



NEWSLETTER

Editor, Kathleen Pursell—AR SMP Director

ARKANSAS AG ANNOUNCES NUMBER OF MEDICAID-RELATED ARRESTS, CONVICTIONS

By: Office of Arkansas Attorney General Leslie Rutledge / December 7, 2021

https://arkansasag.gov/news_releases/rutledges-law-enforcement-round-up-2/

LITTLE ROCK, Ark. — Arkansas Attorney General Leslie Rutledge has announced a number of noteworthy arrests and convictions by the Medicaid Fraud Control Unit (MFCU) of her office. “This is a warning to all Arkansans committing Medicaid fraud on some of our most vulnerable residents,” said Attorney General Rutledge. “My Medicaid Fraud unit continues to identify and prosecute fraud cases because Arkansans and taxpayers deserve better.”

CONVICTIONS

In Faulkner County, Karen Todd, 53, pleaded guilty to Class A felony Medicaid fraud. Todd was sentenced to 36 months in the Arkansas Department of Correction, with an additional 84 months suspended imposition of sentence. She was ordered to pay \$286,536.64 in restitution to the Arkansas Medicaid Program Trust Fund and \$573,073.28 in fines to the general revenue of the State of Arkansas. The restitution is joint and several with Dr. Charles Todd Jr., pursuant to a civil settlement in [State v. Dr. Charles Todd Jr., 23CV-21-1035](#).

In Pulaski County, Jawara Blanks, 31, pleaded guilty to probation revocation. He was sentenced to five years probation. Blanks was ordered to pay \$10,485 in restitution and \$32,096.00 in fines to general revenue of the State of Arkansas. This case was pertaining to secondary services billed while the primary provider had billed for services.

In Scott County, Doretha Eslick, 31, pleaded guilty to one count of abuse of an endangered or impaired person, a Class D felony and one count of Medicaid fraud, a Class A misdemeanor. Eslick was sentenced to 60 days in county jail, followed by 36 months of supervised probation and ordered to pay \$540 restitution to the Medicaid Trust Fund. Eslick coerced a client, to whom she provided medical care services, to sign timesheets showing she completed the care for the client, when in fact no services were performed. The dates of the fraudulent billings were Sept. 4, 2020 – Oct. 1, 2020. In Washington County, Bobby Morgan, 60, pleaded guilty to abuse of an endangered or impaired person without injury, a Class C misdemeanor. He was sentenced to 30 days in the Washington County jail and ordered to pay a fine of \$100, restitution to the victim in the amount of \$1006.16 and court costs. Morgan was accused of misappropriating funds from his mother’s account while she was a patient at North Hills Health & Rehab. In August 2019, all of the money from Morgan’s mother’s Social Security checks was withdrawn or transferred to his account.

In Pulaski County, Teashara Smith, 33, pleaded guilty to one count of conspiracy to distribute and possession with intent to distribute marijuana, Oxycodone, ecstasy and Alprazolam, a Class C felony. Smith was sentenced to two years of supervised release and a \$100.00 fine.

ARRESTS

In Lawrence County, Adam Doyle, 44, was arrested July 17 on three counts of forgery in the second degree. Doyle allegedly took and cashed several checks from a resident of the facility. In Lawrence County, Laneshia Williams, 36, was arrested July 26 on four counts of forgery in the second Degree. Williams allegedly took and cashed several checks from a resident of the facility. In Sharp County, Angela Costa, 38, was arrested Aug. 2021, for Medicaid fraud, a Class B felony. Costa allegedly submitted

documents to Arkansas Medicaid for payment of services she did not render. In Mississippi County, Jeleisha Holmes, 29, was arrested Aug. 26 and charged with Medicaid fraud, a Class C felony. Holmes, a former employee of Elite Senior Care, allegedly submitted documents to Arkansas Medicaid for payment of services she did not render between Oct. 4, 2019 and Dec. 20, 2019.

In Clark County, Ravin Caldwell, 32, was arrested in August 2021 for Medicaid Fraud, a Class A felony. Caldwell allegedly created and cloned documents for 22 Medicaid beneficiaries while employed at Arkansas Counseling and Psychodiagnostics (ACaP). The issue was recognized after the quarterly random 10% internal audit of client records. He created several narrative templates that were cycled through his clients’ records on a three-week basis to elude detection. ACaP also discovered Caldwell documented/billed for services while he was in Florida on March 20, 2019. Amount in question: \$73,204.96. In Craighead County, Tina Terry, 47, was arrested Oct. 7 for abuse of an endangered or impaired person, a Class D felony. Terry is accused of abusing two different residents at the Jonesboro Human Development Center.

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INSIDE MEDICARE —

I AM ABOUT TO TURN 65 — WHEN DO I ENROLL IN MEDICARE?

If you are retired and collecting Social Security benefits, you will be automatically enrolled in Medicare. A Medicare card will be mailed to you (usually three months prior to your 65th birthday), enrolling you in both Part A (hospital coverage) and Part B (medical coverage.) If you are still working (i.e. actively employed by an employer with 20 or more employees) you may be able to delay enrolling in Part B, in which case you will follow the instructions that come with the card and send the card back. If you keep the card, you keep Part B and will pay the Part B monthly premium. If you are working for an employer with 19 or fewer employees, you will need to keep Part B because Medicare will be your primary insurer.

When you retire and are no longer actively employed you will have an eight-month Special Enrollment Period to add Part B without any penalty.

If you are not collecting Social Security benefits, you will need to enroll in Medicare.

Enroll in Medicare during the first three months before your 65th birthday so your eligibility will be effective the month you turn 65. You can do this by (i) calling the Social Security Administration to enroll, (ii) going online to the Social Security Administration (ssa.gov) to enroll or (iii) going online to Medicare.gov to enroll. On the website, under “Resources” toward the bottom left, click on “Apply for Medicare.” This will link you to the Social Security Administration’s website which will give you additional information about enrollment, and you can enroll in Medicare online.

When you enroll in Medicare for the first time and receive your Medicare card, you then must: (1) decide on Original Medicare A & B with a supplement (Medigap) plan and a Part D drug plan; or (2) enroll in a Medicare Advantage plan with drug coverage.

Because Medicare is very confusing, the AR SMP suggests speaking to a AR Senior Health Insurance Information Program (SHIIP) counselor to assist you in enrolling in Medicare and help you determine the best choices for you. You may contact SHIIP at 800-224-6330.



Arkansas SHIIP connects Medicare beneficiaries, their families, and caregivers with skilled Medicare counselors.

AR SHIIP’s trained counselors provide **confidential, free, unbiased, and personalized** information about your Medicare.

AR SHIIP’s assist beneficiaries with reviewing and comparing plans regarding:

1. Medicare
2. Medicare Supplements
3. Free assistance with Medicare Drug Coverage (Part D)
4. Medicare Advantage Plans

AR SHIIP will help you discover ways to lower your out-of-pocket expense and search other ways to save you money.

Call AR SHIIP 1-800-224-6330

MEDICARE ADVANTAGE Open Enrollment Period January 1 — March 31

Did you know that each year, there’s a Medicare Advantage (Part C) Open Enrollment Period from January 1 – March 31. During this time, if you’re in a Medicare Advantage Plan and want to change your health plan, you have a choice to either:

- ⇒ Switch to a different Medicare Advantage Plan with or without drug coverage;
- OR
- ⇒ Go back to Original Medicare and, if needed, also join a Medicare Prescription Drug Plan.

If you switch Medicare Advantage Plans or go back to Original Medicare with or without a Medicare drug plan, your new coverage will start the first day of the month after your new plan gets your request for coverage. Keep in mind, if you go back to Original Medicare now, you may not be able to buy a Medicare Supplement Insurance (Medigap) policy.

The Medicare Plan Finder can help you find, compare, and enroll in a new Medicare Advantage Plan or a Medicare drug plan in your area. You can also call 1-800-MEDICARE (1-800-633-4227) for help. TTY users can call 1-877-486-2048.

The Medicare Advantage Open Enrollment Period isn’t for people who already have Original Medicare.

Remember, this Medicare Advantage Plan Open Enrollment Period ends March 31.

SOURCE: <https://www.medicare.gov/blog/medicare-advantage-open-enrollment>

**FOR ASSISTANCE CALL
AR SHIIP—800-224-6330**

SHIIP has counselors who will assist you with making changes to your Medicare coverage, and will help you determine the best choices for you.

Medicare Part B Income-Related Monthly Adjustment Amounts

Since 2007, a beneficiary's Part B monthly premium is based on his or her income. These income-related monthly adjustment amounts affect roughly 7 percent of people with Medicare Part B. The 2022 Part B total premiums for high-income beneficiaries are shown in the following table:

Beneficiaries who file individual tax returns with modified adjusted gross income:	Beneficiaries who file joint tax returns with modified adjusted gross income:	Income-related monthly adjustment amount	Total monthly premium amount
Less than or equal to \$91,000	Less than or equal to \$182,000	\$0.00	\$170.10
Greater than \$91,000 and less than or equal to \$114,000	Greater than \$182,000 and less than or equal to \$228,000	68.00	238.10
Greater than \$114,000 and less than or equal to \$142,000	Greater than \$228,000 and less than or equal to \$284,000	170.10	340.20
Greater than \$142,000 and less than or equal to \$170,000	Greater than \$284,000 and less than or equal to \$340,000	272.20	442.30
Greater than \$170,000 and less than \$500,000	Greater than \$340,000 and less than \$750,000	374.20	544.30
Greater than or equal to \$500,000	Greater than or equal to \$750,000	408.20	578.30

Part A Deductible and Coinsurance Amounts for Calendar Years 2021 and 2022 by Type of Cost Sharing

	2021	2022
Inpatient hospital deductible	\$1,484	\$1,556
Daily coinsurance for 61 st –90 th Day	\$371	\$389
Daily coinsurance for lifetime reserve days	\$742	\$778
Skilled Nursing Facility coinsurance	\$185.50	\$194.50

SOURCE: <https://www.cms.gov/newsroom/fact-sheets/2022-medicare-parts-b-premiums-and-deductibles2022-medicare-part-d-income-related-monthly-adjustment>

HHS Kicks Off New Year with New Protections from Surprise Medical Bills

January 3, 2022

Beginning January 1, 2022, new federal protections championed by the Biden-Harris Administration will shield millions of consumers from surprise medical bills—unexpected bills from an out-of-network provider, out-of-network facility or out-of-network air ambulance provider. The protections, implemented under the No Surprises Act, ban surprise billing in private insurance for most emergency care and many instances of non-emergency care. They also require that uninsured and self-pay patients receive key information, including overviews of anticipated costs and details about their rights.

In addition to shielding millions of consumers from surprise medical bills, these protections will further President Joe Biden's [work to promote competition](#) in health care and other sectors of the American economy.

“The No Surprises Act is the most critical consumer protection law since the Affordable Care Act,” said Health and Human Services (HHS) Secretary Xavier Becerra. “After years of bipartisan effort, we are finally providing hardworking Americans with the federal guardrails needed to shield them from surprise medical bills. We are taking patients out of the middle of the food fight between insurers and providers and ensuring they aren’t met with eye-popping, bankruptcy-inducing medical bills. This is the right thing to do, and it supports President Biden’s vision of creating a more transparent, competitive and fair health care system.”

A [recent report](#) from the HHS Office of the Assistant Secretary for Planning and Evaluation (ASPE) reviewed key evidence on surprise billing and the need for the consumer protections in the No Surprises Act. The report showed that surprise billing is common among those with private insurance—nearly one in five patients who go to the emergency room, have an elective surgery, or give birth in a hospital receive surprise bills, with average costs ranging from \$750 to \$2,600 per episode.

Where to Learn More—Help Desk and Website

Both insured and uninsured/self-pay individuals who are concerned that their rights have been violated now have access to a host of tools, including a help desk — 800-985-3059-8am-8pm ET / 7 days/wk; TTY: 800-985-3059) and webpage ([CMS.gov/nosurprises](https://www.cms.gov/nosurprises)).

SOURCE: <https://www.hhs.gov/about/news/2022/01/03/hhs-kicks-off-new-year-with-new-protections-from-surprise-medical-bills.html>

HAPPY NEW YEAR

Here's wishing you a Happy New Year 2022, with hopes that it brings you good health, much happiness, and the best of times with those who matter most to you!



Kathleen Pursell
AR SMP Program Director

A GOOD THING TO DO BEGINNING 2022...

Visit [Medicare.gov](https://www.medicare.gov) to log into (or create) your secure Medicare account.
<https://www.medicare.gov/account/login>

Create your new account

If you want access to personalized information and features, you'll need to create an account. Visit [Medicare.gov/plan-compare](https://www.medicare.gov/plan-compare) and click "Log in or create account."

Have the following information ready (for yourself or the person you're helping):

1. Medicare Number – You can find this on your red, white, and blue Medicare card. If you're new to Medicare and don't have your Medicare card yet, you can get your Medicare number on the letter you get from Social Security after you enroll.
2. Last name
3. Date of birth
4. Current address with ZIP code or city
5. Part A or Part B coverage start date (find this on your Medicare card)



Once you add this information and select "Next," you can create a username and password and use your new Medicare account. You can write your username and a password hint below. Just remember to keep this sheet in a safe place to protect your privacy.

My Username:

My Password Hint:

Forgot your username or password?

If you have an existing account, but forgot the username or password, click "Trouble signing in?" under the Username box on the log in page. You'll need this information:

1. Medicare number
2. Last name
3. Date of birth



Attend SMP's
FRAUD FACT FRIDAY
to hear the latest
fraud and scam alerts!

For more information:
Call —866-726-2916 or

Email: kathleen.pursell@dhs.arkansas.gov

Medicare Fraud Stops with You

Report Medicare fraud to your local SMP



Each year an estimated **\$60 billion**
is lost to Medicare fraud



866-726-2916

www.smpresource.org

Available in all 50 states, the District of Columbia,
Puerto Rico, Guam, and the U.S. Virgin Islands

ARKANSAS AG ANNOUNCES...
CONTINUED from Pg 1

In Pulaski County, Teashia Landren, 33, was arrested Oct. 13 for Medicaid fraud, a Class A misdemeanor. Landren, a former employee of Diamond Personal Care, allegedly submitted fraudulent timesheets while the beneficiary was hospitalized.

In Clark County, Mikel Tristen Noel, 32, was arrested on Oct. 25 and charged with abuse of adult and battery second degree. He is accused of physically abusing a resident at the Arkadelphia Human Development Center.

In Craighead County, Veronica L Dillehay, 56, was arrested on Oct. 26 and charged with theft of property, a Class C felony. Dillehay is alleged to have embezzled over \$5,000 in nursing home resident payments from the facility, in her capacity as business office manager. A resident's daughter was notified that the resident's bill at the facility had not been paid for several months despite having cash receipts signed by former Business Office Manager Dillehay. There is no record of the cash ever being deposited into the facility account or credit given to the resident for those months.

In Pulaski County, Keon Jenkins, 24, turned himself in to the Pulaski County court on Oct. 28. He is

charged with Medicaid fraud, a Class C felony. Jenkins allegedly submitted documents to Arkansas Medicaid for payment of services he did not render.

In Sebastian County, Rachel Zanelli, 39, was arrested on Nov. 04 and charged with abuse of an endangered or impaired person, a Class A misdemeanor. Zanelli is accused of stealing and using a recipient's food stamp card.

In Mississippi County, Correshia Rogers, 28, was arrested on Nov. 25 and charged with Medicaid fraud, a Class C felony. Rogers allegedly submitted documents to Arkansas Medicaid for payment of services she did not render.

Medicaid fraud occurs when Medicaid providers use the program to obtain money for which they are not entitled. The Medicaid Fraud Control Unit also prosecutes cases of abuse, neglect and financial exploitation against Medicaid recipients.

To report suspected fraud or abuse, contact the Arkansas Attorney General's Office at (800) 482-8982 or visit ArkansasAG.gov

SOURCE: Rutledge's Law Enforcement Round Up
https://arkansasag.gov/news_releases/rutledges-law-enforcement-round-up-2/

TERMINOLOGY—

STARK LAW / ANTI-KICKBACK STATUTE

Congress passed the Stark Law and the Anti-Kickback Statute to prevent financial incentives from improperly influencing medical decision-making, which can lead to excessive and unnecessary tests and services. Among other things, the Stark Law prohibits billing Medicare for laboratory testing services referred by a physician who has a financial relationship with the laboratory. The Anti-Kickback Statute prohibits offering or paying anything of value to induce the referral of items or services covered by federal healthcare programs, including laboratory testing services.

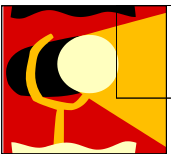
“Improper financial relationships between healthcare providers and laboratories can lead to overutilization and increase the cost of healthcare services paid for by the taxpayers,” said Acting Assistant Attorney General Brian M. Boynton of the Justice Department's Civil Division.

“The provision of medical services and prescriptions should be based on a patient's medical needs rather than the financial interests of providers.”

Source: <https://www.justice.gov/opa/pr/south-carolina-chiropractor-pleads-guilty-and-agrees-9-million-false-claims-act-consent>

A rare photograph of my parents on their way to school





SMP VOLUNTEERS IN THE SPOTLIGHT!

Really Special and Valuable



We Will Miss You

Shirley Gardner of El Dorado passed away December 6, 2021 at the age of 80. Shirley had been an active El Dorado Connections RSVP volunteer since 2010. Her heart was in helping others. She enjoyed doing things that mattered. She loved people and always wanted to see that they

were taken care of. When she heard of the Senior Medicare Patrol Program, she knew this was right up her alley. Shirley had an avenue that let her do what she loved the most. Talk. She shared with everyone the mission of SMP and was delighted when she heard she was making a difference. Shirley's first love was her Lord and Savior Jesus Christ and then her family and friends. She will be greatly missed. Heaven is a little brighter now.

Beloved actress **Betty White** has died at the age of 99 — just weeks before her 100th birthday.

In a 2011 interview with #CBSSundayMorning, White said she wasn't afraid of dying: **"Growing up, whenever we'd lose somebody, [my mother] would always say, 'Now they know the secret.'"**

<https://cbsn.ws/3JpzLxQ>



PICTURED: Ronnie Bluford and Margaret Ross in Camden at Pine Hill Nursing Home's "Socks for Seniors" program handing out new socks to nursing home residents and sharing the SMP mission, how to recognize a phone scam and how to protect yourself. They are a great team!



PICTURED: SMP partner, UAMS Texarkana Regional Center on Aging's Director KASANDRA GUILBEAU at an event honoring all Veterans at the Ashdown Library on November 10, 2021.

"We Love and appreciate All veterans. Thank you for your service!"

Elder LGBTQ Information

New Jersey Makes It Illegal to Discriminate Against LGBTQ+ Elders in Nursing Homes

By Britni De La Cretaz
March 11, 2021

New Jersey is taking historic steps to prevent discrimination against LGBTQ+ elders.

New Jersey Gov. Phil Murphy signed the “LGBTQ+ Senior Bill of Rights,” a law providing much-needed protections for LGBTQ+ elders. The law bans discrimination based on sexual orientation or gender identity in long-term care facilities, as well as outlining nine other actions that would qualify as discriminatory by healthcare facility staff. These include assigning or reassigning someone’s room based on their identity, refusing to use someone’s chosen name or pronouns, and preventing them from using the restroom of their choice.

“A long-term care facility is a health care setting, but it’s also someone’s home,” New Jersey Human Services Acting Commissioner Sarah Adelman [said in a press release](#). “Every person deserves to feel safe, respected, and comfortable where they receive their medical care, and especially in the place they call home.”

Earlier this year, Senate Bill 2545 [passed unanimously](#) through the New Jersey Senate by a 33-0 margin and received just one “No” vote in the 70-person Assembly. In signing the bill into law last Wednesday, Murphy said that SB 2545 “underscores” his administration’s “commitment to our LGBTQ+ older adults and people living with HIV in long-term care facilities by providing critical

protections from discrimination.”

With 2.7 million LGBTQ+ adults in the United States being over the age of 50 and 1.1 million over the age of 65, there is undoubtedly a large population of queer and trans elders who need support. In the next decade, that number will only increase, with nearly 4.7 million LGBTQ+ elders [expected to seek long-term care](#). But LGBTQ+ older adults face a host of unique challenges. A lifetime in which they experienced severe discrimination, a total lack of legal and social recognition, and a dearth of inclusive healthcare services all contribute to poorer health outcomes for LGBTQ+ seniors, [according to a 2017 report](#) by the Movement Advancement Project, an LGBTQ+ think tank, and SAGE, an advocacy organization for LGBTQ+ elders.

An increased reliance on social support networks and chosen family also means that higher numbers of LGBTQ+ older adults may need access to nursing homes because they lack families of origin to care for them, despite their own fears about the care they may receive in long-term facilities. A 2018 study by the AARP found that 70% are concerned they will need to hide their sexual orientation or gender identity or in senior housing facilities for fear of discrimination.

A majority of respondents also expressed concerns about neglect, abuse, being refused access to services, or harassment in centers for older adults. Gender-expansive individuals were the most concerned about discrimination.

Those anxieties are well-founded. In 2019, the Human Rights Campaign and

SAGE put together [the first assessment of care facilities](#) serving LGBTQ+ elders and found that only 22% of respondents felt they could be open with staff at their long-term care facilities about their identities.

New Jersey Assemblywoman Valerie Vainieri Huttle (D-Bergen), a supporter of SB 2545, said these findings are unacceptable and said state lawmakers would continue to do what is necessary to address them.

“Many older adults in the LGBTQ+ community have experienced decades of stigma and discrimination. They should not, under any circumstances, feel marginalized in the long-term care center where they deserve to feel at home,” Vainieri Huttle said in a press release. “We’ve worked tirelessly in New Jersey to protect the rights of LGBTQ+ people, but there’s more we can do to combat discrimination in long-term care facilities and ensure all LGBTQ+ residents may grow older with dignity.”

New Jersey’s legislation is another sign that attention is finally being paid to the large community of aging LGBTQ+ people in the United States. [California has a similar law in place](#), while New York’s [has yet to pass a legislature](#) that only recently flipped back to Democratic control of both houses. Washington, D.C., meanwhile, [has its own antidiscrimination protections](#) for queer and trans seniors.

SOURCE: <https://www.them.us/story/new-jersey-illegal-to-discriminate-against-lgbtq-elders-nursing-homes>

Surveys show 70% of LGBTQ+ elders feel they need to hide their identity in long-term care facilities for fear of discrimination.



RUTLEDGE ANNOUNCES ARREST WARRANT ISSUED FOR SKYLINE NURSING HOME OWNER, JOSEPH SCHWARTZ

Schwartz Fraudulently Obtained \$3.6 Million from Eight Facilities in Arkansas & Failed to pay \$2 Million in Employee Income Taxes to State

December 20, 2021

LITTLE ROCK — a warrant was issued for Joseph Schwartz, owner of Skyline nursing homes, accused of eight counts of Medicaid fraud resulting from the submission of false statements in cost reports and other documentation to the Arkansas Medicaid Program. In 2018, Skyline exaggerated its costs by \$6,285,216 and received an overpayment of \$3,610,912 for the eight nursing home facilities in Arkansas. Schwartz is also charged with failing to pay \$2,012,177 withheld from his Arkansas employees' paychecks to the state of Arkansas from July 2017 to March 2018.

“These charges come after a 44-month-long investigation into Skyline’s wrongdoings, and I will not sit idly by while anyone defrauds the State and Federal government out of millions of dollars to line their own pockets,” said Attorney General Rutledge. “It’s important for Arkansans to know if they suspect Medicaid fraud, they should immediately contact my office.”

The charges include eight violations of Medicaid fraud under Ark. Code Ann. § 5-55-103(a)(2)(C) [2017 Code] as prohibited in Ark. Code Ann. § 5-55-111(2). The eight Medicaid fraud charges resulted from the submission of false statements in cost reports and other documentation to the Arkansas Medicaid Program. The overstated direct care costs presented by Skyline caused illegally inflated rates to be paid at eight Skyline nursing homes in 2018. Skyline exaggerated its costs by \$6,285,216 and received an overpayment of \$3,610,912 for the eight facilities.

Also, one count of Attempting to Evade or Defeat Taxes, under Ark. Code Ann. §26-18-201, resulted from Schwartz withholding \$2,012,177 from his Arkansas employees' paychecks from July 2017 to March 2018, but failing to pay the withheld employee income taxes to the State of Arkansas.

A count of Willful Failure to Pay or File resulted from violations of Ark. Code Ann. §26-18-202. Schwartz received tens of millions of dollars in gross income from his Arkansas facilities in 2018 and 2019 but failed to file an Arkansas tax return as required by law.

Source: https://arkansasag.gov/news_releases/rutledge-announces-arrest-warrant-issued-for-skyline-nursing-home-owner-joseph-schwartz/

South Carolina Chiropractor Pleads Guilty and Agrees to \$9 Million False Claims Act Consent Judgment

SOUTH CAROLINA — Daniel McCollum, a South Carolina chiropractor, pleads guilty and agrees to \$9 million for engaging in a conspiracy to pay illegal kickbacks and to defraud healthcare programs by billing for unnecessary medical services. The maximum criminal penalty McCollum could face is five years in prison and a fine of \$250,000. A sentencing date has not been set.

McCollum owned and operated pain management clinics, laboratories and a pharmacy in South Carolina. He also operated pain management clinics in North Carolina and Tennessee. McCollum’s clinics did business collectively as Pain Management Associates.

The complaint alleges McCollum caused the submission of false claims to federal health care programs arising from kickbacks he paid for urine drug testing (UDT) referrals in violation of the Anti-Kickback Statute; referrals prohibited under the Stark Law from physicians with whom McCollum had financial relationships; and claims for UDT and other services that were not medically necessary and that lacked a legitimate medical purpose.

SOURCE: <https://www.justice.gov/opa/pr/south-carolina-chiropractor-pleads-guilty-and-agrees-9-million-false-claims-act-consent>

Court assesses more than \$170M in penalties against two area ophthalmologists

Two ophthalmologists and their eye clinic must pay millions of dollars for fraudulently billing Medicare in relation to the evaluation and treatment of glaucoma

HOUSTON, TX — The action is a result of a whistleblower lawsuit a former employee of Outreach had filed under the False Claims Act (FCA). It alleged the two ophthalmologists were fraudulently billing the Medicare Program for single eye pressure measurement tests used to assess and treat glaucoma. The two allegedly billed the federal health care program using an improper reimbursement code that provided a higher reimbursement than what was allowed. Under the FCA, the government is entitled to treble damages and a penalty on each false claim. The judge assessed a penalty of \$11,803 for each false claim, resulting in a total of \$170,553,350 in penalties.

SOURCE: <https://www.justice.gov/usao-sdtx/pr/court-assesses-more-170m-penalties-against-two-area-ophthalmologists>

Be aware of **SCAM(S)**:

Report all scams to the Arkansas SMP — **1-866-726-2916**



Oh no,
**I gave out my Medicare number.
What do I do now?**

- 1** Know that it's not your fault. Scammers are tricky! They put on pressure, lie, and earn your trust. Don't feel guilty.
- 2** Call your local Senior Medicare Patrol (SMP) and tell them what happened. They will help you with the steps to take to report your Medicare number stolen.

Call: **AR SMP 866-726-2916**

If you fall victim and give your Medicare number to a scam caller, report it to the AR SMP at **866-726-2916**.

You will need to read your Medicare Summary Notices (MSNs) to look for charges for things you did not receive, and that your doctor did not order, like charges for braces (knee, back, wrist); or lab tests (especially COVID-19 related).

A MESSAGE FROM SOCIAL SECURITY ADMINISTRATION

Guard Your Card: Protect What's Important to You

By Dawn Bystry, Deputy Associate Commissioner, Office of Strategic and Digital Communications

Last Updated: November 18, 2021

We encourage you not to carry your Social Security card with you every day. The best way to "Guard Your Card" is to keep it in a safe place and share it only when required, which is rare. In fact, in most cases, just knowing the Social Security number should be enough. In 49 states and the District of Columbia, a Social Security card isn't required to request a Real ID. Only Pennsylvania requires it.

Please be careful about sharing your number when asked for it. You should always ask why your number is needed, how it will be used, and what will happen if you refuse. Also, you shouldn't carry documents that display your number.



If you need a replacement Social Security card, we make it easy. You may be able to use a personal **my Social Security** account to request a replacement on our website. If you live in one of 45 participating states or the District of Columbia, and are requesting a replacement card with no changes, like a name change, you can use our free online service: <https://www.ssa.gov/myaccount/>

Visit our Social Security Number and Card page to learn more about your Social Security card.

Please read our factsheet, *How You Can Help Us Protect Your Social Security Number and Keep Your Information Safe*, for more information:

<https://www.ssa.gov/pubs/EN-05-10220.pdf>

Our *Guard Your Card* infographic is another great resource to understand whether you need to show your card: <https://www.ssa.gov/ssnumber/assets/EN-05-10553.pdf>



JOIN US for SMP's "FRAUD FACT FRIDAY"

Fraud Fact Fridays are casual, 15-minute Zoom meetings, with Q & A following each meeting. These will be scheduled on various Friday's at 10 a.m. each month. You will receive an invitation to attend prior to each event. You will simply click on the link to attend. It's easy!

We will use this time to inform you of the latest scams and other current Medicare topics. Most importantly, you will have the opportunity to tell us of any scams you have experienced, ask questions, and share any other Medicare-related concerns or other information with attendees.

Mark your calendars to join on Friday mornings at 10 a.m. for SMP's Fraud Fact Friday!

IF YOU ARE INTERESTED IN RECEIVING A NOTIFICATION OF THE FRAUD FACT FRIDAY ZOOM MEETINGS, PLEASE EMAIL: Kathleen.Pursell@dhs.arkansas.gov or call 866-726-2916. We will need your email address or phone number to send you the link.

New NCOA Board Chair (2021-2024)

Kathy Greenlee

President & CEO, Greenlee Global, LLC

Arlington, VA (October 13, 2021) —

The National Council on Aging (NCOA), the national voice for every person's right to age well, announced the appointment of Kathy Greenlee, former U.S. Assistant Secretary for Aging, as the new Chair of its Board of Directors, while also welcoming four new Board members who bring a diverse mix of business acumen, thought leadership and industry expertise to its mission.

Greenlee is an attorney with 25 years of public service experience. In 2009, she was appointed U.S. Assistant Secretary for Aging by President Obama, a position she held for 7 years. During her time in Washington, Greenlee created the Administration for Community Living, an agency that administers a broad range of aging and disability programs. She also chaired the Elder Justice Coordinating Council, created a federal home for state adult protective services programs, and created the national elder maltreatment data collection system.

Source: https://ncoa.org/article/kathy-greenlee-installed-as-new-ncoa-board-chair?utm_source=newsletter&utm_medium=email&utm_campaign=M arCom

CMS Encourages People with Medicare to get COVID-19 Vaccine Booster Shot

December 2, 2021



→ For people with Original Medicare, CMS will include a COVID-19 booster message in their Medicare Summary Notice over the next several months.

People with Medicare pay nothing when they get the COVID-19 vaccine and booster and there is no applicable copayment, coinsurance, or deductible.

→ CMS will send COVID-19 vaccine booster reminder emails to the more than 14 million people that receive Medicare emails.

The Centers for Medicare & Medicaid Services (CMS) is encouraging those with Medicare who are fully vaccinated to get a booster dose of the COVID-19 vaccine. Data shows that a COVID-19 vaccine booster does increase immune response, which improves protection against COVID-19.

→ The @MedicareGov Twitter handle will continue to tweet about the importance of COVID-19 vaccine boosters.

NOTE:

→ All 63 million people who currently have Medicare will receive a letter encouraging them to get their COVID-19 vaccine booster as soon as possible.

In addition, thanks to the American Rescue Plan (ARP), nearly all Medicaid and CHIP beneficiaries must receive coverage of COVID-19 vaccines and boosters without cost-sharing. COVID-19 vaccines and boosters will also be covered without cost-sharing for eligible consumers of most health insurance issuers in the commercial market.

→ Approximately two million people call 1-800-MEDICARE each month. They will hear a reminder to get their COVID-19 boosters at the beginning of their call.

SOURCE: <https://www.cms.gov/newsroom/news-alert/cms-encourages-people-medicare-get-covid-19-vaccine-booster-shot>



Report Medicare

FRAUD

AR SMP 866-726-2916



www.facebook.com/arsmp
www.Facebook.com/Medicare

IMPORTANT PHONE NUMBERS:

AANHR —AR Advocates for Nursing Home Residents	501-607-8976
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
Alzheimer’s Arkansas	501-224-0021
Arkansas Rehabilitation Services	1-800-981-4463
AR SMP (Healthcare Fraud Complaints)	1-866-726-2916
Better Business Bureau (BBB)	501-664-7274
CareLink (Pulaski Co)	501-372-5300
CMS —(Medicare)— (Centers for Medicare and Medicaid Services) (1-800MEDICARE)	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
DHS Resource Center	1-866-801-3435
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
KEPRO -AR QIO(Quality Improvmt Org.)	1-844-430-9504
LGBT Elder Hotline	888-234-SAGE
Medicaid —(Claims Unit)	1-800-482-5431
Medicaid Inspector General (OMIG)	1-855-527-6644
MEDICARE (CMS 1-800MEDICARE)	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
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)	1-800-772-1213
Little Rock Office	1-866-593-0933
SSA Fraud Hotline	1-800-269-0271
South Central Center on Aging	1-866-895-2795
South East AR Center on Aging	1-870-673-8584
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)—
www.choicesinliving.ar.gov/

AR Advocates for Nursing Home Residents
(AANHR)—www.aanhr.org; **e-mail:** Info@aanhr.org

AR Long Term Care Ombudsman Program—
www.arombudsman.com

Arkansas Aging Initiative—<http://aging.uams.edu/?id=4605&sid=6>

Arkansas Attorney General—www.arkansasag.gov

Arkansas Attorney General Consumer Protection Division—**e-mail:** consumer@ag.state.ar.us

Area Agencies on Aging—www.daas.ar.gov/aaamap.html

Arkansas Foundation for Medical Care—www.afmc.org

Arkansas SMP—www.ar.gov/smp

BBB (Better Business Bureau)— **scams and alerts**—
<https://www.bbb.org/scamtracker/arkansas/>

CMS (Medicare) Centers for Medicare and Medicaid Services—
www.cms.hhs.gov

Do Not Call—www.donotcall.gov

Do Not Mail—www.DMAchoice.org

Elder Tree / Spinsterhaven—Spinsterhaven@gmail.com

Elder Care Locator—www.eldercare.gov

H.E.A.T—www.stopmedicarefraud.gov/
(Healthcare Fraud Prevention and Enforcement Action Team)

LGBT—**National Resource Center on LGBT Aging**
<https://www.lgbtagingcenter.org/about/updatesProcess.cfm>

MEDICAID—www.Medicaid.gov

MEDICAID INSPECTOR GENERAL (OMIG)—
<http://omig.arkansas.gov/fraud-form>

MEDICARE—www.medicare.gov

Medicare Interactive Counselor—
www.medicareinteractive.org

Hospital Compare—www.hospitalcompare.hhs.gov

MyMedicare.gov—www.mymedicare.gov
(Access to your personal Medicare claims information)

MyMedicareMatters.org (National Council on Aging)

Office of Long Term Care—[http://](http://humanservices.arkansas.gov/dms/Pages/oltcHome.aspx)
humanservices.arkansas.gov/dms/Pages/oltcHome.aspx

Office of Inspector General (OIG)—**e-mail:**
HHSTips@oig.hhs.gov

Pharmaceutical Assistance Program—
medicare.gov/pap/index.asp

Physician Compare—www.medicare.gov/find-a-doctor

AR SHIIP—<https://insurance.arkansas.gov/pages/consumer-services/senior-health/>

SMP Locator—SMPResource.org (locate an SMP outside of AR)

Social Security Administration (SSA)—www.ssa.gov

SSA OIG—**Report SS Fraud**—<https://oig.ssa.gov/report>

TAP—www.arsinfo.org (Telecommunications Access Program)

UofA Cooperative Extension Service—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

Current and archived newsletters available at:

<https://humanservices.arkansas.gov/divisions-shared-services/aging-adult-behavioral-health-services/reports-publications/#smp-newsletter-archive>

AR SMP PARTNERS

AmeriCorps Seniors RSVP/EI Dorado
EI Dorado, AR
870-864-7080

AmeriCorps Seniors RSVP/Central AR
Little Rock, AR
501-897-0793

Oaklawn Center on Aging Inc.
Hot Springs, AR
501-623-0020

Spinsterhaven
Fayetteville, AR
Spinsterhaven@gmail.com

Tri County Rural Health Network
Helena, AR
870-338-8900

Texarkana Regional Center on Aging
Texarkana, AR
870-773-2030

South Central Center on Aging
Pine Bluff, AR
870-879-1440

**AmeriCorps Seniors RSVP/
South East AR Educ Services Coop
Foster Grandparent Program**
Monticello, AR
870-367-4819

**AR State Independent Living Center
(ARSILC)**
Little Rock, AR
501-372-0607



Arkansas Senior Medicare Patrol (SMP)

P. O. Box 1437—Slot W241

Little Rock, AR 72203-1437

[Facebook.com/ARSMP](https://www.facebook.com/ARSMP)

Website: www.ar.gov/smp

Report Medicare Fraud, Error & Abuse

Call the Toll-Free **Helpline** 8:00am—4:30pm

1-866-726-2916