Your Medicare Coverage: Yearly Wellness Visit

By the SMP Team

Have you scheduled your Yearly Wellness Visit? This visit is one of the preventive services and screenings covered by Medicare Part B. The basis of this visit is to help prevent disease and disability based on your current health and risk factors. You will be asked by your health care provider to fill out a questionnaire called a “Health Risk Assessment” as part of this visit. Reviewing this assessment with your provider will help you develop a personalized prevention plan to help you stay healthy and get the most benefit from your visit.

The visit may also include:

- A review of your medical and family history.
- Developing or updating a list of current providers and prescriptions.
- Height, weight, blood pressure, and other routine measurements.
- Detection of any cognitive impairment.
- Personalized health advice.
- A list of risk factors and treatment options for you.
- A screening schedule (like a checklist) for appropriate preventive services.
- An Advance Care Planning discussion.

(Continued on page 2)
It is important to note that the Yearly Wellness Visit is not the same as a physical. Medicare does not cover a routine physical. When scheduling the appointment, please be clear that you are requesting the Yearly Wellness Visit so there is no confusion with billing.

If your doctor or other qualified provider accepts assignment, you will pay nothing for the Yearly Wellness Visit. If additional tests or services are performed during the same visit, they may not be covered under this preventive benefit and you may have to pay the coinsurance and the Part B deductible may apply. If you are not sure if the test or screening your doctor has recommended will be covered by Medicare, you should always ask your provider.

For more information about the preventive tests/screenings covered by Medicare, please visit the Medicare website (www.medicare.gov) or review the Medicare and You 2019 Handbook.

Source: https://www.medicare.gov/coverage/yearly-wellness-visits

CMS Finalizes New Medicare Card Distribution Ahead of Deadline, Accelerating Fight Against Medicare Fraud and Abuse

New Medicare cards offer better identity protection for millions of Americans.

The Centers for Medicare & Medicaid Services (CMS) recently completed a large-scale effort to provide new Medicare cards without Social Security numbers to people with Medicare. The new cards support the agency’s work to protect personal identity and reduce fraud and abuse. Over the past nine months, CMS sent new cards to more than 61 million people with Medicare across all U.S. states and territories, completing the mailing ahead of schedule.

“Safeguarding our beneficiaries’ personal information continues to be one of our top priorities,” said CMS Administrator Seema Verma. “The Trump Administration is committed to modernizing Medicare and has expedited this process to ensure the protection of Medicare beneficiaries and taxpayer dollars from the potential for fraud and abuse due to personal information that existed on the old cards. All beneficiaries should continue to use these new cards as a valuable resource when seeking care. These new cards will not only be easier for beneficiaries, but also provide the Medicare program with essential protections due to the new unique identifier on the cards.”

In April 2018, CMS began mailing the new Medicare cards, each of which features a unique, randomly assigned Medicare number known as a Medicare Beneficiary Identifier (MBI). The MBI is a combination of letters and numbers that helps protect against personal identity theft and fraud. CMS mailed the new cards on a rolling schedule to all people with Medicare, completing the task three months before the April 2019 deadline for replacing old Medicare cards set by Congress as part of the legislation passed under the Medicare Access and CHIP Reauthorization Act (MACRA) of 2015.

Medicare patients are successfully using their new cards in doctor’s offices and other healthcare

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facilities. More than half of healthcare claims CMS is processing now include the new MBI, demonstrating a smooth transition to the new cards. Healthcare providers submitted 58% of all Medicare fee-for-service (FFS) claims with an MBI for the week ending January 11th.

Assistance Available
For anyone with Medicare who has not received a new card by now, CMS offers these tips:

• **Call 1-800-MEDICARE** for assistance. They will verify your identity, check your address on record, and help you get your new card.

• **Log into your MyMedicare.gov account** to get your new Medicare number or print your official card. The new Medicare number is now available in your account, even if you didn’t receive your card in the mail. Accounts are password-protected and secure. To access or create an account, visit [MyMedicare.gov](https://www.medicare.gov/mymedicare).

• **Ask your healthcare provider.** Providers may be able to look up your Medicare number through a secure portal when you come in for healthcare services.

Prioritizing Security
Although the new Medicare cards are designed to protect against identity theft, people with Medicare should continue to look out for scams. CMS offers these tips:

• **Destroy your old Medicare card** so no one can get your personal information.

• **Start using your new Medicare card right away.** Carry it when you need healthcare. Medicare coverage and benefits are the same. The new card does not impact or change your healthcare benefits.

• **Keep your other plan cards.** If you’re in a Medicare Advantage Plan (like an HMO or PPO) or a Medicare Drug Plan, keep using that plan ID card whenever you need care or prescriptions. However, please carry and protect your new Medicare card too — you may be asked to show it.

• **Protect your Medicare number just like a credit card.** Only give the new Medicare number to doctors, pharmacists, other healthcare providers, insurers, or people you trust to work with Medicare on your behalf. Medicare will never call uninvited for your Medicare number or other personal information.


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**New Medicare Numbers Causing Confusion?**

The CMS Region V office has provided some tips and insights into deciphering letters from numbers on the new Medicare ID cards:

• When in doubt, the character is a number.

• CMS will *never* use any of the following letters in the new Medicare IDs: I, L, Z, S, and O.

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Want to receive The SMP Scoop?

Sign up for our newsletter by emailing us at [smp-wi@gwaar.org](mailto:smp-wi@gwaar.org) or calling our free confidential helpline at 888-818-2611.
The Wisconsin SMP is pleased to announce that a partnership has been established with the Great Lakes Inter-Tribal Council Inc. (GLITC). GLITC represents the 11 federally recognized tribes in the state of Wisconsin through a Tribal Technical Assistance Center. The Center works with tribal aging units to assure they are given the culturally appropriate assistance they need to carry out their Older Americans Act programs. There is also a Tribal Elder Benefit Specialist to assist tribal elders with any legal and benefit counseling/assistance they may need. The tribal technical assistance will be a pivotal SMP partner in sharing the mission of the SMP with tribal elders and their families across the state. In addition to outreach and education, the team will also focus on recruiting tribal members and elders to join the SMP team as volunteers to share the message and help people prevent, detect and report Medicare fraud, errors and abuse.

We are excited to introduce Mary Wolf and Grace Livingston, two of the key people that will be instrumental in moving this partnership forward.

Mary Wolf

Mary Wolf is the Program Director for the Tribal Technical Assistance Center located at the Great Lakes Inter-Tribal Council in Lac du Flambeau. Her previous work experience at the Lac Courte Oreilles Tribe includes Tribal Aging Unit Director, Aging & Disability Resource Specialist, HUD Ross Coordinator and Compliance Officer; University of WI Extension Nutrition Educator in Sawyer County, and Accountant for the Yavapai-Prescott Tribe in Arizona. Mary brings 23 years of experience working with tribal elders to this partnership, which will be of great benefit to everyone. Mary is an enrolled member of the Lac Courte Oreilles Band of Lake Superior Chippewa and is also White Earth MN Chippewa and Ft. Peck Assiniboine from Montana.

Grace Livingston

Grace Livingston has been working for GLITC for one year as the Tribal Elder Benefit Specialist and she shares that she loves her job because of the interactions that she has daily with elders. Grace has been a part of the tribal aging network for over 5 years, serving as an Aging Unit Director and an Aging and Disability Resource Specialist. Having worked as an Economic Support Worker for almost 10 years, Grace has a long history of advocating for elders. Grace was born in Washburn, WI and is a life-long resident and a member of the Red Cliff Band of Chippewa.
What Is a Medicare Summary Notice?
The Medicare Summary Notice, also called an MSN, is a report of doctor visits, services or supplies billed to Medicare in your name. It is mailed out to beneficiaries every 3 months and is also available online. The MSN explains whether or not Medicare is covering the claim and the amount that will be paid. MSNs are mailed to people enrolled in Medicare Part A and/or Part B.

The MSN states in large print that it is NOT a bill.

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How to Read a Medicare Summary Notice

Medicare beneficiaries frequently ask what they can do to protect themselves against fraud, errors, and abuse. One of the best ways to do so is to be an active participant in one’s own healthcare. This means reviewing the quarterly Medicare Summary Notice that comes in the mail following medical appointments to ensure its accuracy. A Medicare Summary Notice (MSN) provides a lot more than just the charges for the service or procedure.

Using Your MSN to Detect Errors, Fraud, and Abuse

- Keep a calendar at home of your medical appointments. That way you can compare the dates of your medical appointments against the dates listed on the MSN.
- Review each claim to be sure the provider name, service date, and procedure codes are correct.
- Look on the front page of the MSN to check whether your Part A or Part B deductibles have been met.
- Examine each claim to determine if proper payment was made:
  - Did Medicare pay towards each claim?
  - Was the breakdown of payment correct?
    - Were the number of benefit days used under Part A correct?
    - Were the daily copays assessed for hospital or skilled nursing facility claims correct?
    - If it was a Part B claim, was it paid at 80/20%?
  - Was a modifier used on the billing code that may provide more information about the claim (for example, GY or HA)
- If there are denials on the MSN, try to determine why the claim(s) were denied:
  - The footnotes at the bottom may refer you to a local or national coverage determination number which explains the criteria for coverage of that procedure.
  - Check the “You May Be Billed” column to see if Medicare determined that the provider is liable for the cost of the service and you owe nothing.
  - Call the provider billing office to be sure the billing codes used were correct, and see if they have any other information about why the claim was denied.
  - Be mindful of the appeal date and address on the last page of the MSN. Your appeal must be received by this date in order to appeal the coverage denial!
- Save your MSNs for several years after the dates of service. If/when you decide to get rid of them, be sure to shred them rather than throw them in the garbage as they contain personal information.
- Medicare only mails MSNs every three months, but you can view your MSNs 24 hours a day by visiting MyMedicare.gov. Registering for access to Medicare’s free, secure online service allows you to review all bills processed within the past 36 months.

*For those enrolled in Medicare Advantage Plans, Explanation of Benefits (EOBs) are sent from the plan rather than the MSNs. Information should be thoroughly reviewed on the EOB to detect errors, fraud, and abuse.
Be on the Lookout!

By the SMP Team

At the Wisconsin SMP, we are receiving daily reports from Medicare beneficiaries who are being contacted by durable medical equipment (DME) supplier scammers.

Wisconsin Medicare beneficiaries are reporting receiving harassing phone calls from people who claim to be calling from medical equipment suppliers. These suppliers are typically out-of-state and in the business of selling knee or back braces. Some of these scammers claim to have received an order or prescription from the beneficiary’s medical doctor requesting the equipment be sent to the beneficiary. If the beneficiary questions the prescription, the caller threatens to report the beneficiary as “non-compliant” if they do not follow through with obtaining the equipment. Other scammers have threatened to cancel the person’s Medicare benefits altogether if they do not comply and provide a Medicare number, address, and contact information.

While some of these scammers seem to be after a person’s Medicare number and contact information, some of them are actually sending out shipments of knee and back braces to Medicare beneficiaries and billing Medicare for the products. We have heard reports of people receiving five different knee or back braces at one time! Most of the people receiving these phone calls and supplies have never suffered from back or knee problems during their lifetime, so it is obvious that the supplies were not needed and not ordered by a treating physician.

What can you do if you receive phone calls like this?

• Hang up immediately
• If you have caller ID, write down the caller’s phone number
• Write down the company the caller alleges it works for
• Do not provide any personal contact information, your Medicare number, or even verify information they may already have
• Call the Wisconsin SMP helpline to report the call. We report this fraudulent activity to Medicare and the federal Office of Inspector General
• Review all of your Medicare Summary Notices to be sure nothing was fraudulently billed under your Medicare number.

For more information on how to review your Medicare Summary Notice, visit our publication on this topic on our website, https://gwaar.org/senior-medicare-patrol.
www.smpresource.org is a great resource if you are interested in learning more about Senior Medicare Patrol program news across the country.

DME Conviction, Settlement Announced

December 19, 2018

Here are two separate cases involving durable medical equipment (DME): In the first, a federal jury found the owner of a medical equipment company guilty of multiple counts of Medicare fraud and identity theft. The scheme involved items that were never provided to patients and never ordered by a physician. She submitted thousands of false claims, fabricated patient files, and falsified prescriptions from doctors for items such as heavy-duty wheelchairs while providing much cheaper standard wheelchairs to patients. Read a Department of Justice press release.

In another case, a company agreed to pay more than $1.6 million to settle False Claims Act allegations. Complaints were based primarily on allegations surrounding the company’s use of a telemarketing scheme to sell knee and back braces to Medicare beneficiaries. The United States alleged that the company violated Medicare’s prohibition against telephone solicitation of covered products to beneficiaries. Read a Department of Justice press release.

Source: https://www.smpresource.org/News/20181219/256/DME-Conviction-Settlement-Announced.aspx
Volunteer Corner

By Ingrid Kundinger, SMP Project Manager

“Life’s most urgent question is: What are you doing for others?”

—Martin Luther King Jr.

Volunteer recruitment is underway for the Wisconsin SMP program. We are preparing for our first orientation sessions and there is still time if you are interested in joining us!

We are currently looking for volunteers to serve in three roles:

1. **Distributing information**: Help with transporting and disseminating SMP information materials to sites and events (i.e. Senior Centers, congregate meal sites, libraries, community centers).

2. **Staffing Exhibits**: Help by staffing information tables or exhibits at events such as health fairs and senior expos. In this position you may be asked to provide general information about SMP to the public and answer basic questions.

3. **Making Group Presentations**: Help by giving presentations on SMP topics to small and large groups. In this position, you will likely interact with the audience by answering questions and through discussion.

The application process includes submitting a cover letter and application along with a self-assessment of skills and interests. These materials can be found on our website, [https://gwaar.org/senior-medicare-patrol](https://gwaar.org/senior-medicare-patrol) and clicking on the **Volunteer Opportunities** section of the page. You can also contact us via email, [smp-wi@gwaar.org](mailto:smp-wi@gwaar.org) or call 1-(888) 818-2611 to request application materials.

Once your application materials are submitted, you will be contacted via telephone for an interview, giving us the opportunity to get to know each other and determining the best “fit” based on your interests and abilities. Following the interview, your materials will be submitted for screening including a background check and reference checks. Once the screening is completed successfully and both parties are interested in moving forward, you will receive an official welcome to the program. Orientation and training information will be provided to you at that time. Volunteers will be an important factor in spreading the message of the SMP to Medicare beneficiaries across the state of Wisconsin! Please consider joining us!
What’s the “Scoop”? 

The Wisconsin Senior Medicare Patrol toll-free and confidential Helpline, (888) 818-2611, has been ringing very frequently in the past several weeks as Wisconsin Medicare Beneficiaries reach out to us with questions and concerns. Each quarter we will feature one or two of the most frequent type of calls along with the SMP response.

Hey, Wisconsin SMP! What’s the Scoop?

I received a call from someone stating that they wanted to send me a back and neck brace because of some of the issues I am currently having. They told me that the braces would be free to me, Medicare would take care of the cost. Then they asked for me to verify my Medicare number. I told them that I didn’t share that information over the phone and they hung up. Was that a scam call?

Here’s the Scoop: More than likely, this was a scam call. Unfortunately, there are durable medical equipment (DME) companies across the country that are calling people, trying to get Medicare numbers so that equipment can be sent to you, billed to Medicare, and the company receives payment. Often, these companies are from out of state (Florida and California have been popular recently) and have not talked with your health care provider. They are merely hoping that you will be interested in FREE braces and will share your Medicare number with them.

What should you do if you get a call like this? Hang Up! If you do engage with the person calling, please DO NOT share your Medicare number with them. Nothing good will come of that! If you would like to report the call to the Wisconsin SMP, some helpful information for us to have is the number that the person is calling from and any other details, such as the name of the company calling. We share this sort of information with the Administration for Community Living and the Federal Office of Inspector General for additional investigation.

If you did share your Medicare number on a call like this, don’t worry—you aren’t alone. Call us so that we can help! We will compile information from you to pass along for additional investigation. We will also provide additional suggestions about things to watch for and be aware of in the coming weeks and months. It is better to reach out in this situation than be embarrassed and not call! We are here to help, so please give us a call! □
Where in Wisconsin is SMP?

This section of the newsletter will highlight upcoming Outreach and Educational events that the WI SMP is going to be doing across the state of Wisconsin. Not on the list? Contact us and we will do our best to accommodate your request! Call 1-888-818-2611 or email smp-wi@gwaar.org to connect with us and get your organization added to the list!

February 2019:

19th: Fitchburg Senior Center - Fitchburg, WI
25th: Stoughton Senior Center - Stoughton, WI

March 2019:

15th: Middleton Senior Center - Middleton, WI
30th: Ready, Set, Retirement! Seminar - Madison, WI

April 2019:

4th: Lac Courte Oreilles Elders Association - Hayward, WI
17th: Columbia County I-Team - Portage, WI
25th: Oregon Senior Center - Oregon, WI
25th: WI Rural Partners Summit - Rice Lake, WI
27th: Ready, Set, Retirement! Seminar - Verona, WI
29th: Baraboo Area Senior Citizens Organization - Baraboo, WI

May 2019:

9th: 60 Plus Senior Expo - Janesville, WI
10th: Ready, Set Retirement! Seminar - Madison, WI
20th – 21st: Alzheimer’s Association State Conference - Wisconsin Dells, WI

June 2019:

4th: Senior American’s Day - Eau Claire, WI

**Note: Event list reflects those events scheduled by the publish date of this newsletter. □

SMP Wisconsin Helpline: 888-818-2611
SMP Wisconsin Email: smp-wi@gwaar.org
SMP Wisconsin Website: https://gwaar.org/senior-medicare-patrol
Save the Dates:

◊ 12th Annual HealthWatch Wisconsin Conference, March 5 & 6, at the Masonic Center in Madison. For more information, visit [https://www.safetyweb.org/healthwatchwi/conference.html](https://www.safetyweb.org/healthwatchwi/conference.html)

◊ WI Assisted Living Association (WALA) Conference, March 13 & 14, Kalahari in WI Dells. For more information, visit [https://ewala.org/](https://ewala.org/)


◊ Hunger & Health Summit, March 25-26, at the Chula Vista in WI Dells

◊ Aging Advocacy Day, May 14, Park Hotel in Madison on the capitol square

◊ Alzheimer’s Association Conference, May 20 & 21, Kalahari in WI Dells

◊ Senior Americans Day, June 4, UW-Eau Claire

◊ WI Institute for Healthy Aging Conference, June 6-7 at the Wilderness Resort in WI Dells. For more information, visit [https://wihealthyaging.org/](https://wihealthyaging.org/)

◊ WI Association of Benefit Specialists Conference, June 18-19, Green Lake

◊ Adult Protective Services Conference, October 10 & 11, Glacier Canyon Lodge in WI Dells

Happy Valentine’s Day from the SMP!