

NEWSLETTER

To Report Fraud, Waste & Abuse
Call Toll-free 1-866-726-2916

“Outstanding,” “Innovative,” “Ground-Breaking,” “Brilliant!”

Officials from the **Administration on Aging (AoA)** praised the **Arkansas Senior Medicare Patrol (ASMP)** for the “groundbreaking” work of the **Arkansas Delta Project** team in creating an “outstanding and innovative” 2008-2010 **Senior Medicare Patrol Integration (SMPI) Grant** project. The goal of these two-year grants, awarded to only seven of the 54 **SMP** programs nationwide, was to identify

- (1) determining what Medicare beneficiaries who are underserved by virtue of their isolation want and need (know and don't know), and educating them about Medicare benefits and the potential for health-care fraud associated with those benefits; and
- (2) conducting research to determine the best methods to reach rural seniors by asking them face-to-face, in their homes or in



focus groups, how they would prefer to receive health related public awareness information and what is the best way to get their attention.

ways to reach out to isolated senior Medicare beneficiaries in the most hard-to-reach rural and tribal areas of the United States with information about public assistance programs available to low-income seniors and ways to prevent health-care fraud.

The **Arkansas Delta Project** team is a collaboration of the **DHS Division of Aging and Adult Services ASMP**, the **University of Arkansas at Little Rock (UALR) Senior Justice Center**, and **Tri-County Rural Health Network (TCRHN)** in Helena. It focused on one of the poorest, most rural areas in the nation – Phillips, St. Francis, Monroe and Lee counties in the Arkansas Delta – using an innovative community outreach, educational and research model that can be successfully replicated by other **SMPs** across the country. The two-phase intervention involved:

On May 4-5, **John Pollett** (ASMP Project Administrator), **Kathleen Pursell** (ASMP Project Coordinator), and **Dr. David Montague** and **Candace Greenlee** from the **UALR Senior Justice Center** attended the **SMPI Roundtable** in



Washington, D.C., along with the six other **SMPI** grantees, to present a progress report and project outcomes to **AoA** top brass. The purpose of the roundtable was to create project guidelines and a toolkit to facilitate replication of best practices nationwide. The Arkansas presentation emphasized the importance of building strong and effective partnerships with community-based organizations as the key first step toward earning grassroots trust in the target communities. It was apparent to us early on that we were facing more than just economic, racial and literacy barriers to effective communication with Medicare beneficiaries in the Arkansas Delta. In order to engage the most isolated seniors in fruitful, open dialogue, we first had to gain the trust and respect of a very closed and wary community, whose residents wonder why they should trust the government.

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SMP programs nationwide help Medicare and Medicaid beneficiaries fight healthcare fraud. Check out the national SMP program:

www.smpresource.org

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What Medicare Fraud IS NOT :

Some beneficiaries may find that sometimes charges *appearing* to be false on their Medicare bill may simply be mistakes, rather than the result of physicians, providers, or suppliers trying to take advantage of the Medicare system.

Still, what may seem like a simple error can lead to fraud or abuse. Likewise, SMPs continually advise beneficiaries to be diligent in reviewing their Medicare Summary Notices for errors, fraud or abuse, or charges that “just don’t seem right.”

Some examples of charges that may not be fraud include:

- ◆ Beneficiary claims they did not receive the service: The service provided may have been provided by a laboratory, pathologist, anesthesiologist, physical therapist, physician assistant. This may also be a processing error where the Medicare number has been miskeyed.
- ◆ Bill high: Unreasonably high or duplicate charges do not usually affect what Medicare allows or pays. Medicare pays based on a set fee schedule. Always call the provider to report high or duplicate charges. This may also be a billing error or a miskeyed figure.
- ◆ Billing for medical equipment that was returned: Provider may simply refund Medicare as a result of a simple phone call from you.
- ◆ Billing for services or supplies different than received: Call the provider and have them explain the charges.

The U.S. Department of Health and Human Services urges Medicare patients to discuss charges with physicians, suppliers or providers first. If things still seem fishy and you are not satisfied, then contact your **SMP** at **1-866-726-2916** or local authorities.

MEDIGAP CHANGES!



Starting June 1 several changes took effect to

Medicare supplemental insurance plans (Medigap plans) — there are **TWO NEW** Medigap plans (**M and N**), and four plans (**E, H, I and J**) **WILL NO LONGER BE SOLD**.

Furthermore, Medigap plans sold after June 1 will feature different benefit packages. **If you bought a plan before June 1, 2010, you can keep it, and your benefits will not change.**

Remember that plans are not required to sell you a policy if you are not within a time that you have the right to purchase a Medigap.

In general, if you are happy with your current plan, there is no reason to switch.

PLEASE contact SHIIP (Senior Health Insurance Information Program) at 1-800-224-6330 for advice before making a decision to switch plans!

Questions you should ask:

Before you join a Medicare private health plan (Medicare Advantage Plan), there are some questions you should ask:

- Will I be able to use my doctors and local hospital?
- Are my prescription drugs on the plan’s formulary (list of covered drugs)?
- How much is the monthly premium, what is the deductible and how high are the copayments?

Call the SMP to ask for your free copy of the **Medicare Protection Toolkit** for more information about things you should know **BEFORE** you sign up for a Medicare Advantage plan! **1-866-726-2916**

The ASMP Delta Project...

(Cont’d from Page 1)

For this reason, all our actions were guided by the excellent advice of **Dr. Mary Olson** of **TCRHN**, who told us that, “The greatest social determinant is mistrust. Race, ethnicity, poverty levels, unequal access to jobs and isolation all build and cement this barrier. Mistrust is the result of systemic and personal experiences. Failure to recognize this barrier is the reason so many initiatives are unsuccessful in their efforts to reach out to underserved populations.”

The original premise of our grant proposal was that all we needed to do to find out how isolated seniors in underserved areas want to receive health-care and health-care fraud information was to ask them. However, we now understand that we could not have gotten honest responses to our questions or even

persuaded seniors to show up at community meetings unless they were invited by people whom they trust. That’s where the **TCRHN community connectors** came in. These well-known individuals assist people in their community to find all the health care and social services that they need and, as our partners in this project, they introduced us at town hall meetings and arranged for us to conduct personal interviews in the homes of over 100 Medicare beneficiaries in the targeted counties. With their help, we were able to conduct an amazing 98% of the attempted one-on-one interviews and gain full participation in the focus groups that followed.

Dr. Montague and the **Arkansas Delta Project** team have gathered a wealth of information over the past two years that will help **SMP** programs reach Medicare beneficiaries in the hardest-to-reach communities across our nation. In discussions following the

presentation in Washington, our approach was called outstanding, innovative, groundbreaking and brilliant – so special that we were asked to return at a later date to present our program to higher level **AoA** administrators.

We could not be more proud of the **UALR Senior Justice Center interns** and **Naomi Cottoms**, **TCRHN** Executive Director, and her **community connectors**, without whom the project would have failed. We also thank **Gloria Gordon**, our excellent volunteer grant writer, whose vision of the project was so eloquently stated in the grant application. The project has been extended through Dec. 31 to allow for data evaluation and submission of a final report to **AoA**.

So, be on the lookout for more exciting news to come after the final phase!

Can You Be Penalized For NOT Joining Medicare?

The law says that a 10 percent penalty is imposed “for each full 12-month period” that people delay enrolling in Part B when eligible to do so (unless they have group health insurance from their own or their spouse’s current employment). If the delay is less than 12 full months, the penalty should not apply.

You can delay signing up for Part B beyond your Initial Enrollment Period (IEP) when you turn 65 **IF**:

- You are covered by a group health insurance plan from your employer or union and you are still working; or
- You are covered by your spouse’s group insurance and your spouse is still working.

The Social Security Administration, which administers Medicare enrollment, explains that if you do not qualify for Medicare Part A (hospital insurance) without having

to pay a premium because you hadn’t paid Medicare payroll taxes long enough, you are still eligible to enroll in Part B (outpatient insurance) at age 65 if you live in the U.S. and have been a U.S. citizen or a legal immigrant (green card holder) for at least five years.

So, the penalty clock starts ticking at the beginning of the month following your **seven-month initial enrollment period (IEP)** which is **three months before the month of your 65th birthday, your birthday month, and three months after your 65th birthday month**. Being unaware of this rule is not a defense for avoiding a late penalty.

If you are unsure when to (or whether or not to) enroll in Medicare Parts A or B, call the Social Security Administration at 1-800-772-1213 or **SHIP** at **1-800-224-6300** to check out the rules for your own circumstances.

Taken in part from the AARP Bulletin / May 4, 2009

SMP ANNUAL REPORT SUMMARY FROM THE OFFICE OF INSPECTOR GENERAL:

Performance Data for the Senior Medicare Patrol Projects—**2009**

Of the 55 SMP projects nationwide:

4,444 Active volunteers;
 7,177 Group education sessions;
 33,855 One-on-one counseling sessions;
 311,377 Media outreach activities;
 5,684 Community outreach education events;
\$76,176 Medicare funds recovered
\$214,060 Total savings to Medicare, Medicaid, and beneficiaries

Total savings to Medicare, Medicaid, and Beneficiaries and others were over three times higher in 2009 compared to totals in 2008.

The AR SMP emphasizes that while PREVENTION is the key to our program, prevention is difficult to measure. We applaud the number of beneficiaries who have learned from the SMP projects and have been proactive in reporting their concerns of fraud, waste, and abuse to the OIG fraud hotline, Medicare, their provider, or other contacts; however, these numbers cannot be tracked having bypassed the SMP reporting system. Therefore, the above numbers may not reflect the full credit for savings attributable to the work of the projects toward prevention.

2010 SMP CALENDAR OF EVENTS:

- JULY 13-15** — CMS Train-the-Trainer Workshop
Grapevine, TX
- JULY 30** — Medicare Maze(s)
Hot Springs, AR / Malvern, AR
- AUGUST 3-5** — AoA SMP Regional Conference
Kansas City, MO
- AUGUST 10** — SMP Advisory Council Meeting / LRA
- SEPTEMBER 15** — Medicare Maze(s)
Springdale, AR / Siloam Springs, AR

PROTECTING ARKANSANS—Registration 8:30 a.m.
 Program Starts 9:00 a.m.—1:00 p.m.
Lunch Provided

- SEPTEMBER 20** — Clarksville, AR
Marvin Venson Center
- Date TBD** — Pine Bluff, AR
Pine Bluff Country Club

Go to <http://www.daas.ar.gov/asmp.html> to watch for updated dates/locations for *Protecting Arkansans* events in 2010!

- OCTOBER 27-29** — Arkansas Aging Conference
Hot Springs Civic & Convention Center
Hot Springs, AR

Take Caution to Protect Yourself from Fraud!



- ♦ Don’t give out your Social Security, Medicare or bank account numbers over the telephone. They can be used against you. So can information such as the names of your children or grandchildren.
- ♦ Beware of callers who say they’re from an organization such as Medicare and they need to know your Medicare number. If they truly were from Medicare, they wouldn’t need to ask. Nor would they call or visit your home unless you called them first.
- ♦ Never purchase items online from a Web site that you’ve found from an e-mail link. It could be a fraudulent site. If you know the name of an organization you want to do business with, go to the Web site on your own. Only buy from secure Web sites: those with “https” as part of their Web addresses.
- ♦ If a charity calls wanting a donation and you’d like to donate, hang up, look up the name of the charity and call yourself. The caller might not be from the organization at all, or the caller might be a middleman who funnels little of the donation to the charity.

Contact the Arkansas SMP if you think you’ve been scammed or to volunteer to help prevent others from being scammed.

1-866-726-2916

SMP VOLUNTEER TRAINING COMPLETED



The Arkansas SMP volunteers of the **TEXARKANA RSVP / SOP** received training Certificates of Completion after a day-long SMP training seminar on April 20. **CONGRATULATIONS!** to: (Pictured below) Sherry Allen, Melissa Brown, Evangeline Cobb, Wanda Holt, Phyllis Martin, Lawrence Meadows, Debbie Schneider, Tanesha Smith, Willie Starks, Vincent Wesley, Jimmie White, and Stella Wright! (not pictured: *LaShawna Hughes*)

“I have had the opportunity to serve the people in my community and get the satisfaction of seeing their faces when I have been able to give them the service that they both needed and deserve.”

—Stella Wright



“The reward to me is like casting bread upon the waters of life; it always comes back. To extend one’s soul to help others, from love and kindness always reaps a just reward. So to be a volunteer is like stretching one’s soul.”

– Lawrence Meadows

“When I consider why I am volunteering to help senior citizens, I realize it is because I know that it just takes a lot of little things adding up daily to help make this phase of their life most rewarding. It is my goal and my hope that the one little thing that I do on the day that we meet will multiply into days of joy and dignity for them.” – Phyllis T. Martin



In an effort to ‘catch’ more fraud, we need to

Cast A wider Net to ‘catch’ more volunteers!

Won’t you join the effort?

Arkansas SMP Volunteers Protecting Medicare Dollars

With estimates of \$60 to \$70 billion in Medicare dollars being lost nationwide each year to fraud, errors, and abuse, the role of the SMP volunteer has become more important than ever.

We would like to take this opportunity to give a big THANKS to our volunteers for their work and dedication in educating the Medicare beneficiaries in the state of Arkansas! Without the continued support of our active volunteers, the Arkansas SMP would be unable to reach the volume of seniors that we do today through statewide outreach and education activities.

There are over 500,000 Medicare beneficiaries in Arkansas alone, and we rely heavily on volunteers to help spread the word to our seniors about how to *protect, detect and report* health-care fraud. Our SMP volunteers currently reach the following counties: **Washington, Jefferson, Miller, Hempstead, Lafayette, Little River, Nevada, Sevier, Union, Phillips, Lee, St. Francis, Monroe, Pulaski, Benton, Carroll, and Madison, along with Bowie and Cass** counties in Texarkana, TX. With many more counties still to cover, we could use additional volunteers! Please consider joining our team!

THANK YOU! THANK YOU! THANK YOU

The SMP is always in need of additional volunteers to assist us in our effort to spread the word statewide about how to *protect, detect and report* health-care fraud!

If you are interested in giving of your time and talents as a volunteer to this worthwhile cause please contact Kathleen.pursell@arkansas.gov; 1-866-726-2916.

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

FRAUDSTERS TARGET PEOPLE WITH DIABETES

Patients with diabetes are being targeted in the latest Medicare scam. The bait behind these calls is nothing new—an alleged offer for free medical supplies, which in this case is a promise of diabetes testing equipment and other medical goods. And the hook is the same: to get the beneficiary's Medicare number. The caller specifically asks these Medicare beneficiaries if they have diabetes, and in some cases, the callers—who also already know the recipient's name, address and phone number—also request the maiden name of the patient's mother, allegedly to “verify” their identities. The callers appear to have a foreign accent and have sometimes identified themselves as calling from “Med-care.”

The bottom line: Never provide your Medicare number or other personal information to an unknown caller.

If you are contacted about this new scam, or any other, report it to the Arkansas SMP at 1-866-726-2916.

FROM THE OFFICE OF THE ATTORNEY GENERAL

FRAUDULENT E-MAIL TARGETS UNEMPLOYED

Little Rock—With continuing high levels of unemployment, many Arkansans who have been laid off are desperately searching for alternative employment. Attorney General Dustin McDaniel issued a warning about a rash of spam e-mail employment offers that purport to offer lucrative jobs, but are really offering nothing but trouble.

“Like all Arkansans I am concerned about how this state can weather the faltering economy and sluggish recovery,” McDaniel said. “While it appears that the recovery is beginning to gather steam in terms of new jobs, we are also aware there are scam artists who will try to take advantage of hard-working, temporarily out of work Arkansans searching for a steady income.”

Although the spam e-mails can appear in different forms, the typical e-mail will offer employment opportunities with attractive salaries in a wide variety of fields. The recipient is requested to supply both personal and contact information in order to apply for the job. One danger here is that the sender of the e-mail may be seeking to obtain personal information from the applicant for the purpose of identity theft.

Another possible danger is that the applicant will be offered a job processing payments. The applicant will be asked to establish a bank account into which payments for goods or services sold by an “employer” may be deposited. The applicant is then instructed to forward these payments by wire transfer to the bank account of the “employer,” retaining a small percentage as compensation. In reality the payments are coming from consumers who have been conned; the applicant is in effect laundering stolen funds.

“The consequences in this case can be even more harmful for the job applicant than mere identity theft,” McDaniel said. “The fake employer keeps the lion's share of the stolen money and leaves the applicant holding the bag of legal consequences, potentially including criminal charges.”

Scams already surfacing with the passing of the new Health-care Reform:

“ObamaCare”

The ObamaCare ruse is the latest trick to get older Americans to buy insurance or other products they may not need.

Insurance agents are showing up at the homes of seniors explaining that they are with ObamaCare, representing the Federal Government, and trying to sell insurance policies. These reps are going door to door, saying they need to “talk about your Medicare benefits,” and that “you may need to take a certain plan in order to get coverage.” They use **fear** and they use **change** as an opportunity to get to seniors.

It is illegal for salesmen to mislead the public in saying they are government officials when they are not. The government does not go door to door selling insurance. The danger with a front-door visit is that some residents may be more easily pressured into buying a plan on the spot. If someone comes to your home to sell you a plan, REMEMBER, sometimes it's *shrewd to be rude*.....just shut the door!

“\$250 Rebate Checks”

Fraudsters have already started calling beneficiaries asking for a bank account number to “make sure your rebate check is deposited into the correct account;” or asking to confirm Medicare numbers so ensure you receive the \$250 rebate check. **You do not have to do ANYTHING to receive this check!**

“New Medicare Card Needed”

Beneficiaries are receiving calls from “government officials” stating that with the passing of the new health-care reform law, new Medicare cards are being issued!

“Changes to Medicare and Part D”

Seniors are being approached by unscrupulous insurance agents claiming that the recent legislation requires seniors to make certain changes to their health-care benefits, including Part D plans.



Is there opportunity for an SMP presentation in your area?

1-866-726-2916

Alpharma Settlement

FROM THE OFFICE OF THE ATTORNEY GENERAL

Little Rock— Arkansas has joined other states and the federal government to reach an agreement in principle with pharmaceutical manufacturer Alpharma, Inc., to settle alleged Medicaid fraud claims, announced Attorney General Dustin McDaniel.

Under the agreement, Alpharma agreed to pay participating states and the United States \$42.5 million plus interest.

Deputy Attorney General Jay Shue was one of just four attorneys from across the country that participated in the investigation and conducted settlement negotiations with Alpharma on behalf of the states. Shue, who heads the Attorney General's Medicaid Department, was part of a National Association of Medicaid Fraud Control Units team.

"This is an issue that Jay Shue and my staff have been personally involved in for two years. I'm glad we were able to play a key role in this settlement and I appreciate Jay's hard work in completing this agreement," McDaniel said.

Participating states and the federal government alleged that during a period from Jan. 1, 2000, through Dec. 29, 2008, Alpharma offered and paid for training programs, consulting forums, research grants and speakers bureaus and made or disseminated false statements about the safety and efficacy of Kadian, all of which was done to induce health-care providers to prescribe Kadian.

Kadian is a sustained release morphine product indicated for the management of moderate to severe pain.

Medicaid Fraud Alleged in NY Dental Clinics

The New York Post—"Dentists are using hawkers on the streets of Harlem to lure Medicaid cardholders to their clinics with promises of cash," *The Post* has learned. The practice is illegal and often a sign of fraud, according to the New York State Office of the Medicaid Inspector General, which oversees the state's cash-strapped public insurance fund. The hawkers unwittingly gave two *Post* reporters an inside peek at their operations. "Dentist, dentist, dentist! Get paid \$20 to \$40! Medicaid!" barked Victor Sotille on the corner of 123rd Street and Lexington Avenue on Friday. ... Sotille told a *Post* reporter that if he has a Medicaid card, he'll receive \$20 cash if he sits for a dental cleaning and \$40 for partial denture work. (Montero, Fasick and Bennett, 3/29).

http://www.nypost.com/p/news/local/bronx/big_bite_vOUkZUm8HbMxyIdxdZrJ8J

Law Enforcement Officials Seek, Find Medicare Fraud

The Palm Beach Post—To pay for the health reform bill, Medicare fraud is "ripe for plucking," top South Florida prosecutors say.

In 2008, of all the Medicare payouts for home health-care services nationwide, over 50 percent were shelled out in Miami-Dade. That was despite the fact that only 2 percent of patients receiving such federally-funded care in the U.S. live in the county. Much of the billing was fraudulent.

Critics argue that trimming Medicare by \$500 billion is unrealistic and benefits will suffer if that amount is cut. But [U.S. Attorney for the Southern District of Florida Jeffrey] Sloman does not find the figure farfetched. ... The best way to reduce Medicare fraud and waste, he says, is to scrutinize claims more closely before they are paid. (Lantigua, 3/31).

"The best way to reduce Medicare fraud and waste, he says, is to scrutinize claims more closely **before they are paid.**"
Jeffrey Sloman



IT'S GOT A NEW LOOK....

Medicare's Website—WWW.MEDICARE.GOV—NEW AND IMPROVED!

Improved usability so the information you need is more easily accessible! **CHECK IT OUT!**

Watch the **video tutorial** featuring Kathleen Sebelius (Secretary, U.S. DHHS) — *It's so easy, you shouldn't even need help from your grandchildren!* http://www.youtube.com/watch?v=KHWMEnt_Fs0v=KHWMEnt_Fs0

COMPARE!

- www.hospitalcompare.hhs.gov—Hospital Compare
- www.medicare.gov/NHCompare—Nursing Home Compare
- www.medicare.gov/Dialysis—End Stage Renal Disease Facilities
- www.medicare.gov/MPPF—Medicare Advantage
- www.medicare.gov/MPDPF—Medicare Prescription Drug Plans

How does health reform affect you?

Your questions are answered on

HealthReform.gov

E-mail questions to healthreform@hhs.gov

Housing Help for People with Disabilities

Thousands of Americans with disabilities will get rental help in 2010 under President Obama's new Year of Community Living program. The program provides \$40 million in HUD funds to help non-elderly people with disabilities live independently in their communities, rather than institutions.

To read the full funding announcement, visit HUD's website: http://portal.hud.gov/portal/page/portal/HUD/program_offices/administration/grants/fundsavail

More information about the Money Follows the Person program: http://www.cms.hhs.gov/CommunityServices/20_MFP.asp

- There are five things that you cannot recover in life:*
- (1) The Stone.....after it's thrown,
 - (2) The Word.....after it's said,
 - (3) The Occasion..after it's missed,
 - (4) The Time.....after it's gone,
 - (5) A person.....after they die.

National Summit on Health Care Fraud *

The first-ever National Summit on Health Care Fraud held at the National Institutes of Health in Bethesda, Md. on January 28, 2010 was a joint undertaking by the U.S. Department of Health & Human Services (DHHS) and the U.S. Department of Justice (DOJ). It was inspiring in its scope and commitment to significantly ramping up the heat on health-care fraud. It represented the most significant acknowledgement among a broad spectrum of stakeholders, including prosecutors, program integrity personnel and public and private payers, of the importance of the SMP program in the battle against health-care fraud.

With DHHS Secretary Kathleen Sebelius's opening remarks, the SMP program received considerable attention in the working session on states' roles, as did the role of beneficiaries in identifying and fighting health-care fraud.

Secretary Sebelius said that one of the most effective ways to stop fraud is prevention: Stop fraud before it happens. She highlighted the SMP program stating that the 20 million beneficiaries reached over the years by the SMP program are like having "20 million undercover cops" combating health-care fraud, adding that we are "trying to beef up that effort."

One important area that was addressed was that the use of new technologies to analyze data more efficiently and to cease the current method of recovering money fraudulently paid, known as "pay and chase," needs to be reversed. Presently, Medicare is required to make timely payments to providers, even if there is suspicion of fraud. Giving Medicare the flexibility to cease or suspend payment if it suspects fraud would go a long way in the fight to prevent fraud.

Secretary Sebelius put criminals on notice. The Obama administration has zero tolerance for health-care fraud. DHHS wants every good idea to combat this growing problem.

Medicare has been an easy target. Fraud has grown faster than the solutions. It violates two sacred trusts: to spend money wisely and to do everything we can to protect Medicare for future generations.

Secretary Sebelius' closing remarks summarized that "... Health-care fraud isn't just a government problem. Criminals do not discriminate. They are stealing from Medicare, Medicaid and private companies at an unacceptable rate. We have a shared interest in stopping these crimes and this summit brought us together to discuss how we can all work together to fight fraud."

The Summit proved that it was obvious that fighting fraud in Medicare and Medicaid was something all could agree upon and efforts to combat this problem would go forward.

*Excerpts taken from article written in the May issue of *The Sentinel* – Full article can be viewed at [http://www.smpresource.org/Content/NavigationMenu/Media/The_Sentinel_\(May2010\).pdf](http://www.smpresource.org/Content/NavigationMenu/Media/The_Sentinel_(May2010).pdf)



LINDA ZIMMERMAN and NANCY MABRY with the RSVP of Benton, Carroll & Madison Counties

Linda is new to the RSVP and will be hosting a 'Medicare Fraud Help Desk' at the Adult Wellness Center in Rogers the first Wednesday of each month from 9a.m.-11a.m. Linda will assist seniors with questions regarding their MSNs or any concerns regarding possible fraud or abuse with their health-care.

WELCOME LINDA!

PLEASE NOTE!

\$250 check—a one-time, automatic payment, from the U.S. Department of Health and Human Services (HHS), mailed to seniors who fall into the donut hole—The HHS logo will be clearly displayed on the envelope. It will also include Medicare's 1-800 toll-free number in case Medicare beneficiaries have any questions. It should be noted that the checks will be mailed by one of Medicare's contractors and the envelope will include the contractor's Wisconsin address in case any checks are returned for follow-up.

AR SMP cautions you — Protect yourself from fraud —DO NOT give out your personal information to anyone calling about the \$250 rebate check!

You do not have to do anything to receive this check! You do not have to apply for it! There are no forms to fill out, and no one will be calling you to get any personal information from you in order to receive your check!

In 2011, Medicare beneficiaries who reach the donut hole will automatically receive a 50% discount on brand-name drugs and biologics when purchasing their medications.



The EmployAbility Project

Do You have a disability or severe long-term illness?
DO YOU WANT TO WORK?
Now Arkansans with disabilities can work, earn a living
AND have health benefits!
Before you get a job, get advice!

1-866-283-7900 Employment Sources Hotline
www.workingdisabled-ar.org

Save the Date: August 10-11, 2010
Arkansas Disability Employment Conference
Arlington Hotel, Hot Springs, AR
Contact: Betsy.Barnes@arkansas.gov / 501-683-6251

FIND OUT IF YOU QUALIFY

Call to find out if you qualify for
EXTRA HELP paying for your prescription drug costs!
We could *all* use the extra help!

SS at 1-800-772-1213 / SHIP at 1-800-224-6330

For more information on Extra Help view the
April/May/June issue of **MEDICARETalk** at

www.afmc.org/HTML/publications/consumers/mtalk_pub.aspx

Do YOU Read It?

The Arkansas SMP strongly urges all Medicare beneficiaries to read your **Medicare Summary Notices (MSN)!** Yes, that's the one that says **"THIS IS NOT A BILL!"** Please regularly check your medical bills, Medicare Summary Notices and explanation of benefits (EOBs) for errors. It is your responsibility to verify that the charges are accurate and the payments made on your behalf are correct.

Get help reading your Medicare Summary Notice on the Medicare website at www.medicare.gov/basics/SummaryNotice.asp.

If you see a discrepancy on your MSN, first contact the provider for an explanation, or contact the Arkansas SMP 1-866-726-2916.

DID YOU KNOW it is **ILLEGAL** to sell your Medicare Number !?



BE LOOKING FOR IT!

The Centers for Medicare and Medicaid Services (CMS) mailed a brochure in late May to Medicare beneficiaries that describes how people with Medicare will be affected by health reform. The brochure is entitled **"Medicare and the New Health Care Law – What it Means for You."**

Read the brochure at:
www.medicare.gov/Publications/Pubs/pdf/11467.pdf

DID YOU KNOW?

IF YOUR PROVIDER 'TAKES ASSIGNMENT'

Your provider has agreed to be paid by Medicare only the amount approved by Medicare for their services and will only charge you the Medicare deductible and/or coinsurance amount.

IF YOUR PROVIDER DOES NOT 'TAKE ASSIGNMENT'

Your provider may charge up to 15% more than the Medicare-approved amount and may also ask you to pay the entire charge at the time of service.

Find out if your provider 'takes assignment'—go to:

Arkmedicare.com and click on "Medpard Database" in the middle of the page under Beneficiary. Then find your provider by name, city, or specialty.

"We all die, but if we're lucky we get to grow old first." —Roy Faudree, *No Theater*
Watch Young@Heart — www.youtube.com/watch?v=1qq0FURLPbs

Sign up for **MyMedicare.gov**—IT'S EASY!

SEE WHAT'S **NEW!**

By registering on MyMedicare.gov, you can:

- View Claim Information (excluding Part D). You don't have to wait three months for your MSN to come in the mail...you can view it online as the claims are filed
- Order Duplicate Medicare Summary Notices (MSN)
- **NEW!** Access quality information about your provider
- View plan enrollment and quality information for your Prescription Drug, Medicare Advantage and other insurance plans
- Compare health and drug plans based on quality measures and estimated costs
- **NEW!** Create and print "On the Go" report listing information you can share with your Health-care providers
- **NEW!** Add or modify self-reported health management information such as medical conditions and allergies
- View and modify your self-selected drug and pharmacy information
- **NEW!** Search for and create a list of your favorite providers
- View details of preventive services you are entitled to and Medicare will pay for

BE SURE TO PUT IN YOUR E-MAIL ADDRESS IF YOU HAVE ONE!

When registering for MyMedicare.gov, it is a good idea to put an e-mail address where asked and you will receive your password immediately via e-mail; otherwise, you may wait up to two weeks to receive your password in the mail.

JUST FOR
LAUGHS!



Getting older is like visiting an all-you-can-eat buffet. What should be hot is cold, what should be firm is limp, and the buns are bigger than anything else on the menu.



Dear Marci



Your trusted source for Medicare answers.

Dear Marci,

www.medicarerights.org

I have had a toothache for several days, and I think I may have a cavity. Will I be covered by Medicare if I go to the dentist for a check up?

—Jeanette (Kansas City, Missouri)

Dear Jeanette,

Unfortunately, Original Medicare will not cover dental check ups and other dental care that is primarily for the health of your teeth. Some Medicare private health plans cover routine dental services. If you have a Medicare private health plan, you should check with your plan to see what, if any, dental services may be covered.

Medicare will cover some dental services if they are required to protect your general health, or you need dental care for another health service that Medicare covers to be successful. For example, Medicare will pay for dental services if you have a disease that involves the jaw, like oral cancer, and need dental services that are necessary for radiation treatment.

Medicare will also pay for some dental-related hospitalizations, for example, if you develop an infection after having a dental procedure. Even if you are in the hospital Medicare will never pay for dental services that are excluded from Medicare, such as dentures.

— Marci

Resources To Help Pay For Dental Care—

Medicaid. You may qualify for Medicaid if you have a low income. Check with your local Medicaid office to see if you qualify and what dental services are covered. Call **1-800-482-5431**. Find a dentist who accepts Medicaid **1-800-322-5580 / www.seeyourdoc.org**; or call ConnectCare **1-800-275-1131**.

Reduced-Cost or Free Clinics - Free and reduced-cost dental clinics are available in many states; *check with:*

- **Local hospitals.** Call the hospitals in your area to ask if they offer dental clinics, how you can become a patient there, what services they offer, what the fees are and if payment plans are available.
- **Federally Qualified Health Centers (FQHCs)**, also known as **Primary Health Care Service Delivery Sites** sometimes offer dental care. FQHCs are health care facilities located in regions defined as "medically underserved areas." People with Medicare are eligible to receive Medicare-covered medical services as well as some preventive services that Medicare does not cover. **1-877-666-CHCA**.
- **Community Health Centers of AR** provide free or reduced-cost health services, including dental care. Community Health Centers are funded by the Health Resources and Services Administration (HRSA) -1-877-666-CHCA. **College Station Health Clinic—NLR 501-490-2440**.
- **Arkansas Healthcare Access Foundation—Donated Dental Service Programs.** These are purely donated services so there may not always be a service available. <http://www.ahcaf.org/services.html>

- **River City Ministry—NLR, AR. 501-376-6694.** Call Monday mornings for appointments—Services include **dental extractions**.
- **Dental Schools** sometimes provide quality, low-cost dental care. Dental students work with patients under the supervision of experienced, licensed dentists.
- **Program of All-Inclusive Care for the Elderly (PACE).** PACE is a program available in some states to people with Medicare and Medicaid who need a nursing home level of care. If you qualify, PACE will cover all the medical, social and rehabilitative services you need. PACE also will cover some dental services among other specialist services including items that Medicare does not cover, such as social work services, meals and more nursing home care. If you do not qualify for Medicaid, you can still participate in PACE, but will need to pay additional costs. Local PACE program - **Total Life Healthcare, Jonesboro—(870) 336-5000 / www.totallifehealthcare.com**
- **Medicare private health plans.** Some Medicare private health plans offer routine dental coverage as part of their benefits package. If you are in a private health plan (such as an HMO or PPO), call your plan to find out what dental services, if any, it covers. If you are considering joining a Medicare private health plan, make sure it covers the doctors and hospitals you prefer to use and the medications you take at a cost you can afford.
- For Arkansas Foundation for Medical Care's (AFMC's) brochure on **\$500 Annual Medicaid Spending on Dental Care for Adults** go to www.afmc.org/Documents/pdf_files/mmcs/Medicaid_Dental_Program_bro.pdf

2011—UPCOMING CHANGES TO THE PART D ENROLLMENT PERIOD

The new health reform law has changed the dates for the enrollment period because advocates for these changes noted that the current enrollment period runs into many major holidays that occur at the end of the year.

New enrollment period! Beginning OCTOBER 15—DECEMBER 7, 2010, effective 2012!

**PLEASE NOTE: The 2010 ENROLLMENT PERIOD WILL REMAIN THE SAME
November 15—December 31**

All Social Security Benefits to Go Electronic

By 2013, the checks will not be in the mail!

NEW RECIPIENTS, or those who start collecting Social Security or other benefits as of **March 1, 2011**, will see a change from paper checks to electronic payments on that date!

Recipients who don't have bank accounts will be able to enroll in the government's Direct Express Debit MasterCard program. Prepaid debit cards will allow them to access their monthly payments.

Millions of other Social Security recipients, who are now and have been receiving their monthly checks by mail, will instead receive them electronically as of March 1, **2013**.

The switch is expected to save the federal government more than \$300 million in mail and paper fees in the first five years. It will also cover veterans as well as railroad and federal civil service retirees.

You May Qualify for Help With Medicare Costs

If your income is less than \$1,354 a month (\$1,821 if you're married and living together), you may qualify to get help paying your Medicare costs from one of these two programs:

1. **Extra Help with Medicare Drug Plan Costs; OR**
2. **Medicare Savings Programs.**

Applying for Extra Help automatically starts your application for Medicare Savings Programs, too. Depending on where you live, you may qualify even if your income is higher.

JUST FILL IT OUT!
www.socialsecurity.gov

Or call SHIP for assistance
1-800-224-6330



Is your Junk Mail Piling Up?

Stopping Junk Mail Is Easy!

Follow these steps:

De-list your name

Unsolicited junk mail comes from one of three sources: Abacus Catalog Alliance (catalogs), Direct Marketing Association (fliers, brochures, etc.), or the credit bureaus (credit card and insurance offers). Take the time to wipe your name from these lists. Here's how to do so:

- ◆ **Abacus Catalog Alliance:** Signing up permanently halts the catalog mailings from association members. *E-mail:* abacusoptout@epsilon.com with your full name and current address.
- ◆ **Direct Marketing Association:** Stops direct mail marketing from association companies for five years. There is a \$1 fee. Access forms for online or mail-in submission at www.dmaconsumers.org/cgi/offmailing
- ◆ **OptOutPrescreen.com:** This joint venture of the four credit bureaus (Equifax, Experian, Innovis, and TransUnion) puts a stop to pre-

screened credit and insurance solicitations. Sign up to halt these mailings for five years, or stop them permanently. Call **1-888-5-OPTOUT**, or fill out a form at <http://www.optoutprescreen.com/>

Pick up the phone

Unfortunately, not every company sending junk mail your way belongs to one of these big three. Plus, companies with which you have a business relationship — from your credit-card issuer to that Internet retailer you ordered from once — can (and will) continue to send you mail. When you get a stray piece of junk, curb that initial impulse to throw it out, and instead, **give the company's toll-free number a call and ask to be removed from the mailing list.**

Having the actual letter or catalog on hand may make the process easier, he says. Look for a customer number on the label, which may help the reps access your records more quickly.

Go to the *Arkansas Recycling Marketing Directory* on www.adeq.state.ar.us/solwaste/branch_market_dev/mkt_dev.asp

www.Green.Arkansas.gov is Arkansas's website to help you take steps to move our state toward a greener economy.

TIPS to know to avoid falling for scams by unscrupulous INSURANCE REPS!

- Neither the State nor Federal government is going door-to-door to sell insurance;
- Neither the State nor Federal government is calling people on the phone to sell insurance;
- Beware of high pressure sales tactics using phrases such as "limited-time offer" or plans that are advertised to be necessitated by the new health insurance reform;
- If you are speaking with a person who claims to be a government representative and are uncertain of their identity, ask to see their credentials;
- Be wary of aggressive sales tactics, and consult friends and family before making any decision;
- Never sign anything or agree to anything on the spot.

More needs to be done

Still, the Centers for Medicare and Medicaid Services could do more to prevent fraud, said Rep. Lloyd Doggett, D-Texas. The agency has failed to remove Social Security numbers from Medicare insurance cards — leaving many of the 45 million beneficiaries vulnerable to identify theft, he said.

Lawmakers and administration officials have been pressing the agency for years to remove Social Security numbers from the cards, yet the agency seems to be no closer to achieving that goal, Doggett said.

"The main thing CMS has done is to come up with astronomical implementation costs that seek to deter legislative action," he said.

Kimberly Brandt, CMS official, said she believes the agency remains committed to protecting beneficiaries against identity theft.

<http://www.federaltimes.com/article/20100617/AGENCY03/6170301/>



Are you confused and overloaded with all the information you have been receiving about the new **Health Care Reform**? Here is link to a one-page tip sheet on **how health reform helps seniors:**

http://www.whitehouse.gov/files/documents/health_reform_for_seniors.pdf

IMPORTANT PHONE NUMBERS:

AANHR AR Advocates for Nursing Home Residents
501-224-8431

AFMC AR Foundation for Medical Care
1-800-272-5528

Area Agency on Aging 1-800-986-3505

Arkansas Attorney General 1-866-810-0016

Arkansas Attorney General Consumer Protection Division 1-800-482-8982

APS Hotline - Adult Protective Services
1-800-482-8049

AR-GetCare (Directory of Community-Based Services)
1-866-801-3435

Arkansas SMP 1-866-726-2916
(Empowering Seniors to Prevent Healthcare Fraud)

Better Business Bureau (BBB) 501-664-7274

Choices in Living Resource Center (DHS)
1-866-801-3435

CMS—Centers for Medicare and Medicaid Services (Fraud Unit) 1-800-633-4227

Community Health Centers of Arkansas
1-877-666-2422

Do Not Call Registry 1-888-382-1222

Elder Care Locator 1-800-677-1116

Federal Trade Commission
Report STOLEN IDENTITY 1-800-438-4338

Medicaid (Customer Assistance Unit) 1-800-482-8988

Medicaid (Arkansas State) 1-800-482-5431

MEDICARE (1-800-Medicare) 1-800-633-4227

Medicare Part D 1-877-772-3379

Medicare Rights Center—Hotline 1-800-333-4114

National Consumer Technical Resource Center
1-877-808-2468

National Medicare Fraud Hotline (1-800-HHS-TIPS)
Office of Inspector General 1-800-447-8477

OLTC—Office of Long Term Care 1-800-LTC-4887

OLTC—Abuse Complaint Section 501-682-8430

Ombudsman—Statewide—Office of Long Term Care
501-682-8952

Senior Circle (Northwest Health System)—Fun, fellowship, discounts, privileges 1-800-211-4148

SHIIP (Senior Health Insurance Information Program)
1-800-224-6330

SSA (Social Security Administration) 1-800-772-1213
Little Rock Office 1-866-593-0933

SSA Fraud Hotline 1-800-269-0271

Tri-County Rural Health Network 1-870-338-8900

UALR Senior Justice Center 501-683-7153

UofA Cooperative Extension Service 501-671-2000

HELPFUL WEBSITES:

ADRC (AR Aging & Disability Resource Center (DHS))—
www.choicesinliving.ar.gov/

AR-GetCare— www.ARGetCare.org
(Directory of Community-Based Services)

AR Advocates for Nursing Home Residents—
www.aanhr.org; e-mail: Info@aanhr.org

AR Long Term Care Ombudsman Program—
www.arombudsman.com

Arkansas 2-1-1— www.arkansas211.org
(Get Connected. Get Answers)

Arkansas Attorney General— www.arkansasag.gov

Arkansas Attorney General Consumer Protection Division—e-mail: consumer@ag.state.ar.us

Area Agencies on Aging—www.daas.ar.gov/aaamap.html

Arkansas Foundation for Medical Care—www.afmc.org

Arkansas SMP—www.daas.ar.gov/asmp.html

BBB (Better Business Bureau)—www.bbb.org

BBB scams and alerts—<http://arkansas.bbb.org/bbb-news/>

CMS (Centers for Medicare and Medicaid Services)—
www.cms.hhs.gov

Elder Care Locator— www.eldercare.gov

H.E.A.T—Healthcare Fraud Prevention and Enforcement Action Team (Turning Up the HEAT to Stop Medicare and Medicaid Fraud—
<http://www.hhs.gov/stopmedicarefraud/>

MEDICARE— www.medicare.gov

Medicare Interactive Counselor—
www.medicareinteractive.org

Hospital Compare— www.hospitalcompare.hhs.gov

MyMedicare.gov— www.mymedicare.gov
(Access to your personal Medicare claims information)

MyMedicareMatters.org (National Council on Aging)

Office of Long Term Care— www.medicaid.state.ar.us/InternetSolution/general/units/oltc/index.aspx

Office of Inspector General— e-mail: HHSTips@oig.hhs.gov

Pharmaceutical Assistance Program—
medicare.gov/pap/index.asp

Social Security Administration—
www.ssa.gov/dallas/state_ar.html

Tri-County Rural Health Network—
communityconnecting.net/home.html

UofA Cooperative Extension Service—
www.uaex.edu (or) www.arfamilies.org

Working Disabled—www.workingdisabled-ar.org



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 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:
e-mail: kathleen.pursell@arkansas.gov

Current and archived newsletters available at:
www.daas.ar.gov/asmpnl.html

SMP SUBGRANTEES

El Dorado Connections RSVP

El Dorado, AR 71730
870-864-7080

EOA of Washington County RSVP

Springdale, AR 72764
479-872-7479

The Literacy Council of Jefferson County

Pine Bluff, AR 71601
870-536-7323

Texarkana RSVP

Texarkana, AR 71854
870-779-4983

RSVP of Central Arkansas

North Little Rock, AR 72114
501-604-4527

RSVP of Benton, Carroll & Madison Counties

Bella Vista, AR 72715
479-876-5960

Tri-County Rural Health Network, Inc.

Helena, AR 72342
870-338-8900

UALR Senior Justice Center

Little Rock, AR 72204
501-683-7511



P. O. Box 1437 Slot S530
Little Rock, AR 72203-1437

Toll-Free: 1-866-726-2916

<http://www.daas.ar.gov/asmp.html>