



'Care Share

MONTANA SMP

What is Montana SMP you may ask? SMP stands for Senior Medicare Patrol, and Senior Medicare Patrols (SMPs) empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report health care fraud, errors, and abuse through outreach, counseling, and education. SMPs are discretionary grant projects funded by the U.S. Administration for Community Living (ACL). Their work is in three main areas:

1. Conduct Outreach and Education. SMPs give presentations to groups, exhibit at events, and work one-on-one with Medicare beneficiaries.
2. Engage Volunteers. Protecting older persons' health, finances, and medical identity while saving precious Medicare dollars is a cause that attracts civic-minded Americans.
3. Receive Beneficiary Complaints. When Medicare beneficiaries, caregivers, and family members bring their complaints to the SMP, the SMP makes a determination about whether or not fraud, errors, or abuse is suspected. When fraud or abuse is suspected, they make referrals to the appropriate state and federal agencies for further investigation.

The ACL competitively awards grants to a selected project in each of the 50 states, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands.

SMPs play a unique role in the fight against Medicare errors, fraud, and abuse. SMP volunteers and staff serve as “eyes and ears” in their communities, educating beneficiaries to be the first line of defense.

Medicare is complicated. What may seem like an error to the beneficiary may simply be the result of a misunderstanding about benefits.

It may also be abuse, which involves billing Medicare for services that are not covered or are not correctly coded.

Medicare fraud assumes criminal intent. The Centers for Medicare and Medicaid Services (CMS) defines fraud as “the intentional deception or misrepresentation that the individual knows to be false or does not believe to be true,” and that is made “knowing that the deception could result in some unauthorized benefit to himself or herself or some other person.

Some common examples of suspected Medicare fraud or abuse are:

- Billing for services or supplies that were not provided
- Providing unsolicited supplies to beneficiaries
- Misrepresenting a diagnosis, a beneficiary's identity, the service provided, or other facts to justify payment
- Prescribing or providing excessive or unnecessary tests and services
- Violating the participating provider agreement with Medicare by refusing to bill Medicare for covered services or items and billing the beneficiary instead

Call SMP if you encounter any of the above.

HOW CAN ONE PERSON MAKE A DIFFERENCE?

Preventing Medicare fraud can seem overwhelming. You may think it is too enormous of a problem to be able to make any impact. You may tell yourself that Medicare already has a system in place to find fraud and arrest people. You probably think it's not possible for one person to make a difference when we're losing \$60 billion a year to Medicare fraud. What if I were to tell you that it is exactly you, and every other person on Medicare, who can put a stop to it.

There is a saying, "you can't arrest your way out of a problem." When you see headlines like, "Ambulance service raked in \$4.7 million for fake trips", or "Ex-Pharmacy owner charged in \$5M fraud scheme" and "Health care exec sentenced to federal prison for \$4.6M kickback scheme", are you thinking that Medicare is protected and there is nothing more that can be done? Or are you wondering if it were possible to stop each one of those scams when they were under \$1000.

If each person on Medicare read their Medicare Summary Notice (MSN) or Medicare Advantage Explanation of Benefits (EOB) and questioned anything they didn't understand, they could stop each fraud occurrence before they "raked in \$4.7M". When we read in the news a criminal was caught after several years and taking in \$4.7M, we are also saying we spent money investigating, we spent money prosecuting, and when it came time to take the money back, the criminal didn't have \$4.7M sitting in duffle bags after we found them guilty. We are really saying that Medicare still lost a lot of money.

What if you noticed a fake ambulance trip, a service you didn't receive, or supply you didn't order on your MSN or EOB? What if you called SMP and they were able to research your question and refer the case to the Office of Inspector General and Medicare, who then were able to stop payments to the provider before they did it to other people?

Medicare has a fraud prevention system which alerts them if certain data points are met. However, it takes time for patterns to build and takes time for those red flags of a doctor billing for more hours than are in a day or a doctor billing for more back braces than any other doctor in the country to develop. A person reading their MSN or EOB can notice something billed in their name on day one and can stop fraud at first sight instead of three years down the road when it's found out and we're arresting someone instead of stopping them from stealing in the first place.

With that as the goal, here are the steps you can take to really help stop Medicare fraud.

- 1. Protect.** Protect your new Medicare number and call Medicare right away if it does become compromised.
- 2. Detect.** Always review your Medicare Summary Notice or Medicare Advantage Explanation of Benefits for mistakes. Look for things such as charges for something you didn't get, billing for the same thing twice, or services that weren't ordered by your doctor.
- 3. Report.** Report or question anything that doesn't look right to you. MT SMP is in each Office on Aging and can be reached by calling 1-800-551-3191.

The Senior Medicare Patrol (SMP) helps to educate Medicare beneficiaries about ways to prevent, detect, and combat Medicare fraud. For more information about Medicare fraud, visit the Stop Medicare Fraud website at www.stopmedicarefraud.org.