

The SMP SCOOP

PROTECT DETECT REPORT

SEPTEMBER 2022



The Senior Medicare Patrol (SMP) Scoop is prepared by the GWAAR SMP Team to help Medicare beneficiaries and their advocates prevent, detect, and report health care fraud, abuse, and errors.

Please feel free to share this publication with others who may benefit from its contents.

TO CONTACT WI SMP

Call: (888) 818-2611

E-mail: smp-wi@gwaar.org

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Facebook:

@WisconsinSeniorMedicarePatrol

To subscribe, please send us an e-mail.



Feeling Bombarded by Celebrity Commercials?

Here are a few things to know before you call.

By Ingrid Kundinger, SMP Project Manager

If you watch television, you have probably seen the commercials for Medicare insurance. Some of these commercials feature famous athletes delivering “important information if you are on Medicare.” Other commercials might make you feel like you are missing out on all sorts of benefits that you are entitled to. Are you nodding your head right now because you’ve seen these types of commercials?



These types of commercials are intensifying due to Medicare’s Open Enrollment Period, October 15 – December 7, 2022. This is the time of year that Medicare health and drug plans can make changes to things like cost, coverage, and which providers and pharmacies are in their networks. This is when anyone with Medicare can change their Medicare health plan and prescription drug coverage for the following year to better meet their needs. Television commercials will try to entice you with additional benefits or make you feel like you are missing out. Be careful and do your homework to make sure you understand the benefits and plans available to you.

Continued on page 2

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PROTECT DETECT REPORT

Feeling Bombarded by Celebrity Commercials continued from page 1

Here are a few important things to know before you make the decision to call the number on the TV screen:

- While commercials may use the word Medicare, as well as the red, white, and blue colors and images of a Medicare card, the telephone numbers displayed on these commercials are NOT Medicare, but rather a licensed insurance agent or broker. The fine print on the bottom of the screen, which is almost impossible to read, states that these plans are not affiliated with any government program or agency.
- The benefits that are mentioned (eyeglasses, hearing aids, rides to appointments, etc.) are benefits that MAY be offered with certain Medicare Advantage plans. Medicare Advantage plans vary greatly from state to state, and even county to county, so it is important to do your homework. In some cases, there are additional costs associated with these benefits or eligibility guidelines that must be met to qualify. It is not a “one-size-fits-all” type of option.
- Some commercials mention that you may qualify for up to \$144 added back to your Social Security check every month. Be careful, as there are conditions that apply to this statement. This rebate is something that you may be eligible for IF you purchase a Medicare Advantage plan AND live in a certain area of the country. It is important that you understand whether you live in an eligible area of the country or zip code.

- The commercials may also state that you could qualify for a zero-dollar premium or mention available benefits at no additional cost. Again, there is fine print for these types of situations that you need to be aware of. Zero-dollar premium plans may also have co-payments and coinsurance that can apply. And again, these types of plans may not be available where you live.

What’s the bottom line? By responding to the TV commercials, you may end up with a Medicare Advantage plan that is not available in your area, does not include your preferred healthcare provider, or has costs that you were not anticipating. And since the new plan doesn’t go into effect until January 1, 2023, you may not find out these things until it’s too late.

So, what can you do to make sure that you understand all your options?

- Do your homework and become an informed consumer. Make sure that you understand the differences between Medicare Part A, B, C, and D and other plans available such as Medigap. Yes, it can be complicated, but there are available resources across the state of Wisconsin that provide unbiased information, at no cost to you.

Important Resources for Wisconsin Medicare Beneficiaries:

- **Benefit Specialists at local Aging and Disability Resource Centers (ADRCs)** and aging units in every county and tribe offer benefits counseling. For contact information, visit <https://www.dhs.wisconsin.gov/benefit-specialists/index.htm> or call 608-266-2536.
- **Contact Medicare directly by calling** (800-633-4227) or visiting <https://www.medicare.gov/>.
- **The Medigap Helpline (800-242-1060)** is a toll-free helpline operated by the Wisconsin Board on Aging and Long-Term Care that provides counseling for all Wisconsin Medicare beneficiaries on Medicare, Medicare supplement insurance, employer-based health insurance, Medicare Advantage plans, long-term care insurance, and related topics.

Continued on page 3

Important Resources continued from page 2

- **The Wisconsin Medigap Part D and Prescription Drug Helpline** (855-677-2783) is a toll-free helpline that answers questions from Wisconsin residents age 60 and over about Medicare Part D and other prescription drug coverage options.
- **The Disability Drug Benefits Helpline** (800-926-4862) is a toll-free helpline operated by Disability Rights Wisconsin that helps people who have Medicare due to a disability with questions about prescription drug coverage.
- **Office for the Deaf and Hard of Hearing** (video phone: 262-347-3045) provides outreach and individual counseling in American Sign Language.
- **Wisconsin Judicare, Inc.** (800-472-1638) provides outreach and benefits counseling to Native American Medicare beneficiaries.
- **The Wisconsin Senior Medicare Patrol** (888-818-2611) is a toll-free helpline for Medicare beneficiaries and their families to call to report suspected Medicare fraud, errors, and abuse.



The Senior Medicare Patrol (SMP) is ready to provide you with the information you need to PROTECT yourself from Medicare fraud, abuse, and errors; DETECT potential fraud, abuse, and errors; and to REPORT your concerns. SMP helps educate and empower Medicare beneficiaries in the fight against healthcare fraud. SMP can help you with your questions, concerns, or complaints about potential fraud and abuse issues. SMP can also provide information and educational presentations, virtually and in-person, when it is safe for everyone.

The Wisconsin SMP is located at the Greater Wisconsin Agency on Aging Resources, Inc. (GWAAR). The Wisconsin SMP can be reached toll-free at (888) 818-2611, by email at smp-wi@gwaar.org, or online at <https://www.smpwi.org/>



Used Car Scams

By Tiffany Schultz, BBB SW WI Regional Director

With used cars in high demand, look out for too-good-to-be-true prices

Used cars are in high demand, and scammers know it. Con artists are taking advantage of shoppers who turn to online platforms in search of a reasonably priced used vehicle. Be wary of this latest twist and too-good-to-be-true prices.

HOW THE SCAM WORKS

You are shopping for a used vehicle on Craigslist, Facebook Marketplace, eBay, or another online platform, and you find the make and model you want at an excellent price. Upon contacting the seller, you're told a sad story meant to tug on your heart strings, such as the car belonged to a relative who has passed away, and is located in another city. The seller can help you get the car to your location, and



is willing to connect you with a transport company, who will hold the funds in escrow until the vehicle is delivered.

Continued on page 6



Wisconsin SMP Partnership With Great Lakes Inter-Tribal Council

Working to enhance the quality of life for all Native people
By Kassy Heard, Tribal Technical Assistance Center, Program Director

A Message of Caution During Open Enrollment

Boozhoo!

The annual Medicare open enrollment period, October 15–December 7, is a chance to review your coverage and switch plans if needed. Given the timing, I wanted to take this opportunity to chat about broker/ insurance agent misconduct, which tends to surface around open enrollment.

Recently, another representative attended a meeting for older adults in the Lac Courte Oreilles, LCO, community. During the meeting two insurance brokers came in and started to ask the members about their Medicare and Medicaid coverage. They proceeded to provide misinformation to the Tribal Elders about their plans, including statements that the coverage that the Elders would receive by signing up with them, would be “better” coverage. Before making any changes, we encourage you to review your current Medicare and Medicaid coverage. You want to ensure you have the best coverage to meet your personal needs.

In addition to offering better coverage, they were offering a \$150 food voucher and \$30 if the Elders signed up. If an insurance broker is offering these types of add-on benefits, be aware that this is a red flag.

We’re just urging you to BE CAUTIOUS about what you are being offered and signing up for. Never share your personal information with someone who contacts you unsolicited. If you have questions about your current Medicare benefits, contact your Tribal Benefits Specialist so they can get you the information you need to decide which option is best for you.



If you have any concerns relating to these types of interactions, please contact Senior Medicare Patrol's toll-free Helpline: (888) 818-2611. You can also contact me Kassy Heard, at 715-588-1016.

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For more information on The History of GLITC - Wisconsin Senior Medicare Patrol, visit: <https://www.smpwi.org/the-history-of-glitc/>

September is Fall Prevention Month

Prevent Falls and Fractures

Excerpts from the NIH National Institute on Aging (NIA).

A simple thing can change your life – like tripping on a rug or slipping on a wet floor. If you fall, you could break a bone, like thousands of older men and women do each year. For older people, a break can be the start of more serious problems, such as a trip to the hospital, injury, or even disability.

If you or an older person you know has fallen, you're not alone. More than one in three people age 65 years or older falls each year. The risk of falling – and fall-related problems – rises with age.

Many Older Adults Fear Falling

The fear of falling becomes more common as people age, even among those who haven't fallen. It may lead older people to avoid activities such as walking, shopping, or taking part in social activities.

But don't let a fear of falling keep you from being active. Overcoming this fear can help you stay active, maintain your physical health, and prevent future falls. Doing things like getting together with friends, gardening, walking, or going to the local senior center helps you stay healthy. The good news is, there are simple ways to prevent most falls.

Causes and Risk Factors for Falls

Many things can cause a fall. Your eyesight, hearing, and reflexes might not be as sharp as they were when you were younger. Diabetes, heart disease, or problems with your thyroid, nerves, feet, or blood vessels can affect your balance. Some medicines can cause you to feel dizzy or sleepy, making you more likely to fall. Other causes include safety hazards in the home or community environment.

Scientists have linked several personal risk factors to falling, including muscle weakness, problems with balance and gait, and blood pressure that drops too much when you get up from lying down or sitting (called postural hypotension). Foot problems that cause pain and unsafe footwear, like backless shoes or high heels, can also increase your risk of falling.

Confusion can sometimes lead to falls. For example, if you wake up in an unfamiliar environment, you might feel unsure of where you are. If you feel confused, wait for your mind to clear or until someone comes to help you before trying to get up and walk around.

Some medications can increase a person's risk of falling because they cause side effects like dizziness or confusion. The more medications you take, the more likely you are to fall.



Take the Right Steps to Prevent Falls

If you take care of your overall health, you may be able to lower your chances of falling. Most of the time, falls and accidents don't just happen. Here are a few tips to help you avoid falls and broken bones:

- Stay physically active.
- Have your eyes and hearing tested.
- Find out about the side effects of any medicine you take.
- Get enough sleep.
- Limit the amount of alcohol you drink.
- Stand up slowly.

Continued on page 6



Prevent Falls and Fractures continued from page 5

- Use an assistive device if you need help feeling steady when you walk.
- Be very careful when walking on wet or icy surfaces.
- Wear non-skid, rubber-soled, low-heeled shoes, or lace-up shoes with non-skid soles that fully support your feet.
- Always tell your doctor if you have fallen since your last checkup, even if you aren't hurt when you fall.

What to Do if You Fall

Whether you are at home or somewhere else, a sudden fall can be startling and upsetting. If you do fall, stay as calm as possible.

Take several deep breaths to try to relax. Remain still on the floor or ground for a few moments. This will help you get over the shock of falling.

Decide if you are hurt before getting up. Getting up too quickly or in the wrong way could make an injury worse.

If you think you can get up safely without help, roll over onto your side. Rest again while your body and blood pressure adjust. Slowly get up on your hands and knees, and crawl to a sturdy chair.

Put your hands on the chair seat and slide one foot forward so that it is flat on the floor. Keep the other leg bent so the knee is on the floor. From this kneeling position, slowly rise and turn your body to sit in the chair.

If you are hurt or cannot get up on your own, ask someone for help or call 911. If you are alone, try to get into a comfortable position and wait for help to arrive.

Carrying a mobile or portable phone with you as you move about your house could make it easier to call someone if you need assistance. An emergency response system, which lets you push a button on a special necklace or bracelet to call for help, is another option.

Used Car Scams continued from page 3

Once you pay the third-party transport company, usually by wire transfer or prepaid debit cards, your vehicle isn't delivered. The seller is in cahoots with the transport company and this is a scam. Your money is gone for good.

HOW TO AVOID CAR SALES SCAMS

Watch out for prices that are too-good-to-be-true. Scammers know that used vehicles are in high demand and tempt shoppers with great deals.

Contact the seller by phone. Ask plenty of questions. If you get vague answers, the seller gets defensive or aggressive, or if they can't confirm the location of the vehicle, you're probably dealing with a scammer.

See the car before you buy it. Always make an in-person inspection and take a test drive before purchasing.

Don't give in to threats or pressure. Resist the urge to act immediately. Always take time to consider



a purchase, especially if it's a vehicle that costs thousands of dollars.

Don't wire funds for a car. Scammers often ask for wired funds because they are hard to track, and there's no way to get your money back. It's best to make large purchases by check or credit card.

Report it. If you've experienced a scam, regardless if you lost money or personal information, report it to BBB.org/ScamTracker. Your report helps to warn others of the scams taking place in the marketplace.

You Can Defend the Integrity of Medicare!

By Molly A. Kelly, SMP Volunteer Coordinator



Are you frustrated with the number of scam calls you receive? Does it bother you that scammers specifically target older adults?

Did you know that Medicare loses billions of dollars every year due to fraud, and this fraud affects all of us?

Are you concerned for the well-being of others and want to help them avoid becoming a victim of fraudsters?

You can make a difference. You can play a significant role in curbing Medicare waste and fraud by helping others become better healthcare consumers.

We invite you to join the Senior Medicare Patrol (SMP) program volunteer team.

We empower Medicare beneficiaries and their caregivers to minimize waste and fraud today and to preserve the integrity of Medicare and its funding for future generations.

To become a victim of fraud or to have to fight errors in medical insurance can be stressful, demanding, and traumatic. By volunteering for the SMP you can invest in your community, potentially saving beneficiaries money and improving their quality of life. You can spread the

word by distributing materials, staffing a booth at a conference or an outreach event, or even by giving small group presentations. And we train you to take the message effectively into your community as a knowledgeable volunteer.

We invite you to become a member of our Wisconsin SMP volunteer network. With a strong statewide network, we can work together to help safeguard Medicare and its beneficiaries. We can reduce the amount of needless waste, which benefits all of us. We can become better healthcare consumers.

Attorney Kate Schilling, the Legal Services Manager for the Elder Law & Advocacy Center, and Director of Wisconsin SMP, has stated, "The SMP program offers vital information to our older adults, often a vulnerable and preyed-upon populace. By volunteering, you'd be involved with a worthwhile and rewarding cause in your community, benefiting both you and Medicare beneficiaries. Together we can build an effective volunteer team!"

Please contact me at molly.kelly@gwaar.org if you would like to volunteer, or to learn more. You can also find information about volunteer opportunities on our website: www.smpwi.org.

The integrity of Medicare involves all of us. Take charge. Volunteer today.



Understanding Medicare Supplement Enrollment

By the GWAAR Legal Services Team



If you want to buy a Medicare supplement policy, also known as Medigap, it is important to understand the best times to enroll. When you enroll can affect your monthly premium costs, coverage for preexisting conditions, and whether you can buy a policy at all.

OPEN ENROLLMENT PERIOD

In general, the best time to enroll in a supplement is during your open enrollment period. In Wisconsin, your open enrollment period begins the month your Part B coverage starts and continues for six months. If you are under age 65 and enrolled in Medicare due to disability or end-stage renal disease, you are entitled to another six-month open enrollment period when you turn 65.

During your open enrollment period, insurance companies cannot deny you coverage. They must sell you a policy at the best available rate regardless of your health status. The best available rate will depend on factors like your age and gender. If you enroll during your open enrollment period, companies may not charge you an increased premium amount because of your use of tobacco. Some policies may require waiting periods before they will cover preexisting medical conditions.

GUARANTEED ISSUE

If you miss your open enrollment period, you can also buy a supplement when you have a guaranteed issue right because your other health insurance ended. In Wisconsin, an insurance company must sell you a supplement if:

- Your Medicare Advantage or Medicare Cost plan stops participating in Medicare or providing care in your service area; or
- You move outside the plan's geographic service area; or
- You leave the health plan because it did not meet its contractual obligations to you; or
- Your employer group health plan ends some or all of your coverage; or
- You leave your employer group plan to join a Medicare Advantage plan but leave the Medicare Advantage plan within 12 months of enrollment; or
- Your insurance company ends your Medicare supplement or Medicare SELECT policy and you are not at fault; or
- You drop your supplement to join a Medicare Advantage plan, a Medicare Cost plan, or buy a Medicare SELECT policy for the first time, and then leave the plan or policy within one year after joining. You may return to your former plan or to any available supplement if your former plan is unavailable; or
- You join a Medicare Advantage plan or Medicare Cost plan when you first become eligible for Medicare Parts A and B at age 65 and within one year of joining you decide to leave the health plan; or
- You have Medicare Parts A and B and Medicaid, and you lose eligibility for Medicaid; or

Continued on page 9



Understanding Medicare continued from page 8

- Your employer group plan increases your cost from one 12-month period to the next by more than 25% and the new payment for the employer-sponsored coverage is greater than the premium charged under the supplement plan for which you are applying.

If you have a guaranteed issue right, you must apply for a new supplement policy within 63 calendar days of when your old health plan or policy ends. During this time, an insurance company:

- Cannot deny insurance coverage or require a waiting period for coverage,
- Must cover you for all preexisting conditions, and
- Cannot charge you more for a policy because of any preexisting conditions.

If your old plan ended, that insurance company must send you a notice explaining your guaranteed issue rights. You will need this notice or other evidence that your coverage ended when you apply for a new supplement.

ENROLLING IN A SUPPLEMENT AT OTHER TIMES

If you try to enroll in a supplement outside of your open enrollment period or when you have a guaranteed issue right, you may run into problems. Insurance companies may refuse to sell you a policy, or they may require a waiting period before the policy will cover any preexisting medical conditions. In addition, the company may charge you a higher monthly premium.

Medicare Marketing Violations *Tips for Protecting Yourself and Medicare*

By the SMP National Resource Center



Unlike Original Medicare, Medicare Advantage (MA, Part C) and Medicare Prescription Drug Plans (Part D) are administered, marketed, and sold by private insurance companies. The Centers for Medicare & Medicaid Services (CMS) has guidelines for marketing Part C and Part D insurance that protect Medicare beneficiaries from manipulative and deceptive sales and enrollment tactics.

Please note, these guidelines primarily focus on activities and materials related to agents, brokers, and direct plan communication, as opposed to television and radio commercials or advertising.

Plan sponsors and their representatives, including agents and brokers, must follow these guidelines when marketing to beneficiaries. Marketing is seen as equivalent to steering beneficiaries toward a plan.

What are Examples of Medicare Marketing Violations?

- Receiving an unsolicited phone call from a plan with whom they have no prior relationship or from which they disenrolled
- An agent or broker representing themselves as though they come from or were sent by Medicare, Social Security, or Medicaid
- Receiving an unsolicited home visit – i.e., “door-to-door cold call”

Continued on page 10



PROTECT DETECT REPORT

Medicare Marketing Violations continued from page 9

- Receiving information such as leaflets, flyers, door hangers, etc. on their car or at their residence from a company with whom they did not have an appointment
- An agent initiating a discussion about other insurance products, such as life insurance or annuities, during a visit or meeting about a Part C or Part D Medicare product
- An agent returning uninvited to a residence after missing an earlier appointment
- Requiring attendees to provide contact information as a prerequisite for attending a marketing event
- Marketing event attendees are later called without permission
- Prospective enrollees are called to confirm receipt of mailed information
- An agent signing a beneficiary up for a plan that is supposed to cover specific prescriptions or services but the beneficiary learning later that those prescriptions or services were actually not covered by the plan because they received a bill

What Can Plans and Agents Do?

- Call a beneficiary who has expressly given advanced permission
- Offer nominal gifts valued at \$15 or less (or \$75 in total, per person, annually) to beneficiaries, provided the gift is given regardless of whether a beneficiary enrolls in the plan
- Include information about rewards and incentives programs in their marketing materials
- Provide refreshments and light snacks, but not meals, at marketing/sales events
- Make unsolicited contact with potential enrollees using conventional mail and other print media (e.g., advertisements) and by email provided it contains an opt-out function
- Conduct marketing/sales activities in common areas of health care settings (i.e., waiting rooms, common entryways, vestibules, cafeterias, or community, recreational, or conference rooms)



What Can't Plans and Agents Do?

- Conduct marketing or sales activities at an educational event
- Require participants to provide contact information to attend an event
- Sell door-to-door or leave information like leaflets, flyers, door hangers, etc. on someone's car or at their residence (unless the beneficiary is a "no show" for a prescheduled appointment)
- State that they are approved, endorsed, or authorized by Medicare; are calling on behalf of Medicare; or that Medicare asked them to call or see the beneficiary
- Send unsolicited text messages, make unsolicited phone calls, or leave voicemail messages for potential enrollees
- Approach beneficiaries in public common areas (i.e., parking lots, hallways, lobbies, or sidewalks)
- Provide information that is inaccurate or misleading
- Offer health screenings or other activities that may be perceived as, or used for, "cherry-picking"

Where Do I Go to Report Violations or to Get More Information?

Visit www.smpwi.org for directions on how to report violations and for more information.

What's the "Scoop"?

By Ingrid Kunding, SMP Project Manager

1997 was a very important year. For Green Bay Packers fans, it marked a Superbowl Championship. For theater fans, The Lion King made its debut on Broadway. For the technology enthusiasts, google.com was registered as a domain name.

But perhaps most importantly, the Senior Medicare Patrol (SMP) was established as a program to help in the fight against health care fraud in the Omnibus Consolidated Appropriations Act of 1997 (P.L.104-208). The origins of the project were to recruit and train retired professionals to identify and report errors, fraud, and abuse. A Senate report explained the logic of the newly formed program by saying, "Senior citizens are our best front line defense against these losses [from health care fraud and abuse], but they don't have the information and experience needed" to recognize and accurately report cases or errors, fraud, and abuse. The SMP program would address this problem by recruiting and training volunteers to provide consumer education.

Fast forward 25 years and the SMP program continues to fight Medicare-related fraud, abuse, and errors with the help of thousands of volunteers who help Medicare beneficiaries, and their advocates prevent, detect, and report healthcare fraud, abuse, and errors. Millions of Medicare beneficiaries have learned the importance of protecting their personal information, reviewing their Medicare Summary Notices on a regular basis, and reporting concerns when something doesn't seem right.

While there have been changes to the SMP program over the years, the mission has remained the same and the commitment to this work continues in all 50 states, the District of Columbia, Guam, Puerto Rico, and the U.S.



Virgin Islands. The three main areas of focus are to participate in outreach and education events, engage volunteers, and receive beneficiary concerns.

To learn more about the history of the SMP program, please visit the SMP Resource Center website, <https://www.smpresource.org/Content/What-SMPs-Do.aspx>.

Here's the Scoop on how you can reach us:

Call: (888) 818-2611

E-mail: smp-wi@gwaar.org

Website: www.smpwi.org

Facebook: @WisconsinSeniorMedicarePatrol





Choosing Between Original Medicare and Medicare Advantage

August 2022 Medicare Minute

People with Medicare can get their health coverage through either **Original Medicare** or a **Medicare Advantage Plan**. Here is a look at the differences between the two options.

Original Medicare

The traditional Medicare program offered directly through the federal government.

Original Medicare includes Part A (inpatient/hospital coverage) and Part B (outpatient/medical coverage).

You will receive a red, white, and blue card to show to your providers when receiving care.

Most doctors in the country take your insurance. Medicare limits how much you can be charged if you visit providers who accept Original Medicare.

Medicare Advantage

Private plans that contract with the federal government to provide Medicare benefits.

Medicare Advantage (MA) Plans are also known as Medicare private health plans or Part C.

Instead of showing the red, white, and blue Medicare card, you will show the membership card from your plan to your providers.

Plans must provide the same benefits offered by Original Medicare, but they may apply different rules, costs, and restrictions, such as provider networks or referral requirements. They also may offer certain benefits that Medicare does not cover.

If you sign up for Original Medicare and later decide you would like to try a Medicare Advantage Plan, or vice versa, be aware that there are certain enrollment periods when you are allowed to make these changes.

The table below compares Original Medicare (without a supplement) and Medicare Advantage. Remember that there are several different kinds of Medicare Advantage Plans. If you are interested in joining a Medicare Advantage Plan, speak to a plan representative for more information.

	Original Medicare	Medicare Advantage
Costs	Standardized Part A and B costs, including monthly part B premiums and 20% coinsurance for Medicare-covered services if seeing a participating provider (after meeting your deductible).	Varies depending on plan. Usually a co-payment is owed for in-network care. Plans may charge a monthly premium in addition to the Part B premium.
Supplemental Insurance	Have the choice to pay an additional premium for a Medigap policy to cover Medicare cost-sharing.	Cannot enroll in a Medigap policy.
Provider Access	Can see any provider and use any facility that accepts Medicare (participating or non-participating).	Typically can see only in-network providers.
Referrals	Do not need referrals for specialists.	Typically need referrals for specialists.
Drug Coverage	Must sign up for a stand-alone prescription drug plan.	In most cases, plans provide prescription drug coverage (may charge a higher premium).
Other Benefits	Does not cover vision, hearing or dental services.	May cover additional services, including vision, hearing, and/or dental (additional benefits may increase your premium and/or other out-of-pocket costs).
Out-of-Pocket Limit	No out-of-pocket limit.	Annual out-of-pocket limit. Plans pay the full cost of your care after you reach the limit.
Notices	Beneficiaries receive quarterly Medicare Summary Notices (MSNs).	Beneficiaries receive monthly Explanation of Benefits (EOBs).

Continued on page 13

Choosing Between Original Medicare and Medicare Advantage continued from page 12

BE AWARE OF MARKETING VIOLATIONS AND ENROLLMENT FRAUD

Medicare Advantage Plans and Part D plans are administered, marketed, and sold by private companies. Plan representatives, agents, and brokers must follow federal guidelines when marketing to you. These guidelines protect you from manipulative and deceptive sales and enrollment tactics. A fundamental principle is that marketing cannot be conducted under the guise of education. When comparing or enrolling in plans, here are some red flags to look for:

- You signed up for a plan after being told by a company that certain services or prescriptions are covered, but after enrolling, you discover they are not covered
- A company represents itself as coming from Medicare, Social Security, or Medicaid
- You receive an unsolicited phone call or text from a plan with which you have no prior relationship or have asked not to contact you
- An agent discusses other insurance products during a meeting that was scheduled to only discuss a Part D or Medicare Advantage product
- A plan agent returns uninvited to your residence after missing an earlier meeting
- You signed up for a plan after being told by a company that certain prescriptions or services were covered, but after reviewing your EOB, you found they were not covered by the plan and you received a bill instead

You should report these red flags to your Senior Medicare Patrol (SMP). If you enrolled in a plan because of misleading information, you may be able to change your plan by calling 1-800-MEDICARE. Your SMP or State Health Insurance Assistance Program (SHIP) can also help

WHO SHOULD I CONTACT WITH MEDICARE QUESTIONS?

State Health Insurance Assistance Program

(SHIP): Contact your local SHIP to further discuss the differences between Original Medicare and Medicare Advantage and which may be a better fit for you. SHIP counselors provide unbiased Medicare counseling and assistance.

Senior Medicare Patrol (SMP): Contact your SMP if you have experienced potential marketing violations or enrollment fraud and errors. SMPs empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report Medicare fraud, errors, and abuse.

Medicare: Call 1-800-MEDICARE or use the Physician Compare tool on Medicare.gov to learn which doctors participate in Medicare. You can also call or use the website’s Plan Finder tool to compare Medicare Advantage and Part D plans.

Definitions:

Premium: The monthly fee you pay to have Medicare.

Deductible: What you must pay out of pocket before Medicare starts paying for your care.

Copayment/Coinsurance: The amount you pay for each service.

Participating provider: Provider that accepts Medicare’s approved amount as full payment.

Network: Doctors, hospitals, and medical facilities that contract with a plan to provide services.





New Medicare Decision-Making Tools Now Available

By the Wisconsin SMP Team

If you or a family member are dealing with issues surrounding Medicare, you are probably aware of the complexity of the system and the effort of making informed decisions. The Senior Medicare Patrol program recognizes the wide-ranging amount of material that needs to be considered when making choices and wants to help Medicare beneficiaries sort through the information. We have created two worksheets to help you with the process.



WORKING WITH INSURANCE AGENTS ABOUT A MEDICARE PLAN

Ask the Right Questions

Use the **Ask the Right Questions** worksheet when working with an insurance agent. This tool draws attention to key questions that are fundamental to choosing a plan that meets your needs. The worksheet is meant to be filled out as you meet with an agent. You can then refer to this form when deciding later about which insurance to choose.



Comparing Medicare Coverage Options

Use the **Comparing Medicare Coverage Options** worksheet when comparing a variety of plans. This tool identifies the central components of medical coverage that are essential to picking a plan that best meets your needs. The worksheet helps you to develop side-by-side notes for easier and more efficient comparison of the plans that you are considering.



Medicare Health Care Coverage

To Navigate the Medicare Maze, Know Your Resources!

The **Navigate the Medicare Maze** list is a companion piece to the worksheets. It provides you with resources that you can call for unbiased and reliable information. We want to ensure that you have the assistance, clarity, and guidance on Medicare options and benefits, so you feel comfortable in making an informed decision that is right for you.

These forms are available to print from the SMP website: www.smpwi.org. Or if you would like to request printed copies be sent to you, please call our SMP Helpline: (888) 818-2611.

Views & Activities



SMP attended the Fond du Lac Senior Expo, along with our ADRC partners who also passed out SMP materials!

(below) SMP attended the Academy of Lifelong Learners in Eau Claire



One of the speakers at the Alzheimer's Association Meet & Greet in Eau Claire. Both GWAAR and SMP were proud to be sponsors!



Giving a Presentation



Staffing a Booth



Old School House in Wittenberg. SMP was in Wittenberg twice this spring!



Art of Aging Resource and Lifestyle Fair



Tribal Volunteer Event in Keshena



Preventing Medicare Fraud

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“Everybody can be great. Because anybody can serve. You don’t have to have a college degree to serve. You don’t have to make your subject and your verb agree to serve. You don’t have to know the second theory of thermodynamics in physics to serve. You only need a heart full of grace. A soul generated by love.”

– Martin Luther King, Jr.