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Seniors on Patrol: Baby Boomers Fighting Fraud in Healthcare

Just when they thought it was safe to retire, the nation's Baby Boomers are being drafted to fight another war: Medicare fraud. And while World War II it's not, the Department of Health and Human Services (HHS) believes their senior citizen army could save the United States millions of dollars over the next decade. If their efforts are successful, doctors should be prepared to address seniors with a heightened level of concern for what they will be charged, what they will pay out-of-pocket, and a reticence to sign off on blanket authorizations to bill for services.

On November 29, 2011, HHS announced the awarding of \$9 Million from the Centers for Medicare and Medicaid Services (CMS) to Senior Medicare Patrol programs in each state. Started in 1997, the Senior Medicare Patrol (SMP) recruits and teaches senior volunteers, as well as professionals such as doctors, nurses, accountants, investigators, law enforcement personnel, attorneys, teachers, and others, to help Medicare and Medicaid beneficiaries recognize and report instances and patterns of health care fraud.

Federal officials believe that older Americans, including the growing ranks of eligible Baby Boomers, will help in sending more fraud perpetrators to jail and are encouraging them to take a more active role in monitoring their health care than previous generations.

It is estimated that between 3% and 10% of heathcare spending is lost to fraud¹--about \$48 billion annually. SMP volunteers emphasize that the effect of fraudulent healthcare schemes is equally devastating to the financial independence of seniors.

SMP's roughly 5000 volunteers partner with community, faith-based, tribal, and health care organizations. As SMP volunteers spend most of their time answering questions and educating Medicare beneficiaries, the CMS inspector general says it is difficult to measure just how effective they are. According to CMS, the senior patrols have educated 9.2 million people about Medicare fraud, received 87,000 complaints from beneficiaries, and saved Medicare and Medicaid \$105.9 million. There do seem to be some discrepancies with respect to what information is included when calculating financial impact numbers. In 2009, the program was credited with saving \$214,000, but in 2010 that number dropped to a mere \$22,262. As no significant changes were made to the program from 2009 to 2010, it appears fluctuating calculation methods are chiefly responsible for the variation.

¹<u>http://www.ageoptions.org/whatwedo/smp.cfm</u>

Some tips that the patrol volunteers offer their senior peers give insight into the concerns that seniors may bring to their physicians:

- Never sign blank insurance claim forms
- Never give blanket authorization to a medical provider to bill for services rendered
- Ask your medical providers what they will charge and what you will be expected to pay out-ofpocket
- Carefully review your insurer's explanation of the benefits statement. Call your insurer and provider if you have questions
- Do not do business with door-to-door or telephone salespeople who tell you that services of medical equipment are free
- Give your insurance/Medicare identification only to those who have provided you with medical services
- Keep accurate records of all health care appointments
- Know if your physician ordered equipment for you

The SMP program is just one way HHS is working to fight fraud and strengthen Medicare. HHS states that in 2010, more than \$4 billion was returned to the Medicare Hospital Insurance Trust Fund, the U.S. Department of the Treasury, and others as a result of targeting false claims and Medicare/Medicaid fraud. The Affordable Care Act provides an additional \$350 million boost to enforcement activities over the next ten years through the Health Care Fraud and Abuse Control Account. Additionally, the Act toughens sentencing for criminal activity, enhances screenings and enrollment requirements, encourages data sharing between governmental entities, expands overpayment recovery efforts, and provides greater oversight of potential abuses.