National Health Care Fraud Takedown Results in Charges Against 601 Individuals Responsible for Over $2 Billion in Fraud Losses

Largest Health Care Fraud Enforcement Action in Department of Justice History Resulted in 76 Doctors Charged and 84 Opioid Cases Involving More Than 13 Million Illegal Dosages of Opioids

Attorney General Jeff Sessions and Department of Health and Human Services (HHS) Secretary Alex M. Azar III, announced today [June 28, 2018] the largest ever health care fraud enforcement action involving 601 charged defendants across 58 federal districts, including 165 doctors, nurses and other licensed medical professionals, for their alleged participation in health care fraud schemes involving more than $2 billion in false billings. Of those charged, 162 defendants, including 76 doctors, were charged for their roles in prescribing and distributing opioids and other dangerous narcotics. Thirty state Medicaid Fraud Control Units also participated in today’s arrests. In addition, HHS announced today that from July 2017 to the present, it has excluded 2,700 individuals from participation in Medicare, Medicaid, and all other Federal health care programs, which includes 587 providers excluded for conduct related to opioid diversion and abuse.

...Today’s enforcement actions were led and coordinated by the Criminal Division, Fraud Section’s Health Care Fraud Unit in conjunction with its Medicare Fraud Strike Force (MFSF) partners, a partnership between the Criminal Division, U.S. Attorney’s Offices, the FBI and HHS-OIG. In addition, the operation includes the participation of the DEA, DCIS, IRS-CI, Department of Labor, other various federal law enforcement agencies, and State Medicaid Fraud Control Units.

The charges announced today aggressively target schemes billing Medicare, Medicaid, TRICARE (a health insurance program for members and veterans of the armed forces and their families), and private insurance companies for medically unnecessary prescription drugs and compounded medications that often were never even purchased and/or distributed to beneficiaries. The charges also involve individuals contributing to the opioid epidemic, with a particular focus on medical professionals involved in the unlawful distribution of opioids and other prescription narcotics, a particular focus for the Department. According to the CDC, approximately 115 Americans die every day of an opioid-related overdose.

“Every dollar recovered in this year’s operation represents not just a taxpayer’s hard-earned money—it’s a dollar that can go toward providing healthcare for Americans in need,” said HHS Secretary Azar. “This year’s Takedown Day is a significant accomplishment for the American people, and every public servant involved should be proud of their work.”

According to court documents, the defendants allegedly participated in schemes to submit claims to Medicare, Medicaid, TRICARE, and private insurance companies for treatments that were medically unnecessary and often never provided. In many cases, patient recruiters, beneficiaries and other co-conspirators were allegedly paid cash kickbacks in return for supplying beneficiary information to providers, so that the providers could then submit fraudulent bills to Medicare. Collectively, the doctors, nurses, licensed medical professionals, health care company owners and others charged are accused of submitting a total of over $2 billion in fraudulent billings. The number of medical professionals charged is particularly significant, because virtually every health care fraud scheme requires a corrupt medical professional to be involved in order for Medicare or Medicaid to pay the fraudulent claims. Aggressively pursuing corrupt medical professionals not only has a deterrent effect on other medical professionals, but also ensures that their licenses can no longer be used to bilk the system.

The Medicare Fraud Strike Force operations are part of a joint initiative between the Department of Justice and HHS to focus their efforts to prevent and deter fraud and enforce current anti-fraud laws around the country. The Medicare Fraud Strike Force operates in 10 locations nationwide. Since its inception in March 2007, the Medicare Fraud Strike Force has charged over 3,700 defendants who collectively have falsely billed the Medicare program for over $14 billion. ***


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INSIDE MEDICARE—

New Medicare card

CHECK YOUR MAILBOX FOR YOUR NEW MEDICARE CARD COMING IN JULY!

FOR ALL INFORMATION AVAILABLE ABOUT YOUR NEW CARD, LOG ON!

Official Gives Hints About Medicare Advantage LTC Benefits
Issuers can add new types of benefits based on two separate rule 'reinterpretations.'

By Allison Bell | Think Advisor
May 10, 2018

Seema Verma, the administrator of the Centers for Medicare and Medicaid Services (CMS), talked about the Medicare Advantage program’s new benefits flexibility at a Medicare conference at CMS headquarters, in Baltimore

Starting in 2019, Medicare Advantage plans can cover adult day care services, and in-home help with activities such as dressing, bathing and managing medications.

CMS now wants to let plans offer benefits that can compensate for physical impairments, reduce the impact of injuries, or reduce avoidable use of emergency rooms.

Plans adding supplemental benefits must make sure the services covered are recommended by a physician or other licensed medical professional as part of a care plan.

The new benefits must not include items or services used to induce enrollment.

https://www.medicare.gov/newcard/

WATCH THIS HELPFUL VIDEO:
https://www.youtube.com/watch?v=oP5_yZU9d9w&t=96s
2017—SENIOR MEDICARE PATROL (SMP) PROJECTS

BY THE NUMBERS

The mission of the SMP program is to 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.

The SMP program model is one of prevention. SMPs educate Medicare beneficiaries to scrutinize their medical statements and bills and subsequently reduce fraud and errors. Though beneficiaries have several avenues they can take to report fraud, such as the Office of Inspector General (OIG) hotline or 1-800-Medicare, some beneficiaries choose to report fraud to the SMP. In these cases, SMPs refer the complaint to the appropriate entity.

The OIG collects performance data for the SMP projects. The SMP activity data (known as “performance measures”) is presented to the Administration for Community Living (ACL) and is made available to the general public through the OIG’s website.

In 2017, the 53 SMP projects had a total of 6,130 total active team members who conducted 26,429 group outreach and education events, reaching an estimated 1.9 million people. In addition, the projects had 226,261 individual interactions with, or on behalf of, a Medicare beneficiary.

They reported $211,749 in cost avoidance on behalf of Medicare, Medicaid, beneficiaries, and others; $44,468 in savings to beneficiaries and others; and $2,010,475 in expected Medicare recoveries. Additional Medicare expected recoveries totaled $53.2 million and additional Medicaid expected recoveries totaled $1.8 million.

The OIG reports that since 1997 the SMP projects have saved more than $126.8 million. This includes cost avoidance on behalf of Medicare, Medicaid, beneficiaries, or others of $9.4 million; expected Medicare recoveries of more than $24.8 million; expected Medicaid recoveries of more than $94.8 million; and savings to beneficiaries and others of approximately $7.1 million.

The OIG emphasizes that it is not always possible to track SMP referrals to Medicare contractors or law enforcement from beneficiaries who have learned to detect fraud, waste, and abuse from the projects. Therefore, SMPs may not be receiving full credit for savings, recoveries, and cost avoidance attributable to their work. In addition, SMPs are unable to track the potentially substantial savings derived from a sentinel effect whereby fraud and errors are reduced by Medicare beneficiaries’ scrutiny of their bills.

SEE PAGE 9 FOR MORE INFORMATION—

SOURCE:
Office of Inspector 2017 Performance Data for the Senior Medicare Patrol Projects
WHAT SHOULD YOU DO WITH EXPIRED OR UNUSED MEDICATIONS?

→ Never Flush any medications!
→ DO NOT THROW AWAY any medications in the trash!

FOR SAFE MEDICATION DISPOSAL—

Take any unused or expired medications to a local drop box!
To find a drop box location near you, go to artakeback.org and type in the city or zip code;
Or
Find a drop box at local police departments and participating local pharmacies. Some collection sites offer 24-hour drop boxes.

GO TO A TAKE BACK EVENT - Saturday, October 27

Take-Back events (a.k.a. Operation Medicine Cabinet) are offered in various locations statewide in an effort to not only get the public to dispose of unused or expired medications, but to educate as many people as possible about the dangers prescription medications can pose.

WHAT IS NALOXONE?

Used in an emergency situation, such as a suspected opioid overdose, Naloxone is a medication used to reverse the effects of an opioid-induced overdose.

Naloxone is available for purchase at some pharmacies throughout Arkansas.

Arkansas Governor Asa Hutchinson has a standing order allowing Arkansas-licensed pharmacists to initiate naloxone therapy including ordering, dispensing and/or administering naloxone, along with any necessary supplies for administration, to eligible persons who are at risk of experiencing an opioid-related overdose, or who are family members, friends, or others who are in a position to assist a person at risk of experiencing an opioid-related overdose. This standing order was issued pursuant to Act 284 of 2017 (SB 142) [Arkansas Code § 17-92- 101(16)] to authorize licensed pharmacists in Arkansas to order, dispense and/or administer naloxone according to the provisions of Arkansas Code § 17-92-101(16) and the requirements of this standing order.

NOTE: Naloxone has no effect on non-opioid overdoses.
The Arkansas SMP is currently recruiting volunteers!

COME JOIN THE FUN!
Dee Edwards, Volunteer Coordinator
1-866-726-2916

SMP - Empowering Seniors to Prevent Medicare Fraud!

The Ambassador program has allowed us a more far-reaching opportunity to partner with other organizations such as Area Agencies on Aging, senior minority apartment communities, and other volunteer based organizations. This is where Dan Spear comes into view. We have named him Dan the Man.

Dan has opened the door for us to have an Ambassador in Northwest Arkansas (NWA) thereby giving the SMP a greater penetration in that region of the state.

Officially designated by the United States Census Bureau, NWA includes: Fayetteville, Springdale, Rogers, and Bentonville, which are the 3rd, 4th, 8th, and 10th largest cities in Arkansas.

Dan has already hosted an SMP exhibit booth in Bella Vista, presented SMP Fraud Bingo in Rogers at two different locations, and assisted with two presentations in Springdale. Thanks, Dan!

The Ambassador program in senior housing communities is a way to organize our volunteer teams. It was our goal to recruit existing volunteers to be Ambassadors acting as liaisons between SMP staff and the volunteer team at each senior housing location. The growth of our senior housing community volunteer teams has birthed the need for a new look at organization and expansion.

Our first choice was Parkview Towers to initiate this program locally. This volunteer team is a solid team, and what better volunteer to recruit as their Ambassador than Margie Jones. Margie has been involved with Parkview for many years. She knows several of the residents. Margie has been the Ambassador in that community since March 2018. Great job, Margie! Thank YOU!

Join the Senior Medicare Patrol
Join our efforts by becoming a volunteer with the SMP program!

As a volunteer you can be a vital part of our grassroots network to stop Medicare fraud and abuse through outreach and education. Volunteers use their time and experience to help their peers protect their identity, read their Medicare Summary Notices, and avoid getting taken by scammers. They work one-on-one with beneficiaries, give presentations to groups, and represent the SMP at events.

To learn more about becoming a SMP volunteer, please email darwina.edwards@dhs.arkansas.gov or call 866-726-2916.
Free credit freezes are coming soon

Thanks to a new federal law, soon you can get free credit freezes and year-long fraud alerts.

A security freeze is the single most effective tool to minimize the risk of identity theft. Identity thieves often target older adults, luring them into giving out personal information. The scammers then use this information to steal the older adults’ identity and ruin a lifetime of positive credit.

Here’s what to look forward to when the law takes effect on September 21st:

- **Free credit freezes**
  - **What is it?** A credit freeze restricts access to your credit file, making it harder for identity thieves to open new accounts in your name. Usually you get a PIN to use each time you want to freeze and unfreeze your account to apply for new credit.
  - **What’s new?** Currently, credit freezes may involve fees, based on state law. Starting this fall, it will be free to freeze and unfreeze your credit file throughout the country.

- **Free child credit freezes**
  - **What is it?** A child credit freeze allows you to freeze a child’s credit file until the child is old enough to use credit.
  - **What’s new?** Currently, some state laws allow you to freeze a child’s credit file. Starting September 21st, no matter where you live, you’ll be able to get a free credit freeze for children under age 16.

- **Year-long fraud alerts**
  - **What is it?** A fraud alert will tell any business that runs your credit that they should check with you before opening a new account.
  - **What’s new?** Currently, fraud alerts last 90 days. Starting this fall, an initial fraud alert will last for one year. It will still be free and identity theft victims can still get an extended fraud alert for seven years.

The new law has a long name – Economic Growth, Regulatory Relief, and Consumer Protection Act – but the outcome is simple. When the law takes effect in September, Equifax, Experian and TransUnion must each set up a webpage for requesting fraud alerts and credit freezes. The FTC will also post links to those webpages on IdentityTheft.gov.

And if you’re in the military, there’s more. Within a year, credit reporting agencies must offer free electronic credit monitoring to all active duty military.

If you want to stay tuned on this law and get other tips, sign up for the FTC’s Consumer Information Updates.

**SOURCE:** https://www.consumer.ftc.gov/blog/2018/06/free-credit-freezes-are-coming-soon

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Elder LGBTQ Information

April 26, 2018

Three out of four adults age 45 and older who are lesbian, gay, bisexual, or transgender (LGBT) say they are concerned about having enough support from family and friends as they age. Many are worried about how they will be treated in long-term care facilities and want specific LGBT services for older adults. They are likely to worry that their sexual orientation and age may have a negative impact on the quality of care they receive from health care providers as they age. To read information about the AARP survey, click here.


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LGBT Elder Hotline — 888-234-SAGE
SAGE@GLBThotline.org

Services and Advocacy for GLBT Elders (SAGE) is the world’s largest organization devoted to improving the lives of LGBT older people.

Now, no matter where they live, LGBT elders have a place to call when they need peer counseling, information and local resources.

Operated by the GLBT National Help Center, this hotline offers peer support to callers who are often very isolated sometimes still closeted, and in need of a caring, non-judgmental person to talk with. The folks on the hotline don’t give advice, instead they listen and they care!
**FRAUD IN THE NEWS —**

**Yell County woman sentenced for healthcare fraud**

**Belleville AR** — A former Yell County Emergency Medical Services employee was convicted of one count of theft of property and one count healthcare fraud. She pleaded guilty in Conway County Circuit Court for stealing money from Yell County Emergency Medical Services and submitting false claims to Medicare and Medicaid. She must pay $250,000 in restitution, of which she has already paid $100,000. She was also sentenced to 20 years in the Arkansas Department of Correction with all but six months suspended, which will be spent in Arkansas Community Correction.

Attorney General Rutledge said “Stealing money from the service and from Medicare and Medicaid will not be tolerated in Arkansas. Attorney and investigators at the Attorney General’s office continue to investigate these crimes and stopping this type of fraud continues to be a top priority.”


**Arrest of Little Rock man for Medicaid Fraud**

**LITTLE ROCK**— (June 2018) A Pulaski County man, a known Medicaid expert who knew how to exploit the program for self-benefit, was arrested for scamming $2.2 million from the Arkansas Medicaid Program. He is charged with two counts of Medicaid fraud and is accused of coordinating an effort which reimbursed his company for 20,109 illegally billed mental health services for a total of $2,277,816.05 from January 1, 2015 to October 19, 2017. Arkansas Attorney General Rutledge said, “He took advantage of a system which provides important care to Arkansans by misrepresenting more than 20,000 services totaling over $2 million. As Attorney General, it is important for me to hold criminals accountable in order to deter future fraud within the Medicaid system.”

**THE OPIOID CRISIS**

The Department of Health and Human Services (DHHS) and the Department of Justice (DOJ) are using Medicare data to identify potential healthcare fraud leads generally, as well as to combat the opioid epidemic with the formation of the Opioid Fraud and Abuse Detection Unit. This unit will focus on “investigating and prosecuting health care fraud related to prescription opioids, including pill mill schemes and pharmacies that unlawfully divert or dispense prescription opioids for illegitimate purposes.”

**DON’T BE A “DEALER”**

More than four in 10 teens (42 percent) who have misused or abused a prescription drug obtained it from their parent’s medicine cabinet.

**TERMINOLOGY—**

**ADDITION vs. DEPENDENCE?**

It is difficult to discern between addiction and dependence, particularly with prescribed medications for which the need of increasing dosages can represent tolerance or a worsening underlying problem, as opposed to the beginning of abuse or addiction.


**ADDITION:** Compulsive drug use (substance use disorder) that becomes the main priority of the addict (both mental and physical reliance), despite harmful consequences; characterized by an inability to stop using a drug; a change in behavior, failure to meet work, social, or family obligations; and sometimes tolerance (the ability to endure unusually large doses of a poison or toxin) and withdrawal. Some people believe they are not an “addict” because they are not taking opioid medications prescribed to them to “get high.”

**DEPENDENCE:** Physical dependence can happen with chronic use of many prescription drugs—even if taken as instructed. The body adapts to the drug, requiring more of it to achieve a certain effect (tolerance) and eliciting drug-specific physical or mental symptoms if drug is abruptly ceased (withdrawal). An opioid-dependent person may not be taking medications to get high, but their body may still be physically addicted (dependent) to those medications.
WATCH OUT FOR SCAMS!

Scam artists may try to get your current Medicare number and other personal information by contacting you about your new Medicare card. They often claim to be from Medicare and use various scams to get your Medicare number, including:

- Asking you to confirm your Medicare or Social Security number so they can send you a new card.
- Telling you there is a charge to process your new card and ask for payment.
- Threatening to cancel your health benefits if you don’t share your Medicare number or other personal information.

What should you do if someone calls and asks for your information, for money, or threatens to cancel your health benefits if you don’t share your personal information?

Hang up! It’s a scam.

REMEMBER — Medicare will never call you uninvited and ask you to give personal or private information to get your new Medicare Number and card. If someone asks you for your information, for money, or threatens to cancel your health benefits if you don’t share your personal information, hang up and call 1-800-MEDICARE (1-800-633-4227) or the Arkansas SMP at 866-726-2916.

Do you have Medicare?
Starting July 2018 Arkansas Medicare recipients will begin receiving new Medicare cards with new Medicare numbers. You don’t need to do anything to get your new card! Just watch your mailbox for its arrival.

Once you get your new card, 
DESTROY YOUR OLD CARD, or put it in a safe place along with your Social Security card.
Do not carry the old card or your Social Security card in your wallet!

Start using your new card right away!

You may carry your new card in your wallet, but guard it like you would a credit card!

For more information on your new Medicare card, call the Arkansas SMP at 866-726-2916.

YOUR NEW MEDICARE CARD…
GET IT!
USE IT!

In this scam, callers claim they need a beneficiary’s old Medicare card number to prevent their insurance from being interrupted while new cards are being mailed out.

In reality, there will be no interruption in service. In fact, both the old and new Medicare numbers may be used through December 2019.

Your new Medicare card will not change any of your benefits.

For more information about Medicare card scams and other scams, contact your Senior Medicare Patrol by calling 866-726-2916.
SMP projects receive grants from ACL to recruit and train retired professionals and other senior citizens to prevent, recognize, and report health care fraud, errors, and abuse. These SMP team members then participate in outreach events to help educate other Medicare and Medicaid beneficiaries to do the same.

In 2017, the 53 projects: • had 6,130 active team members; • conducted 26,429 group outreach and education events; and • had 226,261 individual interactions with, or on behalf of, a Medicare beneficiary. The projects also had the following results: • $2,010,475 in expected Medicare recoveries that were attributable to the projects; • $211,749 in cost avoidance on behalf of Medicare, Medicaid, beneficiaries, and others; and $44,468 in total savings to beneficiaries and others.

### Summary of Overall Performance of Projects in 2017

<table>
<thead>
<tr>
<th>Performance measures</th>
<th>Total for 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of active SMP team members</td>
<td>6,130</td>
</tr>
<tr>
<td>Total number of SMP team member hours</td>
<td>433,728</td>
</tr>
<tr>
<td>Number of group outreach and education events</td>
<td>26,429</td>
</tr>
<tr>
<td>Estimated number of people reached through group outreach and education events</td>
<td>1,895,594</td>
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<tr>
<td>Number of individual interactions with, or on behalf of, a Medicare beneficiary</td>
<td>226,261</td>
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<tr>
<td>Cost avoidance on behalf of Medicare, Medicaid, beneficiaries, or others</td>
<td>$211,749</td>
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<tr>
<td>Expected Medicare recoveries attributable to the projects</td>
<td>$2,010,475</td>
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<tr>
<td>Additional expected Medicare recoveries attributable to the projects</td>
<td>$53,248,830</td>
</tr>
<tr>
<td>Expected Medicaid recoveries attributable to the projects</td>
<td>$0</td>
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<tr>
<td>Additional expected Medicaid recoveries attributable to the projects</td>
<td>$1,789,200</td>
</tr>
<tr>
<td>Savings to beneficiaries attributable to the projects</td>
<td>$43,726</td>
</tr>
<tr>
<td>Other savings attributable to the projects (e.g., savings to supplemental insurance)</td>
<td>$741</td>
</tr>
<tr>
<td>Total savings attributable to the projects</td>
<td>$2,054,942</td>
</tr>
</tbody>
</table>

* The totals in this table have been rounded.

** Additional expected recoveries are expected recoveries from cases in which the SMP projects were minimally involved, as distinguished from referrals that led to the opening of an investigation or from meaningful contributions to an existing investigation by an SMP project.

*** Total savings includes expected Medicare recoveries, expected Medicaid recoveries, and savings to the beneficiaries and others.

### Arkansas – Arkansas Department of Human Services

<table>
<thead>
<tr>
<th>Performance measures</th>
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<tr>
<td>Total number of active SMP team members</td>
<td>138</td>
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<tr>
<td>Total number of SMP team member hours</td>
<td>7,408</td>
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<tr>
<td>Number of group outreach and education events</td>
<td>300</td>
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<tr>
<td>Estimated number of people reached through group outreach and education events</td>
<td>15,517</td>
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<tr>
<td>Number of individual interactions with, or on behalf of, a Medicare beneficiary</td>
<td>190</td>
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<tr>
<td>Cost avoidance on behalf of Medicare, Medicaid, beneficiaries, or others</td>
<td>$6,850</td>
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<tr>
<td>Expected Medicare recoveries attributable to the project</td>
<td>$0</td>
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<tr>
<td>Additional expected Medicare recoveries attributable to the project</td>
<td>$0</td>
</tr>
<tr>
<td>Expected Medicaid recoveries attributable to the project</td>
<td>$0</td>
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<tr>
<td>Additional expected Medicaid recoveries attributable to the project</td>
<td>$0</td>
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<tr>
<td>Savings to beneficiaries attributable to the project</td>
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<tr>
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<td>$0</td>
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<td>Total savings attributable to the project</td>
<td>$0</td>
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* Additional expected recoveries are expected recoveries from cases in which the SMP projects were minimally involved, as distinguished from referrals that led to the opening of an investigation or from meaningful contributions to an existing investigation by an SMP project.
<table>
<thead>
<tr>
<th>DATE</th>
<th>ACTIVITY</th>
<th>COUNTY</th>
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<tbody>
<tr>
<td>July 5</td>
<td>SMP Presentation — Alzheimer’s AR Lunch &amp; Learn — Little Rock</td>
<td>Pulaski</td>
</tr>
<tr>
<td>July 10</td>
<td>SMP Presentation—N.A.R.F.E. #299—Fort Smith</td>
<td>Sebastian</td>
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<tr>
<td>July 12</td>
<td>SMP Presentation — GACA Meeting — Patrick Henry Hays Senior Center North Little Rock</td>
<td>Pulaski</td>
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<tr>
<td>July 20</td>
<td>SMP Presentation — N.A.R.F.E. #1156—Greers Ferry</td>
<td>Cleburne</td>
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<td>July 24</td>
<td>SMP Volunteer Training—LRA</td>
<td>Pulaski</td>
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<tr>
<td>July 25</td>
<td>SMP Fraud Bingo — St. Anthony’s Senior Living Apts — Morrilton</td>
<td>Conway</td>
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<tr>
<td>July 27</td>
<td>SMP Exhibit Booth — HOPE for the Future — Fayetteville</td>
<td>Washington</td>
</tr>
<tr>
<td>August 15</td>
<td>Bull Shoals-Lake View Rotary Club — Bull Shoals</td>
<td>Marion</td>
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<tr>
<td>August 16</td>
<td>Mountain Home Rotary Club</td>
<td>Baxter</td>
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<tr>
<td>August 20</td>
<td>SMP National Conference — Chicago IL</td>
<td>Out of State</td>
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<tr>
<td>September 4</td>
<td>National Park Medical Center Auxiliary—Hot Springs Country Club</td>
<td>Garland</td>
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<tr>
<td>September 7</td>
<td>SMP Presentation &amp; Exhibit Booth — HOPE for the Future — Helena</td>
<td>Phillips</td>
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<td>September 10</td>
<td>AANHR (AR Advocates for Nursing Home Residents)—North Little Rock</td>
<td>Pulaski</td>
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<tr>
<td>September 18</td>
<td>SMP Advisory Council Meeting — Little Rock</td>
<td>Pulaski</td>
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<tr>
<td>September 19</td>
<td>SMP Presentation — CMS Train-the-Trainer (Day1) — Jacksonville</td>
<td>Pulaski</td>
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<tr>
<td>September 20</td>
<td>CMS Train-the-Trainer (Day 2) — Jacksonville</td>
<td>Pulaski</td>
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<tr>
<td>September 20</td>
<td>SMP Exhibit Booth—Apple A Day Health Fair — Clarksville</td>
<td>Johnson</td>
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<td>September 21</td>
<td>Interfaith Coalition — Jacksonville</td>
<td>Pulaski</td>
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<td>September 26</td>
<td>SMP Presentation—Alzheimer’s AR Lunch &amp; Learn — Mtn. Home</td>
<td>Baxter</td>
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<td>October 3-5</td>
<td>Arkansas Hospital Auxiliary Association (AHAA) 60th Convention Embassy Suites, LRA</td>
<td>Pulaski</td>
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<tr>
<td>October 12</td>
<td>Faulkner County HOPE for the Future—Conway</td>
<td>Faulkner</td>
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<tr>
<td>October 19</td>
<td>SMP Presentation—Alzheimer’s AR Lunch &amp; Learn—Hot Springs</td>
<td>Garland</td>
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<td>October 26</td>
<td>SMP Exhibit Booth — HOPE for the Future — Magnolia</td>
<td>Columbia</td>
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<tr>
<td>November 9</td>
<td>Arkansas Gerontological Society (AGS) Conference —Pulaski Heights United Methodist Church— LRA</td>
<td>Pulaski</td>
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<tr>
<td>December 11</td>
<td>SMP Volunteer &amp; Advisory Council Appreciation</td>
<td>Pulaski</td>
</tr>
</tbody>
</table>

We would welcome any opportunity to present the SMP message statewide. Please contact the Arkansas SMP to schedule a presentation in your area at 1-866-726-2916.

Call 1-866-726-2916 to receive the quarterly SMP Newsletter. You can read new and archived issues on our website — [http://www.daas.ar.gov/asmpnl.html](http://www.daas.ar.gov/asmpnl.html) —

This newsletter was supported in part by a grant (No. 90MP0022101) from the Administration for Community Living (ACL). Grantees carrying out projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not necessarily represent official ACL or DHHS policy.
IMPORTANT PHONE NUMBERS:

- **AANHR**—AR Advocates for Nursing Home Residents 501-450-9619
- **AFMC**—AR Foundation for Medical Care 1-888-354-9100
- **Area Agency on Aging** 1-800-986-3505
- **AG-Attorney General (Consmr Prot Div)** 1-800-482-8982
- **AG Medicaid Fraud Hotline** 1-866-810-0016
- **APS**—Adult Protective Services (DHS) 1-800-482-8049
- **Arkansas Rehabilitation Services** 1-800-981-4463
- **AR SMP (Healthcare Fraud Complaints)** 1-866-726-2916
- **Better Business Bureau (BBB)** 501-664-7274
- **CMS**—(Medicare) 1-800-633-4227
- **Community Health Centers of AR** 1-877-666-2422
- **Coordination of Benefits** 1-855-798-2627
- **DHS (Customer Assistance Unit)** 1-800-482-8988
- **Do Not Call Registry** 1-888-382-1222
- **Elder Care Locator** 1-800-677-1116
- **El Dorado RSVP** 1-870-864-7080
- **Federal Trade Commission**
  - Report STOLEN IDENTITY 1-877-438-4338
- **ICan**—Increasing Capabilities Access Network 501-666-8868
- **LGBT Elder Hotline** 888-234-SAGE
- **KEPRO—AR QIO(Quality Improvmmnt Org.)** 1-844-430-9504
- **Medicaid**—(Claims Unit) 1-800-482-5431
- **Medicaid Inspector General (OMIG)** 1-855-527-6644
- **MEDICARE** (CMS 1-800-MEDICARE) 1-800-633-4227
- **Medicare Part D** 1-877-772-3379
- **Medicare Rights Center** 1-800-333-4114
- **Mid-Delta Community Consortium** 1-870-407-9000
- **Oaklawn Foundation/Center on Aging** 501-623-0020
- **OIG—Nat’l Medicare Fraud Hotline** 1-800-HHS-TIPS
  - (OIG) Office of Inspector General 1-800-447-8477
- **OLTC—Office of Long Term Care** 1-800-LTC-4887
- **OLTC—Abuse Complaint Section** 501-682-8430
- **Ombudsman—State Ofc of Long Term Care** 501-682-8952
- **Resource Center (ADRC)** 1-866-801-3435
  - (DHS’S Choices in Living Resource Center)
- **RSVP of Central Arkansas** 501-897-0793
- **SAGE (LGBT Elder Hotline)** 1-888-234-SAGE
- **SHIIP (Senior Health Ins.Info Program)** 1-800-224-6330
- **SMP Locator**—(locate an SMP outside AR) 1-877-808-2468
- **SSA (Social Security Administration)**
  - Little Rock Office 1-866-593-0933
- **SSA Fraud Hotline** 1-800-269-0271
- **South Central Center on Aging** 1-866-895-2795
- **Texarkana Regional Center on Aging** 1-870-773-2030
- **Tri-County Rural Health Network** 1-870-338-8900
- **UALR Senior Justice Center** 501-683-7153
- **UofA Cooperative Extension Service** 501-671-2000

HELPFUL WEBSITES:

- **ADRC**—AR Aging & Disability Resource Center (DHS)—
- **AR Advocates for Nursing Home Residents (AANHR)**—
  [www.aanhr.org; e-mail: Info@aanhr.org](http://www.aanhr.org; e-mail: Info@aanhr.org)
- **AR Long Term Care Ombudsman Program**—
  [www.arombudsman.com](http://www.arombudsman.com)
- **Arkansas Aging Initiative**—
  [http://aging.uams.edu/?id=4605&sid=6](http://aging.uams.edu/?id=4605&sid=6)
- **Arkansas Attorney General**—
  [www.arkansasag.gov](http://www.arkansasag.gov)
- **Arkansas Attorney General Consumer Protection Division**—
  [e-mail: consumer@ag.state.ar.us](mailto:consumer@ag.state.ar.us)
- **Area Agencies on Aging**—
  [www.daas.ar.gov/aaamap.html](http://www.daas.ar.gov/aaamap.html)
- **Arkansas Foundation for Medical Care**—
  [www.afmc.org](http://www.afmc.org)
- **Arkansas SMP**—
- **BBB (Better Business Bureau)**—
  [scams and alerts—
  https://www.bbb.org/scamtracker/arkansas/](https://www.bbb.org/scamtracker/arkansas/)
- **CMS (Medicare) Centers for Medicare and Medicaid Services**—
  [www.cms.hhs.gov](http://www.cms.hhs.gov)
- **Do Not Mail**—
  [www.DMAchoice.org](http://www.DMAchoice.org)
- **Elder Tree / Spinsterhaven**—
  [Spinsterhaven@gmail.com](mailto:Spinsterhaven@gmail.com)
- **Elder Care Locator**—
  [www.elderccare.gov](http://www.elderccare.gov)
- **H.E.A.T**—
  [www.stopmedicarefraud.gov/](http://www.stopmedicarefraud.gov/)
  (Healthcare Fraud Prevention and Enforcement Action Team)
- **ICan AT4ALL**—
- **LGBT**—
  [National Resource Center on LGBT Aging](https://www.lgbtagingcenter.org/about/updatesProcess.cfm)
- **MEDICAID**—
  [www.medicaid.gov](http://www.medicaid.gov)
- **MEDICAID INSPECTOR GENERAL (OMIG)**—
  [http://omig.arkansas.gov/fraud](http://omig.arkansas.gov/fraud)
- **MEDICARE**—
  [www.medicare.gov](http://www.medicare.gov)
- **Medicare Interactive Counselor**—
  [www.medicareinteractive.org](http://www.medicareinteractive.org)
- **Hospital Compare**—
  [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)
- **MyMedicare.gov**—
  [www.mymedicare.gov](http://www.mymedicare.gov)
  (Access to your personal Medicare claims information)
- **MyMedicareMatters.org** (National Council on Aging)
- **Office of Long Term Care**—
  [http://humanservices.arkansas.gov/dms/Pages/oltcHome.aspx](http://humanservices.arkansas.gov/dms/Pages/oltcHome.aspx)
- **Office of Inspector General (OIG)**—
  [email: HHSTips@oig.hhs.gov](mailto:HHSTips@oig.hhs.gov)
- **Pharmaceutical Assistance Program**—
- **Physician Compare**—
  [www.medicare.gov/find-a-doctor](http://www.medicare.gov/find-a-doctor)
- **SMP Locator**—
  [SMPResource.org](http://SMPResource.org) (locate an SMP outside AR)
- **Social Security Administration (SSA)**—
  [www.ssa.gov](http://www.ssa.gov)
- **SSA OIG**—
- **TAP**—
  [www.arsinfo.org](http://www.arsinfo.org) (Telecommunications Access Program)
- **UofA Cooperative Extension Service**—
  [www.uaex.edu](http://www.uaex.edu)
SENIOR MEDICARE PATROL (SMP) MISSION

“To empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report health care fraud, error, and abuse through outreach, counseling, and education.”

TO PREVENT HEALTHCARE FRAUD—

Protect Personal Information
* Treat Medicare/Medicaid and Social Security numbers like credit card numbers.
* Remember, Medicare will not call or make personal visits to sell anything!
* READ and SAVE Medicare Summary Notices (MSN) and Part D Explanation of benefits (EOB), but shred before discarding.

Detect Errors, Fraud, and Abuse
* Always review MSN and EOB for mistakes.
* Compare them with your Personal Health Care Journal.
* Visit www.mymedicare.gov to access your personal account online to look for charges for something you did not get, billing for the same thing more than once, and services that were not ordered and/or you never received.

Report Mistakes or Questions
* If you suspect errors, fraud, or abuse, report it immediately! Call your provider or plan first.
* If you are not satisfied with their response, call the Arkansas SMP.

TO RECRUIT & TRAIN VOLUNTEERS—

* Retired seniors;
* Retired health-care providers; or
* Retired professionals, e.g., teachers, accountants, attorneys, investigators, nurses.

To receive the Arkansas SMP Newsletter electronically email: kathleen.pursell@dhs.arkansas.gov