

The SMP SCOOP

PROTECT DETECT REPORT

SUMMER 2023

The Senior Medicare Patrol (SMP) Scoop is prepared by the GWAAR SMP Team to help Medicare beneficiaries and their advocates prevent, detect, and report health care fraud, abuse, and errors.

Please feel free to share this publication with others who may benefit from its contents.

TO CONTACT WI SMP

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To subscribe, please send us an e-mail.



Medicare Fraud Prevention Week Starts June 5

Everyone Can Prevent Medicare Fraud

By the Senior Medicare Patrol Resource Center



Fraud costs Medicare an estimated \$60 billion per year. It costs Medicare beneficiaries in time, stress, their medical identities, and potentially their health. It costs families, friends, and caregivers in worry and lost work when helping their loved ones recover from falling victim to Medicare fraud.

"Medicare fraud has a devastating impact on both beneficiaries and the Medicare program," said Ingrid Kunding, Project Manager, Senior

Medicare Patrol in Wisconsin. "We teach people how to avoid experiencing Medicare fraud. By preventing fraud from happening, this program helps individuals and protects the Medicare program for generations to come."

Learn how to protect yourself and your loved ones by joining the Senior Medicare Patrol (SMP) and their partners for Medicare Fraud Prevention Week, held June 5-11, 2023. This observance starts on June 5, or "6-5," because most people become eligible for Medicare when they turn 65 years old.

"We're excited to teach people both about how to protect themselves from Medicare fraud and about the services that the Senior Medicare Patrol program offers. We hope that people will remember the numbers '6-5' to help us celebrate Medicare Fraud Prevention Week," said Ingrid.

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The Wisconsin SMP program is supported, in part by grant number 90MPPG0041-01-00, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.



Medicare Fraud Prevention Week Starts June 5 continued from page 1

Everyone plays a part in the fight against fraud. During Medicare Fraud Prevention Week:

- **Medicare beneficiaries** can monitor their insurance statements to make sure products and services received match what is on the statements. They can request free My Health Care Trackers from their local SMP.
- **Caregivers** can help by being on the lookout for items such as durable medical equipment (like boxes of knee braces) lying around the house that may have been shipped to the beneficiary without their or their doctor's approval. They can remind their client or loved one to never give out their Medicare number or other personal information over the phone.
- **Families** can help by talking to their loved ones about protecting their Medicare number just as they would a credit card number. They can help their loved ones create a Medicare.gov account to access their Medicare statements online or remind them to open and review them when they come in the mail. They can also register their phone number on "do not call" lists and go to optoutprescreen.com to opt out of mailings.
- **Partners and professionals** can help by sharing SMP information on social media, referring clients and consumers to the SMP, and inviting the SMP to speak during a shared event.

- **Health care providers** can help by talking to patients about health care-related scams such as those related to durable medical equipment and genetic testing schemes. They can remind them that products and services should only be ordered by physicians they regularly see. Needed medical items should never be ordered through TV ads or unsolicited calls.
- **Community members** can help by looking out for older neighbors. When in public, they can be aware of older individuals purchasing gift cards in large amounts. They can encourage those they know to talk to a trusted source about their Medicare questions and tell neighbors about the most recent Medicare scams. They can even consider volunteering with the local SMP!

The Senior Medicare Patrol (SMP) is ready to provide you with the information you need to PROTECT yourself from Medicare fraud, errors, and abuse; DETECT potential fraud, errors, and abuse; and REPORT your concerns. SMPs help educate and empower Medicare beneficiaries in the fight against health care fraud. Your SMP can help you with your questions, concerns, or complaints about potential fraud and abuse issues. It also provides information and educational presentations.

IMPORTANT

Message to Medicare Beneficiaries

From the National Senior Medicare Patrol Resource Center

On behalf of CMS, we want to remind beneficiaries to protect their Medicare card and Medicare number by only sharing this information with health care providers, insurance companies or health plans (and their licensed agents or brokers), or SMPs that you trust to work with Medicare. We advise you to not make copies (or pay others to make copies) of your Medicare cards or laminate the cards. For beneficiaries who have an account at Medicare.gov, you can easily print or order an official replacement card, if your original card is lost or damaged.

Guard your Medicare card and number like a credit card! Don't share your number, laminate it, make copies, or let anyone else make a copy. If you need an official replacement card, you can print or order one at Medicare.gov or call 1-800-MEDICARE (1-800-633-4227).

Medicare Coverage of Ambulance Services

By the GWAAR Legal Services Team



If you ever find yourself experiencing a medical emergency, you may need to call an ambulance. You may also need medical transport via ambulance between two different medical providers. But how do you know that Original Medicare or your Medicare Advantage plan will cover the charges?

Criteria for an Emergency Call

You can get emergency ambulance transportation when you've had a sudden medical emergency and your health is in serious danger because you can't be safely transported by other means, like by car or taxi. The ambulance must also transport you to the nearest appropriate facility, usually a hospital. If you call an ambulance but are not transported, Medicare will not cover the cost of the ambulance call. If you are not transported to the nearest appropriate facility, Medicare will not cover the extra mileage to that facility. The nearest appropriate facility means that the institution is generally equipped to provide the needed hospital or skilled nursing care for the illness or injury involved. For example, someone with end-stage renal disease may need to be transported to a hospital that has dialysis capabilities.

Criteria for Facility-to-Facility Transport

You may be able to get emergency or non-emergency ambulance transportation from one medical facility to another if you need it to treat or diagnose your health condition and the use of any other transportation method could endanger your health. In some cases, Medicare may cover limited, medically necessary, non-emergency ambulance transportation if your doctor writes an order stating that ambulance transportation is necessary due to your medical condition. Even if a situation isn't an emergency, ambulance transportation may be medically necessary to get you to a hospital or other covered health facility. For example, someone needing a specialized kind of surgery may need to be transported to the nearest facility that has the required specialist on staff. Again, if you are transported to a facility farther away, Medicare will not pay for that extra mileage.

Note: if you have a Medicare Advantage plan, it must cover at least what Original Medicare covers, but it may provide additional coverage. For information about that coverage, see your plan's evidence of coverage or contact your plan directly.

If you end up with ambulance services that have been denied, you have the option to appeal. For Original Medicare, you follow the appeal procedures outlined in your Medicare Summary Notice (MSN). For Medicare Advantage appeals, you will follow the appeal procedures outlined in your explanation of benefits (EOB). For assistance with these appeals, you may reach out to your local Elder Benefit Specialist (EBS). To find the EBS in your area, visit: www.dhs.wisconsin.gov/benefit-specialists/counties.htm



Wisconsin SMP Partnership With Great Lakes Inter-Tribal Council

Working to enhance the quality of life for all Native people

Prescription Drug Coverage for Medicare-Eligible Tribal Members

By Mary Wolf, Director, Aging & Disability Services

Wisconsin is home to 11 federally recognized American Indian tribes. All tribal members may access tribal pharmacies that provide their prescription medications at no cost to them. As a result, many tribal members who are eligible for Medicare are not enrolled in a Part D plan or Advantage plan with prescription drug coverage.

However, tribal pharmacies are not without limits. While some tribal pharmacies do mail prescriptions within the state of Wisconsin, not all do this, which means that only tribal members who live near the pharmacy are able to fill prescriptions there. In addition, even if the pharmacy can mail prescriptions, it will not be able to mail them to tribal members who are traveling out of state. Moreover, some tribal pharmacies are not open on weekends or during the evening. Finally, some pharmacies have limited inventories and may not be able to provide all medications a member may need. For example, some pharmacies do not carry Schedule II drugs.

As a result, even if a tribal member has access to a tribal pharmacy that will provide prescription medication at no cost, it may be in the member's best interest to enroll in Medicare prescription drug

coverage to avoid any issues with access to medication.

As Indian Health Service beneficiaries, tribal members can enroll in Medicare prescription drug coverage during the fall Annual Enrollment Period or during a Special Enrollment Period with no late enrollment penalty.

You can check with your local tribe's benefit specialist, health benefits coordinator, or a clinic benefit specialist for assistance.

If you have questions about current prescription drug benefits provided by your tribe, speak with your Tribal Elder Benefit Specialist, Medical/Health Benefits Coordinator, or a Tribal Clinic Benefit Specialist. Benefit Specialists and Health Benefits Coordinators can also assist with enrollment into a Part D plan or Advantage plan.

An Elder or Disability Benefit Specialist can assist you in choosing the coverage that works best for you!

Please call (715) 588-1078 if you have any questions.



World Elder Abuse Awareness Day (WEAAD), observed on June 15, promotes awareness of the abuse and neglect of older people by focusing on the cultural, social, economic, and demographic processes affecting elder abuse and neglect. WEAAD also supports the United Nations International Plan of Action, acknowledging elder abuse as a public health and human rights issue, and reminds us that elder abuse has implications for everyone. WEAAD is a call to action for society's individuals, organizations, and communities to identify, address, and prevent abuse so we can all do our part to support our aging community.

The Power of Connections, Do YOU Know How Valuable You Are?

By Jackie Carattini, Human Development and Relationships Educator, UW-Madison Division of Extension



The past few years have been turbulent to say the least. Many people have experienced losses and are carrying burdens of traumas and challenges

they may have faced as a result of the COVID-19 pandemic. As a result of those challenges, some people may have developed coping mechanisms to help them travel through their changing worlds. One thing that the pandemic has reaffirmed is that people need people. No matter your age, gender, or where you live, people need people. It is a basic human requirement. Even prior to the pandemic research showed that having social connections is vital to your health. Being socially connected to others can lower anxiety and depression, help regulate emotions, and increase self-esteem and empathy. Social connections can actually improve your immune system. You may be thinking, well how powerful can the impact of social connections really be? Can it really impact my health and daily life? A 2018 research study led by the American Cancer Society found that social isolation may contribute to depression, insomnia, and cognitive decline. The same study also found that lack of social connections may be associated with obesity, smoking, and high blood pressure. Other studies have linked isolation to increased chances of stroke and heart disease.

Do you have at least one person you connect with on a regular basis? According to Dr. Robert Brooks, a Harvard Psychologist, having one charismatic adult in a person's life has a profound effect on both adults and children. That connection has the potential to propel you forward in your goals and

encourage you to persevere when times are difficult. He defines a charismatic adult as a person who you feel connected to and from whom you can gather strength. We often talk about the importance of having strong role models for children but we don't often talk about needing those connections and relationships as we age. Take a moment to think about a person you have in your life that you feel connected to and can gather strength from. This may surprise you. It may be a spouse, child, grandchild, friend, or sibling, but it may also be a minister or your neighbor.

Now that we have established the importance and need for social connection, let's talk about what kind of connections YOU can provide. Yes, I said you! Who are you that charismatic adult for? Let's start by breaking down what connections can look like.

What exactly is meant by connection? Connections can look like many different things. It may be a phone call to check on a friend. It may be a wave to the neighbor as they are walking their dog. Or it could be attending your monthly card club, free movie night at the library, or volunteering at your local food pantry. Sometimes just being around people at the grocery store, church, or restaurant can provide a sense of connection. So take a moment and think about where you find connections in your daily life.

Examples of different types of social connections:

- **Concrete help** - such as someone coming to help you rake leaves and clean your yard or you taking a friend to a doctor's appointment.
- **Emotional support** - this could be a friend stopping by and listening to your struggles.
- **Perspective** - being reminded that we all have flat tires and that the world is not out to get you.

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The Power of Connections, Do YOU Know How Valuable You Are? continued from page 5

- **Advice** - this might be someone suggesting which handyman service is recommended.
- **Validation** - learning that other people plan their day around the weather too.

What kinds of connections do you provide for others? Which of these do YOU excel at? What would you consider your connection superpower?

As we go through life our relationships with those around us may change. There may be times where you may want to get more out of the relationships you have. Consider the following steps to strengthen your connections:

- Make a list of who you want to connect with.

- Schedule dates and times to call, email, text, or get together with them.
- Commit time each week to connect with others! Make it a priority and limit distractions.
- Focus on being a good listener to those around you.
- Ask what kind of help you can provide.

There is a time and place for all of these. You may not do each one for every person you know all of the time, but acknowledge that you do have the power to impact those around you! Each and every person has value! Your actions and connections with others can improve lives! Use your connection super powers!

View Our New Volunteer Video

By Molly A. Kelly, SMP Volunteer Coordinator

"...We know that one of the most effective and direct steps we can take to improve Medicare's long-term health is ridding the program of waste, fraud, and abuse. And for the last 14 years, the Senior Medicare Patrol has been on the frontlines of that fight. No one feels more strongly about keeping criminals out of Medicare than seniors themselves. When someone defrauds Medicare, it means higher premiums and co-pays for beneficiaries. It also threatens the program that they have worked so hard for – and that they want to make sure is there for their children and grandchildren."

In August 2011, Health and Human Services (HHS) Secretary Kathleen Sebelius said this when addressing SMPs at a national SMP conference. This sentiment remains true in 2023 as we continue to educate Medicare beneficiaries, their families, and caregivers on how to prevent, detect, and report health care fraud. As long as the fraudsters are out there, we will use our resources to oppose their attempts to deceive the system. And volunteers are an essential part of this effort. To introduce and promote our volunteer program we partnered with

Volunteer Corner

HVS Advertising & Marketing to produce a volunteer video: [Join the SMP Volunteer Team!](#)

Ten thousand Americans turn age 65 every day and many of them are seeking satisfying ways to give back to their communities, to find a meaningful way to get involved. Volunteering provides a sense of purpose, structure, and engagement in your community. And the health benefits of volunteering have been appropriately noted over and over. Your involvement has an enormous impact on those who are helped.

We invite you to view our video and to become a member of our Wisconsin SMP volunteer network. With a strong state-wide network, we can work together to help safeguard Medicare and its beneficiaries.

If you would like to volunteer, or to learn more, please call: (888) 818-2611 or go online to [Become A Volunteer - Wisconsin Senior Medicare Patrol](#)





What's the "Scoop"?

By Ingrid Kundinger, SMP Project Manager



The federal Public Health Emergency (PHE) for COVID-19 expired on May 11, 2023. The expiration of the PHE was based on current COVID-19 trends and the responses set in place in the last three years, meaning that we no longer need to operate in an emergency phase related to COVID-19. The PHE allowed for some changes to the ways in which health care was delivered during this time. Some of the changes will be permanent or extended due to Congressional actions, other waivers and flexibilities have expired.

There are some important things for Medicare beneficiaries to know related to COVID-19 vaccines, testing, and treatments. Per the Centers for Medicare and Medicaid Services (CMS) [Public Health Emergency Fact Sheet](#):

COVID-19 Vaccines: People with Medicare coverage will continue to have access to COVID-19 vaccinations without cost sharing after the end of the PHE.

COVID-19 Testing: People with traditional Medicare (Parts A & B directly from Medicare) can continue to receive PCR and antigen tests with no cost sharing when the test is ordered by a physician or certain other health care providers and performed in a laboratory. People enrolled in Medicare Advantage (MA) plans will

be able to continue to receive COVID-19 PCR and antigen tests when the test is covered by Medicare, but the cost-sharing may be different with the ending of the PHE. Beneficiaries are encouraged to call their MA plans and ask what the payment structure will, going forward, for COVID-19 tests.

Very important to note: Access to free over the counter COVID-19 tests ended with the PHE. Some MA plans may continue to provide coverage as a supplemental benefit. Again, check with your plan for more details.

COVID-19 Treatments: There was not a change in Medicare coverage of treatments for people who were exposed to COVID-19 because of the PHE ending. If you were responsible for cost sharing and deductibles during the PHE, those responsibilities will continue. Access to oral antivirals, such as Paxlovid and Lagevrio is not changed because of the end of the COVID-19 PHE.

For specific questions about this information as it relates to your Medicare coverage, you can contact Medicare directly at 1-800-MEDICARE (1-800-633-4227) or contact your Medicare Advantage plan.

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Access to Telehealth Services

Medicare beneficiaries had greatly expanded access to telehealth services during the PHE. Legislation (the *Consolidated Appropriations Act, 2023*) has extended many telehealth flexibilities through December 31, 2024, including:

- Medicare beneficiaries can access telehealth services in any geographic area in the United States, not just those in rural areas.
- Medicare beneficiaries may stay in their homes for telehealth visits that Medicare pays for rather than traveling to a health care facility.
- Some telehealth visits can be delivered as audio-only (such as by telephone) if someone is not able to use both audio and video, requiring a smartphone or computer.

Medicare Advantage plans may offer additional telehealth benefits. Those with an MA plan should contact their plan about coverage for telehealth services.

One final note: Fraudsters typically take advantage of uncertainty and use that to their advantage to try and take advantage of Medicare beneficiaries to fraud the Medicare program.



Please be cautious and remember that personal information, including a Medicare number, should never be shared with someone who calls, emails, or texts you out of the blue. Simply hang up the phone, or better yet, don't answer it if you don't know the number. And delete email and text messages without clicking on any links they may contain.

And remember that your Senior Medicare Patrol team is here to help in any way that we can. Please contact us by calling toll-free (888) 818-2611 or visiting our website, www.smpwi.org, for more information about how you can protect yourself from Medicare-related fraud and scams.


Here's the Scoop on how you can reach us:

Call: (888) 818-2611

E-mail: smp-wi@gwaar.org

Website: www.smpwi.org


Facebook: @WisconsinSeniorMedicarePatrol

 **FEDERAL TRADE COMMISSION**

Got a text from Costco or Home Depot about a survey?

Don't click on the link! It's a scam.

Learn more: ftc.gov/phishing

 Answer Questions About Your Experience With Us For Your Chance To Receive a Brand-New Power Drill! click OK to Begin.





How to Avoid Moving Scams

By Tiffany Schultz, BBB SW WI Regional Director

Spring into summer marks the busiest time throughout the country for moving. With the amount of moving activity during the summer months, the potential of being a victim of a moving scam increases. The Better Business Bureau receives reports every year of the following versions of moving scams:

- Consumers receive a quote and pay a deposit, but the movers never show up.
- The moving company provides a quote based on expected weight and, after loading the truck, the company informs the consumer that the load is over the expected weight and an additional fee will apply. Most of the time the additional fee is significantly more expensive per pound, sometimes as much as double the original estimate.
- The move appears to go well but the truck fails to arrive at its destination. Either the belongings have disappeared, or the company holds them hostage until the consumer pays an additional fee for delivery.

Tips to Help Avoid Moving Scams

Watch out for warning signs. If a company website doesn't include an address, or information about a mover's registration or insurance, it's a sign that it may not possess the proper policies to protect a consumer's belongings. Additionally, if the mover uses a rented truck or offers an estimate over the phone prior to conducting an on-site inspection, it may not be a legitimate business.

Be wary of unusual requests. If a mover asks for a large down payment or full payment in advance, it may be an indication of a fraudulent business. If an individual's possessions are being held hostage for additional payment that was not agreed upon when the contract was signed, contact the Better Business Bureau or law enforcement for help.



Get everything in writing. When moving between states, [check licensing](#) with the US Department of Transportation. An identification number issued by the [Federal Motor Carrier Safety Administration](#) (FMCSA) is required of all interstate moving companies. Make sure to carefully read the terms and conditions of the contract, as well as the limits of liability and any disclaimers. The pickup and expected delivery date should be easily identified.

Keep inventory of your belongings. Having an inventory sheet is one of the best ways to keep track of your possessions. BBB recommends consumers who are moving label the boxes with a list of what is in each box. In general, movers are not liable for lost or damaged contents in customer-packed boxes unless there is provable negligence on the part of the mover. Taking photos of the contents prior to packing is a great way to prove if damages were incurred during the moving process.

Ask questions. Don't be afraid to ask questions about anything you don't understand. If the moving company either can't or won't answer, look for another company.

Report it. If you've experienced a scam, regardless if you lost money or personal information, report it to [BBB.org/ScamTracker](https://www.bbb.org/ScamTracker). Your report helps to warn others of the scams taking place the marketplace.



Eating Right for Older Adults

By Academy of Nutrition and Dietetics

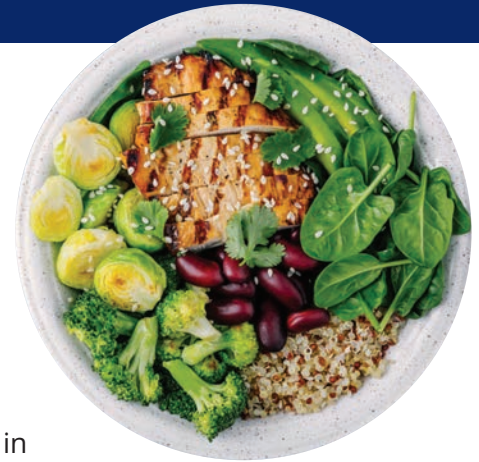
Healthy eating is recommended throughout life, but as we age certain factors can affect our nutrient needs. Choosing a variety of foods from all the food groups (vegetables, fruits, grains, dairy, and protein foods) will help you build a healthy eating routine. The following tips can help you get started on your way to eating right.

Make half your plate fruits and vegetables. Eat a variety of different colored vegetables, including ones that are dark-green, red, and orange. Beans, peas, and lentils are also good choices. Fresh, frozen, and canned vegetables can all be healthful options. Look for reduced sodium or no-salt-added on the labels. Add fruit to meals, snacks, or as dessert. Choose fruits that are dried, frozen, or canned in water or 100% juice, as well as fresh fruits.

Make at least half your grains whole. Choose breads, cereals, crackers, and noodles made with 100% whole grains. Whole grain corn tortillas, brown rice, bulgur, millet, amaranth, and oats all count as whole grains. Also, look for fiber-rich cereals to help stay regular and cereals that are fortified with vitamin B12, which is a nutrient that decreases in absorption as we age or due to some medications.

Switch to fat-free or low-fat milk, yogurt, and cheese. Older adults need more calcium and vitamin D to help keep bones healthy. Include three servings of fat-free or low-fat milk, yogurt or cheese each day. If you are lactose intolerant, try lactose-free milk or a calcium-fortified soy beverage.

Vary your protein choices. Eat a variety of foods from the protein food group each week. In addition to lean meat, poultry, and eggs, choose seafood, nuts, beans, peas, and lentils when planning your meals. Spread your protein intake throughout the day by including a source with meals and snacks. Protein foods derived from animal sources also provide vitamin B12, and certain plant-based foods may be fortified. If you're at risk for low levels of vitamin B12, your doctor may also recommend a supplement.



Limit sodium, saturated fat, and added sugars. Look out for salt, or sodium, in foods you eat. Compare sodium in the foods you buy and choose those with lower amounts. Add spices or herbs to season food without adding salt. Switch from solid fats to oils when preparing foods. Make major sources of saturated fats occasional choices, not everyday foods. Examples of these include desserts, fried foods, pizza, and processed meats like sausages and hot dogs. Select fruit for dessert more often in place of treats with added sugars.

Stay well-hydrated. Drink plenty of water throughout the day to help prevent dehydration and promote good digestion. Other beverages that can help meet fluid needs include unsweetened beverages, like low-fat and fat-free milk, fortified soy beverages, and 100% fruit juices. Choose these more often in place of sugary drinks.

Enjoy your food but be mindful of portion sizes. Most older adults need fewer calories than in younger years. Avoid oversized portions. Try using smaller plates, bowls, and glasses.

Cook more often at home, where you are in control of what's in your food. When ordering out, look for dishes that include vegetables, fruits, and whole grains, along with a lean protein food. When portions are large, share a meal or save half for later.

Consult a registered dietitian nutritionist if you have special dietary needs. A registered dietitian nutritionist can create a customized eating plan for you.

For a referral to a registered dietitian nutritionist and for additional food and nutrition information, visit www.eatright.org.



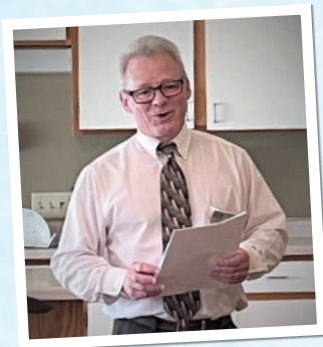
Views & Activities



The Lifestyle & Retirement Expo in Racine



SMP attended a Volunteer Recruitment Fair in Green Bay



Presentation at Assisi Homes of Kenosha



SMP at the booth for the Minobimzdziiwin Community Expo in Lac du Flambeau



SMP Team Retreat & Recognition





How We Protect You From Misleading Advertising and Communications

Social Security works with the Office of the Inspector General (OIG) to protect you from scams that use Social Security as bait. **Section 1140 of the Social Security Act** allows OIG to impose severe penalties against anyone who engages in misleading Social Security-related advertising or imposter communications. You can review Section 1140 at www.ssa.gov/OP_Home/ssact/title11/1140.htm.

For example, the OIG may impose a penalty against anyone who:

- Mails misleading solicitations that appear to be from or authorized by Social Security.
- Operates an imposter internet website or social media account designed to look like it belongs to or is authorized by Social Security.
- Sends emails or text messages or makes telephone calls claiming to be from Social Security.
- Sells Social Security's free forms, applications, and publications without our written approval.
- Charges a fee for a service that Social Security provides free of charge without providing a clearly visible notice that Social Security provides the service for free.

If you receive a misleading or suspicious Social Security-related advertisement or imposter communication, please let us know immediately. Try to capture as much information about the communication as you can.

Here's what you can do:

- For suspicious websites or social media accounts, please take a screenshot of the page. Please note the website address or social media link - and how you came across it.
- For emails and text messages, please capture the entire message and any message links.



- For U.S. mail solicitations, please retain the complete communication, including the outside envelope and all inserts.
- For telephone solicitations, please note the caller identification phone number and any company name or call back number that the caller or recorded message provides.

You can help us stop misleading advertising and communications. We encourage you to report potential scams to the OIG at oig.ssa.gov. You can also call our fraud hotline at 1-800-269-0271 or send an email to OIG.1140@ssa.gov.

This information will help OIG locate the source of the suspicious solicitation or communication. You can also check out our publication,

What You Need to Know About Misleading Advertising, at www.ssa.gov/pubs/EN-05-10005.pdf.

Please share this information with friends and family and help us spread the word on social media!



Securing today
and tomorrow



Medicare Coverage of Hospice Care

In this resource on hospice care, we speak directly to patients as if they are the ones taking these actions or making these decisions. However, discussions about hospice often involve caregivers and family members as well. If you are a caregiver, family member, or a patient's appointed representative, you may be leading these conversations or decisions, rather than the patient.

What is the Medicare hospice care benefit?

Hospice is a program of end-of-life pain management and comfort care for those with a terminal illness. Medicare's hospice benefit offers end-of-life palliative treatment, including support for your physical, emotional, and other needs. It is important to remember that the goal of hospice is to help you live comfortably, not to cure an illness.

To elect hospice, you must:

1. Be enrolled in Medicare Part A.
2. Be certified, by the hospice doctor and your doctor, if you have one, to have a terminal illness, meaning a life expectancy of six months or less if the illness takes its normal course.
3. Sign a statement electing to have Medicare pay for palliative care (pain management), rather than curative care (unless your provider is participating in a special demonstration program).
4. Receive care from a Medicare-certified hospice agency.

Once you choose hospice care, all of your hospice-related services are covered under Original Medicare, even if you are enrolled in a Medicare Advantage Plan, unless your plan is part of a special demonstration program. Your Medicare Advantage Plan will continue to pay for any care that is unrelated to your terminal



condition. Hospice care should also cover any prescription drugs you need for pain and symptom management for your terminal condition, while your Part D plan may cover medications that are unrelated to your terminal conditions.



Hospice generally takes place at home, with your hospice provider sending aides, nurses, and/or skilled therapists to provide the pain management services in your place of residence.



Hospice can sometimes take place at an inpatient facility, if your hospice provider determines inpatient care is necessary for you. If your hospice provider determines that you need inpatient care, they must be the one to make the arrangements. The cost of your inpatient stay is covered by the hospice benefit, but if you go to the hospital for hospice care and your hospice provider didn't make the arrangements, you might be responsible for the full cost of the stay.

How can I elect the hospice care benefit?

If you are interested in Medicare's hospice care benefit, ask your provider whether you meet the eligibility criteria for hospice care. If you do, ask your doctor for help to contact a Medicare-certified hospice on your behalf. There may be several Medicare-certified hospice agencies in your area.



Once you have found a Medicare-certified hospice of your choice, the hospice medical director or doctor (and your doctor, if you have one) will certify that you are eligible for hospice care. Afterwards, you must sign a statement electing hospice care and waiving curative treatments for your terminal illness. Your hospice team must consult you – and your primary care provider, if you wish – to develop a plan of care.

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Medicare Coverage of Hospice Care continued from page 13

What services are covered under Medicare's hospice benefit?

If you qualify for the hospice benefit, Medicare covers:

- **Skilled nursing services:** services performed by or under the supervision of a licensed or certified nurse to treat your injury or illness.
- **Skilled therapy services:** physical, speech, and occupational therapy services that are reasonable and necessary to manage your symptoms or help maintain your ability to function and carry out activities of daily living (eating, dressing, toileting).
- **Hospice aides and homemaker services:** includes full coverage of a hospice aide to provide personal care services, including help with bathing, toileting, and dressing, as well as some homemaker services (changing the bed, light cleaning and laundry).
- **Medical supplies:** full coverage of certain medical supplies, such as wound dressings and catheters.
- **Durable medical equipment (DME):** including full coverage of equipment needed to relieve pain or manage your terminal medical condition.
- **Respite care:** short-term inpatient stays for you that allow your caregiver to rest. This coverage includes up to five consecutive inpatient days at a time.
- **Short-term inpatient care:** care at a hospital, SNF, or hospice inpatient facility if your medical condition calls for a short-term stay for pain control or acute or chronic symptom management. This is only covered if care cannot feasibly be provided in another setting.
- **Medical social services:** full coverage of services ordered by your doctor to help you with social and emotional concerns you have related to your illness. This may include counseling and/or help finding resources in your community.

- **Prescription drugs related to pain relief and symptom control.** You pay a \$5 copay.
- **Spiritual or religious counseling**
- **Nutrition and dietary counseling**

How can I recognize and report potential hospice fraud?

Hospice fraud occurs when Medicare is falsely billed for any level of hospice care or service.

Scammers may try to get beneficiaries to agree to hospice even though they do not qualify for the hospice care benefit. As a Medicare beneficiary, you should be on the lookout for suspicious behavior that might indicate Medicare fraud or abuse. Report potential hospice care fraud, errors, or abuse if:

- You were enrolled in hospice without your or your family's permission.
- You find out someone is falsely certifying or failing to obtain physician certification on plans of care.
- You were offered gifts or incentives to receive hospice services or to refer others for hospice services.
- You see on your Medicare Summary Notice (MSN) or Explanation of Benefits (EOB) that you were billed for different hospice services than what you received or needed.
- You experienced high-pressure and unsolicited marketing tactics of hospice services, such as unsolicited home visits or phone calls from hospice providers.
- You know a hospice beneficiary being abused or neglected by a hospice worker.



If you suspect that a provider is committing potential hospice care fraud, you should contact your local Senior Medicare Patrol (SMP). Your SMP can help you identify potential fraud, errors, and abuse, and report your concerns.

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Medicare Coverage of Hospice Care continued from page 14

You can stop hospice fraud by following a few guidelines.

- First, be sure a trusted doctor has assessed your condition and certified that you are terminally ill.
- Second, be wary of deals that seem too good to be true. For example, never accept gifts in return for hospice services.
- Third, report any potential fraud, errors, or abuse to your local Senior Medicare Patrol (SMP).

Where should I go for help with the Medicare hospice benefit?

Your health care provider: If you are interested in electing hospice care, contact your provider to discuss your eligibility. They can contact a Medicare-certified hospice agency.

State Health Insurance Assistance Program (SHIP): Contact your local SHIP to learn more about the hospice benefit, find a Medicare-certified hospice

agency in your area, or to receive general Medicare counseling. Your SHIP contact information is at the bottom of this page.

Senior Medicare Patrol (SMP): Contact your SMP if you have concerns about potential Medicare fraud, errors, or abuse. Local SMP contact information is at the bottom of this page.

Medicare: Contact Medicare at 1-800-MEDICARE if you have hospice billing or coverage questions. 1-800-MEDICARE or Medicare.gov also have lists of Medicare-certified hospice agencies near you.

Your Medicare Advantage Plan or Part D plan: Contact your plan to learn more about how your coverage changes if you elect hospice, to address issues accessing care or medications unrelated to your terminal condition, or to find out if your plan participates in a demonstration program where your hospice benefit is provided by your plan instead of Original Medicare.

Local SHIP contact information	Local SMP contact information
SHIP toll-free: (800) 242-1060	SMP toll-free: (888) 818-2611
SHIP website: SHIP: Medicare Counseling for Wisconsin Residents Wisconsin Department of Health Services	SMP website: www.smpwi.org

SHIP National Technical Assistance Center: 877-839-2675 | www.shiphelp.org | info@shiphelp.org

SMP National Resource Center: 877-808-2468 | www.smpresource.org | info@smpresource.org

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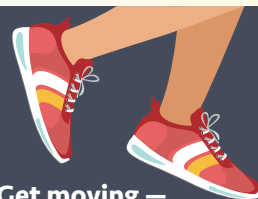
Preventing Medicare Fraud

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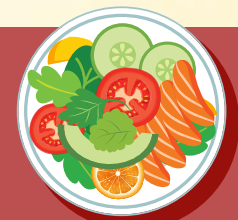
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Tips To **BOOST** Your Health as You Age

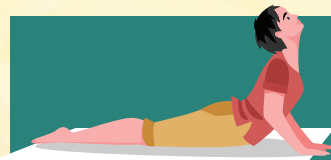
Did you know that making lifestyle changes can help you live longer and better? Try these tips to get started.



Get moving — try gardening, biking, or walking.



Choose healthy foods rich in nutrients.



Manage stress — try yoga or keep a journal.



Learn something new — take a class or join a club.



Go to the doctor regularly.



Connect with family and friends.

Learn more about steps you can take to promote healthy aging at www.nia.nih.gov/healthy-aging.

