

## Senior Medicare Patrol (SMP) Receives National Award

The 2011 SMP National Conference was held in Washington, D.C. on August 9-11. Over 200 individuals from the SMPs nationwide, as well as representatives from the Administration on Aging (AoA), the Office of Inspector General (OIG), and the Centers for Medicare & Medicaid Services (CMS) were in attendance. During an awards ceremony at this conference, the Arkansas Senior Medicare Patrol (SMP) program received an award for exceptional performance by the AoA and CMS. The SMP earned the **Innovation in Program Capacity-Building and Outreach Award**.

The award recognized the innovative statewide capacity building and educational outreach campaign that the Arkansas SMP conducted under the *SMP Capacity Building Grant* that the SMPs nationwide received in 2010. This grant expanded the capacity of the program to educate more older Americans on how to prevent, detect and report health care fraud. “CMS believes that the consumer education efforts of the SMP program at the grassroots level are an essential part of our national strategy to decrease waste, fraud and abuse in the Medicare system,” said Angela Brice-Smith, director of the Medicaid Integrity Group/Center for Program Integrity at CMS. She presented the SMP awards along with Barbara Dieker, Director, Office of Elder Rights, AoA, at the conference.

“These SMPs went above and beyond this year to serve the beneficiaries in their states. Their efforts to fight fraud at the grassroots level are of the highest caliber,” said Barbara Dieker.



Barbara Dieker, AoA



Kathleen Sebelius  
(US DHHS)

Once again, Kathleen Sebelius, Secretary of U.S. Department of Health and Human Services, was the conference’s keynote speaker. The national SMP program is fortunate to have the continued support of Secretary Sebelius. Her support has led to a large increase in funding received from CMS.

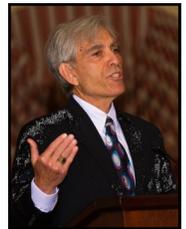


Cindy Padilla, Principal Deputy Assistant Secretary for Aging, AoA, was the speaker at the Volunteer Recognition luncheon where 10 exceptional volunteers were given the opportunity to tell why they volunteer for the SMP program and how the experience has affected their lives and the lives of many others.



Cindy Padilla (AoA)

Dr. Peter Budetti, Deputy Administrator for Program Integrity (CMS) described steps taken by law enforcement and fraud task forces over the past two years using new tools developed to fight fraud in the Medicare system.



Dr. Peter Budetti  
(CMS)

In Arkansas, the SMP is based in Little Rock. John Pollett, Program Director, and Kathleen Pursell, Program Coordinator, attended the SMP National Conference. While there, they were briefed on health care fraud schemes, law enforcement actions and SMP outreach initiatives under the 2011 SMP National Conference theme—“**Leading the Grassroots Fight Against Fraud.**”



Barbara McGinity, TX SMP; Kathleen Pursell, AR SMP, Vera Watson, NM SMP

“Kathleen and I were honored to be recognized at this level for doing a work we both love to do. We are blessed to have the opportunity to work with outstanding programs like the Arkansas Aging Initiative-Centers on Aging, a program of the Donald W. Reynolds Institute on Aging at the University of Arkansas for Medical Sciences (UAMS) and the Arkansas Extension Homemakers Councils (AEHC) with the University of Arkansas Department of Agriculture Cooperative Extension Service, as well as organizations such as the Retired Seniors and Volunteers Programs (RSVP) and Arkansas AARP. We appreciate their efforts in providing the Arkansas SMP Program with the opportunity to reach out to every county in Arkansas - to empower seniors to Prevent health care fraud.”

—John Pollett, SMP Program Director

## ANNUAL ENROLLMENT PERIOD

Your health needs change from year to year, and your health plan may change its benefits and costs each year too. FALL is the time for Open Enrollment — the one time of year when Medicare beneficiaries can make changes to their coverage by adding, dropping, or changing Medicare plans!

**Starting this year**, Open Enrollment starts earlier - on October 15th - and lasts longer (seven full weeks) to give you enough time to review and make changes to your coverage.

Take advantage of this enrollment period and you may be able to save money, get better coverage, or both!

**NEW October 15 to December 7, 2011**

Make your changes early to ensure Medicare has enough time to process your choice, so your coverage can begin without interruption on January 1, 2012.

During this time Medicare beneficiaries who do not have a Part D plan can enroll in one, and those who do have Part D coverage can change plans. Beneficiaries can also return to traditional Medicare from a Medicare Advantage (MA) plan, enroll in an MA plan, or change MA plans.

### **Make Sure You Make Informed Decisions!**

You should understand the type of plan you are joining **BEFORE** you join!

For more information on how to select a plan, visit: [www.medicare.gov](http://www.medicare.gov); or for assistance in making any changes to your coverage, contact the Senior Health Insurance Information Program (SHIIP) at **1-800-224-6330**.

**Did You Know?** Most Social Security services do not require a visit to an office. For example, anyone wishing to apply for benefits, sign up for direct deposit, replace a Medicare card, obtain a proof of income letter or inform Social Security of a change of address or telephone number may do so at [socialsecurity.gov](http://socialsecurity.gov) or call 1-800-772-1213.

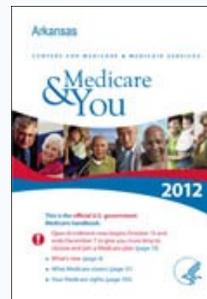
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Be Sure to Review Your  
**Medicare & You 2012**

**Go Paperless!  
Get Future  
Handbooks Electronically**

Go to [mymedicare.gov](http://mymedicare.gov) and sign up to get your next free copy of "Medicare & You" electronically. Next September, you'll get an email from Medicare linking you to "Medicare & You" online, instead of a paper copy in your mailbox.



**SECTION 5**  
of the  
Medicare & You  
handbook is  
an  
Informative  
section on  
**PROTECTING  
YOURSELF  
AND  
MEDICARE.**

The SMP is  
mentioned on  
Page 117 !

**CHECK IT  
OUT!**

### **SMP Resources Available for Fall Events**

As fall health fairs, senior expos, and other events are being planned, we encourage you to contact the Arkansas SMP if you would like to have our Personal Health Care Journals, SMP Newsletters, or any other SMP handouts available for your event. If an SMP volunteer is located in your community, he or she may be able to assist with dissemination of SMP materials at an exhibit booth.

Please contact Kathleen Pursell, Program Coordinator, at 866-726-2916 or email: [kathleen.pursell@arkansas.gov](mailto:kathleen.pursell@arkansas.gov).

### **If It's Not ".Gov", It's Not Social Security**

**PLEASE** be careful when exploring the Internet for Social Security services.

You may *think* you are on the official Social Security website but there are websites that charge people for *free* Social Security services. Some of these sites, at first glance, appear to be affiliated with Social Security, but they're actually for-profit sites charging a fee for what should be free!

Please make sure you go to the **official** Social Security website: [socialsecurity.gov](http://socialsecurity.gov) or [ssa.gov](http://ssa.gov)  
**MAKE SURE YOU LOOK FOR THE ".gov"!**

SOURCE: <http://www.ssa.gov/newsletter/>

**WELCOME TO MEDICARE EXAM**  
Initial Preventive Physical Examination (IPPE)

**VS.**

**ANNUAL WELLNESS VISIT (AWV)**

The Arkansas SMP has been asked by many Arkansas Beneficiaries, **“What’s the difference between a Welcome to Medicare Exam and an Annual Wellness Visit?”**

**More People Using Free Preventive Benefits**

CMS reported that nearly 20.5 million people with Medicare took advantage of the free Annual Wellness Visit or received other preventive services with no deductible or cost sharing this year.

Here’s the difference:

Medicare will pay for a **Welcome to Medicare Exam once in a lifetime** to enrollees in Part B, within the first 12 months of enrollment!

The NEW **Annual Wellness Visit** will be paid for by Medicare **ANNUALLY** to enrollees in Part B, **AFTER** the first 12 months of enrollment **if** you **HAVE NOT RECEIVED AN IPPE or AWV** within the past 12 months.



**IMPORTANT INFORMATION FOR Beneficiaries In Medicare Special Needs Plans**

An estimated 50,000 Medicare beneficiaries who are currently enrolled in Medicare Advantage "Special Needs Plans" (SNPs) but who do not meet the definition of a special needs individual for purposes of their plan **will be disenrolled** from those plans effective December 31, 2011.

Before the end of September 2011, **each such beneficiary should have received a notice** from the plan with this information, as well as information about other options available.

Individuals affected by this change will have an extended enrollment period from December 8, 2011 through February 29, 2012. **This extended enrollment period does not apply to individuals who enrolled in the SNP after January 1, 2010.**

SOURCE: The Center for Medicare Advocacy [medicareadvocacy@medicareadvocacy.org](mailto:medicareadvocacy@medicareadvocacy.org)

If you are interested in joining the thousands of caring and dedicated volunteers across the country who have been trained to fight healthcare fraud please call 1-866-726-2916.

**VOLUNTEER!**

It adds days to your life  
and life to your days!

**A MUST SEE Light-hearted YouTube VIDEO!**

An elderly couple walked into the lobby of the Mayo Clinic for a checkup and spotted a piano. They've been married for 62 years and he'll be 90 this year. Watch this impromptu performance! Enjoy!



<http://www.youtube.com/watch?v=TZwdtwi5ngI>

**ARKANSAS AGING INITIATIVE—CENTERS ON AGING**

The Arkansas SMP is pleased and excited to announce its **partnership** with the Reynolds Institute at UAMS Arkansas Aging Initiative’s Centers on Aging. The Centers on Aging offer a network of health care and educational services statewide, available not only for older Arkansans but also their caregivers and families, as well as students and health care professionals. Through our partnership with the Centers on Aging, seniors in nearly every county of the state will have the opportunity to hear the SMP message of fraud prevention. The mission of the SMP is to protect the senior population who are often the target of health care fraud, waste and abuse. By being better informed citizens, Arkansas seniors will be ‘empowered’ to PROTECT, DETECT AND REPORT!

**QUICK TIP-**

If you get a call from someone asking for personal information—provide NOTHING! Not even a "yes" to "Is this Mr. or Mrs. *Your Name*?"  
Don't give these people anything!

“The strength and durability of a society can be judged by how it treats its elderly”

—John F. Kennedy

# YOUR QUESTIONS ANSWERED!

**Q: How is CMS working with other partners and stakeholders to eradicate fraud?**

**A:** CMS is committed to working with partners in the public and private sector to develop and implement long-term solutions and a collaborative approach to eliminating health care fraud and abuse.

**CMS is partnering with the Administration on Aging (AoA) to expand the SMP program, which empowers seniors to identify and fight fraud. Since the program's**

**inception, the [SMP] program has educated more than 4.2 million beneficiaries and reached over 25 million people through community education outreach events.**

CMS is working with law enforcement partners to investigate and prosecute alleged fraud. Medicare provides support and resources to the Medicare Fraud Strike Forces, which investigate and track down individuals and entities defrauding Medicare and other government health care programs.

CMS is also working with HHS, including the OIG, and the Department of Justice (DOJ) to co-host a series of regional summits on health care fraud prevention. These summits bring together Federal and State officials, law enforcement experts, private insurers, health care providers, and beneficiaries for a comprehensive discussion on the scope of fraud, weaknesses in the current health care system, and opportunities for collaborative solutions.

<https://www.cms.gov/Partnerships/downloadsFAQFraudPreventionInitiative.pdf>

## Arkansas SMP In Action!



SMP Presentation  
**AARP CHAPTER MEETING**  
Oak Forest Methodist



AARP-Sponsored  
**PROTECTING ARKANSANS—DeQueen AR**  
September 29, 2011

SMP Presentation  
**Johnson Co EHC Sponsored**  
JOHNSON COUNTY  
SENIOR CENTER  
Clarksville, AR  
September 15, 2011



SHIIP Sponsored **MEDICARE MAZE**  
United Methodist Church — Harrison, AR  
October 4, 2011

### **MEDICARE BY THE NUMBERS:**

- ✦ Each working day Medicare processes over 4.4 million claims, to 1.5 million providers, worth \$1.1 billion.
- ✦ Each month, Medicare receives almost 19,000 provider enrollment applications.
- ✦ Every year Medicare pays over \$430 billion for more than 45 million beneficiaries.
- ✦ CMS is required by Federal statute to pay Medicare claims within 30 days.
- ✦ CMS is partnering with the Administration on Aging (AoA) to expand the SMP program, which empowers seniors to identify and fight fraud. Since the program's inception, the program has educated more than 4.2 million beneficiaries and reached over 25 million people through community education outreach events.
- ✦ There are approximately 550,000 Medicare beneficiaries in Arkansas.



## MEDICARE'S PREVENTIVE CARE SERVICES

If you are on Original Medicare A&B, the following list of preventive care services are now free for you! That means no deductibles and no co-pays for many of the below services:

- Bone mass measurement
- Hepatitis B vaccine
- Tobacco cessation counseling
- Medical nutrition therapy
- Pap tests
- Pelvic exams (women)
- Screening mammogram
- Most screening tests for colorectal cancer
- Ultrasound screening for abdominal aortic aneurysm
- Prostate-specific antigen (PSA) test
- Diabetes screening test
- Heart disease screening test
- Flu vaccine
- Pneumonia vaccine
- HIV screening
- Annual wellness visit

*For more information visit:*

[www.medicare.gov/navigation/manage-your-health/preventive-services/preventive-service-overview.aspx](http://www.medicare.gov/navigation/manage-your-health/preventive-services/preventive-service-overview.aspx)

**Did you know?** If you register for **MYMEDICARE.GOV**, Medicare will email you to let you know when you are entitled to a preventive service that Medicare will pay for! It is secure and easy! **Go to [www.mymedicare.gov](http://www.mymedicare.gov) and register!** **NOTE:** But be sure to give your email address when registering!

### **Screening Colonoscopy is not the same as a Diagnostic Colonoscopy**

The free Medicare exam only covers screening colonoscopies – not *diagnostic* colonoscopies.

A screening colonoscopy is a procedure performed on a patient of screening age in order to find colon polyps or cancer.

A diagnostic colonoscopy (which is not covered under the Affordable Care Act) is a colonoscopy that is performed in order to explain symptoms (e.g. blood in stools, change in bowel movements, etc. Patients are usually fully liable for at least 20% (and maybe more) of the cost related to a scheduled diagnostic colonoscopy.

There are some cases where a scheduled screening colonoscopy can become a diagnostic colonoscopy, and in those cases a patient becomes responsible for any out-of-pocket costs related to their deductible, co-insurance or co-pays for standard costs like physician and facility fees.

A screening colonoscopy becomes a diagnostic colonoscopy when a physician removes a polyp or takes a biopsy during the procedure. For Medicare patients, a family history of colon cancer or polyps will not automatically transform a screening colonoscopy into a diagnostic one. Some private insurers, however, will do this.

#### **Do you qualify?**

A Medicare patient can qualify for a free *screening* colonoscopy (despite having a family history of colon cancer or colon polyps) if they:

- ✦ Are of the recommended screening age (for people of average risk = age 50 or over, though recent studies indicate that African-Americans may need to start screening at age 45);
- ✦ Do NOT have any symptoms;
- ✦ Do NOT have personal history of colon polyps or colon cancer.

#### **Beware! Related Services Not Always Covered**

Medicare patients who are eligible to have a colonoscopy screening will pay no deductible, co-pay or co-insurance. However, please be forewarned - **Patients may still be responsible for other services, such as anesthesia or medication, associated with the procedure.**

## **Most Power Wheelchairs in the Medicare Program Did Not Meet Medical Necessity Guidelines**



According to a report from the Office of Inspector General, 61 percent of the power wheelchairs provided during the first 6 months of 2007 were **medically unnecessary** or had insufficient documentation to support their need. These power wheelchairs accounted for \$95 million of the \$189 million that Medicare allowed for power wheelchairs during this period.

—SOURCE: <http://go.usa.gov/Zvm>

To view the report, visit: [oig.hhs.gov/oei/reports/oei-04-09-00260.pdf](http://oig.hhs.gov/oei/reports/oei-04-09-00260.pdf)

**Wheelchair providers will now receive their Medicare payment over a 13-month time period instead of in one lump sum payment!**

# Be aware of the following **SCAM(S)**:

## **SMPs Nationwide Report Current Scams:**

**PENNSYLVANIA**—A woman in York county (on the PA-MD border) received a call from the “Social Security Administration”. The fake SSA rep claimed that they were issuing a second medical ID card to be used in conjunction with the red, white, and blue Medicare card. She stated that the current Medicare card would no longer work if the beneficiary did not also have the new card. In order to receive the new card, the beneficiary was asked to provide her bank account number. The fake SSA rep already had the beneficiary’s name, telephone #, address and bank routing #. The beneficiary asked to speak to the rep’s supervisor. When he got on the phone, he demanded she give him her bank account number. He went on to say that if she did not get this new medical ID card and provide her bank account #, not only would her Medicare be cut off, but he would stop her Social Security payments. Luckily, this beneficiary smelled a scam and simply said, “okay”, and hung up.

**ARKANSAS**—The Arkansas SMP helpline (as well as several SMPs nationwide) has received calls from Medicare beneficiaries who have received phone calls from scamsters stating they Medicare is giving out NEW MEDICARE CARDS and they need to verify name, address, date of birth, etc. Once this information is verified they go on to ask for bank account and social security numbers. One lady in particular was asked for the name of her bank and when she asked the caller to send her the information in a letter, the caller hung up. Todaysthv.com released an article on September 30 warning Medicare beneficiaries about giving out personal information (social security and bank account) over the phone! JUST HANG UP!

**ARKANSAS**—A lady in Hamburg AR reported that she received a phone call from someone ‘from Medicare’ offering a *better insurance plan*, and she would not have to pay anything....they asked for her Medicare number and told her Medicare would call her back in 30 minutes! She hung up the phone. She said someone did call her back in approximately 30 minutes, but she did not answer the phone.

**COLORADO**—An RSVP volunteer in Fort Smith reported a call she received from her friend in Colorado. The friend received a call from a foreign talking man who was saying that Medicare had made changes and they were going to start putting **identification chips** in Medicare cards to cut down on scams. The guy had asked for her address and bank account number. She, of course, did not provide that information. The number ID just showed a private number, but they identified themselves as a national center in New York City. She called Social Security and they told her it was strictly false information and was fraud.

## **CMS LETTER—You may receive one!**



The Centers for Medicare and Medicaid Services (CMS) is sending out a letter on two occasions (September 30 and October 28) to approximately 4200 beneficiaries (in a 10-state region—**Arkansas**, Louisiana, Mississippi, Alabama, Georgia, Tennessee, No Carolina, So Carolina, West Virginia and Virginia). While we do not know how many in Arkansas will actually receive the letter, you may be one of the beneficiaries that does.

The letter states that in an effort to *find* more fraud and abuse CMS is working to strengthen the way they review claims, and they are asking beneficiaries to call 1-800-Medicare so they can review, over the phone, their last two months of Medicare claims to make sure there were no claims filed during that time **for services or items which were not received**.

This may cause alarm or confusion, so just know that the letter is legitimate in case you receive one.

The thing you need to be aware of is that **Medicare will not be calling you!** In the letter CMS is asking the beneficiary to make the call! So be warned if you receive a call from someone stating that they are 'FROM MEDICARE' and want to review your claims over the phone—It's not Medicare—Medicare will not call you. Remember, do not give out your personal information (Medicare number, Social Security number, bank account number) over the phone!



### **FRAUD vs. ABUSE**

**FRAUD:** When someone *intentionally* falsifies information or deceives Medicare.

**ABUSE:** When health care providers or suppliers don't follow good medical practices, resulting in unnecessary costs to Medicare, improper payment, or services that aren't medically necessary.

### **THE MEDICARE BLOG:**

<http://blog.medicare.gov/>

Call **1-866-726-2916**  
to receive your copy of the quarterly  
**SMP Newsletter** in the mail!



**STARK ACT AND FRAUD & ABUSE ISSUES-NEWS, GUIDANCE AND ANALYSIS**—The city of Dallas has agreed to pay \$2.47 million to the state of Texas and the U.S. government to settle allegations of healthcare fraud, according to a news release from the U.S. Attorney's Office.

The state and U.S. government claim Dallas caused "upcoded" claims to be submitted to Medicare and Medicaid for city-dispatched 911 ambulance transports between 2006 and 2010.

Ambulance services are generally coded as basic life support or advanced life support, with the later reimbursed at a higher rate by Medicare and Medicaid. Dallas allegedly directed its billing contractor to code every ambulance transport at the ALS level.

Texas and the United States launched an investigation on the matter in response to an Aug. 2009 whistleblower suit filed by a former employee of Dallas' auditing department. By settling, Dallas has not admitted any wrong-doing.

By Molly Gamble | June 08, 2011

SOURCE: [beckersasc.com/stark-act-and-fraud-abuse-issues/dallas-agrees-to-pay-247m-to-settle-allegations-of-medicare-medicaid-fraud.html](http://beckersasc.com/stark-act-and-fraud-abuse-issues/dallas-agrees-to-pay-247m-to-settle-allegations-of-medicare-medicaid-fraud.html)

**LATIN AMERICAN HERALD TRIBUNE**—September 19, 2011, a 50-year prison sentence, the longest prison sentence ever imposed, was given to Lawrence Duran, the owner of a Miami-area mental health company, for orchestrating a Medicare fraud scheme in the amount of \$205 million. Duran was also ordered to pay restitution in the amount of \$87 million. Beginning in 2002, Duran defrauded Medicare of millions of dollars in mental health services that were either not necessary or never provided. Duran was charged with 38 felony counts, some including health care fraud, conspiracy to pay and receive illegal kickbacks, money laundering, and structuring to avoid reporting requirements.

The Medicare fraud strike force and the Centers for Medicare and Medicaid Services are working with the Department of Health and Human Services Office of Inspector General in taking steps to increase accountability in an attempt to rein in on fraudulent providers. They are committed to investigating and prosecuting fraud to the fullest extent of the law.

**NEW YORK**—\$995,000 in damages in health care fraud recovered—Columbia University and New York Presbyterian Hospital have settled charges of defrauding Medicare by over-billing for urological procedures and billing for urological tests that were medically unnecessary. The university's trustees will pay \$995,000 in civil damages under the False Claims Act.

See Press Release:

<http://www.justice.gov/usao/nys/pressreleases/October11/trusteesofcolumbiaunivnypresbyterianhospitalanddrgoluboffsettlementpr.pdf>

**ARKANSAS**—MONTICELLO DOCTOR KEEPS LICENSE AFTER FRAUD CONVICTION—A Monticello doctor (Shrum) was convicted of supplying patients with birth control devices, which were ordered outside of the US, and receiving Medicaid reimbursement for higher-priced versions of the device. Shrum received 5 years probation and restitution of \$203,194. He was granted a waiver because of a new law passed in 2011 allowing physicians to maintain their license based on factors that demonstrate they did not pose a threat to the health and safety of the public. It is also thought that Shrum was allowed to keep his license until his sentencing partly because of the shortage of obstetricians in the Monticello area.

SOURCE: Arkansas Democrat-Gazette October 8, 2011

## DATES TO KNOW!



### October 15—December 7

Annual Enrollment Period (AEP).

During this time you can make changes to your Medicare coverage: You can enroll in a different Part D plan, change from Medicare Advantage to Original Medicare, OR change from Original Medicare to a Medicare Advantage Plan.

### January 1 to February 14, 2012: Medicare

**Advantage Annual Disenrollment Period (MA ADP).** During this time you can only **disenroll** from a Medicare Advantage plan and go to Original Medicare. You **CANNOT SWITCH** MEDICARE ADVANTAGE PLANS at this time. However, you can enroll in a Prescription Drug Plan, with a special enrollment period, if you use this time period to disenroll from your MA plan and get on Original Medicare.

**CAN'T FIND A PROVIDER WHO ACCEPTS MEDICARE?** The Arkansas SMP has received numerous complaints on our helpline from callers stating that they cannot find a doctor in their area who will take Medicare patients. If you are having this same problem there are two websites you can log onto:

- ✦ Medicare's Quality Care Finder, available at [www.medicare.gov/qualitycarefinder](http://www.medicare.gov/qualitycarefinder). You simply enter the type of physician you are looking for along with a zip code, city or state. NOTE: You should click on the place that asks to only locate providers who accept the Medicare-approved amount as full payment.
- ✦ Medicare Part B Participating Physicians Suppliers Directory at [www.pinnaclemedicare.com/bene/medpard/](http://www.pinnaclemedicare.com/bene/medpard/). You simply select your state, city and provider specialty. This directory contains the names, addresses, telephone numbers and specialties of Medicare Participating physicians and suppliers.

### Check Your

**Medicare Summary Notice (MSN) on [MyMedicare.gov](http://MyMedicare.gov)**

You don't have to wait for your MSN to arrive in the mail to view your Medicare claims. Go to [www.MyMedicare.gov](http://www.MyMedicare.gov) to review your Medicare claims or view electronic MSNs. Your claims are usually available within 24 hours after processing.

**Aging. If it's not your issue....it will be.**

## “Credit Card” Technology Helps CMS Detect Medicare Fraud

In the August 2011 issue of *The Sentinel*, Bill Benson and Nancy Aldrich of Health Benefits ABCs explained the new ‘credit card’ technology that the Centers for Medicare & Medicaid Services (CMS) began using on July 1 to help detect Medicare Fraud. “If it works to detect and prevent credit card fraud, why not use the same technology to prevent Medicare fraud?”

In an effort to move away from the “pay and chase” method CMS is currently utilizing, under which they pay the claims first and then chase down the potential fraudster for reimbursement, this new software will help identify potentially fraudulent Medicare claims nationwide. The goal is to stop the fraudulent claims BEFORE they are PAID! It works the same way your credit card company detects unusual activity on your card.

*Here’s how it works:*

1. CMS awarded a \$77 million contract to Northrop Grumman, which partnered with National Government Services and Federal Network Systems, owned by Verizon, to develop the national predictive model software.
2. The software collects data to determine the likelihood that the named beneficiary received the billed services – for example, is the beneficiary alive and living near the provider?

3. It can also tell if the provider was actually able to provide the service. For example, it will detect a single doctor claiming he/she performed the same procedure in six cities at the same time.
4. The software identifies patterns and creates a risk score for each claim.
5. Claims with high risk scores receive an alert and are further examined by federal investigators.

### Terminology

#### Pay and chase

means that an insurer (Medicare) pays providers first, then chases them down later to get the money back if there is fraud or an overpayment.



#### Predictive modeling

uses historical data to build a statistical model that can predict future trends.

6. Claims with the highest risk scores receive immediate attention and additional review by CMS analysts through a new rapid response strategy.

7. CMS then takes appropriate actions, including claim denial, payment suspension or revocation, as well as referral to law enforcement.

The Office of Inspector General (OIG) notes that as the efforts become more technology driven, so will health care fraud, so there will always be adaptations. There are also complicated Medicare rules for filing claims, medical necessity will need to be determined, and claims may initially appear to meet the payment conditions, but subsequently be revealed as improper.

CMS Deputy Administrator and Director for Program Integrity Dr. Peter Budetti admitted that it will take time to catch fraudsters, but added that eventually, the government will stop those payments before they go out the door. Health care is very complex and it is difficult to predict and prevent health care fraud relying solely on data analytics.

The new **FAST Act** (Fighting Fraud and Abuse to Save Taxpayer Dollars Act) introduced to reduce waste, fraud and abuse in Medicare and Medicaid, also contains strategies to help phase out the pay and chase practice. The bill would require the U.S. Department of Health and Human Services to use the **SMP programs** to—conduct a public awareness and education campaign to encourage participation in a revised beneficiary incentive program to encourage individuals to report fraud and abuse. No action has yet been taken on the legislation.

*Today’s announcement is bad news for criminals looking to take advantage of our seniors and defraud Medicare. This new technology will help us better identify and prevent fraud and abuse before it happens and helps to ensure the solvency of the Medicare Trust Fund..*

—CMS Administrator,  
Donald Berwick, MD on the announcement of the new predictive modeling program

**Taken in part from: The Sentinel  
www.smpresource.org  
August 2011**

TO READ ARTICLE IN ITS ENTIRETY:  
[http://www.smpresource.org/Content/NavigationMenu/Media/Newsletters/Sentinel811/The\\_Sentinel\\_August2011\\_HBABCs2.pdf](http://www.smpresource.org/Content/NavigationMenu/Media/Newsletters/Sentinel811/The_Sentinel_August2011_HBABCs2.pdf)

### **READ YOUR MEDICARE SUMMARY NOTICE!**

Do you realize that reviewing your Medicare Summary Notice (MSN)—the statement from CMS that lists the claims filed with Medicare on your behalf—can save the Medicare Trust Fund! Please do your part to prevent the loss of YOUR Medicare dollars due to fraud, errors and abuse by reviewing your MSN, but don’t stop there! Be sure to report any discrepancies to the Arkansas SMP! If you would like a free copy of “How To Read Your Medicare Summary Notice”, please call 866-726-2916 or email [kathleen.pursell@arkansas.gov](mailto:kathleen.pursell@arkansas.gov).

*We are the best defense against fraud because we know what care we receive and what claims are being made on our behalf. Nobody else knows. It is our duty to spend a little time to make sure it is right.*

—Larry Bauer, Volunteer,  
Chicago SMP

## DON'T FALL FOR THESE LINES...

Can you guess them? Have you heard them before?

“ \_\_ 'S F \_\_ E!”

AND

“ 'M \_\_\_ H M \_\_\_\_\_ E!”

### HINTS:

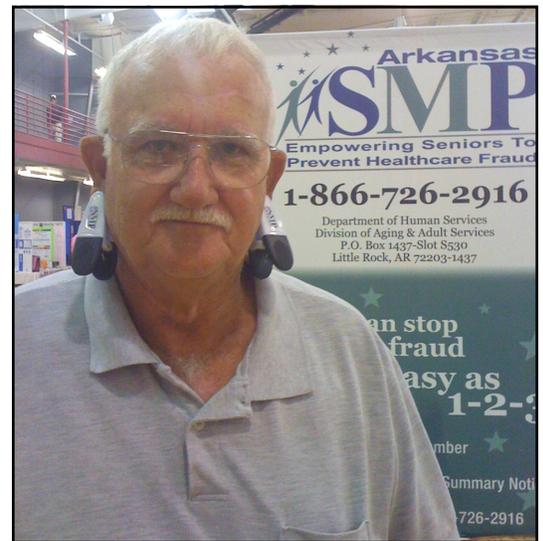
When someone is advertising a product or service as free and then asks for your Medicare number, it is fraud! If it's free, why do they need your Medicare number? Don't give them your Medicare number or any other personal information!

Medicare will not call you on the phone or come to your door! When someone says, "I'm with Medicare"....Hang up the phone or shut the door!

*ANSWERS on back page*



**JODY STORMS** (right) from Lamar, Arkansas, attendee at this year's *Apple A Day Healthy Aging Fair* in Clarksville on September 22, has fun with SMPs magnetic clips—he has found a new use for them! **EARRINGS!**



## MEDICARE SAVINGS PROGRAMS (MSP)



Call 1-866-801-3435 / 1-800-224-6330

MSP is a state program that helps folks on limited incomes save money.

It may pay your Medicare deductible and coinsurance too!

Even if you think you may not qualify—apply anyway!

**JUST FOR LAUGHS!**



Out bicycling one day with my eight-year-old granddaughter, Carolyn, I got a little wistful. 'In ten years,' I said, 'you'll want to be with your friends and you won't go walking, biking, and swimming with me like you do now.'

Carolyn shrugged. 'In ten years you'll be too old to do all those things anyway!'

“Always read stuff that will make you look good if you die in the middle of it.”

“Enjoy Life - It Has An Expiration Date”

## Older Adults Volunteer in the Fight Against Medicare Fraud

The Senior Medicare Patrol program's purpose is to educate older adults receiving Medicare and Medicaid benefits to prevent, detect, and report health care fraud. SMP programs nationwide recruit volunteers in the effort to empower older adults to protect themselves from fraud, and are funded by the U.S. Administration on Aging. For volunteer opportunities call **1-866-726-2916**.

## A Fraud Prevention Television Commercial WORTH WATCHING!

Watch a fraud prevention video on YouTube: [www.youtube.com/watch?v=R6B-dVDJf7A&feature=player\\_detailpage](http://www.youtube.com/watch?v=R6B-dVDJf7A&feature=player_detailpage)

GET YOUR **FREE** COPY OF “HOW TO READ YOUR MEDICARE SUMMARY NOTICE” — **1-866-726-2916**

## 2011 SMP CALENDAR OF EVENTS:

### MEDICARE MAZE

**Medicare Mazes** are *FREE*, unbiased, educational/informational events presented by the Arkansas Insurance Department's **SHIIP**, and the DHS Division of Aging & Adult Services' **ARKANSAS SMP**.

If you would like to know more about the in's and out's of Medicare, join us for a *Medicare Maze* near you! Pre-Register by calling the SHIIP office at 1-800-224-6330.

### 2012 DATES/LOCATIONS:

- JANUARY 19 — JACKSON COUNTY / WHITE COUNTY  
FEBRUARY 16 — HEMPSTEAD COUNTY / LITTLE RIVER COUNTY  
MARCH 15 — ARKANSAS COUNTY / PHILLIPS COUNTY

### PROTECTING ARKANSANS

**PROTECTING ARKANSANS** is an educational, town hall-type seminar sponsored by AARP in partnership with the Office of the Arkansas Attorney General, Arkansas Securities Department, Arkansas Insurance Department, and Arkansas Department of Human Services, *bringing state government to you with the message of consumer protection and fraud awareness.*

Go to [www.daas.ar.gov/asmp.html](http://www.daas.ar.gov/asmp.html) or call **1-866-726-2916** for updates on 2012 events.

### SMP PRESENTATIONS and EVENTS

**Call the Arkansas SMP if you would like us to come speak to your group! 1-866-726-2916**

- |  |   |
|--|---|
| <b>OCT 4</b> — Dallas County EHC<br>Fordyce, AR  | <b>OCT 27</b> — Washington County EHC<br>Fayetteville, AR   |
| <b>OCT 6</b> — Ashley County EHC<br>Hamburg, AR  | <b>NOV 3</b> — Grant County Senior Center<br>Sheridan, AR   |
| <b>OCT 10</b> — Butterfield Trail Valley Retirement Village<br>Fayetteville, AR                                | <b>NOV 7</b> — Mountain View Senior Center<br>Mountain View, AR                                   |
| <b>OCT 12</b> — Shepherd's Center<br>Pine Bluff, AR  | <b>NOV 9</b> — Trumann Senior Life Center<br>Trumann, AR  |
| <b>OCT 18</b> — Ashflat Senior Center<br>Ashflat, AR   | <b>NOV 15</b> — Independence Co Senior Citizens Program<br>Batesville, AR                         |
| <b>OCT 19</b> — Boone County Senior Center<br>Harrison, AR   | <b>NOV 17</b> — Paris Logan County Senior Citizens Inc<br>Paris, AR                               |
| <b>OCT 20</b> — Fairfield Bay Senior Center<br>Fairfield Bay, AR   | <b>DEC 6</b> — SMP Advisory Council Meeting &<br>Volunteer Recognition Banquet<br>Little Rock, AR |
| <b>OCT 26-28</b> — DHS Division of Aging & Adult Services<br>2011 ARKANSAS AGING CONFERENCE<br>Hot Springs, AR |   |

## **IMPORTANT PHONE NUMBERS:**

<b>AANHR</b> —AR Advocates for Nursing Home Residents	<b>501-450-9619</b>
<b>AFMC</b> —AR Foundation for Medical Care	<b>1-888-354-9100</b>
<b>Area Agency on Aging</b>	<b>1-800-986-3505</b>
<b>Arkansas Attorney General</b> Consumer Protection Division	<b>1-800-482-8982</b>
<b>APS</b> —Adult Protective Services (DHS)	<b>1-800-482-8049</b>
<b>AR-GetCare</b> —(Directory of Community-Based Services)	<b>1-866-801-3435</b>
<b>Arkansas Rehabilitation Services</b>	<b>1-800-981-4463</b>
<b>AR SMP</b> (Healthcare Fraud Complaints)	<b>1-866-726-2916</b>
<b>Better Business Bureau (BBB)</b>	<b>501-664-7274</b>
<b>CMS</b> —(Medicare)— (Centers for Medicare and Medicaid Services) (1-800MEDICARE)	<b>1-800-633-4227</b>
<b>Community Health Centers of AR</b>	<b>1-877-666-2422</b>
<b>Coordination of Benefits</b>	<b>1-800-999-1118</b>
<b>DHS</b> (Customer Assistance Unit)	<b>1-800-482-8988</b>
<b>Do Not Call Registry</b>	<b>1-888-382-1222</b>
<b>Elder Care Locator</b>	<b>1-800-677-1116</b>
<b>Federal Trade Commission</b> Report STOLEN IDENTITY	<b>1-800-438-4338</b>
<b>ICan</b> —Increasing Capabilities Access Network	<b>501-666-8868</b>
<b>Medicaid</b> —(Claims Unit)	<b>1-800-482-5431</b>
<b>Medicaid Fraud Control Unit</b>	<b>1-866-810-0016</b>
<b>MEDICARE</b> (CMS 1-800-MEDICARE)	<b>1-800-633-4227</b>
<b>Medicare Part D</b>	<b>1-877-772-3379</b>
<b>Medicare Rights Center</b>	<b>1-800-333-4114</b>
<b>National Consumer Technical Resource Center</b>	<b>1-877-808-2468</b>
<b>National Medicare Fraud Hotline</b> (1-800-HHS-TIPS) Office of Inspector General	<b>1-800-447-8477</b>
<b>OLTC</b> —Office of Long Term Care	<b>1-800-LTC-4887</b>
<b>OLTC</b> —Abuse Complaint Section	<b>501-682-8430</b>
<b>Ombudsman</b> —Statewide Office of Long Term Care	<b>501-682-8952</b>
<b>Resource Center (ADRC)</b> (DHS'S Choices in Living Resource Center)	<b>1-866-801-3435</b>
<b>Senior Circle</b> (Northwest Health System)	<b>1-800-211-4148</b>
<b>SHIP</b> (Senior Health Insurance Information Program)	<b>1-800-224-6330</b>
<b>SMP Locator</b> —(locate an SMP outside AR)	<b>1-877-808-2468</b>
<b>SSA</b> (Social Security Administration) Little Rock Office	<b>1-800-772-1213</b> <b>1-866-593-0933</b>
<b>SSA Fraud Hotline</b>	<b>1-800-269-0271</b>
<b>South Central Center on Aging</b>	<b>1-866-895-2795</b>
<b>Tri-County Rural Health Network</b>	<b>1-870-338-8900</b>
<b>UALR Senior Justice Center</b>	<b>501-683-7153</b>
<b>UofA Cooperative Extension Service</b>	<b>501-671-2000</b>

## **HELPFUL WEBSITES:**

<b>ADRC</b> —AR Aging & Disability Resource Center (DHS)— <a href="http://www.choicesinliving.ar.gov/">www.choicesinliving.ar.gov/</a>
<b>AR-GetCare</b> — <a href="http://www.ARGetCare.org">www.ARGetCare.org</a> (Directory of Community-Based Services)
<b>AR Advocates for Nursing Home Residents</b> — <a href="http://www.aanhr.org">www.aanhr.org</a> ; e-mail: <a href="mailto:Info@aanhr.org">Info@aanhr.org</a>
<b>AR Long Term Care Ombudsman Program</b> — <a href="http://www.arombudsman.com">www.arombudsman.com</a>
<b>Arkansas 2-1-1</b> — <a href="http://www.arkansas211.org">www.arkansas211.org</a> (Get Connected. Get Answers)
<b>Arkansas Aging Initiative</b> — <a href="http://aging.uams.edu/?id=4605&amp;sid=6">http://aging.uams.edu/?id=4605&amp;sid=6</a>
<b>Attorney General</b> — <a href="http://www.arkansasag.gov">www.arkansasag.gov</a>
<b>Arkansas Attorney General Consumer Protection Division</b> —e-mail: <a href="mailto:consumer@ag.state.ar.us">consumer@ag.state.ar.us</a>
<b>Area Agencies on Aging</b> — <a href="http://www.daas.ar.gov/aaamap.html">www.daas.ar.gov/aaamap.html</a>
<b>Arkansas Foundation for Medical Care</b> — <a href="http://www.afmc.org">www.afmc.org</a>
<b>Arkansas SMP</b> — <a href="http://www.daas.ar.gov/asmp.html">www.daas.ar.gov/asmp.html</a>
<b>BBB</b> (Better Business Bureau)— <a href="http://www.bbb.org">www.bbb.org</a>
<b>BBB scams and alerts</b> — <a href="http://arkansas.bbb.org/bbb-news/">http://arkansas.bbb.org/bbb-news/</a>
<b>CMS</b> (Medicare-Centers for Medicare and Medicaid Services) — <a href="http://www.cms.hhs.gov">www.cms.hhs.gov</a>
<b>Do Not Mail</b> — <a href="http://www.DMAchoice.org">www.DMAchoice.org</a>
<b>Elder Care Locator</b> — <a href="http://www.eldercare.gov">www.eldercare.gov</a>
<b>H.E.A.T</b> — <a href="http://www.stopmedicarefraud.gov/">www.stopmedicarefraud.gov/</a> (Healthcare Fraud Prevention and Enforcement Action Team)
<b>ICan AT4ALL</b> — Tools for Life— <a href="http://www.ar-ican.org">www.ar-ican.org</a>
<b>MEDICARE</b> — <a href="http://www.medicare.gov">www.medicare.gov</a>
<b>Medicare Interactive Counselor</b> — <a href="http://www.medicareinteractive.org">www.medicareinteractive.org</a>
<b>Hospital Compare</b> — <a href="http://www.hospitalcompare.hhs.gov">www.hospitalcompare.hhs.gov</a>
<b>MyMedicare.gov</b> — <a href="http://www.mymedicare.gov">www.mymedicare.gov</a> (Access to <u>your personal</u> Medicare claims information)
<b>MyMedicareMatters.org</b> (National Council on Aging)
<b>Office of Long Term Care</b> — <a href="http://www.medicare.state.ar.us/InternetSolution/general/units/oltc/index.aspx">www.medicare.state.ar.us/InternetSolution/general/units/oltc/index.aspx</a>
<b>Office of Inspector General</b> —e-mail <a href="mailto:HHSTips@oig.hhs.gov">HHSTips@oig.hhs.gov</a>
<b>Pharmaceutical Assistance Program</b> — <a href="http://www.medicare.gov/pap/index.asp">www.medicare.gov/pap/index.asp</a>
<b>Physician Compare</b> — <a href="http://www.medicare.gov/find-a-doctor">www.medicare.gov/find-a-doctor</a>
<b>SMP Locator</b> — <a href="http://SMPResource.org">SMPResource.org</a> (locate an SMP outside of AR)
<b>Social Security Administration</b> — <a href="http://www.ssa.gov/dallas/state_ar.html">www.ssa.gov/dallas/state_ar.html</a>
<b>South Central Center on Aging</b> — <a href="http://southcentralcoa.org/">http://southcentralcoa.org/</a>
<b>TAP</b> — <a href="http://www.arsinfo.org">www.arsinfo.org</a> (Telecommunications Access Program)
<b>Tri-County Rural Health Network</b> — <a href="http://communityconnecting.net/home.html">communityconnecting.net/home.html</a>
<b>UofA Cooperative Extension Service</b> — <a href="http://www.uaex.edu">www.uaex.edu</a> (or) <a href="http://www.arfamilies.org">www.arfamilies.org</a>
<b>Working Disabled</b> — <a href="http://www.workingdisabled-ar.org">www.workingdisabled-ar.org</a>



## OUR MISSION

### TO EMPOWER SENIORS

- \* Medicare/Medicaid beneficiaries
- \* People with disabilities
- \* Nursing home residents & their families
- \* Caregivers



### TO PREVENT HEALTH-CARE FRAUD

#### **Protect** Personal Information

- \* Treat Medicare/Medicaid and Social Security numbers like credit card numbers
- \* Remember, Medicare will not call or make personal visits to sell anything!
- \* READ and SAVE Medicare Summary Notices (MSN) and Part D Explanation of benefits (EOB), but **shred** before discarding

#### **Detect** Errors, Fraud, and Abuse

- \* Always review MSN and EOB for mistakes
- \* Compare them to prescription drug receipts and record them in your Personal Health Care Journal
- \* Visit [www.mymedicare.gov](http://www.mymedicare.gov) to access your personal account online to look for charges for something you did not get, billing for the same thing more than once, and services that were not ordered by your doctor, etc.

#### **Report** Mistakes or Questions

- \* If you suspect errors, fraud, or abuse, report it immediately! Call your provider or plan first.
- \* If you are not satisfied with their response, call the Arkansas SMP

### TO RECRUIT & TRAIN VOLUNTEERS

- \* Retired seniors
- \* Retired health-care providers
- \* Retired professionals, *e.g.*, teachers, accountants, attorneys, investigators, nurses

To receive the Arkansas SMP Newsletter electronically  
email: [kathleen.pursell@arkansas.gov](mailto:kathleen.pursell@arkansas.gov)

Current and archived newsletters available at:  
[www.daas.ar.gov/asmpnl.html](http://www.daas.ar.gov/asmpnl.html)



P. O. Box 1437 Slot S530  
Little Rock, AR 72203-1437  
<http://www.daas.ar.gov/asmp.html>

To Report Fraud, Waste & Abuse  
Call the Toll-Free **Helpline**  
8:00am-4:30pm: **1-866-726-2916**

## SMP PARTNERS

**El Dorado Connections RSVP**  
El Dorado, AR

**EOA of Washington County RSVP**  
Springdale, AR

**Texarkana RSVP**  
Texarkana, AR

**RSVP of Central Arkansas**  
Little Rock, AR

**Tri-County Rural Health  
Network, Inc.**  
Helena, AR

**UALR Senior Justice Center**  
Little Rock, AR

**Literacy Council of  
Jefferson County**  
Pine Bluff, AR

**Senior Health Insurance  
Information Program (SHIIP)**  
Little Rock, AR

**UAMS Arkansas Aging Initiative  
Centers on Aging**

**Arkansas Foundation for Medical Care  
(AFMC)**  
Fort Smith, AR

ANSWERS from Pg 9:  
,,IT'S FREE!,,  
,,I'M WITH MEDICARE!,,