

# NEWSLETTER

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

## SMP SUBGRANTEES

**El Dorado Connections  
RSVP**  
*Linda Fitts*  
El Dorado, AR 71730  
870-864-7080

**EOA of Washington County  
RSVP**  
*Gary Morris*  
Springdale, AR 72764  
479-872-7479

**The Literacy Council of  
Jefferson County**  
*Jennifer Hurst*  
Pine Bluff, AR 71601  
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**Texarkana RSVP**  
*Ermer Pondexter*  
Texarkana, AR 71854  
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**WestArk RSVP**  
*Susie Reehl*  
Fort Smith, AR 72901  
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**RSVP of Central Arkansas**  
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North Little Rock, AR 72114  
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**RSVP of Boone & Marion  
Counties**  
*Sandy Hillier*  
Harrison, AR 72601  
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**Office of Human Concern  
RSVP**  
*Patty Haak*  
Bella Vista, AR 72715  
479-876-5960

**Tri-County Rural Health  
Network**  
*Naomi Cottoms*  
Helena, AR 72342  
870-338-8900

## YOU MAY BE ABLE TO GET HELP PAYING YOUR MEDICARE DRUG COVERAGE?

**Extra Help:** A Federal program administered by Social Security that helps people with Medicare, who have low incomes and assets, pay for their Medicare drug coverage (including coinsurance, deductibles, and premiums).  
**Even if you think you may not qualify, apply anyway!**

Applying is easy & FREE!

**It's worth the time to apply—Contact your local  
Arkansas Department of Human Services County Office!**

You can also apply online at [www.socialsecurity.gov](http://www.socialsecurity.gov); OR contact your local Social Security Office—Call 1-800-772-1213. For assistance you may also call the Arkansas SMP @ 1-866-726-2916; or SHIIP @ 1-800-224-6330.

## INCOME ASSET LEVELS TO QUALIFY

	Annual Income	Monthly Income	***Assets
<b>**QI-1 = Qualifying Individual</b>			
Single	\$14,040.00	\$1,170.00	\$4,000.00
Couple	\$18,900.00	\$1,575.00	\$6,000.00
<b>**SLMB = Specified Low Income Beneficiary</b>			
Single	\$12,480.00	\$1,040.00	\$4,000.00
Couple	\$16,800.00	\$1,400.00	\$6,000.00
<b>*QMB = Qualified Medicare Beneficiary</b>			
Single	\$10,400.00	\$866.67	\$4,000.00
Couple	\$14,000.00	\$1,166.67	\$6,000.00

**\*QMB:** Qualified Medicare Beneficiary: An Arkansas Medicaid program that pays for Medicare's premium deductibles and co-payments.

**\*\*SLMB and QI-1:** Arkansas Medicaid programs that pays for Medicare's Part B premium (\$96.40 monthly).

**\*\*\*ASSETS =** Cash, savings, CD's, 401K's, stocks, bonds

**DOES NOT INCLUDE:** home, car, household goods.

**If you have Medicaid, receive Supplemental Security Income (SSI), or are enrolled in a Medicare Savings Program (MSP), then you are automatically eligible for Extra Help.**

# Beware of Scams Targeting Grandparents

## Avoid the Grandparents Scam!

### *What to Look For:*

- 1) **A phone call claiming to be about or from a grandchild or other family member in Distress** (such as need for transportation home from a foreign country, for medical treatment, or bail)
- 2) **An urgent need/request for money to be secretly wire transferred, often to a foreign country.**

### **Don't Become A Victim!**

- 1) **Verify that it is your grandchild by contacting their parents or asking a question only the real grandchildren would know the answer to. Even if a story seems to be true at first, verify its accuracy.**
- 2) **Resist pressure to send money quickly and secretly.**
- 3) **Refuse to send money through wire transfer or overnight delivery.**

## Don't let yourself become a target

Help keep yourself safe from fraud by following these suggestions:

- ◆ Treat your Medicare number as you would your credit card information.
- ◆ Never sign anything you don't understand; have a trusted relative, friend or an attorney review any forms and all information.
- ◆ Stay socially active; isolation increases an older adult's risk of becoming a victim.
- ◆ Don't give out your credit card or bank account numbers over the phone or via the Internet unless you initiate the transaction. Even if you have solicited the call or face-to-face visit from a Part D salesperson, be sure the company is legitimate and sound before giving out any personal identification information. Check with the Better Business Bureau or your Area Agency on Aging if you have doubts.
- ◆ Be aware that some companies take names similar to reputable, established ones, and you could be duped by thinking the similarly named company is the same as the original one.
- ◆ Shred or tear into small pieces all mail solicitations, bank records or any other discarded documents that contain identifying personal information.
- ◆ Be aware of scams. If you are told you have just won a prize, you probably haven't.
- ◆ Accept and live by the adage, "If it sounds too good to be true, it probably is."

## FRAUD FACTS

According to the April 2008 OIG Report, since 1997, the SMP program:

- Recovered \$4.5 million in Medicare funds;
- Reported over \$3.1 million in savings to beneficiaries



### **Texas Man Gets 15 Years in Prison For Role in Wheelchair Fraud Scam**

HOUSTON--

A Texas man was sentenced July 31 to serve 15 years in prison for his role in a scheme to fraudulently bill Medicare and Medicaid more than \$600,000 for motorized wheelchairs, Texas Attorney General Greg Abbott ® announced (*Texas v. Akarue*, Tex. Dist. Ct., No. 115604, *sentencing* 7/31/08).

From July 2002 through June 2003, defendant Enohor Victor Akarue, former owner of Rosewood Medical Supplies in Houston, admitted he billed Medicare and Medicaid for expensive power wheelchairs but actually delivered much less expensive scooters to patients, Abbott said in a statement. Records showed that many of the wheelchairs were either never delivered or not medically necessary.

# HAT'S OFF TO CAREGIVERS!

But beware of Caregiver Burnout!

## TIPS on how to prevent burnout:

**Remember: your needs are important too!** Caring for a loved one is an emotional task and caregivers commonly feel sadness, frustration, resentment, anxiety, anger and guilt. As a result of stress, many caregivers suffer from depression and their own physical ailments. It is important that you take time to take care of yourself—even if it is only a few moments here and there.

### Some tips:

- **Eat well and get enough sleep.** Common sense? Maybe. But when you are busy and stressed, it is easy to neglect the basics.
- **Breathe.** Deep breathing exercises and meditation can permanently change your physical responses to stress. Practicing 20 minutes a day can make the difference.
- **Exercise.** Taking time to exercise can also alleviate stress and help keep you healthy.
- **Set boundaries.** Learn to say no. Realizing your own limitations can make you more productive in the long run.
- **Ask for help.** Many caregivers think they have to shoulder the burden alone. Enlist the assistance of family members and friends.
- **Plan for respite care.** You may need a few days' break (respite). If friends or family cannot fill in, respite care services may be available in the community. Under certain circumstances, Medicare will pay for a limited amount of respite care.

- **Make time for fun.** Do not turn down invitations from friends. If you take time to talk and laugh, it can help keep life in perspective.
- **Be aware of the signs of caregiver burnout.** It is time to take a break if you are feeling constantly irritated; ceasing to laugh; snapping at your loved one over little things; having crying fits or rages; or developing stress-related ailments, such as headaches, upset stomach or insomnia.
- **Join support groups.** You are not alone in your experiences. Finding out how other people have coped may be helpful.
- **Do not neglect your health.** Remember to see your doctor for routine check-ups and recommended screenings. And stay on top of managing any chronic health conditions you may have, such as diabetes.

### Personal information you should never release in a conversation not initiated by you includes:

- Medicare Number
- Bank Account Numbers
- Bank Card Numbers - Credit or Debit
- Personal Identification Numbers (PINs)
- Social Security Number

## Will Medicare continue to pay for physical therapy if you reach Medicare's physical therapy limit?

In 2009, Medicare will cover up to \$1,840 (up from \$1,810 in 2008) worth of physical therapy.

Once Medicare has paid for therapy services up to its limits, it will no longer cover physical therapy. However, if it is medically necessary to receive more physical therapy than will be covered by Medicare, the physician should ask for an exception to the payment limits. Medicare has created special billing codes that allow therapy for a wide range of conditions to be approved.

Always review your MSN (Medicare Summary Notice) to see how close you are to the therapy cap, or ask your provider before each appointment.

## Survey Says . . .

According to a new report by AARP's Public Policy Institute:

- 7 percent of caregivers end up having to reduce their working hours—or quit their job—to provide care.
- caregivers are at risk of becoming ill themselves because of chronic stress—Remember to **TAKE CARE OF YOURSELF!**
- the typical caregiver is a 46-year-old woman who works outside the home and provides more than 20 hours weekly of unpaid care to her mother, including daily chores and health-related tasks, such as administering medications.

## To avoid becoming a victim of cyber fraud:

- Do not respond to unsolicited (spam) e-mail.
- Do not click on links contained within an unsolicited e-mail.
- Be cautious of e-mails claiming to contain pictures in attached files, as the files may contain viruses. Only open attachments from known senders.
- Avoid filling out forms in e-mail messages that ask for personal information.
- Always compare the link in the e-mail to the link that you are actually directed to.
- Log on to the official website instead of "linking" to it from an unsolicited e-mail.
- Contact the actual business that supposedly sent the e-mail to verify if the e-mail is genuine.

If you have received a scam e-mail, file a complaint at [www.ic3.gov](http://www.ic3.gov). For more information on e-scams, visit the FBI's New E-Scams and Warnings webpage: [www.fbi.gov/cyberinvest/scams.htm](http://www.fbi.gov/cyberinvest/scams.htm).



## IN THE SPOTLIGHT! . . .

Really Special and Valuable People!

### **Tri County Rural Health Network Joins Arkansas SMP & UALR in Special Delta Project**

The 2008 Arkansas SMP integration project will focus on expanding and integrating program coverage within one of the poorest, most rural areas in the nation, the Arkansas Delta, via an innovative community outreach, educational and research model that can be successfully replicated by other SMPs across the country.

The two-phase intervention involves: (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 healthcare fraud associated with those benefits; and (2) conducting a research study to determine the best method(s) to reach out to 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.

The proposed initiative will be facilitated by partnerships with the Tri-County Rural Health Network, a strong, like-minded community-based organization located in the Arkansas Delta, and the one-of-a-kind UALR Senior Justice Center, which addresses crime against the elderly and is renowned for involving college students in public service.

Measurable outcomes will be: increased beneficiary awareness of the need to prevent healthcare fraud and abuse; changes in beneficiary behavior as they apply what they have learned about preventing healthcare fraud, avoiding becoming the victim of the healthcare scams prevalent in the Delta, and accessing benefits to which they are entitled (e.g., the Medicare Part D LIS); and the most important outcome will be a better understanding of how rural seniors prefer to receive health-related information.

The results of data collection and analyses will be shared with AoA, other SMPs, the Aging and Disability Resource Network, and the nationwide aging network via study reports and publication in a scientific journal dedicated to aging issues.



## THE CONGRESSIONAL BUDGET OFFICE (CBO) PEGS COST OF ENDING TWO-YEAR WAIT FOR MEDICARE

Eliminating the 24-month Medicare waiting period for individuals who qualify for Social Security Disability Insurance (SSDI) will cost the federal government \$113 billion over ten years, while reducing the wait for Medicare coverage to 12 months would cost \$65 billion, according to a new analysis of health policy options by the Congressional Budget Office (CBO).

Another alternative would eliminate the waiting period for Medicare coverage for individuals who have no access to private insurance. Studies have found that about a fifth to a third of people in the two-year waiting period are uninsured, while others have private coverage through COBRA, or through a spouse's employer or retiree plan.

Eliminating the waiting period for those without private insurance would increase federal spending by \$56 billion over 10 years. The final alternative would eliminate the 24-month waiting

In 1972, when Congress expanded Medicare to include people with disabilities, it created a "waiting period" that requires people to wait 24 months from when they begin receiving their Social Security Disability Insurance (SSDI) payments before can could receive health care through Medicare.

Costs for the elimination of the waiting period are estimated to be around \$9 billion annually. These costs would be offset by about \$4 billion in Medicaid savings.

period only for people who have no access to private insurance or to Medicaid coverage. This option would add \$28 billion to federal spending. These last two options would create new administrative costs to verify that those individuals do indeed lack insurance.

In separate cost projections included in the report, CBO estimated that taxpayers would save \$110 billion over ten years by requiring manufacturers of brand-name drugs to pay the federal government the same

rebate paid to state Medicaid programs for drugs covered under the Medicare Part D drug benefit. CBO also estimated the cost of eliminating the Part D doughnut hole, the gap built into drug coverage, at \$134 billion over ten years.

[Kaiser Daily Health Policy Report](#)  
Wednesday, January 07, 2009

### **CMS Finalizes Medicare Rule That Aims To Stop Pharmacy Benefit Manager Practice That Inflates Drug Costs for Some Beneficiaries**

CMS [Centers for Medicare and Medicaid Services] officials on Tuesday [January 6] said that the agency has finalized a new rule that will restrict an approach used by pharmacy benefit managers that inflates prescription drug costs for some Medicare beneficiaries, the *Wall Street Journal* reports.

PBMs negotiate prescription drug prices with pharmacies and reimburse them for medication purchased by patients, after which health insurers pay PBMs for administration of claims. Under the so-called lock-in approach, health insurers pay PBMs a set amount for claims regardless of the amount that they reimburse pharmacies for prescription drugs. The amount that health insur-

ers pay PBMs for claims often exceeds the amount that they reimburse pharmacies for prescription drugs. PBMs in most cases do not disclose the amount of the difference, which the companies retain. The approach can cause Medicare beneficiaries to reach the so-called "doughnut hole" coverage gap earlier.

The new rule, which will take effect on Jan. 1, 2010, will not ban the use of the approach. However, under the rule, CMS will use the amount that PBMs reimburse pharmacies for prescription drugs, rather than the amount that health insurers pay PBMs for claims, to determine medication costs for Medicare beneficiaries.

Acting CMS Administrator Kerry Weems said that the rule will "reduce what (patients) pay at the pharmacy counter." PBM Express Scripts raised concerns that the rule "will lead to higher costs and fewer competitive plan design choices over the long term". Rubenstein, *Wall Street Journal*, 1/7).

### **NEW RULES FOR ABNs**

As of October 1, 2008, all providers must use ABNs (Advance Beneficiary Notices) that **ALLOW YOU TO CHOOSE WHETHER OR NOT YOU WANT YOUR DOCTOR TO SUBMIT A CLAIM to Medicare at all.**

A resource provided by the Medicare Rights Center, *Medicare Interactive Counselor*, claims to be the largest independent source of health-care information and assistance for people with Medicare.

[medicareinteractive.org](http://medicareinteractive.org)

## ANNUAL ENROLLMENT PERIOD!

**January 1—March 31**

(Medicare) and (Medicare Advantage)

Take the time to consider your options! Find the plan that is right for you! Go to **www.medicare.gov** and compare plans to find the one suited for your medical needs or call **Medicare at 1-800-Medicare (1-800-633-4227)**

Only some Medicare Private Fee For Service Plans offer Medicare prescription drug coverage. In most Medicare Advantage Plans, if you want drug coverage and your plan offers it, you must get it from your Medicare Advantage Plan. If your Medicare PFFS Plan doesn't offer Medicare prescription drug coverage, you can join a Medicare Prescription Drug Plan to add prescription drug coverage to your plan during a valid enrollment period.

If you are eligible for a Medicare Advantage Plan, you can join a Medicare Advantage Plan from January 1–March 31 of each year (except Medicare Medical Savings Account Plans). However, you can't add or change to a plan with prescription drug coverage during this time unless you already have Medicare prescription drug coverage. In certain situations, you may be able to join, switch, or drop Medicare Advantage Plans at other times (like if you move out of the service area, have both Medicare and Medicaid, or live in an institution).

**REMEMBER! If you are happy with your current coverage, keep it!**

You do not have to sign up for a Medicare private health plan, so do not let yourself be pressured into it.

Keep in mind that if you choose a Medicare private health plan, the plan you pick can affect the health care you get, and you are limited in when and how often you can switch your plan.

IF YOU ARE JUST GETTING ONTO MEDICARE, YOU SHOULD CONSIDER GETTING A TRADITIONAL MEDICARE SUPPLEMENT TO PAY THE 20% THAT ORIGINAL MEDICARE DOES NOT COVER IN THEIR 80%.

IF YOU JOIN A MEDICARE ADVANTAGE PLAN FIRST, YOU MAY NOT BE EVER BE ABLE TO GET A MEDIGAP PLAN BECAUSE YOU MAY THEN HAVE TO GO THROUGH HEALTH QUESTIONS AND UNDERWRITING.

IF YOU JOIN A MEDIGAP/MEDICARE SUPPLEMENT FIRST, AND THEN DECIDE TO "TRY" A MEDICARE ADVANTAGE PLAN, YOU HAVE A **12-MONTH PERIOD** WHEREIN IF YOU DECIDE YOU REALLY DON'T LIKE THE ADVANTAGE PLAN YOU WILL NOT HAVE TO GO THROUGH UNDERWRITING TO GET BACK ON THE BEST COVERAGE FOR YOU.

### ***DID YOU KNOW?***

**Beginning January 1, 2009:** Medicare will cover 80% of your "Welcome to Medicare" physical any time during the first 12 months of your Medicare coverage and the Part B deductible does not apply!

*(In 2008 you had to receive the physical within 6 months and Medicare covered 80% after the Part B deductible was met)*

Is there an opportunity for an SMP presentation in your area?  
**1-866-726-2916**

## **MEDICARE PROTECTION TOOLKIT**

a collaborative effort of the Arkansas SMP, the Office of the Arkansas Attorney General and the Senior Health Insurance Information Program (SHIIP) to assist Medicare beneficiaries in the decision-making process of enrolling into a Medicare Advantage Plan.

**Call 1-866-726-2916 or 1-800-224-6330 For your FREE copy!**

Also available at all DHS County Offices

### IMPORTANT PHONE NUMBERS:

<b>AANHR</b> - AR Advocates for Nursing Home Residents	501-224-8431
<b>AFMC</b> - Arkansas Foundation for Medical Care	1-800-272-5528
<b>Arkansas Attorney General</b>	1-866-810-0016
<b>Arkansas Attorney General (Consumer Protection Division)</b>	1-800-482-8982
<b>APS Hotline</b> - Adult Protective Services	1-800-482-8049
<b>AR-GetCare</b> (Statewide directory of community-based services)	1-866-801-3435
<b>Arkansas SMP</b> (Empowering Seniors to Prevent Healthcare Fraud)	1-866-726-2916
<b>CMS</b> — Centers for Medicare and Medicaid Services (Fraud Unit)	1-800-633-4227
<b>Community Health Centers of Arkansas</b>	(1-877-666-2422) 1-877-666-CHCA
<b>DHS—CHOICES IN LIVING RESOURCE CENTER</b>	1-866-801-3435
<b>Do Not Call Registry</b>	1-888-382-1222
<b>Federal Trade Commission</b> - report STOLEN IDENTITY	1-800-438-4338
<b>Medicaid</b> (Customer Assistance Unit)	1-800-482-8988
<b>Medicaid (Arkansas State)</b>	1-800-482-5431
<b>MEDICARE</b>	(1-800-633-4227) 1-800-MEDICARE
<b>Medicare Part D</b> - (SAIC—West Region)	(1-877-772-3379) 1-877-7SAFERX
<b>Medicare Rights Center</b> —Medicare Assistance Hotline	1-800-333-4114
<b>National Consumer Technical Resource Center</b>	1-877-808-2468
<b>National Medicare Fraud Hotline (1-800-HHS-TIPS)</b>	1-800-447-8477
<b>OLTC</b> - Office of Long Term Care	1-800-LTC-4887
<b>OLTC</b> —Abuse Complaint Section	501-682-8430
<b>OMBUDSMAN</b> —Statewide—Office of Long Term Care	501-682-8952
<b>SHIP</b> - State Health Insurance Information Program	1-800-224-6330
<b>SSA</b> (Social Security Administration) (1-800-772-1213)	Little Rock Office...501-324-5827
<b>UALR Senior Justice Center</b>	501-683-7153

### HELPFUL WEBSITES:

- AR-GetCare**— [www.ARGetCare.org](http://www.ARGetCare.org) (Statewide directory of community-based services)
- AR Advocates for Nursing Home Residents**— [www.aanhr.org](http://www.aanhr.org); email: [Info@aanhr.org](mailto:Info@aanhr.org)
- AR LTC Ombudsman Program**— [www.arombudsman.com](http://www.arombudsman.com)
- Arkansas 2-1-1**— [www.arkansas211.org](http://www.arkansas211.org) (Get Connected.Get Answers)
- Arkansas.gov**— official website for the State of Arkansas
- Arkansas Attorney General**— [www.arkansasag.gov](http://www.arkansasag.gov)
- Arkansas Attorney General Consumer Protection Division**— email: [consumer@ag.state.ar.us](mailto:consumer@ag.state.ar.us)
- Area Agencies on Aging**—[www.arkansas.gov/dhs/aging/aaamap.html](http://www.arkansas.gov/dhs/aging/aaamap.html)
- Arkansas Foundation for Medical Care** —[www.afmc.org](http://www.afmc.org)
- (CMS) Centers for Medicare and Medicaid Services**— [www.cms.hhs.gov](http://www.cms.hhs.gov)
- Elder Care Locator**— [www.eldercare.gov](http://www.eldercare.gov) (1-800-677-1116)
- MEDICARE**— [www.medicare.gov](http://www.medicare.gov)
- Medicare Interactive Counselor**— [www.medicareinteractive.org](http://www.medicareinteractive.org)
- Hospital Compare**— [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)
- MyMedicare.gov**— [www.mymedicare.gov](http://www.mymedicare.gov) (access to your personal Medicare information)
- MyMedicareMatters.org** (National Council on Aging)
- Office of Long Term Care**— [www.medicaid.state.ar.us/InternetSolution/general/units/oltc/index.aspx](http://www.medicaid.state.ar.us/InternetSolution/general/units/oltc/index.aspx)
- Office of Inspector General**— [HHSTips@oig.hhs.gov](mailto:HHSTips@oig.hhs.gov)
- SMP**—[www.arkansas.gov/dhs/aging/asmp.html](http://www.arkansas.gov/dhs/aging/asmp.html)
- Social Security Administration**— [www.ssa.gov/dallas/state\\_ar.html](http://www.ssa.gov/dallas/state_ar.html)
- Working Disabled**—[www.workingdisabled-ar.org](http://www.workingdisabled-ar.org)



# OUR MISSION

## TO EMPOWER SENIORS

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



## TO PREVENT HEALTHCARE 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 when not needed

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

- \*Always review MSN and EOB for mistakes
- \*Compare them to prescription drug receipts and record them in your 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

### **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 healthcare providers
- \*Retired professionals, i.e. teachers, accountants, attorneys, investigators, nurses



P. O. Box 1437 Slot S530  
Little Rock, AR 72203-1437  
**Toll-Free Hotline 1-866-726-2916**  
<http://www.arkansas.gov/dhs/aging/asmp.html>

