

## **Value Proposition How-to Guide**

### **Developing Your Value Proposition for Benefits Counseling and Enrollment Assistance**

According to the U.S. Census Bureau's 2025 report, poverty among older adults continues to rise, reaching 15 percent.<sup>1</sup> Unfortunately, many older adults eligible for public benefits programs are not enrolled, leaving over \$30 billion unclaimed.<sup>2</sup>

Many states have robust systems of access to services supported by a state-level governance structure that promotes strong coordination between aging, disability, and Medicaid programs. This framework is called a No Wrong Door<sup>1</sup> system and operates through local level entities, including Area Agencies on Aging (AAAs), many of which also function as Aging and Disability Resource Centers (ADRCs).

AAAs and ADRCs play a vital role in supporting older adults and individuals with disabilities who have limited incomes and resources. They offer benefits counseling and enrollment assistance, which helps increase awareness of cost-saving options and empower older adults to maintain or improve their health. By providing access to essential health care services, prescription medications, and food assistance programs, enrolling in eligible public benefits allows older adults to stay healthy, independent and allows them to age in their communities.

AAAs and ADRCs have a unique opportunity to offer benefits counseling and enrollment assistance to health plan members. In addition to the beneficiary benefits described above, health plans receive a risk adjustment - i.e., a higher capitated rate for individuals enrolled in Medicaid.<sup>3</sup>

This Value Proposition How-to Guide is designed to help you develop a compelling case for partnering with a health plan to offer benefits counseling and enrollment assistance.

#### **What is a Value Proposition?**

A value proposition describes how your organization will provide benefits counseling and enrollment assistance, while protecting client rights, addressing risks, and safeguarding client data. It also demonstrates the effectiveness of your services. A persuasive value proposition serves as the foundation for negotiating a profitable contract with a health plan. It must be carefully crafted to convince the plan of the value in forming a partnership and contract with your organization to provide services to their members.

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## Elements of A Strong Value Proposition

- Clearly explains how your services meet the needs and goals of the health plan and its members.
- Demonstrates your understanding of health plan members' needs by referencing data from your area plan, ADRC marketing plan or streamlined access plan, and other sources.
- Describes your communication strengths and health plan member outreach plan.
- Showcases your achievements in benefits counseling and enrollment assistance and explains how these successes can benefit the health plan.
- Details how your program can provide a positive return on investment (ROI) for the health plan.
- Communicates what sets your AAA's and ADRC's services apart from competitors.

## Sample Value Propositions

Below are examples of value propositions that illustrate how to present services to a health plan. Use these as models when drafting your own value proposition.

### Example 1

Last year in our state, \_\_\_\_\_ people lost their Medicaid coverage because they failed to complete their recertification forms on time, meaning they couldn't see the doctor or afford their medications. We have a \_\_\_\_\_-year track record of providing comprehensive and effective benefits counseling and enrollment assistance to \_\_\_\_\_ [estimate how many] older adults, people with disabilities, and caregivers in our community, and helped \_\_\_\_\_ with their Medicaid applications and renewal forms. Many of your members are familiar with our AAA/ADRC because they have used our services and have come to rely on us as a valued and trusted source of information. Through a combination of \_\_\_\_\_ communication and outreach strategies, we can help your members complete their Medicaid recertification paperwork on time, thereby ensuring that they have continuous coverage and stay enrolled in your plan.

### Example 2

According to recent data from \_\_\_\_\_, there are \_\_\_\_\_ number of people in your plan's service area who are eligible for but not yet enrolled in the Medicare Part D Extra Help. Many of your members are familiar with our AAA/ADRC because they have used our services and trust us as a reliable source of information. Our benefits counseling and enrollment assistance team has a combined experience of \_\_\_\_\_ years in public benefits counseling and enrollment. Last year, they successfully enrolled \_\_\_\_\_ people in public

benefits programs through various outreach methods, including \_\_\_\_\_. For example, Charlie B., one of our clients with heart disease, struggled to afford medications to treat his condition, which often led to hospital stays. We helped him complete the Extra Help application assisting him with his prescription costs, and now he can afford his heart and other medications, reducing his hospitalizations from four in 2023 to zero in 2024. Additionally, because we knew he was eligible for Extra Help, we assisted him in enrolling in other benefits such as farmer's market vouchers, helping him afford his favorite fruits and vegetables, which further improved his overall health and quality of life.

## Guiding Questions for Developing Your Value Proposition

The following guiding questions are included in the accompanying **Value Proposition Worksheet**. Additional suggestions and resources have been provided below to assist your organization in thinking through the questions on the worksheet.

1. What problem can you solve for the health plan and its members related to benefits counseling and enrollment assistance?

Resources that might help in identifying the needs of health plan members:

- a. NCOA's Benefits Map: [Benefits Participation Map \(NCOA\)](#)
- b. Your AAA Area Plan, ADRC marketing plan, ADRC memorandums of understanding (MOUs) with the state Medicaid agency and/or report
- c. The health plan's Annual Report (often listed on its website)

2. Which benefits would you focus on during the contract with the health plan? (i.e., Medicare Part D extra Help/Low-Income Subsidy (LIS), Medicare Savings Programs, Medicaid (initial application and/or recertification), Supplemental Nutrition Assistance Program).

3. What types of beneficiaries will your program serve (e.g., beneficiaries who are eligible but not yet enrolled in LIS), and what challenges are faced by this target population?

4. What specific intervention(s) will you provide to the health plan to boost enrollment of its members in the public benefits your program will target?

Helpful resource:

- a. NOCA's BenefitsCheckUp<sup>®</sup>: [BenefitsCheckUp | Money-Saving Programs for Healthy Aging](#)

5. What strategies will you use to effectively reach the health plan's members?
6. What have been your past successes in providing benefits counseling and enrollment assistance?

Helpful resources:

- a. Chart, table or graph displaying your most recent data on public benefits enrollment.
- b. Stories about how your organization assisted older adults with benefits enrollment and the ways their quality of life was improved.
- c. Stories about how your state No Wrong Door system reduced the time between intake and enrollment with formal agreements and protocols.
- d. USAging's Aging and Disability Business Institute: Success Stories: AAAs and Health Plans Partnering in Benefits Counseling and Enrollment: [AAAs and Health Plans Partnering in Benefits Counseling and Enrollment - Aging and Disability Business Institute](#)
- e. [Defining Streamlined Access to Public Programs](#)
- f. [Checkpoints to Access Long-Term Services and Supports](#)
- g. [State Medicaid Agency Collaboration Checklist in a No Wrong Door System](#)

7. What is the return on investment (ROI) for the health plan, after you have estimated the financial value to your AAA/ADRC?

Helpful resources:

- a. USAging's Aging and Disability Business Institute: Quantifying the Value Proposition: How to Calculate the Return on Investment: [Quantifying the Value Proposition: How to Calculate Return on Investment \(ROI\) - Aging and Disability Business Institute](#)
- b. USAging's Aging and Disability Business Institute: Resource Guide: Pricing CBO Services in a New Health Care Environment: [ADBI-resource-guide-Pricing-CBO-Services.pdf](#)

8. How will you identify and mitigate possible risk? (i.e., conflict of interest issues, data sharing and storing)

Helpful resources:

- a. USAging's Conflict of Risk Action Plan [Template](#) and [Blog](#)
- b. Administration for Community Living's Conflict of Interest: Identification, Remedy, and Removal: [OHIC COI Resource 071720- Final.pdf](#)

## Writing Your Own Value Proposition

1. Review your responses on the Value Proposition Worksheet and identify the key elements that support your case for contracting with a health plan for services.
2. Combine these key elements into a clear yet persuasive statement about the value of your services and how they could benefit the health plan and its members. Use both data and stories to emphasize the advantages of partnering with you to deliver services, including health benefits for their members and the ROI for the health plan.

Before meeting with the health plan, review the services you offer and their costs to your organization. Like any successful business deal, your ROI should be positive. Make sure you are prepared to present solid financial data that meets your ROI goals as well as those of the health plan. USAging's Aging and Disability Business Institute provides the [Health Care Contracting Toolkit](#) as an additional resource for organizations in the early stages of seeking a health care contract.<sup>4</sup>

## Conclusion

Developing your value proposition creates a foundation for persuading a health plan to partner and contract with you. A compelling value proposition can be key to securing a profitable contract with a health plan, and it may also provide financial and professional benefits for your organization and help health plan members access the public benefits they qualify for and need to lead healthier lives.

## Endnotes

1. U.S. Census Bureau. Income, Poverty and Health Insurance Coverage in the United States: 2024, 2025. <https://www.census.gov/newsroom/press-releases/2025/income-poverty-health-insurance-coverage.html>

2. Alwin, R. \$30 Billion Left on the Table: Connecting More Older Adults with Money-Saving Public Benefits, 2025. *National Council on Aging*. [www.ncoa.org/article/30-billion-left-on-the-table-connecting-more-older-adults-with-money-saving-public-benefits](http://www.ncoa.org/article/30-billion-left-on-the-table-connecting-more-older-adults-with-money-saving-public-benefits)

3. Better Medicare Alliance. Understanding Risk Adjustment in Medicare Advantage, 2017. [https://www.bettermedicarealliance.org/wp-content/uploads/2020/03/Understanding-Risk-Adjustment\\_WhitePaper\\_June2017.pdf](https://www.bettermedicarealliance.org/wp-content/uploads/2020/03/Understanding-Risk-Adjustment_WhitePaper_June2017.pdf)

4. USAging's Aging and Disability Business Institute. Health Care Outreach Toolkit. Retrieved September 2025.  
<https://www.aginganddisabilitybusinessinstitute.org/resources/health-care-outreach-toolkit/>

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The National Council on Aging (NCOA) is the national voice for every person's right to age well. Working with thousands of national and local partners, we provide resources, tools, best practices, and advocacy to ensure every person can age with health and financial security. Founded in 1950, we are the oldest national organization focused on older adults. For more information, please visit [ncoa.org](http://ncoa.org).