets.”

to make sure the home is in good shape for the beneficiary – is it safe for them to live there, does it meet their short- and long-term needs?”

When Springhill accepts a home as part of the trust, the trust typically owns the home outright. After a beneficiary passes away, the home stays with Springhill and may be used to house others or sold, with the funds going back into the Springhill Housing Corp. to support other beneficiaries’ housing needs.

Helping beneficiaries and the broader community

Including a home in trust sub-accounts offers many benefits for Springhill’s beneficiaries. In Michigan, when a beneficiary pays rent to their trust on the trust-owned property, Springhill can subsequently pay utilities, taxes, insurance, and other housing expenses without these costs being considered In-kind Support and Maintenance.

Having a property management team “on call” also offers several advantages. For example, CHN has an existing network of vendors who are experienced in working in these homes.



“At the end of the day, we want to do what’s best for the beneficiaries and our broader community. Ultimately, our mission is to strengthen communities by connecting people to housing resources. Managing homes within our pooled trust is one way we work towards this goal.”

“You can’t just call any random contractor to work on the homes our beneficiaries live in. CHN’s list of approved vendors understand the accessibility needs of these homes and can quickly assess and address any problems – like installing a ramp to access the front door or creating a flat entry for the shower,” said Giglio.

CHN also offers a roommate database with general demographic information that makes it easier for beneficiaries in Oakland County, MI, and others in the local community to find appropriate co-housing situations such as group homes, etc.

“At the end of the day, we want to do what’s best for the beneficiaries and our broader community,” said Giglio. “Ultimately, our mission is to strengthen communities by connecting people to housing resources. Managing homes within our pooled trust is one way we work towards this goal.”



LIFE ENRICHMENT TRUST CASE STUDY:

Collaborating Effectively Across a Mission-Driven “Family” of Organizations to Provide Essential Services to Beneficiaries

While many PSNT nonprofits focus exclusively on the provision of trust administration services, some are embedded in organizations or organizational networks with other services for people with disabilities.

A network of services to empower individuals with disabilities

The Life Enrichment Trust (“LET”), part of the Passavant Memorial Homes Family of Services (“PMHFOS”), is just one example of a PSNT that draws on the resources of its broader organization to serve its beneficiaries.

“We work with a wide variety of beneficiaries who have a range of needs. Some may need minimal support, while others can face significant challenges navigating the disability system.”

“We work with a wide variety of beneficiaries who have a range of needs. Some may need minimal support, while others can face significant challenges navigating the disability system. Being a part of the family of services allows us to better match each individual with the services they need,” shared Michael English, LET’s Vice President of Trust Services.

PMHFOS offers several specialized services for individuals with intellectual disabilities, autism, and behavioral health needs, including:

- Property management services for trust-owned homes;
- 140 community residential homes with supported living services;
- Accessible dental services;
- Pharmacy services for those who serve individuals with intellectual disabilities; and
- Community education through the Passavant Foundation.

Like many PSNTs, LET provides case management as needed to beneficiaries, but even the most effective case managers don't have the expertise required to address every single need. Access to a network of services and experts across the family of services helps LET fill gaps in care for those it serves, without driving up costs.

"We were working with one beneficiary named Liam (name changed) who has several disabilities. The case manager was doing the best they could to support him but knew there were other services out there that could be useful," shared Marie Katz, LET's Vice President of Strategic Planning.

LET's team was able to leverage the knowledge and connections of the larger family of services team to have Liam re-evaluated by the appropriate doctors. Through this process, he received an updated diagnosis, which made him eligible for public services he didn't have access to before, including in-home care.

"Securing in-home care services for Liam was incredibly valuable," explained Katz. "Not only did Liam have access to a new level of support, but we were able to reduce case manager visits, which helped us spend less money from his trust."



Benefits of a well-connected organization

Beyond the individual benefits for beneficiaries like Liam, working closely with other members of the PMHFOS team has also made LET a more effective PSNT. "We can share information in real-time across teams, adapt to beneficiary needs, and respond to requests more quickly," said English.

"Working with other members of the PMHFOS community has been critical for helping us connect with more beneficiaries and provide better, more comprehensive services to those who need them most."

Further benefits of operating in this way include centralizing human resources for the whole organization and developing consistent training programs for everyone to learn new systems, like when PMHFOS made the transition from paper to digital processes.

LET is also able to connect with more beneficiaries because of the knowledge and services offered by other PMHFOS teams. As Katz shared, "We have a good relationship with PMHFOS's Representative Payees – they know when a beneficiary needs to move funds into the pooled trust to help protect benefits eligibility and can refer them to us."

Additionally, because PMHFOS's pharmacy and dental services support people with disabilities in ways that aren't found in the typical marketplace, they are often interacting with people who could benefit from a PSNT. In working closely with these individuals, they come to understand their needs, their current support systems and benefits, and more. If these teams see a need for LET's services, they'll connect the family to learn more.

"We're able to demonstrate that we understand their needs from before the first conversation because they already have a relationship with PMHFOS and have seen how much we care about serving people with disabilities," said Katz. "Working with other members of the PMHFOS community has been critical for helping us connect with more beneficiaries and provide better, more comprehensive services to those who need them most."



PLAN OF PENNSYLVANIA CASE STUDY:

Bringing Families Together Virtually to Build Connections in Challenging Times

With the arrival of COVID-19, PSNT teams were pushed to find creative ways to fulfill their missions without the ability to see each other or the people they serve in person. During this time, some organizations discovered that these new approaches unexpectedly proved to be even more effective and efficient than what their team had been doing previously.

See you on Zoom?

“Our biggest silver lining since March 2020 is an increased engagement with families,” said Christy Holland, Executive Director of PLAN of Pennsylvania (“PLAN of PA”). “For instance, formerly our Town Hall events were in person. Families struggled to attend despite their interest. The accessibility of the Zoom format rendered ten times the attendance. Families were more engaged, asking questions, and watching the recordings after the event. As an organization that was started by families of people living with a disability, family engagement is incredibly important to us.”

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After witnessing the success of the virtual Town Halls, PLAN of PA created “Family Connect,” monthly online support sessions for parents, siblings, and other loved ones to share their experiences and ask questions of those who understand their situation. Initially, PLAN of PA’s team set a theme and format for these gatherings, anticipating the facilitator would need to drive the discussion. But they soon found that the families were taking the lead, asking questions of one another and providing their own topics for discussion. The natural dialogue was so rich, the PLAN of PA team only needed to offer light facilitation.

Creating a space for connection

“We had only planned to offer Family Connect over the winter months, to combat the isolation of cold weather and health restrictions, but the families asked to keep it going. They wanted to share: this is who my child is, these are my struggles; they wanted to feel hope, to feel less alone, for someone to bear witness to their frustrations and pain,” shared Holland.

Common topics included:

- **Housing** - what’s available in their area, how you might be able to access it for your children, etc.
- **Benefits** - how others are navigating these systems, what’s been helpful?
- **Reactions from others** - adverse reactions from others in public or within your social circle, physical or emotional distancing from you and your child, etc.
- **Life milestones** - how to celebrate different milestones in your children’s lives and know they may not have the same experiences as other children (getting their driver’s license, going to college, etc.)

“At a time when the whole world was struggling with isolation and loneliness, these sessions were immensely valuable for these families, and for us,” said Holland.



“Family Connect has helped us to reach other families and beneficiaries we want to help; when they hear about how meaningful these sessions are, they want to learn more.”

Valuable for PLAN of PA, too

When people find such valuable connections in a community, they are likely to help spread the word. “Family Connect has helped us to reach other families and beneficiaries we want to help; when they hear about how meaningful these sessions are, they want to learn more,” shared Holland. She also notes that this sort of program requires little overhead, and its greatest value is creating a safe space for families to engage.

Family Connect conversations can also remind families of the case management PLAN of PA provides. If they mention a benefits issue or other concerns, PLAN of PA team members on the call can direct them to the right resources.

As Holland noted, “It also helps us to hear directly from the family what they really need. We’re always adapting our services to ensure we’re having a positive impact on those we serve.”



THE ARC OF TEXAS CASE STUDY:

Building a Network of Case Managers in Texas to Better Meet the Needs of Dispersed Beneficiaries

“We had people with more complex needs than we could meet with our standard services, and we needed to find a cost-effective and efficient way to help them,” shared Haley Greer, Master Pooled Trust Director at The Arc of Texas.

For PSNTs that seek to support beneficiaries beyond their core trust administration services, this challenge is quite common. While some organizations have built an in-house team of case managers to support their beneficiaries’ wellbeing, small teams and limited resources can make providing these services challenging. That’s where a creative, out-of-the-box solution is required. Case management (or “care management,” depending on the organization) is an area where many PSNTs are finding innovative ways to do more with less.

Combining an in-house specialist and local, on-the-ground case managers

In the case of The Arc of Texas, the solution involved a combination of internal and external resources: a Benefits & Resource Specialist and a network of case managers across the state. Because Texas is such a large state, hiring full-time, in-house case managers did not make sense for The Arc’s distributed client base.

“Being face-to-face with someone in their home is critical to helping us understand a beneficiary’s situation and needs. Working with local, on-the-ground resources has been an effective way for us to gain the context and details we need to better serve our clients,” said Greer.

Building an effective program

The Arc of Texas has relied on this model to provide case management for more than three years. Paying for a full-time Benefits & Resource Specialist from their remainder fund keeps them from passing along this expense to their beneficiaries. Anyone who needs help with benefits is sent to this Specialist; she walks them through the process, helps them apply, and can help speed along approvals in times of crisis. In Texas, the waitlist for certain benefits can last more than a decade, so expediting these processes is critical for The Arc’s clients.

The Arc of Texas has leveraged their network – companies they work with, people they meet at conferences, etc. – to find reliable case managers across the state. These individuals are often nurses or social workers who are matched to beneficiaries based on their experience and knowledge of the beneficiaries’ needs. The process

“Being face-to-face with someone in their home is critical to helping us understand a beneficiary’s situation and needs.”

of finding the right case manager for each beneficiary can be a matter of trial and error, and they may go through a few options before finding the right fit.

When a trust coordinator or the Benefits & Resource Specialist deems case management is needed, they work with the network of case managers to contract directly with the beneficiary. Greer said, “Creating relationships with our beneficiaries helps us understand their needs better. When we find that a beneficiary is struggling with something in their life, we enlist the care manager to investigate the situation to determine if the beneficiary needs additional services. The policy is kept simple because each beneficiary’s situation is unique. We have had beneficiaries living in unstable or dangerous housing, beneficiaries who need help finding appropriate local services, beneficiaries who aren’t getting the help they need from the people who should be providing it, etc.”

“There’s a shared responsibility between the beneficiary and our organization,” said Greer. The beneficiary has to give permission to contract with the case manager and sign certain releases, and both parties (the beneficiary and The Arc of Texas) sign an agreement for payment to be made to the provider from the trust.

How case managers can change lives

The impact of case management on beneficiaries’ lives is most evident when organizations like The Arc of Texas share personal anecdotes. “We had a client Dana (name changed) who came to us after suffering a Traumatic Brain Injury,” Greer shared. “After working with her for two months, we noticed she was calling in a lot, often confused, and struggling to pay bills for food and housing.”

Concerned about her wellbeing, The Arc of Texas worked with Dana to arrange for a case manager to visit her home. This helped uncover that she was living in unhealthy conditions, struggling to take care of herself, and in need of additional support. The local, experienced case manager took the time to build a relationship with Dana and gain a better understanding of her needs: what was triggering her episodes of confusion, why bills weren’t getting paid, and what was causing her stress.

With The Arc of Texas, the case manager worked with Dana to:

- Allow someone into her apartment to help with cleaning;
- Find her a place to live closer to her friends;
- Get set up with GPS to help with navigation and avoid getting lost;
- Pay bills directly from the trust and use a True Link Visa Card for some approved purchases;
- Purchase a car so she can meet friends, run errands, etc.

Today, her case manager remains available when Dana needs support but is called on less frequently than when they first started working together. As Greer detailed, “It’s remarkable to see how much Dana’s quality of life has improved over the last few years; I’m so glad we were able to connect her with the resources she needed.”



A positive impact across the board

This approach to case management has also helped The Arc’s coordinators to process disbursements more efficiently for all of their beneficiaries. “Before we implemented this system, clients with a variety of requests and needs would call our two coordinators for help. Responsible for processing disbursements for more than 2,000 beneficiaries, our coordinators found it difficult to handle these calls as they were completing their other critical responsibilities,” explained Greer. “This model of case management allows our team to focus on their key tasks while better serving our clients in a cost-effective way.”



GOLDEN STATE POOLED TRUST CASE STUDY:

Leveraging Local Experts to Bring New Services to Beneficiaries with Mental Health Challenges

The Golden State Pooled Trust (“GSPT”) serves beneficiaries throughout California with a variety of needs and life situations. Some of these individuals, especially those with mental and behavioral health needs, don’t always have extensive support systems in place. When looking for how to help connect these beneficiaries with the resources they needed, GSPT decided to explore how it could help its beneficiaries access existing local and regional resources.

Leaning on local experts to enable more independence

Based in Northern California, for GSPT, this meant turning to agencies across California in the Independent Living and Supported Living Services (“ILS/SLS”) field. GSPT focused its outreach on regional agencies that help adults with intellectual/developmental disabilities establish and maintain safe, stable, and independent lives¹.

“We wanted to support our beneficiaries with mental and behavioral health challenges who needed some extra help but didn’t necessarily require a full-time social worker. GSPT (along with

East Bay Innovations, Bayberry Inc., and Integrated Community Services) was involved in the creation of LifeTrust Care as a way to provide services, like case management, it didn’t have access to before. GSPT didn’t need to develop a completely new program; the resources already existed,” shared Stephen Dale, Trustee of GSPT.

This has been especially valuable for beneficiaries with behavioral health issues, who traditionally cannot access ILS/SLS services in California. Under the LifeTrust Care program, these valuable services are now accessible to them, helping GSPT beneficiaries have a better quality of life.

“It’s not only the experience of these individuals that’s valuable, but also their connections and network.”

Staff from the ILS/SLS agencies help GSPT’s beneficiaries in many ways, but it all starts with gaining an understanding of their needs and living conditions. Once an ILS/SLS case manager has met with the beneficiary, they’re able to identify the ways they can train or assist this individual to gain more independence. Because the ILS/SLS case managers are assigned regionally, they can meet with beneficiaries in their homes, allowing GSPT to gain additional insight into the needs of the people they work with, without having to travel hundreds of miles.

“For some regional PSNTs, 90% of their beneficiaries live within an hour or so from their office, but in GSPT’s case, 99% of those we serve are far away from our office and spread out across the state,” said Dale. “Even if it was financially feasible for us to have full-time case managers, it wouldn’t make sense given our location.”

Some of the ways these professionals help GSPT’s beneficiaries include:

- Teaching them how to grocery shop and make simple meals;
- Purchasing items with a True Link Visa Card and collecting receipts for GSPT;
- Attending medical or dental appointments and serving as a patient advocate;
- Accompanying them to the Social Security office and taking notes; and
- Providing financial literacy to empower more informed decision-making.

“It’s not only the experience of these professionals that’s valuable, but also their connections and network. We were having a hard time placing someone in Section 8 housing and kept running into roadblocks. Because the LifeTrust Care folks know how to advocate for this support and get in touch with the right people in their communities, they were able to bypass standard waiting periods and get the individual into housing,” Dale shared.

A mutually beneficial relationship

Beyond bringing valuable resources to beneficiaries, the LifeTrust Care model also benefits GSPT as an organization. By not needing to bring on full-time social workers or hire case managers, the trust can help beneficiaries access a higher quality of care with a limited budget. Additionally, by working with staff from these agencies, GSPT can be confident their beneficiaries are getting high-quality care from professionals who have been vetted and trained by their agencies.



LifeTrust Care has also allowed GSPT to help beneficiaries with complex needs who require more hands-on support. “We want to be able to support anyone who needs us, but we believe that if a PSNT can’t serve someone effectively, it shouldn’t take their case on,” Dale emphasized. With LifeTrust Care, GSPT has been able to serve individuals they might have had to turn down without these resources.

This sort of relationship not only benefits the beneficiary and the PSNT, but also the agency and the broader community of people with disabilities that it serves. “These agencies and services are often underfunded programs that struggle to stay afloat. By providing an additional income stream, we’re able to help support their essential work in the community beyond our own beneficiaries,” Dale shared.

Ultimately, while resources for ILS/SLS vary from state to state, GSPT’s success with LifeTrust Care can act as a model for other PSNTs across the country. As Dale said, “This is a model that’s worked effectively for our trust, and I’d encourage other PSNTs to see if there are local partners they could work within a similar way.”

¹ <https://www.dds.ca.gov/consumers/independent-living-skills-supported-living-services/>



COLORADO FUND FOR PEOPLE WITH DISABILITIES CASE STUDY:

Developing a Robust Case Management Team to Address the Needs of Every Beneficiary

While many PSNTs focus strictly on providing trust administration services, for some PSNTs, providing case management services to their beneficiaries is a critical part of their strategy. The model for offering these services, however, varies significantly from organization to organization. For the PSNTs that do offer case management, on one end of the spectrum are those that lean on external resources on an as-needed basis; on the other end are those that hire full-time staff to provide case management to everyone they serve.

Assigning a case manager to every beneficiary

The Colorado Fund for People with Disabilities (“CFPD”) is an example of a PSNT that’s developed an effective approach to providing case management services to all its beneficiaries with a team of full-time case managers on staff.

“Case management is deeply embedded in the work we do and has been from Day 1. At CFPD, we believe these services are essential for people with disabilities who have unique needs, particularly related to government benefits,” shared CFPD’s Executive Director Megan Brand, who started as a case manager at the organization.

When a trust is funded, each beneficiary is assigned a case manager. They review the beneficiary’s profile and set up a meeting with that individual and anyone else the beneficiary wants to include in the conversation. During this meeting, several important topics are discussed, including:

- Current living situation
- Medical needs and accessibility concerns
- How the beneficiary’s disability impacts their life
- Educational background and vocational experience
- Passions, hobbies, and other recreational interests

In some cases, the case manager might work with the beneficiary to create a budget and discuss what the trust will cover, what the individual will pay for, etc. As Brand shared, “This way, we can refer back to this document later on and explain, ‘Your new request doesn’t align with what we talked through together; if we do approve this request, we won’t be able to purchase these others things you wanted.’”

After this first required visit¹, case management is offered on an as-needed basis. CFPD's goal is to keep each beneficiary assigned to the same case manager to help establish a strong relationship and make it easier to detect changes in behavior or other red flags.

"Beneficiaries can often be victims of exploitation, so visiting the home and getting to know the beneficiary really helps us identify concerning situations," Brand said. "We had one beneficiary Aaron (name changed) who started submitting large Costco receipts at the same time we saw his utility bills skyrocket. His case manager made a visit to the home and discovered a life-threatening situation."

Upon arriving at Aaron's home, the case manager discovered seven other people living in the house along with a variety of illegal drugs. To make matters worse, the house had been dangerously rewired to accommodate these individuals, and one person was living in the garage with multiple space heaters. "There were several fire hazards in the home, and it was clear to our case manager that this was not a safe or healthy place for Aaron to stay," Brand detailed. "We were able to get him out of this situation and put additional safeguards in place to help protect Aaron from being exploited again."

One of the major responsibilities of the case managers is to help identify and apply for public benefits for which their beneficiaries may be eligible. "Taking advantage of available benefits programs helps put less pressure on the trust to fund everything," explained Brand. Case managers may also coordinate in-home service providers, make larger purchases, or assist in moving from one home to another.

A unique aspect of this case management program is that individuals are not required to have a trust with CFPD to take advantage of this service. A family member trustee can contract with CFPD on a fee-for-service basis to act as another set of eyes and ears for their loved one. The PSNT also advises other trust companies or non-professional trustees, helping them with anything from conducting a short-term benefits analysis to acting as an administrative trustee and taking on disbursement management. Offering these services a la carte benefits CFPD too. After families experience CFPD's quality of care, they often name CFPD as successor trustee, or they may even decide to make CFPD trustee.

How CFPD makes it work

Running an in-house team to handle case management for all beneficiaries is no small feat, but CFPD has honed its approach to make it happen in a sustainable way.

It all starts with how beneficiaries are assigned to case managers. Each manager has a caseload of 100 to 120 individuals. Some beneficiaries never make a request of their managers, some reach out occasionally for help with specific tasks, and some require more frequent support. "Based on a beneficiary's profile and initial assessment, we can typically assess how challenging or complex their needs may be," said Brand. "We try to spread these complex cases out, so the workload is as even as possible across our team."

CFPD's team is mostly full-time and based in Denver with some contractors in places like Fort Collins and Colorado Springs. Because much of Colorado's population is located in the greater Denver metropolitan area, full-time team members can travel to beneficiaries' homes (when it is safe to do so). Brand notes that hiring in-house case managers can be challenging because "case managers with trust experience are nearly impossible to find." She recommends looking for people with strong attention to detail, a desire to work with numbers, and experience working with people with Intellectual/Developmental disabilities or mental health challenges. "You can train people on the trust part of the job," Brand said.

Creating a sustainable funding model for its case management services has also been critical to CFPD's success. CFPD draws on a combination of funding sources to make these valuable services possible.

As Brand emphasized, "Case management is core to what we do and has such a clear impact on the lives of our beneficiaries. We're proud to be able to offer this service to everyone who chooses to work with us."

¹ Before COVID-19, CFPD preferred to have these meetings in the beneficiary's home.



PLANNED LIFETIME ASSISTANCE NETWORK OF NEW JERSEY CASE STUDY:

Crafting a Holistic, Person-Centered Life Plan to Guide Case Management and Trust Administration

In addition to administering pooled and individual Special Needs Trusts, Planned Lifetime Assistance Network of New Jersey (“PLAN|NJ”), has always prioritized providing intensive case management services.

“When our founders established PLAN|NJ they recognized that many people with disabilities didn’t just need trust administration; they need lifelong support. Our goal in offering case management and advocacy services is to provide a circle of support that helps anticipate challenges before they become crises,” said Ellen Nalven, Executive Director of PLAN|NJ. PLAN|NJ also serves as a Representative Payee for Social Security benefits, legal guardian, and power of attorney.

The impact of Life Planning

Before PLAN|NJ begins working with a new beneficiary, they guide the family through the design of a comprehensive plan – a LifePLAN. This plan, which is updated regularly, encompasses the legal, financial, home, and community supports that are required to help their loved one thrive.

“The goal of Life Planning is to enable the person to achieve the highest level of independence and experience the best life possible. For people with disabilities, everyone has a ‘plan’ for their services – things like Individualized Service Plans and Individualized Education Plans. But these plans aren’t person-centered; they are more about outlining the services being provided,” explained Nalven. “Instead, we develop a comprehensive understanding of who the person is, starting from their strengths and capabilities, likes and dislikes, goals and aspirations.”

PLAN|NJ’s LifePLANs are created to be holistic documents and include information on:

- Gifts and talents, current interests and hobbies;
- Hopes and wishes for the future (the individual’s and the family’s);
- Education and work experience;
- Resources that a person has, needs, or would benefit from;
- Housing and employment recommendations;
- Legal and financial protective arrangements; and
- Friends, family, or others who will help implement the plan.

“You need to start with a comprehensive story about the person. We represent a lot of people who may not speak up for themselves. We need to understand their backgrounds and know them well,” emphasized Nalven. “Our LifePLANS are unique because they are highly personalized. We often think of them as a combination of biography, vision statement, and instruction manual.”

Families don’t need to have all the answers to these questions from the beginning. Getting started can be the hardest but most important step. Housing is one area where PLAN|NJ works closely with families to help them get a sense of what might be the right fit. They talk through what the ideal setting or location would be, how much support or supervision is needed, whether roommates or in-home care would be appropriate, and the risks and benefits of various options.

“Talking through legal and financial needs is another area where our expertise can provide a lot of value,” shared Nalven. “Will an individual rely on publicly-funded services or benefits? Do they need help qualifying for those benefits? Will they have a Special Needs Trust, an ABLÉ account, or both? Do they have a power of attorney or health care proxy, or is guardianship recommended? A family may come to us for trust administration, but that may not be all they need to decide.”

“The goal of Life Planning is to enable the person to achieve the highest level of independence and experience the best life possible.”

Using the LifePLAN to provide proactive support

LifePLANS are updated as an individual’s life changes. While these plans can and do inform how PLAN|NJ handles trust administration, case management, and more, families who develop a LifePLAN are not required to sign up for pooled or individual Special Needs Trust Administration, Guardianship, or Representative Payee services.

Once a LifePLAN is created, families can opt into Advocacy and Home Visit Monitoring – even before a trust has been funded. With this service, one of PLAN|NJ’s case managers, called a Service

Coordinator, will be assigned to visit the home of the individual once a month and build a trusting relationship – this is true whether someone is in a home with 24/7 supervision or with limited support. Having eyes on the individual makes it easier to identify any areas of concern before they become more serious issues. The Service Coordinator can provide crucial feedback to family members who live out of state and may be unable to visit. The Service Coordinator can also function as an emergency contact for both the beneficiary and their family to contact if the need arises.

PLAN|NJ’s Trust Coordinators and Service Coordinators collaborate closely, which can help expedite essential requests. For example, if a Service Coordinator realizes during a visit that the beneficiary needs a new coat, they can contact the Trust Coordinator to find out what the budget should be. Then, on the same day, the Service Coordinator can take the beneficiary to select the coat and submit the receipt to document the purchase.

Taking on the responsibility from more families

PLAN|NJ is always seeking to reduce the cost of its services by applying for grants, requesting donations, and leveraging other public funding sources. In the past year, PLAN|NJ served as pro bono legal guardian for eight individuals and provided advocacy and home visits to 60 additional people who live with disabilities, at no cost to them, helping them navigate the complex social service system and obtain needed medical care, housing, and educational services.

Ultimately, PLAN|NJ wants to help families feel less alone as they determine how best to support their loved ones. PLAN|NJ staff recently wrote a LifePLAN for Ben (name changed), who lives with his aging mother in his family’s home. He told his mom that he is frightened about how he’ll manage if something happens to her. After meeting PLAN|NJ’s case managers, he feels much more relaxed knowing he has someone to call in an emergency, someone who will help him retain his home, job, and hobbies when his mother is no longer able. As Nalven shared, “Families come to us uncertain about what will happen after they are gone. They ask, ‘Who is going to do what I do?’ We can take on the weight of the work from the family and help them feel more supported. After all, there’s nothing more important than knowing someone cares about your child and will make sure they are okay for the long term.”



FIRST MARYLAND CASE STUDY:

Stepping up to Serve Foster Children and Helping Them Build Up Their Savings

Because of their unique nature and the oversight systems they already have in place, PSNTs are often approached by government agencies to help identify and create solutions to new or persistent challenges. This was the case when state officials approached First Maryland Disability Trust (“First Maryland”) to help manage accumulating Social Security payments for children in foster care.

Stepping up to the plate for foster kids

In 2018, the State of Maryland began providing more support for the cost of care for foster children under the age of 18. This means that foster parents don’t have to rely solely on Social Security payments to pay for food, clothes, and other basic needs for their foster children; instead, the money from the state covers the majority of these expenses.

However, this new funding didn’t reduce the Social Security benefits for these children. The state wanted to use these accumulating funds to build up some savings for the children before they aged out of the foster care system. For a foster child without robust family support, a small financial cushion as they move toward independence can have an enormous impact on their

ability to succeed as adults. Critically, the State of Maryland wanted to ensure that these children didn’t lose any benefits as a result of these assets.

“Government officials came to PSNTs in Maryland for help managing these new accounts, and we wanted to do our part,” shared Denise Fike, Executive Director of First Maryland.



Adapting to the needs of a new beneficiary community

In order to best serve this group, First Maryland thought creatively about how to invest assets, manage funds, and handle other unique aspects for these individuals and their accounts.

First Maryland works with the individual and their foster parents to establish a budget. Occasionally, funds may be used to pay for a computer for school or other educational needs, but the account is intended to be a nest egg for the child after they turn 18. Disbursement requests are handled in the same way as they are handled for other beneficiaries in the pooled trust – requests are submitted to the First Maryland team who reviews and determines whether to approve or deny the requests.

First Maryland’s experience and relationships across the state enable their team to leverage additional resources like access to a social worker or housing services. Even if an individual moves to another state after the age of 18, the organization goes above and beyond to connect the individual to resources in their new area.

“We can give them an idea of what they need to be doing to settle in a new place, refer them to a local or national pooled trust, and connect them to services they might need.”

Many of the foster children First Maryland serves want to move out of state after they turn 18. Even in these cases, First Maryland wants to make sure these young people get started on the right foot in their new homes. “We will do what we can to help, wherever they move,” shared Fike. “We can give them an idea of what they need to be doing to settle in a new place, refer them to a local or national pooled trust, and connect them to services they might need.”



Prioritizing meeting the community’s needs

Now, First Maryland works with more than 100 foster children clients and brings on two to three new accounts every month. These individuals tend to come to them as referrals from Departments of Social Services in local counties, though some are referred directly from the state.

These clients generally have smaller accounts with shorter timelines than a typical First Maryland beneficiary, so the administration fees don’t fully cover the cost of providing the services. But that’s not why First Maryland does it. As Fike puts it, “At the end of the day, it’s a service we can offer – we know there is a need we can meet.”



COMMONWEALTH COMMUNITY TRUST CASE STUDY:

Establishing New Processes and Systems to Support Beneficiaries of Military Families

When the *Carl Levin and Howard P. “Buck” McKeon National Defense Authorization Act* was passed by Congress in 2015, military members, both currently serving and retired, were finally allowed to direct payments from a Survivor Benefit Plan (“SBP”) Annuity to a Special Needs Trust for the benefit of a dependent child who has special needs.

“Before 2015, you either had to disinherit your child from your SBP payments or name them to receive the SBP payments and risk jeopardizing their public benefits. This put families in a difficult position, and we’re glad the law was changed to better support these special needs dependent children,” said Karen Konvicka, Director of Client Services and General Counsel of Commonwealth Community Trust (“CCT”).

Spreading the word and establishing clear processes

Since the law was changed, CCT has stepped up to offer a Military Survivor Benefit Plan Pooled Special Needs Trust to many military families. To offer this important service, CCT had to develop new processes and provide education and guidance to families in the community, attorneys who support them, and government agencies.

“Our first year offering these types of trusts required a lot of patience. We had to develop a new process with the Defense Finance and Accounting Service (DFAS) to get 1099-Rs issued correctly,” shared Cheryl Carlyon, CCT’s Director of Finance and Operations. “Since this was their first time processing these types of trust designations, we needed to provide clear explanations of how pooled trusts work and submit special paperwork. Today it is a much smoother process than it was six years ago.”

“Before 2015, you either had to disinherit your child from your SBP payments or name them to receive the SBP payments and risk jeopardizing their public benefits.”

There are several steps to ensure the SBP election is processed properly. CCT walks each new joinder through the process:

1. A member of the military must first decide to participate in the SBP with DFAS.
2. Then, they need to make their preferred election with DFAS: Spouse and Child or Child Only coverage under the SBP¹.
3. The military member can then work with CCT (or another pooled trust) to create the trust and name their child as beneficiary.
4. The trust must be funded before the military will acknowledge the existence of the trust.
5. Finally, the military member must provide DFAS a written statement of their decision to have the SBP Annuity paid to the trust. This statement must include the name of the dependent child, the name and Taxpayer Identification Number for the trust, and a Special Needs Trust certification letter from a licensed attorney.



“The initial funding requirement of the trust was a challenge, and we looked to True Link’s team and trust accounting system for help. While the military member is still alive, SBP benefits aren’t being paid into the trust, so there is no corpus for the trust, and DFAS did not recognize the trust as valid,” Konvicka explained. “To meet the DFAS requirement that the trust be funded, CCT accepts funding of just \$10 at the time of enrollment. True Link helped us customize these accounts to waive all fees until payments start funding the trust.”

“The initial funding requirement of the trust was a challenge, and we looked to True Link’s team and trust accounting system for help.”

A real benefit for those they serve

The CCT team put in a lot of effort to enable military families to support their children with special needs without worrying about compromising their public benefits. This is particularly valuable because, for many of these families, a PSNT may be their only option.

“We aren’t talking about large lump sums of money here – these monthly payments are based on 55% of a military member’s base pay, which can range from \$300 up to a maximum of full retired pay. This amount isn’t compelling for many financial institutions that require much higher minimums to start a trust. We can waive our own minimum requirements because of the unique nature of these trusts – we can count on, and plan around, a regular monthly payment,” said Carlyon.

Smaller account sizes can also require additional planning to help the beneficiaries cover their monthly needs with limited assets. But to Joanne Marcus, CCT’s President and CEO, the extra effort is worth it: “Our team is proud to be able to offer these services to military families. This was a huge oversight, and now that there is a solution, CCT is happy to be able to help out however and whenever we can.”

¹ Note: In these cases, Special Needs Trusts can currently only be used for children with special needs, not spouses, even if they have a disability.



ADVOCATES AND GUARDIANS FOR THE ELDERLY AND DISABLED CASE STUDY:

Utilizing Pooled Income Trusts to Help Older Adults Qualify for a Medicare Savings Program

“Why can’t we use a pooled trust for income and not just assets?” This was the question that put Advocates and Guardians for the Elderly and Disabled (“AGED”) on the path to managing Pooled Income Trusts. AGED wanted to help people cover their day-to-day medical costs – things like copays and prescription medications – and they were looking for creative ways to use the framework of the trust to do so.

Today almost 25% of AGED clients shelter their income through the Pooled Income Trust to become eligible for the Qualified Medicare Beneficiary (“QMB”) Program¹.

What is the QMB Program?

The QMB Program is a Medicare Savings Program for people who have Medicare and may need Medicaid to help reduce medication costs and health care copays. QMB reduces the cost of medications and typically covers Medicare Part A and Part B premiums, as well as deductibles, coinsurance, and copays. The QMB program details differ by state, but like all Medicaid programs, income and resource limits must be met for someone to qualify.

AGED is located in Florida where PSNT sub-accounts may be established for individuals over the age of 65 under certain circumstances.² Typically, the QMB Program is used by individuals and couples over age 65 who are living at home or in assisted living

facilities. This made the program particularly appealing to the AGED team, who realized that people outside of nursing facilities could get help to cover their medical costs.

Where do Pooled Income Trusts come in?

AGED also realized that not everyone who might benefit from the QMB Program knows about it, and many of those who do know about it assume they won’t qualify. If an individual’s income or assets exceed the limits for the program, the individual is disabled, and the individual has medical conditions that prevent them from working in gainful employment for a period longer than 12 months, they may be able to deposit excess income into a Pooled Income Trust to qualify for QMB in states that allow this. Setting up such a sub-account may allow a beneficiary to place their overage income or resources into the trust, making this overage no longer “countable” for Medicaid purposes.

Here’s an example from AGED about how this works:

Jim (name changed) is a 82-year-old retiree living in North Florida, who relies on several different medicines for various illnesses. A passionate hobbyist fisherman and devoted grandad, he receives \$1,800 per month from Social Security. With this income, he can’t afford his monthly medication co-pays, his rent, and his weekly grocery bill. At the same time, he doesn’t qualify for the QMB Program to access Medicaid, because his income exceeds the \$1,078 income limit³.

If Jim opens a Pooled Income Trust sub-account and places \$800 into the trust each month, Florida Medicaid only “counts” him as having \$1,000 in monthly income. This means he gets access to discounted medications and co-pays, and he can afford the groceries that he needs every month.

How AGED can provide this benefit

AGED’s initial query of “Why can’t we use a pooled trust for income and not just assets?” turned out to be a question for the State of Florida. AGED consulted with government officials to confirm that income could be transferred into a Pooled Income Trust – something that every PSNT organization in Florida may now benefit from.

A next step in helping beneficiaries qualify for the QMB Program was supporting people in the Medicaid application process.

“We believe that if someone is not working with an attorney and can’t afford to hire a professional to help with their Medicaid application, we should – and will – help them. Once their account is open and funded, an AGED Medicaid Specialist collects all the documents necessary for qualification and submits everything to Medicaid,” shared Sharon Reich, Senior Trust Advisor for AGED. To manage the high volume of applications, they have two Medicaid Specialists on staff.

AGED covers the costs associated with providing these services in two ways:

1. By charging a flat fee for QMB income-only clients. This fee is less than the Medicare Part B premium. This means that once the client qualifies for QMB, and their Medicare Part B premium is paid, that savings more than offsets the AGED fee, making the service affordable. In addition, the client’s out-of-pocket medical expenses go down.
2. Through a contract with the State of Florida paying for half of one of the State’s Provider-Funded Medicaid Case Workers. To secure this position, AGED was asked to submit a whitepaper outlining how this position would help them serve more Medicaid recipients more efficiently, thus saving Medicaid time and money too.

By submitting their beneficiaries’ Medicaid applications directly through this Medicaid Case Worker, AGED can get applications processed more correctly and efficiently. Before AGED stepped in to help, many beneficiaries were trying to complete their applications on their own and were getting denied because of Medicaid processing issues related to approving the Pooled Income Trust. Generally, when a Medicaid application is submitted, it goes to a pool of processors who may or may not know about the pooled trust regulations. If the processor doesn’t know the regulations, they may wrongfully deny an application. With AGED’s provider-funded position, Medicaid applications for AGED beneficiaries go to one person who understands Medicaid’s rules surrounding trusts. This speeds up the application

process tremendously. Applications that used to take three months for approval, on average, can now take a month or less with the provider-funded position.

Pooled Income Trusts remain a driver for reaching and serving more people

“Our clients love the help we give them and tend to work with us for quite some time because they get a lot of value from their QMB benefits,” said Reich.

Offering Pooled Income Trusts to facilitate QMB qualification has become a key, marketable benefit of working with AGED. While other PSNTs offer this service, few are using it as a primary way to reach and assist new beneficiaries.

AGED puts a lot of effort into community awareness and education, sharing information about QMB with assisted living providers, insurance agents, social workers in hospitals, and Elder Law attorneys who may be unaware their clients could qualify for this program. Elder Law attorneys find the option for Pooled Income Trusts to be attractive because the funds are protected, and money is being used for the sole benefit of the individual.

Additionally, “our QMB clients have really taken off because of referrals from insurance agents,” Reich shared. “These professionals are talking to people about their Medicare plans and know if they can’t afford their copays and could benefit from QMB. We make sure they know about how the Pooled Income Trust may reduce countable income for Medicaid qualification purposes.”

In many cases, these are not individuals who would have considered a PSNT otherwise. By spreading the word about using Pooled Income Trusts for QMB, AGED has created a new source of beneficiaries – all while helping individuals qualify for the benefits they need and deserve. For these beneficiaries, the use of the trust means they don’t have to face harrowing decisions, like choosing between buying food or much-needed medicine, which increases their quality of life exponentially.

“There is just a huge number of clients who need QMB help in Florida – those who are over 65 and on Social Security, and those who are under 65 and on Social Security Disability Insurance,” emphasized Reich. “And we will continue to spread the word about the program and how Pooled Income Trusts can help.”

¹ The Income Trusts referred to herein only refer to Pooled Income Trusts where income is deposited monthly to reduce a beneficiary’s countable income for Medicaid qualification purposes.

² As of the time of this publication, there may be some upcoming changes related to over-65 PSNT joiners in Florida, and an individual should always check their local regulations for proper compliance.

³ This is the limit as of January 2021 in the State of Florida.

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