

HHS Office of Inspector General

OIG Fiscal Year 2019 Semiannual Report Reveals Taxpayers Could See Nearly \$5.9 Billion Returned to Government

December 19, 2019

American taxpayers could see nearly \$5.9 billion in misspent Medicare, Medicaid, and other Health & Human Services (HHS) program dollars returned to the government as the result of fiscal year 2019 work by the HHS Office of Inspector General (OIG), according to the Semiannual Report to Congress.

Washington DC-

"In this reporting period, OIG continued to produce outstanding results for the American people through independent, objective oversight," said Joanne M. Chiedi, Acting Inspector General for HHS-OIG. "OIG continued its enterprise-wide oversight of HHS's over \$1 trillion portfolio and its bold pursuit of those who cheat HHS programs or harm HHS beneficiaries."

Of the billions of dollars in savings and recoveries in FY 2019, more than \$819 million is expected to be recovered from audits and approximately \$5.04 billion is expected from investigative recoveries. Investigative receivables include expected recoveries from criminal actions, civil and administrative settlements, civil judgments, and administrative actions by OIG.

In FY 2019, OIG brought 809 criminal actions against individuals or organizations engaging in crimes against HHS programs and the beneficiaries they serve and an additional 695 civil actions, including false claims and unjustenrichment lawsuits filed in Federal district court, civil monetary penalty settlements, and administrative recoveries related to provider self-disclosure matters.

The agency also excluded 2,640 individuals and entities from participation in Medicare, Medicaid, and other Federal health care programs.

In addition to summarizing the full year's achievements, the Semiannual Report reviews OIG activities for the reporting period comprising the last half of the fiscal year from Apr. 1 through Sept. 30, 2019.

During this period, OIG focused on protecting unaccompanied children in the Department's care; preventing opioid misuse and promoting access to treatment; fighting fraud to protect the Medicare and Medicaid programs; ensuring appropriate use of Medicaid funds; protecting beneficiaries from abuse, neglect, and unsafe conditions; promoting access to high-quality care; and safeguarding the security and integrity of medical research. The report highlights multiple OIG activities in each of these areas.

An example of the agency's work to protect the health and safety of unaccompanied children in the Department's care included a report released in September 2019, in which OIG found that the Office of Refugee Resettlement's care provider facilities faced challenges in addressing the mental health needs of children. ORR facilities reported several challenges in addressing children's mental health needs, especially for children who have experienced significant trauma. Facility staff described challenges such as difficulty recruiting and retaining clinicians and resulting high caseloads, trouble accessing external mental health care providers, and difficulty transferring children to facilities within ORR's network that provide specialized treatment. Policy changes in 2018 exacerbated these concerns, as they resulted in a rapid increase in the number of children separated from their parents after entering the United States, many of whom were younger, and longer stays in ORR custody. The Administration for Children and Families, ORR's parent organization, agreed with OIG's recommendations for practical steps that ORR can take to assist facilities caring for children and minimize barriers to appropriate mental health treatment.

OIG continued an extensive body of work focused on preventing opioid misuse and promoting access to treatment in FY 2019, frequently partnering with the Department of Justice. Multiple investigations, evaluations, and audits addressed this public health crisis. An example of a successful OIG-DOJ partnership included a pharmaceutical company agreeing to pay \$700 million to settle



allegations that it illegally marketed an opioid treatment drug. The pharmaceutical company entered into a \$700 million False Claims Act settlement with the United States to resolve allegations that it illegally marketed and promoted the opioid treatment drug Suboxone. The allegations included knowing promotion of Suboxone to physicians who were prescribing it in an unsafe manner, as well as making false and misleading claims to physicians, State Medicaid agencies, and the Food and Drug Administration to increase sales and delay generic competition.

A significant portion of OIG's efforts focused on fighting fraud to protect the Medicare and Medicaid programs, two of the largest Federal programs in the United States. OIG helped lead a multidistrict law enforcement takedown targeting a massive genetic testing fraud scheme. In September 2019, OIG and Federal and State law enforcement partners announced efforts to dismantle one of the largest health care fraud schemes ever charged. The takedown resulted in charges in five Federal districts against 35 defendants-including nine doctors-associated with dozens of telemedicine companies and laboratories. The defendants are charged with fraudulently billing Medicare more than \$2.1 billion for cancer-related genetic tests as part of a scheme involving payment of illegal kickbacks and bribes.

CONTINUED—Page 3

INSIDE THIS ISSUE:	
Vocabulary	Pg 2
Opioid Misuse & Abuse	. Pg 3
Nursing Home Abuse (Report it!).	Pg 4
Volunteer Spotlight	Pg 5
Compromised Numbers	.Pg 6
LGBTQ Resources	Pg 7
Fraud in the News	Pg 8
Scams	Pg 9
Calendar of Events	.Pg 10
Phone Numbers/Websites	.Pg 11
SMP Mission/Partners	.Pg 12

This newsletter is paid for by a grant (#90MPPG0031) from the Administration for Community Living (ACL). Its contents are solely the responsibility of the Arkansas SMP and do not necessarily represent the official views of ACL.

INSIDE MEDICARE

VOCABULARY—



Telehealth

Telehealth is the distribution of health-related services and information via electronic information and telecommunication technologies. It allows long-distance patient and clinician contact, care, advice, reminders, education, intervention, monitoring, and remote admissions, not involving active clinical treatments.

Telehealth will be covered under Part B for all traditional Medicare enrollees during the virus crisis, and services are not limited to Covid-19 care. The definition of telehealth has also been expanded. Previously, patients were required to connect from a health facility, such as an outpatient center, that had approved video conferencing technology; now, patients will be able to connect from home via video on a smartphone or other digital device.

<u>Here is another important change</u>: A requirement that telehealth be provided by a doctor the patient had seen within the last three years <u>has been waived</u>.

Telemedicine

Telemedicine means remote clinical services such as diagnosis and monitoring, including preventative, promotive, and curative care delivery.

NOTE:

If you are on a Medicare Advantage plan, check with your plan about any changes regarding telehealth and telemedicine coverage.

CMS to <u>expand Medicare payments for telemedicine</u> so that more doctors, hospitals and clinics will be paid for such services during the coronavirus pandemic on a temporary and emergency basis under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act.

SMP's PERSONAL HEALTH CARE JOURNAL (PHCJ)

is used to keep track of your doctor appointments, medications and durable medical equipment. This is a valuable tool used for comparing claims on your Medicare Summary Notice to your notes taken while at your doctor visit. It is also a 2020 calendar!

Please call for your *free copy*! 866-726-2916

WHO DO I CALL?

Contact the Social Security Administration

to appeal a Part B premium penalty or IRMAA determination using the instructions on the notice they provided. You can find the address of your local office by calling 800-772-1213 or visiting: www.ssa.gov/locator.

Call your Medicare Advantage or stand-alone Part D prescription drug

plan to discuss notices and forms you received from them about premium-related appeals.

Contact MAXIMUS to

appeal a Part D premium penalty. Their contact information is on the reconsideration request form you received from your Part D prescription drug plan. You can also call MAXIMUS customer service: 585-348-3400.

If you need help understanding your appeal rights, including how to file an appeal, contact your State Health Insurance Assistance Program (SHIIP): 800-224-6330

If you believe that you have experienced Medicare fraud, abuse, or errors, contact Senior Medicare Patrol (SMP): 866-726-2916.

CONTINUED—From Page 1

OIG Fiscal Year 2019 Semiannual Report

A significant portion of OIG's efforts focused on fighting fraud to protect the Medicare and Medicaid programs, two of the largest Federal programs in the United States. OIG helped lead a multidistrict law enforcement takedown targeting a massive genetic testing fraud scheme. In September 2019, OIG and Federal and State law enforcement partners announced efforts to dismantle one of the largest health care fraud schemes ever charged. The takedown resulted in charges in five Federal districts against 35 defendants-including nine doctors -associated with dozens of telemedicine companies and laboratories. The defendants are charged with fraudulently billing Medicare more than \$2.1 billion for cancerrelated genetic tests as part of a scheme involving payment of illegal kickbacks and bribes.

OIG reviews of how the Centers for Medicare & Medicaid Services and States administer Medicaid are vital to ensuring appropriate use of Medicaid funds. For example, in FY 2019, OIG found that Florida made hundreds of millions of dollars in unallowable Medicaid payments to a hospital under a waiver program. As part of its Medicaid reform waiver, Florida established the Low Income Pool program to compensate hospitals for providing care to low-income patients. OIG found that during State FYs 2010 through 2014, Florida paid \$686 million to Jackson Memorial Hospital under the LIP program in excess of the hospital's allowable costs. OIG recommended that Florida refund the \$412 million Federal share of the unallowable payments, improve its oversight of the LIP program, and make other procedural changes.

Protecting beneficiaries from abuse, neglect, and unsafe conditions is at the core of OIG's mission. OIG's work to protect vulnerable populations in FY 2019 included a pair of reports in which OIG highlighted the prevalence of quality-of-care deficiencies among hospice providers and gaps in Medicare protections for hospice patients. Three out of four hospices inspected in 2016 were cited with at least one deficiency, such as poor care planning or inadequate patient assessments. Additionally, over 300 hospices had at least one serious deficiency or at least one substantiated severe complaint. OIG also described cases of serious harm that reveal gaps and vulnerabilities in Medicare's protections for hospice patients. OIG recommended that CMS take a number of actions to more effectively protect hospice beneficiaries from harm.

In the focus area of promoting access to high -quality care, one example of OIG's work to ensure that vulnerable populations receive high-quality care is a report in which OIG found that many Medicaid-enrolled children who were treated for attention deficit hyperactivity disorder did not receive recommended follow-up care. Follow-up care is an important part of treatment for ADHD as the disorder can affect all aspects of a child's academic and health outcomes. OIG found that over 500,000 Medicaidenrolled children who were newly prescribed an ADHD medication and over 3,500 children hospitalized with a primary diagnosis of ADHD did not receive followup care within the timeframes outlined in the national quality measures. CMS agreed with our recommendations to work toward improving health outcomes by developing strategies to increase the number of children who receive timely follow-up care for ADHD.

SOURCE: https://oig.hhs.gov/newsroom/ news-releases/2019/sar.asp#main-content

Read an OIG press release: https:// oig.hhs.gov/newsroom/news-releases/2019/ sar.asp

SOMETHING YOU SHOULD KNOW!

You can help combat opioid Misuse and Abuse-

The opioid epidemic is a public health crisis. While opioids can be useful in treating acute pain, they can be highly addictive with use over a long period of time. Older adults taking opioids along with other prescribed medications need to be mindful of interactions to prevent dangerous side effects. Consider possible non-opioid alternatives for treating chronic pain.

WHAT IS AN OPIOID?

Opioids include prescription pain medications (painkillers) such as: tramadol, codeine, fentanyl, hydrocodone, morphine, oxycodone and more.

COMMON SCAM EXAMPLE: A beneficiary's Medicare number has been stolen or compromised. The number is then sold to unscrupulous prescribers who order opioid prescriptions under the beneficiary's name and then sell these drugs illegally for profit.

FRAUD and ABUSE OCCURS WHEN:

- »Medicare beneficiaries are over-prescribed medications. »Pharmacies are involved in "drug diversion" which is which a pharmacy takes a drug that was legally
- prescribed to one person and gives it to another person for recreational use.
- »Medicare is billed for medications you were not prescribed.
- »Medicare is billed for medications you did not receive.

Coronavirus (COVID-19)

The AR SMP urges all to use reputable and reliable resources for the latest facts and information on the Coronavirus (COVID-19)



Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™

https://www.cdc.gov/coronavirus/2019-ncov/index.html

DID YOU KNOW?

COVID-19: Expanded Use of Ambulance Origin/Destination Modifiers

During the COVID-19 Public Health Emergency, Medicare will cover a medically necessary emergency and non-emergency ground ambulance transportation from any point of origin to a destination that is equipped to treat the condition of the patient consistent with state and local Emergency Medical Services (EMS) protocols where the services will be furnished.

The Arkansas Senior Medicare Patrol (SMP) is a federal grant program administered by the AR Department of Human Services. Division of Aging, Adult & Behavioral Health Services. This project was supported in part by grant number 90MPPG0031 from the U.S. Administration for Community Living (ACL), a Department of Health and Human Services.

Preventing Abuse



The Centers for Medicare and Medicaid Services (CMS) has updated the information on its Nursing Home Compare website with a **consumer alert icon next to nursing homes on the list that have been cited for incidents of abuse, neglect, or exploitation.** This information will help families in their decision-making regarding which nursing home to select.

Every nursing home resident deserves to retain their basic human dignity and to be treated with respect at all times. Abuse and neglect are never acceptable. The Nursing Home Compare website now includes information to alert consumers about abuse or neglect in nursing homes. Consumers using the Nursing Home Compare website to browse facilities <u>will now see an icon by</u> facilities that have been recently cited for resident harm or potential harm for abuse or neglect (the icon is the red circle with a hand in it, as shown above).

Abuse is defined as the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish. It includes verbal abuse, sexual abuse,

physical abuse, and mental abuse.

If you feel that you, or someone you know, has been abused, please contact your state Long-Term Care Ombudsman. If there is an emergency, including a suspected crime, you should call 911 or your local emergency number immediately.

Note: Nursing homes are not included on Nursing Home Compare if they are not certified by Medicare or Medicaid.

https://www.medicare.gov/nursinghomecompare/About/ howcannhchelp.html

Filing a Complaint in ARKANSAS

The Office of Long Term Care investigates complaints against facilities as well as allegations of abuse or neglect of residents, theft of residents' property, and poor quality of resident care. Investigations are confidential, and you do not have to give your name when you file a complaint. If you choose to give your name, the Office of Long Term Care informs you when the investigation is completed.

You can file a complaint by:

- → Phone: 1-800-582-4887
- \rightarrow Fax: 501-682-8540, Attention Complaint Unit \rightarrow E-mail:
- → Letter:
 - Complaints Unit Office of Long Term Care P.O. Box 8059, Slot S407 Little Rock, AR 72203-8059

SOURCE: https://humanservices.arkansas.gov/about-dhs/dpsqa/ office-of-long-term-care/consumer-long-term-care-information#9

Examples of suspected Social Security fraud include when an individual:

- · Conceals work activity while receiving disability benefits;
- Receives Social Security Benefits for a child not under their care;
- Fails to notify SSA of the death of a beneficiary and continues to receive and cash the checks of the deceased;
- Conceals their marriage or assets from the Social Security Administration while receiving Supplemental Security Income payments;
- Resides overseas and is receiving Supplemental Security Income Payment;
- Misuses benefits when acting as a <u>Representative</u> <u>Payee</u>.

Urologist Sentenced to Nearly Six Years in Prison

A urologist was sentenced to 71 months in federal prison for submitting fraudulent billings totaling more than \$700,000 to Medicare for medically unnecessary and nonexistent treatments, sometimes billing for purported patient visits miles apart and occurring at the exact same time. He billed Medicare for services he did not and could not have performed.

Read a Department of Justice <u>press release</u>. https://www.smpresource.org/News/20200310/334/Urologist-Sentenced-to-Nearly-Six-Years-in-Prison.aspx

DID YOU KNOW?

More than \$2.6 billion was recovered in 2019 from lawsuits involving healthcare fraud and false claims from drug and medical device manufacturers, insurers, hospitals, pharmacies, hospice organizations, laboratories and doctors. Two of the largest recoveries were from opioid manufacturers.

Millions more dollars were recovered for state Medicaid programs!

Most of the cases were brought by **WHISTLEBLOWERS**.

<u>Coronavirus-Related Medicare Scam</u> <u>Alert</u>

04/06/2020

by Seema Verma, Administrator of the Centers for Medicare and Medicaid Services

Since older Americans are particularly vulnerable to coronavirus (COVID-19), Medicare beneficiaries are reminded to be vigilant and take precautions to avoid falling victim to healthcare fraud during this pandemic. We're warning Medicare beneficiaries that scammers may try to use this pandemic to steal their Medicare number, banking information, or other personal data.

<u>Continue reading</u> \rightarrow

https://blog.ssa.gov/coronavirus-related-medicare-scamalert/?utm_medium=email&utm_source=govdelivery

4



We enjoyed celebrating St. Patrick's Day during our monthly Retried Nurses' Group meeting at Woodland Heights in early March! Thank you for your dedicated commitment to the AR SMP!







Be careful for scams that are popping up related to the Coronavirus <u>#COVID19</u>. Please read and share this information with loved ones.

For more information on the Coronavirus, follow the CDC and visit their website: <u>https://www.cdc.gov/</u> <u>coronavirus/2019-nCoV/index.html</u>. <u>#SMPwatchCOVID19</u>

SOCIAL SECURITY INSIGHTS—

SSA Semiannual Report to Congress (FY 2019 Apr-Jun 2019)

SOCIAL SECURITY-RELATED SCAM OUTREACH AND INVESTIGATIVE EFFORTS

During this reporting period and since Fall 2018—there has been a dramatic increase in allegations related to Social Security phone scams. These scams use Social Security's good name to scare victims into providing bank account numbers or money via gift cards, pre-paid debit cards, wire transfers, or cash. Although the scams generally do not involve Social Security benefits, the scams have the potential to negatively impact the public's trust in Social Security, and they hinder the Agency's ability to communicate with its customers. As a result, we have directed significant resources to a multi-disciplinary effort to 1) increase public awareness and 2) combat the scams through investigations and liaison with public and private entities.

 To increase public awareness, Social Security conducted an outreach campaign to major retail, gift card, and internet search companies to inform them about the dramatic increase in scams and the potential for fraud losses for their customers. Social Security is asking for their cooperation in warning their customers about these scams. During this reporting period, Wal-Mart began showing an SSA scam warning sign on large-screen televisions in almost half of their U.S. stores, in rotation with other anti-fraud messages and videos.

To combat the scams, Social Security has initiated a number of criminal investigations and they are working with the Department of Justice (DOJ) as well as other Federal law enforcement agencies. These investigations are ongoing, and they continue to analyze allegations and pursue investigative leads. They are also working with public and private entities to reduce scammers' ability to "spoof" legitimate Government phone numbers.

SOURCE: https://oig.ssa.gov/sites/default/ files/semiannual/OIG%20Semiannual% 20Report%20to%20Congress%20-%20Fall% 202019.pdf

Report compromised personal information to the credit bureaus listed below:

Equifax	Equifax.com/personal/credit-report-services 800-685-1111
Experian	Experian.com/help 888-EXPERIAN (888-397-3742)
TransUnion	TransUnion.com/credit-help 888-909-8872

SMP SCAM WATCH CORONAVIRUS (COVID-19)

Be on the lookout for scams that could arise from the coronavirus (COVID-19) pandemic.

As a reminder:

- Protect your Medicare number and only provide it to your doctor and Medicare providers.
- Be cautious of anyone going doorto-door to offer free coronavirus testing, supplies, or treatments.
- Don't fall for scare tactics or time sensitive offers.

Contact the SMP for questions or to report Medicare fraud, error, or abuse at 877.808.2468 or at smpresource.org

COMPROMISED MEDICARE AND CREDIT CARD NUMBERS—

If you have been a victim of a scam or fraud scheme, and your Medicare number has been compromised or potentially compromised, you may want to report this and place a fraud alert and a credit freeze on your accounts:

FRAUD ALERT

Coronavirus :

A <u>fraud alert</u> makes companies verify your identity before granting new credit in your name. Usually, that means calling you to check if you're really trying to open a new account. Placing a fraud alert is easy – you contact any one of the three nationwide credit reporting agencies (Equifax, Experian, TransUnion) and that one must notify the other two. A fraud alert is free and lasts one year.

CREDIT FREEZE

A <u>credit freeze</u> limits access to your credit report so no one, including you, can open new accounts until the freeze is lifted. To be fully protected, you must place a freeze with each of the three credit reporting agencies. You'll usually get a PIN or password to use each time you place or lift the freeze. A credit freeze is free and lasts until you lift it.

Which is right for you? It depends on your personal circumstances. Both fraud alerts and credit freezes can make it harder for identity thieves to open new accounts in your name.

With a fraud alert, you keep access to your credit.

Freezes are generally best for people who aren't planning to take out new credit.

New National, Toll Free Hotline Provides Help for Victims of Elder Fraud (Posted March 3, 2020)

For too long and far too frequently, fraudsters have preyed upon our senior citizens, robbing them of their hard-earned savings. To help combat fraud against older Americans and provide services to victims, the Office for Victims of Crime (OVC) is pleased to announce the launch of the National Elder Fraud Hotline.

The National Elder Fraud Hotline is staffed by caring professionals who will treat you with dignity and respect and provide personalized support to callers. Callers will be assigned a case manager, who will remain their point of contact. A case manager will assist you with reporting the crime and connect you with other resources as needed.



If you or someone you know is a victim of elder fraud, we encourage you to call the <u>National Elder Fraud</u> <u>Hotline</u> at 833–FRAUD–11 (833–372–8311).

Use this call center to-

- report incidences of fraud;
- obtain a case manager who will help you through the reporting process at the federal, state, and local levels; and
- connect with other helpful resources on a case-bycase basis.

The hotline is open daily from 6:00 a.m. to 11:00 p.m. ET. Services are available for speakers of English, Spanish, and other languages.

https://www.ovc.gov/news/index.html? utm_source=newsfromovc&utm_medium=em ail&utm_content=elder_fraud_hotline_2020.0 3.03&utm_campaign=news#030320



CORONAVIRUS (COVID-19) TIPS—

Because older adults are at greater risk for serious illness from COVID-19, fraudsters and scam artists may target older populations.

What you should know:

- → There is currently no FDA-approved vaccine for COVID-19 and although there may be treatments for symptoms, there is no "cure."
- → Scammers often use fearbased tactics to convince people that a vaccine or cure is now being offered.



- → Scammers may ask for personal information like SS number or Medicare number and bank account information. Hang up!
- → Although the Centers for Disease Control and Prevention (CDC) and other public health officials may contact you if they believe you may have been exposed to the virus, they will not need to ask you for insurance or financial information.

Elder LGBTQ Information

During this Coronavirus pandemic and the social distancing we are all practicing, the elder LGBTQ community will experience an even more heightened feeling of isolation with most living alone, with no partner, no children and some with no family support. Because of the closure of many outlets seniors utilize for support, e.g.: senior centers, where many go for food and as a social outlet, libraries, exercise classes, group gatherings with friends, etc.

Please see below for support and resources from your local community:

FOR ASSISTANCE ESPECIALLY DURING THE COVID-19 PANDEMIC:

- → SAGE Hotline: 877-360-*LGBT* If you are an *LGBT elder* or care for one, call the Sage Hotline to talk with friendly responders who are ready to listen / https://www.sageusa.org /
- → Elder Care Locator: Eldercare.acl.gov / 800-677-1116
- → National Hunger Hotline: 866-3-Hungry (866-348-6479)
- → National Council on Aging: NCOA.org\Covid-19
- → Diverse Elders Coalition | Advocating for black elders, AAPI elders, AI/AN Elders, Hispanic elders: https://www.diverseelders.org / https://www.diverseelders.org/who-we-are/diverse-elders/lgbt-elders/

FRAUD IN THE NEWS



Federal Law Enforcement Action Involving Fraudulent Genetic Testing— September 27, 2019

The Department of Justice (DOJ) along with the US DHHS Office of Inspector General (OIG) and the FBI investigated and charged 35 individuals (among whom were 10 medical professionals, including 9 doctors) associated with dozens of telemedicine companies and cancer genetic testing laboratories for the alleged participation in one the largest health care fraud schemes ever charged. Elderly patients nationwide were lured into the criminal scheme, and these defendants are responsible for billing Medicare more than \$2.1 billion for lab tests.

https://www.justice.gov/opa/pr/federal-law-enforcement-action-involving-fraudulent-genetic-testing-results-charges-against -community-health-network

Indian National Pleads Guilty to Owning, Funding, and Operating India-Based Call Centers That Scammed U.S. Victims Out of Millions of Dollars between 2013-2016-

January 2020

The Defendant pleaded guilty to wire fraud conspiracy and conspiracy to commit identification fraud, money laundering and impersonal of a federal officer or employee. Defendant and other co-conspirators perpetrated a complex scheme in which employees from call centers in India impersonated officials from the IRS and U.S. Citizenship and Immigration Services (USCIS), and engaged in other telephone call scams designed to defraud victims throughout the United States who were threatened with arrest, imprisonment, fines or deportation if they did not pay alleged monies owed to the government. Those who fell victim to the scammers were instructed how to provide payment, including by purchasing general purpose reloadable (GPR) cards or wiring money. Upon payment, the call centers would immediately turn to a network of "runners" based in the United States to liquidate and launder the fraudulently obtained funds.

Twenty-four defendants associated with this scheme have previously been convicted and sentenced in TX, Arizona and Georgia, to up to 20 years of imprisonment, ordered to pay back restitution and forfeit seized assets. Some were ordered to be deported because of illegal immigration status.

A Department of Justice website has been established to provide information about the case to victims and the public. Anyone who believes they may be a victim of fraud or identity theft in relation to this investigation or other tele fraud scam phone calls may contact the FTC via this website.

Anyone seeking additional information about telefraud scams generally, or preventing identity theft or fraudulent use of their identity information, may find helpful information on the IRS tax scams website, the FTC phone scam website, and the FTC identity theft website. SOURCE: https://www.justice.gov/opa/pr/indian-national-pleads-guilty-owning-funding-and-operating-india-based-call-centers-scammed

Doctor found guilty of \$325 million health care fraud

January 15, 2020

TEXAS—a rheumatologist was found guilty of falsely diagnosing and falsifying records to reflect patients having rheumatoid arthritis and then treating them with toxic, medically unnecessary chemotherapy medications. Many patients suffered through chemotherapy injections, hours' long intravenous infusions, and other excessive, repetitive and profit-driven medical procedures. His role in the \$325 million health care fraud scheme led to a conviction of one count of conspiracy to commit health care fraud, seven counts of health care fraud, and one count of conspiracy to obstruct justice. Sentencing is scheduled for March 27, 2020. "Rarely do we see such an egregious case of health care fraud, where so many patients received years of unnecessary and debilitating treatments, which were rendered out of sheer greed," said Special Agent in Charge Christopher Combs of the FBI's San Antonio Field Office.

SOURCE: https://www.justice.gov/opa/pr/texas-doctor-found-guilty-role-325-million-health-care-fraud-scheme-involving-false-diagnoses

Urologist Sentenced to Nearly Six Years in Prison for Fraudulent Billings of Nonexistent Patient Visits and **Unnecessary Tests**

February 24, 2020

LOS ANGELES—A urologist was sentenced to 71 months in federal prison for submitting fraudulent billings totaling more than \$700,000 to Medicare for which Medicare paid approximately \$219,934, for services he did not and could not have performed and also ordered medically unnecessary tests and nonexistent treatments, sometimes billing for purported patient visits miles apart and occurring at the exact same time.

SOURCE: https://www.justice.gov/usao-cdca/pr/urologist-sentenced-nearly-six-years-prison-fraudulent-billings-nonexistent-patient

Doctor and Sales Rep Charged in \$12 Million Fraud Scheme Targeting Tricare and Extensive Cover Up Kickbacks Generate Expensive Compounded Drug Prescriptions

January 10, 2020

ARKANSAS—A doctor and a medical sales representative, both from Alexander, have been charged in a scheme to pay and receive kickbacks to generate expensive pre-filled prescriptions for compounded drugs. TRICARE beneficiaries were sought out to receive the drugs, promising to secure their prescriptions (without any doctor consult) and were offered money to sign up. TRICARE, the military's health insurer, paid over \$12 million for the prescriptions. Their 43-count indictment included charges for conspiracy, wire fraud, mail fraud, Anti-Kickback violations, aggravated identity theft, money laundering, lying to the FBI, falsifying records, and obstruction of justice.

The indictment alleges that recruiters sought out over 100 TRICARE beneficiaries, and once personal information was obtained from the recruiters, the ringleader of the scheme sent pre-filled prescriptions to medical professionals who used a cell phone to electronically sign without consulting patients or any regard to medical necessity. Prescriptions went to a Mississippi pharmacy, which shipped drugs nationwide and billed TRICARE for reimbursement, for which TRICARE paid \$4.5 million. Many of those beneficiaries were recruited during a meeting at a North Little Rock National Guard facility where attendees were each offered \$1,000 for receiving drugs. They were given the names of the prescriber so they could behave as if they had seen the doctor if they came into contact with the pharmacy.

SOURCE: https://www.justice.gov/usao-edar/pr/doctor-and-sales-rep-charged-12-million-fraud-scheme-targeting-tricare-and-extensive



Stopping Robocalls—

Unwanted robocalls continue to frustrate all of us, and too often they result in significant financial loss to victims. In 2019 the Telephone Robocall Abuse Criminal Enforcement and Deterrence Act or the **TRACED Act** was signed into law. This Act will require phone providers to make sure that an incoming call is coming from whom caller ID says it's coming from. If the caller ID doesn't match the origin of the call, then it can be blocked or tagged for the consumer as "scam likely." The Federal Communications Commission (FCC), approved a proposal in June to allow carriers to block illegal robocalls by default.

New Twist to Social Security Phone Scams-

The Inspector General of Social Security is warning the public that telephone scammers stating that your social security has been 'suspended' may also send fake documents by email that contains a link to register for a program to

"protect yourself from Social Security fraud." The email may also contain an attached letter to help convince victims the email is legitimate and to comply with their demands. This is a scam, and the website, which may look real, will be used to gather and steal your information. Be vigilant against phone scams, <u>no matter what</u> "proof" the callers offer!

Your Social Security Number Won't Be Suspended. EVER.

9

2020 CENSUS-

During the 2020 Census, the Census Bureau will never ask you for:

- Your Social Security number.
- Medicare number.
- Your bank or credit card account numbers.
- Money or donations.
- Anything on behalf of a political party.
- There is no citizenship question on the 2020 Census.

If someone claiming to be from the Census Bureau contacts you via email or phone and asks you for one of these things, *it's a scam*, and you should not cooperate. These questions will not be on the paper census form. For more information, visit Census.gov, <u>Avoiding Fraud and Scams</u>.

Help for survey participants: https://census.gov/programs-surveys/surveyhelp.html

CORONAVIRUS Scams

We know that scamsters use tragic world events to snare their victims, and the coronavirus pandemic is no exception. As the Massachusetts SMP Director said, "Sadly, the scams around Coronavirus testing are spreading almost as fast as the virus itself." Seniors are receiving calls from scamsters stating they are with the Centers for Disease Control (CDC), the *Chinese* CDC, or your local health department offering coronavirus testing, vaccinations, and treatments in exchange for a Medicare number or credit card payment. A coronavirus test should be prescribed for you by your personal doctor.

- There is NO VACCINE for Coronavirus (Covid-19).
- You do not have to do anything to receive the expected stimulus check or economic impact payment from the Treasury Department.
- SOCIAL SECURITY is not suspending your SS benefits due to office closures or due to the Coronavirus pandemic.

The Senior Medicare Patrol (SMP) recommends that Medicare beneficiaries:

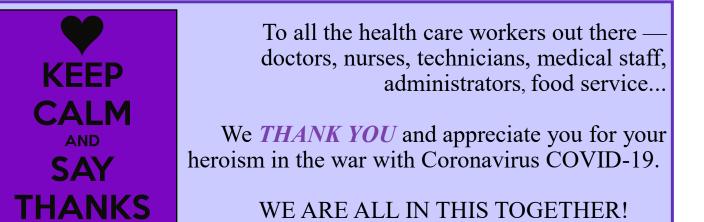
- \Rightarrow Contact your own doctor if you are experiencing potential symptoms of COVID-19.
- ⇒ Do not give out your Medicare number, Social Security number, or personal information in response to unsolicited calls, texts, emails, home visits, or booths at health fairs and other public venues. If your personal information is compromised, it may be used in other fraud schemes as well.
- \Rightarrow Be suspicious of anyone going door-to-door to offer free coronavirus or COVID-19 testing, supplies, or treatments.
- ⇒ Carefully review your Medicare Summary Notice (MSN) or Explanation of Benefits (EOB), looking for errors or claims for products or services that weren't received.
- ⇒ Follow the instructions of your state or local government for other actions you should be taking in response to COVID-19.

Please report scams surrounding the Coronavirus to **AR SMP-866-726-2916**.

Upcoming Arkansas SMP Activities			
DATE	ACTIVITY	COUNTY	
April 15	KABF 88.3FM Radio—"It Could Happen to You"—Live Radio SMP segment—LR	Pulaski	
April 20	SMP Presentation—Alzheimer's AR Lunch & Learn—FACEBOOK LIVE	Pulaski	
	ALL EVENTS AFTER APRIL 30 ARE TENTATIVE DUE TO CORONAVIRUS		
May 8	SMP Presentation / Exhibit Booth—HOPE for the FUTURE—Russellville	Pope	
June 9	SMP Presentation—P.E.O. of Pine Bluff—Pine Bluff	Jefferson	
June 12	SMP Presentation / Exhibit Booth—HOPE for the FUTURE—National Park College— Hot Springs	Garland	
June 16	SMP Advisory Council Meeting—LR	Pulaski	
July 10	SMP Presentation / Exhibit Booth—HOPE for the FUTURE—Jonesboro	Craighead	
July 16	SMP Presentation—Lunch & Learn—Woodland Heights Retirement Community—LR	Pulaski	
July 20-23	NATIONAL SMP/SHIIP CONFERENCE—Maryland	Out of Stat	
August 14	SMP Presentation / Exhibit Booth—HOPE for the FUTURE—Activity Center—Rogers	Washingto	
September 11	SMP Presentation / Exhibit Booth—HOPE for the FUTURE—Civic Center—Marianna	Lee	
September 15	SMP Advisory Council Meeting—LR	Pulaski	
October 9	SMP Presentation / Exhibit Booth—HOPE for the FUTURE—Magnolia	Columbia	
October 22	SMP/SHIIP Presentation—Lunch & Learn—Woodland Heights —LR	Pulaski	
December 9	SMP 10th Annual Volunteer Appreciation & Update Training	Pulaski	

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.

www.facebook.com/arsmp



REPORT SUSPECTED *MEDICAID* FRAUD to the AR MEDICAID INSPECTOR GENERAL (OMIG) HOTLINE - 855-527-6644 or online at: <u>http://omig.arkansas.gov</u>

IMPORTANT PHONE NUMBERS:

AANHR—AR Advocates for Nursing Home Resid	
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
CMS-(Medicare)- (Centers for Medicare and M	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	
KEPRO -AR QIO(Quality Improvmnt 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	g 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 C	are 501-682-8952
Resource Center (ADRC)	1-866-801-3435
(DHS'S Choices in Living Resource Cente	· · · · · · · · · · · · · · · · · · ·
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; <u>e-mail:</u> 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 — <u>e-mail:</u> 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.daas.ar.gov/asmp.html
BBB (Better Business Bureau)— scams and alerts—
https://www.bbb.org/scamtracker/arkansas/
CMŜ (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 <u>your personal</u> Medicare claims information)
MyMedicareMatters.org (National Council on Aging)
Office of Long Term Care—http://
humanservices.arkansas.gov/dms/Pages/oltcHome.aspx
Office of Inspector General (OIG)—email:
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

The Arkansas Senior Medicare Patrol (SMP) is a federal grant program administered by the AR Department of Human Services Division of Aging, Adult & Behavioral Health Services. This publication was paid for by a grant from the Administration for Community Living (ACL). Points expressed herein do not necessarily reflect official ACL policy 11

60

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 <u>first</u>.
- * 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/about-dhs/daabhs/asmp/smp-newsletter-archive



Arkansas Senior Medicare Patrol (SMP) P. O. Box 1437—Slot W241 Little Rock, AR 72203-1437 FACEBOOK.COM/ARSMP https://humanservices.arkansas.gov/about-dhs/daabhs/asmp

To Report Medicare Fraud, Waste & Abuse Call the Toll-Free **Helpline** 8:00am—4:30pm **1-866-726-2916**

AR SMP PARTNERS

El Dorado Connections RSVP El Dorado, AR 870-864-7080

RSVP of Central Arkansas 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

South East Arkansas RSVP Pine Bluff and Stuttgart, AR 870-673-8584

South East AR Educ Services Coop Foster Grandparent Program Monticello, AR 870-367-4819

Senior Health Insurance Information Program (SHIIP) Little Rock, AR 800-224-6330