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# Indiana SMP Volunteer Packet

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## SMP INFORMATION TOOLKIT

section  
**5**





# Senior Medicare Patrol

## *What is the Senior Medicare Patrol?*

**S**enior Medicare Patrol programs, or SMPs, help Medicare and Medicaid beneficiaries prevent, detect, and report health care fraud. They not only protect older persons, they also help preserve the integrity of the Medicare and Medicaid programs. Because this work often requires face-to-face contact to be most effective, SMPs nationwide rely on more than 5,100 volunteers who are active each year to help in this effort.

## *Tell me about SMP volunteers.*

**P**rotecting older persons from criminals and saving precious health care dollars at the same time is a mission that attracts many civic-minded Americans. Most SMP volunteers are both retired and on Medicare, so they are well-positioned to assist their peers.

## *How, exactly, do SMPs fight fraud?*

**S**MP staff and volunteers work with individual beneficiaries to review Medicare Summary Notices for accuracy, make presentations to groups about how to avoid getting taken by scam artists, exhibit at community health fairs, and more.

Their primary goal is to teach Medicare beneficiaries how to protect their personal identity, identify and report errors on their health care bills and identify deceptive health care practices, such as illegal marketing, providing unnecessary or inappropriate

services, and charging for services that were never provided.

In some cases, SMPs do more than educate: When Medicare and Medicaid beneficiaries are unable to act on their own behalf to address these problems, the SMPs work to address the problems, making referrals to the Centers for Medicare & Medicaid Services (CMS) and their anti-fraud contractors; the Office of Inspector General (OIG); state attorneys general offices; local law enforcement; State Health Insurance Assistance Programs (SHIP); state insurance divisions; and other outside organizations that are able to intervene.

## *What is the background of the program?*

**I**n 1995, the U.S. Administration on Aging (AoA) became a partner in a government-led effort to fight fraud, error, and abuse in the Medicare and Medicaid programs through the implementation of a ground-breaking demonstration project called Operation Restore Trust (ORT). ORT's purpose was to coordinate and target federal, state, local, and private resources on those areas most plagued by abuse. Operation Restore Trust was announced at the 1995 White House Conference on Aging.

It created a partnership in the U.S. Department of Health & Human Services (HHS) between CMS, the OIG, and the AoA, which continue to work as a team in a coordinated anti-health care fraud effort at the local, state, and national levels.

*continued*



Find an SMP at [www.smpresource.org](http://www.smpresource.org)

In 1997, because of the Omnibus Consolidated Appropriation Act of 1997 (Public Law 104-208), AoA established 12 local demonstration projects designed to recruit and train retired professionals such as doctors, nurses, teachers, lawyers, accountants, and others to identify and report error, fraud, and abuse. Senate Report 104-368 noted that “senior citizens are our best front line defense against these losses.”

### *Tell me about the scope of the SMP program today.*

Based on the success of these demonstration projects, the SMP program is now in every state, as well as the District of Columbia, Puerto Rico, Guam, and the Virgin Islands. Under Title IV of the Older Americans Act, approximately \$9.3 million in grants are provided annually. Beginning in FY2010, CMS provided additional funds to double SMP program efforts. To implement this expansion, the AoA has awarded \$9 million in additional annual funds to the nationwide network of SMPs to enhance their volunteer programs and outreach efforts.

### *What has the SMP program achieved over the years?*

Since 1997 almost 28 million people have been reached during community education events, more than 5.3 million beneficiaries have been

educated and served, and more than 35,000 volunteers have been active.

Total savings to Medicare, Medicaid, beneficiaries and other payers attributed to the SMP projects is more than \$112 million. (Source: [July 2013 OIG Performance Report](#))

### *What are examples of fraud and waste seen by SMPs?*

- Equipment or insurance plan providers tricking senior center participants into giving up their personal information (including Medicare numbers) on “sign-in” sheets
- Medicare Summary Notices showing billing for services or supplies that were never provided
- Equipment suppliers providing expensive “scooter” wheelchairs not ordered by a physician or needed by the beneficiary
- Luring beneficiaries into providing their Medicare numbers for “free” services, then billing Medicare
- Kickbacks — paying beneficiaries to receive service from a particular provider or company

### *Where can I learn more?*

Go to [www.smpresource.org](http://www.smpresource.org) for detailed information about fraud and abuse as well as the SMP program.



# HOW TO PROTECT ELDERLY FAMILY MEMBERS FROM FRAUD

## MUST-READ TIPS FROM BEDEL FINANCIAL

Don't leave elderly parents or relatives alone, isolated and vulnerable to fraud.

Educate them about the latest scams. Recently the United States Senate Special Committee on Aging released its "Fighting Fraud" book, providing the top scams for 2016. Get it at [aging.senate.gov](http://aging.senate.gov) (search "Fraud Book 2017").

If it isn't feasible for you to personally be actively involved, assemble a team of trusted advisors (e.g. financial advisor, accountant, lawyer) to watch over your loved one(s).

Even if a family member is providing care for your mom or dad, having others involved is a smart move. Many problems occur when one person has unlimited access to seniors without any checks and balances in place.

Above all, stay connected. The better communication with your loved ones is, the more likely you will be able to protect them from harm.

# 9 ELDER FRAUD SCAMS TO WATCH OUT FOR

Financial fraud is the fastest-growing form of elder abuse, as scammers find seniors easy prey. Since fraud comes in many forms, the best way to avoid financial disaster is to stay on top of the latest trends in these kinds of crimes. Here are nine scams Nancy Moore, Senior Medicare Patrol Program Director at the Indiana Association of Area Agencies on Aging, says seniors should be wary of.

## 1 DURABLE MEDICAL EQUIPMENT SCAMS

Be skeptical of companies that offer medical equipment at reduced prices, or claim Medicare will cover the cost. More than likely, the product will be inferior and will need to be replaced.

## 2 PHONE SPOOFING

Scammers can change the caller ID to a number other than the calling number. If you don't recognize a name or number, let it go to voicemail.

## 3 LOTTERY SCAM

If you receive an email that claims you are the winner of a foreign lottery, don't believe it. Don't shell out your hard-earned money for "winnings" you'll never receive.

## 4 PHISHING EMAILS

Phishing is designed to steal your identity. The messages look authentic and may feature corporate logos, but if they ask for credit card or account information, delete, delete, delete.

## 5 "CAN YOU HEAR ME?" SCAM

If you receive a phone call from someone asking, "Can you hear me," hang up. If you say the word "yes," a scammer can record it and use your voice to authorize unwanted charges.



## 6 HOME REPAIR SCAMS

Door-to-door sales are a favorite among home repair scammers. Be skeptical of anyone who pressures you to accept an offer, or who says they can do the work that day.

## 7 GRANDPARENT SCAMS

Scammers like to take advantage of your sentimentality. In this case, someone may call, claim to be your grandchild and ask for money. Talk to your family before taking action.

## 8 FAKE DEBT COLLECTORS

Scammers will call and try to collect payments for "overdue accounts." Be wary of these calls, as the IRS does not contact individuals by phone. Screen your calls, always.

## 9 "FREE" TRIAL OFFERS

Free trial offers may seem risk free, but it's common for seniors to be repeatedly billed every month. It can be extremely difficult to cancel, too.

If you or a loved one believes you are a victim of financial fraud, or would like more information on how to protect yourself, contact these agencies:

AARP  
[www.aarp.org](http://www.aarp.org), 866-448-3618

Indiana Association of Area Agencies on Aging  
[www.iaaaa.org](http://www.iaaaa.org), 800-986-3505

Indiana Attorney General Consumer Protection Division  
[www.indianaconsumer.com](http://www.indianaconsumer.com), 800-382-5516

Office of the Inspector General  
[www.oig.hhs.gov](http://www.oig.hhs.gov)





# VOLUNTEERING

## FIGHT FRAUD IN YOUR COMMUNITY!

The goal of the Indiana Senior Medicare Patrol (SMP) is to provide Medicare beneficiaries, caregivers and the professionals that serve them information on how to prevent, detect and report Medicare fraud and abuse. SMP depends on volunteers to help educate and empower consumers.

### VOLUNTEER BENEFITS



**Flexibility**



**No Required  
Service Hours**



**Free Medicare  
Training**



**Learn about  
Fraud Trends**

### OPPORTUNITIES WITH INDIANA'S SENIOR MEDICARE PATROL (SMP)

#### **Community Events & Health Fairs**

Attend community events and help educate the public about Medicare fraud, distribute SMP information and answer questions.

#### **One-On-One Counseling**

Meet with beneficiaries to help them understand Medicare Summary Notices and other healthcare documentation.

#### **Office Support**

Participate in office projects, distribute SMP materials to senior centers, assemble supplies for community events & seek out outreach opportunities around Indiana for other volunteers.

#### **Presentations**

Deliver prepared presentations about Medicare fraud.

#### **Promotions**

Write articles for newsletters and create Facebook posts and messages.

#### **Complex Issues**

Gather facts from beneficiaries, healthcare providers, insurance companies and Medicare about beneficiary issues to aid in problem resolution.

For more info on volunteering contact Mary Wallace at 317.205.9201 or [mwallace@iaaaa.org](mailto:mwallace@iaaaa.org)

This project was supported, in part by grant number 90MPPG0035, from the U.S. Administration for Community Living (ACL), 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.



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# PROTECTING SENIORS FROM

# FRAUD

Anyone of any age can get scammed, but seniors make the easiest targets. Each year they lose billions of dollars to scam artists, friends and family. But if they're armed with the facts and know what to do when a fraudster comes calling, they're far less likely to be victimized.

## How Big a Problem Is It?

Huge! A 2015 Consumer Reports article reported that elder financial abuse alone (i.e. the illegal or improper use of an older adult's funds/assets) costs families between \$3 billion and \$36 billion every year. The true cost probably lies somewhere in-between. And it's on the rise.

## A Scam for Every Vulnerability

Recently the United States Senate Special Committee on Aging released its "Fighting Fraud" book. (found at [aging.senate.gov](http://aging.senate.gov)) Warning: It's a depressing read that can shake your faith in mankind, but it contains valuable information. Here are the book's Top 10 scams for 2016:

- IRS impersonation scams
- Sweepstakes scams
- Robocalls/unwanted phone calls
- Computer scams
- Elder financial abuse
- Grandparent scams
- Romance scams/confidence fraud
- Government grant scams
- Counterfeit check scams
- Identity theft

Unfortunately it's not always professional thieves and strangers you have to protect yourself from.

According to a 2013 Consumer Reports article, ninety percent of abusers are family members or trusted others.

## Remember This: The IRS Will Not Call You!

This is the big one. In 2016, IRS impersonation scams were three-and-a-half times more prevalent than the other nine scams combined. In this scam con artists, claiming to be IRS agents, call you. Sometimes they'll say you're due a refund and then try to trick you into divulging private information. More often they'll claim you owe taxes and demand immediate payment - often threatening you with arrest.

The IRS will never initiate contact with you via phone call or e-mail. Instead, you'll receive official correspondence through the mail. The IRS won't ask for sensitive personal information such as credit card or bank account information. If you receive a "fishy" call, hang up. If you're unsure - perhaps there's a legitimate reason the IRS might need to contact you - hang up, then call the IRS for confirmation.

## How Can You Protect Your Family?

The best way to protect someone you love is to stay connected. Don't leave elderly parents or relatives alone, isolated and vulnerable to fraud. Educate them about the latest scams. The book *Fighting Fraud* is a good starting point. If it isn't feasible for you to personally be actively involved, assemble a team of trusted advisors (e.g. financial advisor, accountant, lawyer) to watch over your loved one(s). Even if a family member is providing care for your mom or dad, having others involved is a smart move. Many problems occur when one

person has unlimited access to seniors without any checks or balances in place.

## Summary

Being scammed by fraudsters, friends or family is a serious, and growing, problem impacting seniors today. Combatting it takes constant vigilance, perseverance and personal involvement. There are no shortcuts. But spending time on prevention is far better than desperately trying to undo the financial and emotional damage resulting from senior fraud.

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**BEDEL FINANCIAL  
CONSULTING, INC.**

Financial Planning and Investment Management



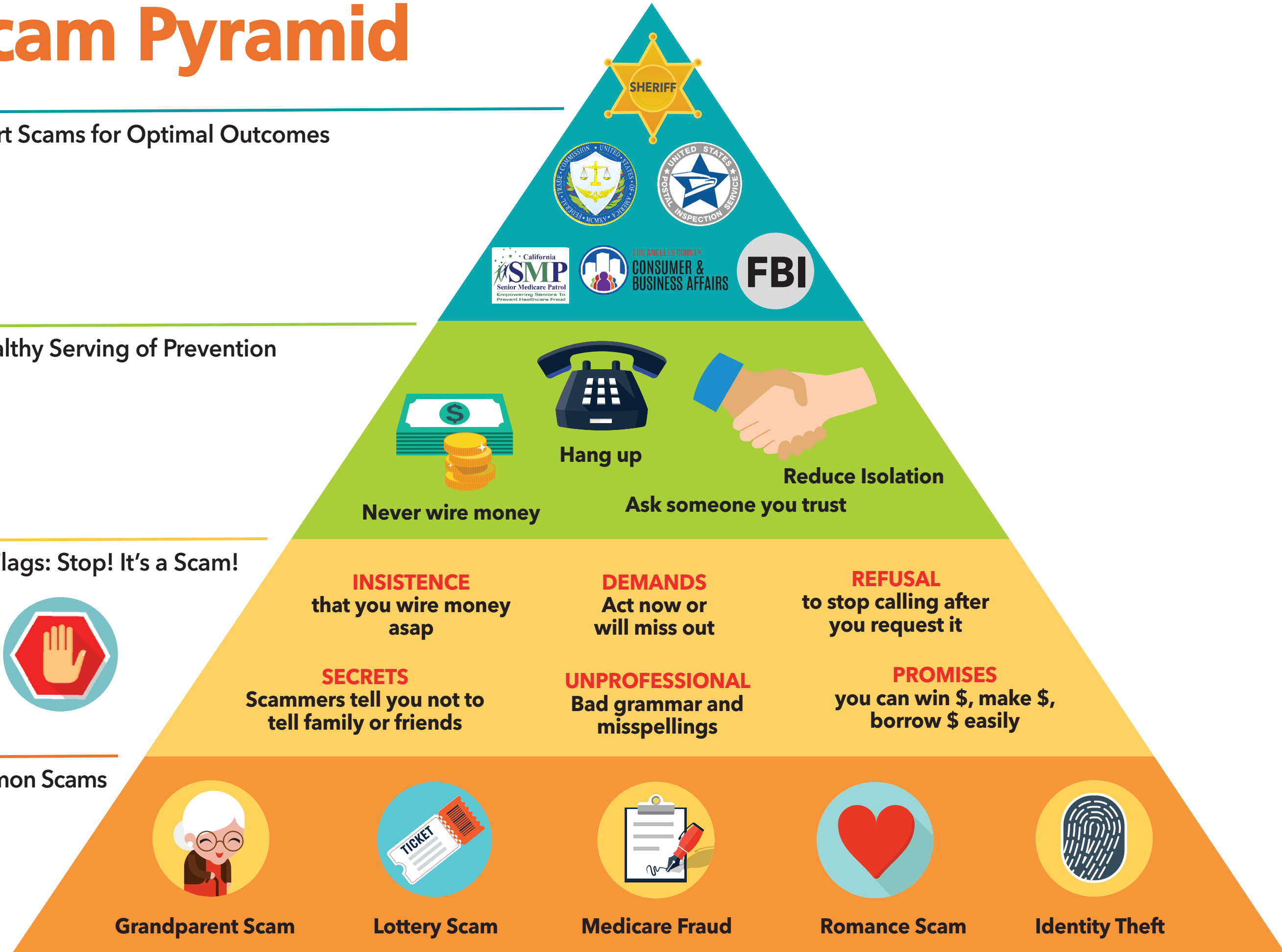
# Scam Pyramid

Report Scams for Optimal Outcomes

A Healthy Serving of Prevention

Red Flags: Stop! It's a Scam!

Common Scams









# Genetic Testing Fraud

## Tips for Protecting Yourself and Medicare

Genetic testing scams are currently a widespread issue throughout the country. Scammers are offering Medicare beneficiaries cheek swabs for genetic testing to obtain their Medicare information for identity theft or fraudulent billing purposes.

### What is Genetic Testing Fraud?

Genetic testing fraud occurs when Medicare is billed for a test or screening that was not medically necessary and/or was not ordered by a beneficiary's treating physician.

### What are Examples of Genetic Testing Fraud?

- A company offering you “free” testing without a treating physician's order and then billing Medicare. These tests go by many names and claim to test for many things. Here are some examples of ways you may see this advertised:
  - ◊ Cancer screening / test
  - ◊ DNA screening / test
  - ◊ Hereditary cancer screening / test
  - ◊ Dementia screening / test
  - ◊ Parkinson's screening / test
  - ◊ Pharmacogenomics – medication metabolism
- A company providing a test or screening that you never requested or that you do not need
- A company billing Medicare for screening services that are not covered by Medicare or for screenings that do not apply to you
- A company requesting your Medicare number at a community event, a local fair, a farmer's market, a parking lot, or any other event

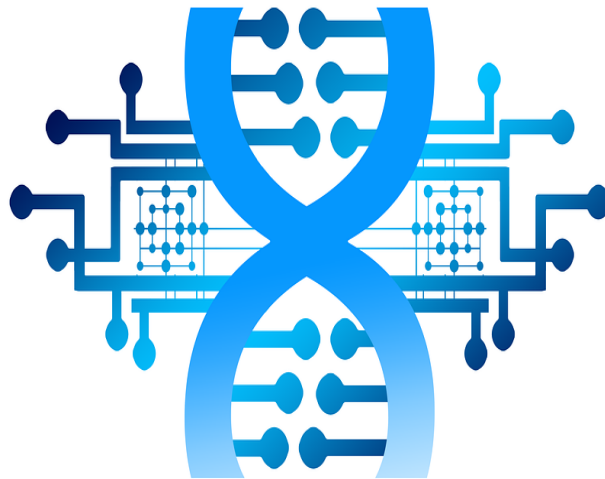


### What Happens if Medicare Denies the Genetic Test Claims?

- You could be responsible for the entire cost of the test! The average is \$9,000-\$11,000.

## What Can You Do to Stop Genetic Testing Fraud?

- Be sure your doctor has assessed your condition. Although Medicare covers many genetic tests for diagnostic use, it only covers one preventative genetic test to screen for cancer.
- Do not give out your personal information or accept screening services from someone at a community event, a local fair, a farmer's market, a parking lot, or any other event.
- Always read your Medicare Summary Notice (MSN) or Explanation of Benefits (EOB). The words "gene analysis," "molecular pathology," or "laboratory" may indicate questionable genetic testing has occurred.
- If you received a cheek swab or a screening that was not medically necessary, report your concerns about billing errors or possible fraud and abuse to your local SMP.



## How Your Senior Medicare Patrol (SMP) Can Help

Your local 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 and their trained volunteers 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 can provide information and educational presentations.

**To locate your state Senior Medicare Patrol (SMP):**

**Visit [www.smpresource.org](http://www.smpresource.org) or call 1-877-808-2468.**

Supported by a grant (No. 90MPC0001) from the Administration for Community Living (ACL),  
U.S. Department of Health and Human Services (DHHS).

## When are Genetic Tests Covered?

- When someone has stage III or IV cancer
- When the test is medically reasonable and necessary
  - ✓ Federal regulations define medical necessity as *“services or items reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member.”*
- When it is ordered by a treating physician
  - ✓ Federal regulations define a treating physician as *“the physician who furnishes a consultation or treats a beneficiary for a specific medical problem and who uses the results in the management of the beneficiary’s specific medical problem. Tests not ordered by the physician who is treating the beneficiary are not reasonable and necessary.”*
- When one or more coverage requirements are met for colorectal cancer genetic screening
  - ✓ There is no other Medicare coverage for genetic testing as a screening service.
- When a treating physician orders the test as a diagnostic service and uses the results to manage the patient’s condition

### Example Charges for One Cheek Swab

Service	Billing Code	Amount Charged	Amount Paid by Medicare
Gene analysis	81201	\$936.00	\$764.40
Gene analysis	81255	\$582.72	\$285.53
Gene analysis	81259	\$720.00	\$588.00
Gene analysis	81292	\$694.98	\$661.89
Gene analysis	81317	\$848.42	\$692.88
Gene analysis	81325	\$2,308.74	\$754.19
Molecular pathology	81407	\$870.81	\$829.34
Molecular pathology	81408	\$4,116.00	\$3,920.00
<b>Totals</b>		<b>\$11,077.67</b>	<b>\$8,496.23</b>



### How are Fraudsters Benefiting from Genetic Testing Fraud?

See the chart for why this is becoming more prevalent.

**These services are not free.**

Each cheek swab could potentially make the company thousands of dollars by billing Medicare and/or you for services that were not needed.





## PROTECT YOURSELF FROM THIS SCAM

A booth at a local health fair, senior housing, community center or home health agency is offering free health screenings, including genetic testing. The representative falsely promises that Medicare will pay for the test, and you simply need to provide a cheek swab, your ID and Medicare information to receive your test results. They may even ask for your doctor's name, implying that they will send your results to your doctor. Unfortunately, now they have your health plan or Medicare number, and they can bill Medicare thousands of dollars for medically unnecessary tests or even services that you never receive. They also have personal genetic information regarding your health.

**Beware: This is a scam.**

**Don't be a victim of Medicare fraud. Protect yourself and your benefits.**

- Never give out your Social Security, Medicare or health plan numbers or banking information to someone you don't know.
- Do not consent to any lab tests without your doctor's order.
- Keep in mind, it is illegal to accept anything of value in exchange for medical services.

For questions about Medicare or for more information, call:

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

[www.medicare.gov](http://www.medicare.gov)



## WARNING!

**Genetic tests must be ordered by your doctor to be covered by Medicare.**

Some labs may offer a cheek swab for genetic testing as part of a "free" health screening in order to obtain your Medicare information for identity theft or fraudulent billing purposes.

Before you agree to genetic testing, be sure:

- The test is ordered by your doctor
- The genetic test is medically necessary and covered by your plan

To discuss benefit, coverage, claims payment or other concerns, contact

Customer Service at:

PPO/PDP 1-800-541-8981 HMO 1-855-522-8896

To report suspected fraud, call:

1-877-7SafeRx (1-877-772-3379)

**IF YOU SUSPECT  
GENETIC TESTING FRAUD  
OR THINK YOU MAY HAVE  
BEEN TARGETED BY THIS,  
OR A SIMILAR SCAM,  
REPORT IT TO:**



**800-986-3505**







# Fraud Alert: Genetic Testing Scam

The U.S. Department of Health and Human Services Office of Inspector General is alerting the public about a fraud scheme involving genetic testing.

Scammers are offering Medicare beneficiaries cheek swabs for genetic testing to obtain their Medicare information for identity theft or fraudulent billing purposes. Fraudsters are targeting beneficiaries through telemarketing calls, booths at public events, health fairs, and door-to-door visits.

If a beneficiary agrees to genetic testing or verifies personal or Medicare information, a testing kit is sent even if it is not ordered by a physician or medically necessary.

## Protect Yourself

- If a genetic testing kit is mailed to you, don't accept it unless it was ordered by your physician. Refuse the delivery or return it to the sender. Keep a record of the sender's name and the date you returned the items.
- Be suspicious of anyone who offers you free genetic testing and then requests your Medicare number. If your personal information is compromised, it may be used in other fraud schemes.
- A physician that you know and trust should approve any requests for genetic testing.
- Medicare beneficiaries should be cautious of unsolicited requests for their Medicare numbers. If anyone other than your physician's office requests your Medicare information, do not provide it.

If you suspect Medicare fraud, [contact the HHS OIG Hotline](#).

Last updated: **June 3, 2019**







Individuals promoting genetic testing of Medicare Patients through meetings and educational sessions could be using these tests to commit Medicare fraud and abuse.

## **Genetic Testing Scam!**

[https://www.kdads.ks.gov/docs/default-source/commissions/medicare-programs/kansas-senior-medicaid-patrol-\(smp\)/genetic-testing-kansas.pdf?sfvrsn=76a634ee\\_4](https://www.kdads.ks.gov/docs/default-source/commissions/medicare-programs/kansas-senior-medicaid-patrol-(smp)/genetic-testing-kansas.pdf?sfvrsn=76a634ee_4)





**Do not accept cheek swabs for genetic screening services at senior centers, health fairs, or in your home.**

Be suspicious of anyone offering you “free” testing without your treating physician’s order. Decline the offer.

Genetic tests and cancer screenings must be medically necessary and ordered by the treating physician to be covered by Medicare.

The words “gene analysis” or “molecular pathology” on an MSN may indicate questionable genetic testing.

Report genetic screening offers to the Senior Medicare Patrol at [www.smpresource.org](http://www.smpresource.org).



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# 2017 NATIONAL HEALTH CARE FRAUD TAKEDOWN

The Department of Health and Human Services Office of Inspector General, along with our state and federal law enforcement partners, participated in an unprecedented nationwide health care fraud takedown in July 2017.

## SCOPE

This year's takedown features a large-scale federal and state partnership to combat health care fraud and the opioid epidemic. Enforcement activities took place nationwide, from Washington to Puerto Rico. This **multi-agency enforcement operation is the largest in history**, both in terms of the number of defendants charged and loss amount.

More than **400 defendants** in **41 federal districts** were charged for their alleged participation in schemes involving more than **\$1.3 billion in false billings** to vital health care programs. Of those subjects charged, **115 are medical professionals**—particularly doctors and nurses. **Thirty** Medicaid Fraud Control Units participated in the takedown.

Approximately **1,000 law enforcement personnel** took part in this operation, including more than **350 OIG special agents**.

As part of this year's takedown, **295 individuals** were served with exclusion notices by HHS-OIG for conduct related to opioid diversion and abuse. These notices bar participation in, or submitting claims to, all Federal health care programs, including Medicare and Medicaid. Among those issued exclusion notices were **57 doctors**, **162 nurses**, and **36 pharmacists**.

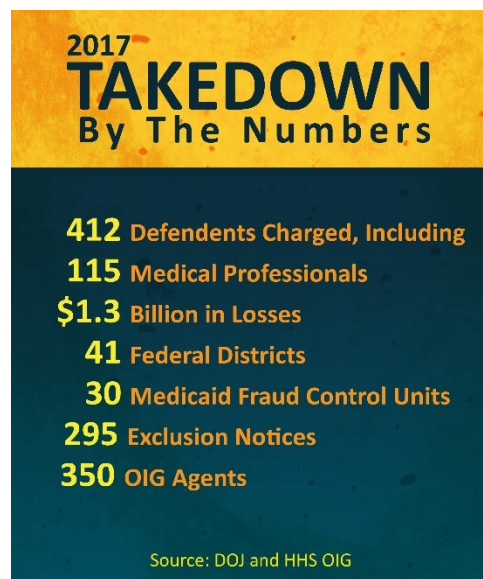
These takedowns send a strong signal that theft from these federal health care programs will not be tolerated. The money taxpayers spend fighting fraud is an excellent investment: For **every \$1 spent on health care related fraud and abuse investigations in the last 3 years, more than \$5 was recovered**.

## SCHEMES

Medicare **fraud schemes are regional and viral**. Criminals often copy fraud techniques they learn from other criminals in their communities. HHS OIG and our law enforcement partners investigate and shut down fraud quickly and responsibly.

In one noteworthy fraud scheme, a medical professional in Texas was charged with **overprescribing medically unnecessary narcotics to patients**, some of whom died from drug overdoses. The doctor allegedly fraudulently billed Medicare and received more than \$1.2 million in reimbursement.

Another fraud scheme resulted in the arrest of seven defendants in Michigan, including five physicians, who allegedly engaged in **illegal kickbacks and billing for medically unnecessary joint injections, drug screenings, and home health services**. One of the defendants owned multiple medical and health-related businesses, and these businesses allegedly fraudulently billed Medicare \$126 million as part of the scheme.









# Genetic Testing Fraud

## Medicare Beneficiary Questions & Answers

Genetic testing scams are currently a widespread issue throughout the country. Beneficiaries are being solicited in person, through phone calls, via email, and from online ads. The Senior Medicare Patrol (SMP) program wants Medicare beneficiaries to have the most up-to-date information about genetic testing companies, the tests they offer, and what Medicare covers. This document provides questions to ask when encountering potential genetic testing scams along with answers that provide information and guidance about how to handle each situation.

**Q. Did the provider offer genetic tests to screen for cancer or another condition?**

- A.** Decline the offer. These cheek swabs are being referred to as hereditary cancer screenings, DNA screenings, cancer screenings, genetic testing, pharmacological testing, Alzheimer's screenings, dementia screenings, heart disease screenings, gene mutation screenings, genetic marker screenings, etc. Medicare does not cover genetic tests to screen for cancer – except for one colorectal cancer DNA screening test.

**Q. Did the provider say that Medicare covers genetic tests at no cost to you?**

- A.** The tests are usually described as being available and useful for a wide range of people regardless of their health condition. Providers often say that a person's insurance will cover the tests for "free." They make this claim because Medicare pays for diagnostic lab tests according to a fee schedule, with no deductible or coinsurance costs for patients, but only when medically necessary. The tests are only medically necessary with a treating physician's order. If Medicare denies the tests, you could be charged the entire amount, which could easily run \$9,000-\$11,000.

**Q. Did the provider say that Medicare covers this as a preventative test?**

- A.** Medicare does not cover genetic tests to screen for cancer as a preventative benefit, with only one exception for a colorectal cancer DNA screening test.

**Q. Did the provider tell you what they are doing the genetic test for or which cancers they are testing for?**

- A.** Medicare does not cover genetic tests for beneficiaries who do not have any symptoms or diagnoses of cancer (Medicare rule: [https://www.cms.gov/Medicare/Coverage/CoverageGenInfo/Downloads/manual201801\\_ICD10.pdf](https://www.cms.gov/Medicare/Coverage/CoverageGenInfo/Downloads/manual201801_ICD10.pdf)).  
"Tests for screening purposes that are performed in the absence of signs, symptoms, complaints, or personal history of disease or injury are not covered except as explicitly authorized by statute."

**Q. Did the provider tell you who would be following up with you regarding the results? Did the provider read your results and, if needed, use them to set up a treatment plan?**

**A.** Lab tests like this must be ordered by a treating physician (Medicare rule: [https://www.cms.gov/medicare/medicare-fee-for-service-payment/clinicallabfeesched/downloads/410\\_32.pdf](https://www.cms.gov/medicare/medicare-fee-for-service-payment/clinicallabfeesched/downloads/410_32.pdf)).

“All diagnostic x-ray tests, diagnostic laboratory tests, and other diagnostic tests must be ordered by the physician who is treating the beneficiary, that is, the physician who furnishes a consultation or treats a beneficiary for a specific medical problem and who uses the results in the management of the beneficiary’s specific medical problem. Tests not ordered by the physician who is treating the beneficiary are not reasonable and necessary.”

**Q. Did the provider use scare tactics such as “your prescriptions could kill you” or “to prevent cancer,” claiming cancer and using the wrong prescription as the biggest killers of seniors?**

**A.** If you have concerns about how your body is metabolizing your prescriptions or if you are at risk for cancer, you should talk with your health care provider, who should be aware of the prescriptions that you are on and your family’s medical history.

## Available Resources

- Genetic testing fraud resources on the national SMP Resource Center website
  - <https://www.smpresource.org/Content/Medicare-Fraud/Fraud-Schemes/Genetic-Testing-Fraud.aspx>
- Office of Inspector General (OIG)
  - [https://oig.hhs.gov/fraud/consumer-alerts/alerts/geneticcam.asp?utm\\_source=website&utm\\_campaign=geneticcam](https://oig.hhs.gov/fraud/consumer-alerts/alerts/geneticcam.asp?utm_source=website&utm_campaign=geneticcam)

## Where Can Beneficiaries Go with Questions

Your local 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 and their trained volunteers 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 can also provide information and educational presentations.

**To locate your state Senior Medicare Patrol (SMP):**  
Visit [www.smpresource.org](http://www.smpresource.org) or call 1-877-808-2468.



# Hereditary Cancer Test Scam

Scammers are offering Medicare beneficiaries cheek swabs for genetic testing to obtain their Medicare information for identity theft or fraudulent billing purposes.

## **Medicare Coverage Guidelines - Preventative and Diagnostic Screenings**



### Colorectal cancer

is the ONLY preventative genetic screening test covered by Medicare  
...and it's not a cheek swab.

### Treating physician

must order the test AND use  
its results to manage the  
patient's condition.

### Unnecessary Tests

Tests not ordered by the  
treating physician are not  
reasonable and not necessary.



### Red Flags



Test is ordered by someone  
other than your doctor.

Tests conducted at  
community events.





# WARNING

## GENETIC TESTING SCAM

Medicare beneficiaries are being targeted at senior centers, housing complexes, and other community locations by companies claiming Medicare fully covers a cheek swab that tests for any or all cancers, how your body processes prescriptions, and/or a variety of other genetic or hereditary diseases.

## REPORT IT

If you are contacted by anyone who offers these tests, don't do it!  
Report it to the SMP at 1-877-808-2468.





Genetic tests for cancer or other diseases should  
be ordered by a treating physician...

## Where would you find a treating physician?



Health fair booth



Mail order



Phone salesperson



Your doctor's office



When you think of a treating physician, think of who you  
want to talk to when the genetic test results come in.

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R94BP.pdf>

Supported by grant # 90MPRC0001 from ACL







# INDIANA ASSOCIATION OF AREA AGENCIES ON AGING

## AREA 1

### Northwest Indiana Community Action Corporation

5240 Fountain Drive  
Crown Point, IN 46307  
TTY: 888.814.7597  
FAX: 219.794.1860  
www.nwi-ca.com

## AREA 2

### REAL Services, Inc.

1151 S. Michigan Street  
South Bend, IN 46601-3427  
574.284.2644 OR 800.552.7928  
FAX: 574.284.2642  
www.realservicesinc.org

## AREA 3

### Aging and In-Home Services of Northeast Indiana, Inc.

8101 W. Jefferson Boulevard  
Fort Wayne, IN 46804  
260.745.1200 OR 800.552.3662  
FAX: 260.422.4916  
www.agingihs.org

## AREA 4

### Area IV Agency on Aging & Community Action Programs, Inc.

660 N. 36th Street  
Lafayette, IN 47903-4727  
765.447.7683 OR 800.382.7556  
TDD: 765.447.3307  
FAX: 765.447.6862  
www.areaivagency.org

## AREA 5

### Area Five Agency on Aging & Community Services, Inc.

1801 Smith Street, Suite 300  
Logansport, IN 46947-1577  
574.722.4451 OR 800.654.9421  
FAX: 574.722.3447  
www.areafive.com

## AREA 6

### LifeStream Services, Inc.

1701 Pilgrim Boulevard  
Yorktown, IN 47396-0308  
765.759.1121 OR 800.589.1121  
TDD: 800.801.6606  
FAX: 765.759.0060  
www.lifestreaminc.org

## AREA 7

### Area 7 Agency on Aging and Disabled West Central Indiana Economic Development District, Inc.

2800 Poplar Street, Suite 9A  
Terre Haute, IN 47803  
812.238.1561 OR 800.489.1561  
TDD: 800.489.1561  
FAX: 812.238.1564  
www.westcentralin.com

## AREA 8

### CICOA Aging and In-Home Solutions

8440 Woodfield Crossing Boulevard,  
Suite 175  
Indianapolis, IN 46240-2476  
317.254.5465 OR 800.432.2422  
TDD: 317.254.5497  
FAX: 317.254.5494  
www.cicoa.org

## AREA 9

### LifeStream Services, Inc.

1701 Pilgrim Boulevard  
Yorktown, IN 47396-0308  
765.759.1121 OR 800.589.1121  
TDD: 800.801.6606  
FAX: 765.759.0060  
www.lifestreaminc.org

## AREA 10

### Area 10 Agency on Aging

631 W. Edgewood Drive  
Ellettsville, IN 47429  
812.876.3383 OR 800.844.1010  
FAX: 812.876.9922  
www.area10agency.org

## AREA 11

### Thrive Alliance

1531 13th Street, Suite G900  
Columbus, IN 47201  
812.372.6918 OR 866.644.6407  
FAX: 812.372.7846  
www.thrive-alliance.org

## AREA 12

### LifeTime Resources, Inc.

13091 Benedict Drive  
Dillsboro, IN 47018  
812.432.6200 OR 800.742.5001  
FAX: 812.432.3822  
www.lifetime-resources.org

## AREA 13

### Generations Vincennes University Statewide Services

1019 N. 4th Street  
Vincennes, IN 47591  
812.888.5880 OR 800.742.9002  
FAX: 812.888.4566  
www.generationsnetwork.org

## AREA 14

### LifeSpan Resources, Inc.

33 State Street Third Floor  
New Albany, IN 47151-0995  
812.948.8330 OR 888.948.8330  
TTY: 812.542.6895  
FAX: 812.948.0147  
www.lsr14.org

## AREA 15

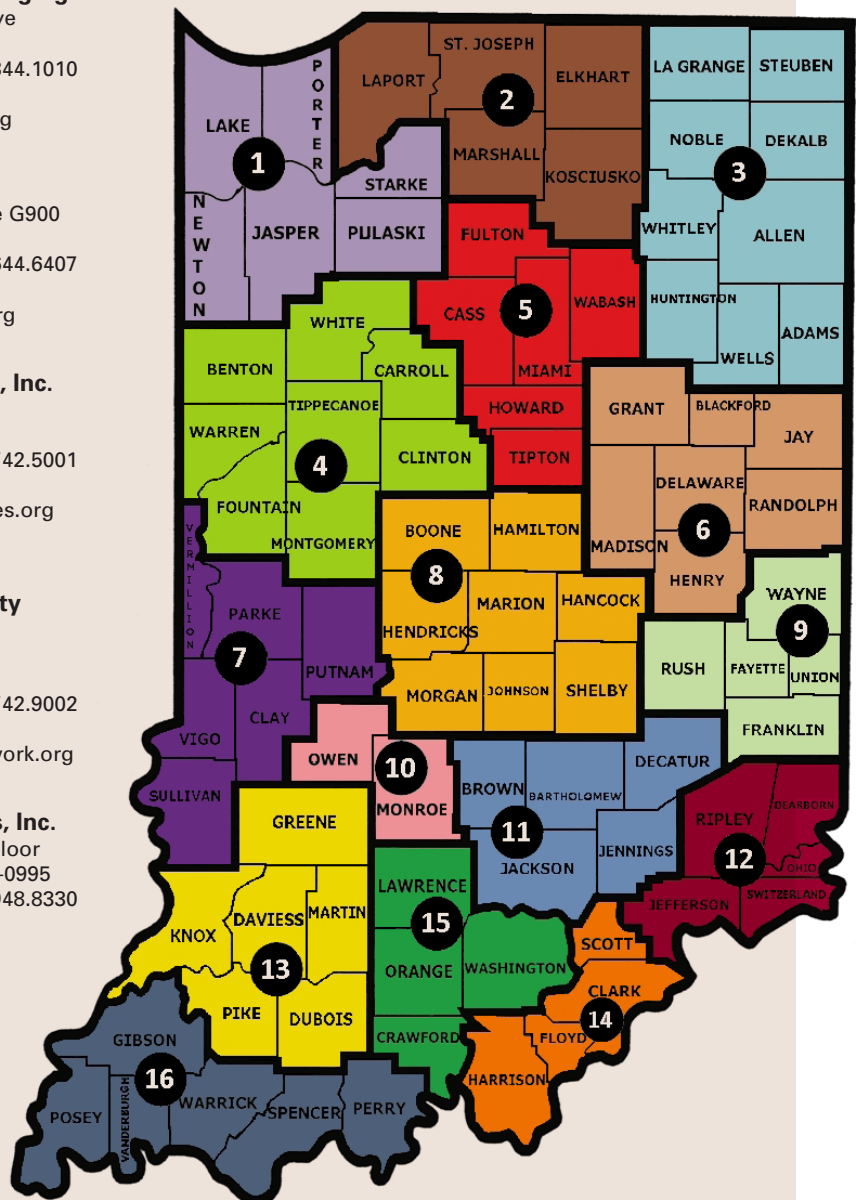
### Hoosier Uplands / Area 15 Agency on Aging and Disability Services

521 W. Main Street  
Mitchell, IN 47446  
812.849.4457 OR 800.333.2451  
TDD: 800.743.3333  
FAX: 812.849.4467  
www.hoosieruplands.org

## AREA 16

### SWIRCA & More

16 W. Virginia Street  
Evansville, IN 47710  
812.464.7800 OR 800.253.2188  
FAX: 812.464.7843  
www.swirca.org



# INDIANA ASSOCIATION OF AREA AGENCIES ON AGING



## AAA SERVICES

Attendant Care  
Legal Services  
Caregiver Support  
Guardianship  
Wellness Activities  
Respite Care  
Information & Referral  
Nutrition Services  
Transportation  
Adult Day Care  
Case Management  
In-Home Care & Services  
Options Counseling  
Home Modifications



## CALL 1.800.986.3505 TO CONTACT YOUR LOCAL AAA.

Indiana's 16 Area Agencies on Aging (AAAs) deliver services to older adults and people with disabilities of any age and their caregivers. AAAs provide Information about resources and service providers, assess needs for service, make referrals to case managers, link to services, monitor consumer satisfaction and adjust services to meet changing needs.

AAA's staff will help you plan how best to meet your long-term services and support needs, whether that be through your own resources

or those of your family, through community resources and/or through other sources of subsidy for which you may qualify.

Some subsidies are available based on age alone. Others are based on your level of disability, income and assets. Some subsidies may require a cost-share.

You should contact your AAA to determine what resources are currently available and best fit your needs.

## VISIT IAAAA'S WEBSITE

For more information about Indiana's AAA network, visit the Indiana Association of Area Agencies on Aging at [www.IAAAA.org](http://www.IAAAA.org).

You can also follow us on Facebook and Twitter!

[www.IAAAA.org](http://www.IAAAA.org) | [www.facebook.com/IN.IAAAA](https://www.facebook.com/IN.IAAAA) | Twitter: @IAAAAgings



# Page 2 – Making the Most of Your Medicare

**1 Section Title**  
This helps you navigate and find where you are in the notice. The section titles are on the top of each page.

**2 How to Check**  
Medicare offers helpful tips on what to check when you review your notice.

**3 How to Report**  
Help Medicare save money by reporting fraud!

**4 How to Get Help**  
This section gives you phone numbers for where to get your Medicare questions answered.

Jennifer Washington  
THIS IS NOT A BILL | Page 2 of 4

**1 Making the Most of Your Medicare**

**5 Medicare Preventive Services**  
Medicare covers many free or low-cost exams and screenings to help you stay healthy. For more information about preventive services:  
• Talk to your doctor.  
• Look at your "Medicare & You" handbook for a complete list.  
• Visit [www.Medicare.gov](http://www.Medicare.gov) for a personalized list.

**6 Your Messages from Medicare**  
Get a pneumococcal shot. You may only need it once in a lifetime. Contact your health care provider about getting this shot. You pay nothing if your health care provider accepts Medicare assignment.  
To report a change of address, call Social Security at 1-800-772-1213. TTY users should call 1-800-325-0778.  
Early detection is your best protection. Schedule your mammogram today and remember that Medicare helps pay for screening mammograms.  
Want to see your claims right away? Access your Original Medicare claims at [www.Medicare.gov](http://www.Medicare.gov). Usually within 24 hours after Medicare processes the claim. You can use the "Blue Button" feature to help keep track of your personal health records.

**7 How to Report Fraud**  
If you think a provider or business is involved in fraud, call us at 1-800-MEDICARE (1-800-633-4227). Some examples of fraud include offers for free medical services or billing you for Medicare services you didn't get. If we determine that your tip led to uncovering fraud, you may qualify for a reward.  
You can make a difference! Last year, Medicare saved tax-payers \$4.2 billion—thanks to people who reported suspicious activity to Medicare.  
Ask for "doctors services." Your customer-service code is 05535.  
TTY 1-877-486-2048 (for hearing impaired)  
Contact your State Health Insurance Program (SHIP) for free, local health insurance counseling. Call 1-555-555-5555.

**8 How to Get Help with Your Questions**  
1-800-MEDICARE (1-800-633-4227)  
Ask for "doctors services." Your customer-service code is 05535.  
TTY 1-877-486-2048 (for hearing impaired)  
Contact your State Health Insurance Program (SHIP) for free, local health insurance counseling. Call 1-555-555-5555.

# Page 3 – Your Part B Medical Claims

**1 Type of Claim**  
Claims can either be assigned or unassigned.

**2 Definitions**  
Don't know what some of the words on your MSN mean? Read the definitions to find out more.

**3 Your Visit**  
This is the date you went to your doctor. Keep your bills and compare them to your notice to be sure you got all the services listed.

**4 Service Descriptions**  
User-friendly service descriptions will make it easier for you to know what you were treated for.

Jennifer Washington  
THIS IS NOT A BILL | Page 3 of 4

**1 Your Claims for Part B (Medical Insurance)**

Your provider has agreed to accept this amount as full payment for covered services. Medicare usually pays 80% of the Medicare-approved amount.  
**Amount Medicare Paid.** This is the amount Medicare paid your provider. This is usually 80% of the Medicare-approved amount.  
**Maximum You May Be Billed.** This is the total amount the provider is allowed to bill you, and can include a deductible, coinsurance, and other charges not covered. If you have Medicare Supplement Insurance (Medigap policy) or other insurance, it may pay all or part of this amount.

**2 Definitions of Columns**  
Part B Medical Insurance helps pay for doctors' services, diagnostic tests, ambulance services, and other health care services.  
**Service Approved:** This column tells you if Medicare covered this service.  
**Amount Provider Charged:** This is your provider's fee for this service.  
**Medicare-Approved Amount:** This is the amount a provider can be paid for a Medicare service. It may be less than the actual amount the provider charged.

**3**  
January 21, 2013  
Craig L. Secosan, M.D., (555) 555-1234  
Looking Glass Eye Center PA, 1888 Medical Park Dr, Suite C, Brevard, NC 28712-4187

Service Provided & Billing Code	Service Approved?	Amount Provider Charged	Medicare-Approved Amount	Maximum You May Be Billed	Notes
Eye and medical examination for diagnosis and treatment, established patient, 1 or more visits (92014)	Yes	\$143.00	\$107.97	\$86.38	
Destruction of skin growth (17009)	NO	68.56	0.00	68.56	

**5 Approved Column**  
This column lets you know if your claim was approved or denied.

**6**  
\$21.59

**7**  
\$90.15

**Notes for Claims Above**  
A This service was denied. The information provided does not support the need for this service or item.  
B Your claim was sent to your Medicare Supplement Insurance (Medigap policy), Wellmark BlueCross BlueShield of N. Carolina. Send any questions regarding your benefits to them.

**6 Max You May Be Billed**  
This is the total amount the provider is able to bill you. It's highlighted and in bold for easy reading.

**7 Notes**  
Refer to the bottom of the page for explanations of the services you got.

# Page 4 – How to Handle Denied Claims

## 1 Get More Details

Find out your options on what to do about denied claims.

## 2 If You Decide to Appeal

You have 120 days to appeal your claims. The date listed in the box is when your appeal must be received by us.

## 3 If You Need Help

Helpful tips to guide you through filing an appeal.

Jennifer Washington THIS IS NOT A BILL | Page 4 of 4

### How to Handle Denied Claims or File an Appeal

**1 Get More Details**

If a claim was denied, call or write the provider and ask for an itemized statement for any claim. Make sure they sent in the right information. If they didn't, ask the provider to contact our claims office to correct the error. You can ask the provider for an itemized statement for any service or claim.

Call 1-800-MEDICARE (1-800-633-4227) for more information about a coverage or payment decision on this notice, including laws or policies used to make the decision.

**2 If You Disagree with a Coverage Decision, Payment Decision, or Payment Amount on this Notice, You Can Appeal**

Appeals must be filed in writing. Use the form to the right. Our claims office must receive your appeal within 120 days from the date you get this notice.

We must receive your appeal by:

July 13, 2013

**3 If You Need Help Filing Your Appeal**

**Contact us:** Call 1-800-MEDICARE or your State Health Insurance Program (see page 2) for help before you file your written appeal, including help appointing a representative.

**Call your provider:** Ask your provider for any information that may help you.

**Ask a friend to help:** You can appoint someone, such as a family member or friend, to be your representative in the appeals process.

**Find Out More About Appeals**

For more information about appeals, read your "Medicare & You" handbook or visit us online at [www.medicare.gov/appeals](http://www.medicare.gov/appeals).

**File an Appeal in Writing**

Follow these steps:

- 1 Circle the service(s) or claim(s) you disagree with on this notice.
- 2 Explain in writing why you disagree with the decision. Include your explanation on this notice or, if you need more space, attach a separate page to this notice.
- 3 Fill in all of the following:  
Your or your representative's full name (print)  
Your or your representative's signature  
Your telephone number  
Your complete Medicare number
- 4 Include any other information you have about your appeal. You can ask your provider for any information that will help you.
- 5 Write your Medicare number on all documents that you send.
- 6 Make copies of this notice and all supporting documents for your records.
- 7 Mail this notice and all supporting documents to the following address:  
**Medicare Claims Office**  
c/o Contractor Name  
Street Address  
City, ST 12345-6789

## 4 Appeals Form

You must file an appeal in writing. Follow the step-by-step directions when filling out the form.



# READING YOUR MEDICARE SUMMARY NOTICE

## Page 1 – Your Dashboard

## 1 DHHS Logo

The redesigned MSN has the official Department of Health & Human Services (DHHS) logo.

## 2 Your Information

Check your name and the last 4 numbers of your Medicare number, as well as the date your MSN was printed and the dates of the claims listed.

## 3 Your Deductible Info

You pay a yearly deductible for services before Medicare pays. You can check your deductible information right on page 1 of your notice!

**1** **4** **Medicare Summary Notice** **Page 1 of 4**  
for Part B (Medical Insurance)  
The Official Summary of Your Medicare Claims from the Centers for Medicare & Medicaid Services

JENNIFER WASHINGTON  
TEMPORARY ADDRESS NAME  
STREET ADDRESS  
CITY, ST 12345-6789

**2** **Notice for Jennifer Washington**

Medicare Number	XXX-XX-1234A
Date of This Notice	March 1, 2013
Claims Processed Between	January 1 – March 1, 2013

**3** **Your Deductible Status**

Your deductible is what you must pay for most health services before Medicare begins to pay.

**Part B Deductible:** You have now met **\$85.00** of your **\$147.00** deductible for 2013.

**Be Informed!**

Welcome to your new Medicare Summary Notice! It has clear language, larger print, and a personal summary of your claims and deductibles. This improved notice better explains how to get help with your questions, report fraud, or file an appeal. It also includes important information from Medicare!

**4** **THIS IS NOT A BILL**

**5** **Your Claims & Costs This Period**

Did Medicare Approve All Services?	NO
Number of Services Medicare Denied	1
See claims starting on page 3. Look for <b>NO</b> in the "Service Approved?" column. See the last page for how to handle a denied claim.	
Total You May Be Billed	\$90.15

**6** **Providers with Claims This Period**

January 21, 2013  
Craig I. Secosan, M.D.

**7**

¿Sabía que puede recibir este aviso y otro tipo de ayuda de Medicare en español? Llame y hable con un agente en español. 1-800-MEDICARE (1-800-633-4227)

## 4 Title of your MSN

The title at the top of the page is larger and bold.

## 5 Total You May Be Billed

A new feature on page 1, this summary shows your approved and denied claims, as well as the total you may be billed.

## 6 Providers You Saw

Check the list of dates and the doctors you saw during this claim period.

## 7 Help in Your Language

For help in a language other than English or Spanish, call 1-800-MEDICARE and say "Agent." Tell them the language you need for free translation services.