

# FraudAlert!

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**Wisconsin SMP**

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• Coalition of Wisconsin Aging Groups Elder Law Center

**From the Project Director. . . . . Elizabeth Conrad**

## **Let's Get Acquainted**

**By Judy Steinke, Wisconsin SMP Volunteer Coordinator**

Russ and Dot Adams of St. Croix Falls got involved with CWAG and the SMP after a friend at their local senior center invited them to join. Research has shown that having someone you know invite you to join in a volunteer effort is one of the most successful ways to recruit new volunteers.

Russ and Dot are very active members in CWAG's District 6. Russ is currently the Vice-Chair, and Dot has been the Secretary since 2005. They are always ready, willing, and able to attend community health fairs, senior expos and meetings where they promote CWAG membership and the SMP project.

Prior to retirement, Russ was a construction laborer, and Dot was a busy homemaker raising their 7 children. They also have 14 grandchildren and 19 great-grandchildren with whom they enjoy spending time.

Russ and Dot love to travel. Upon retirement, they purchased a 5<sup>th</sup> wheel camper, which they took to Texas in the winter and lived in Wisconsin during the summer months. After making this journey back and forth for 11 years, they decided to settle in Wisconsin. Camping is still a big part of their lives, and they enjoy being members of the Good Sam Club and going camping with family members and friends.

Volunteering at their local senior center is also something that Russ and Dot do together. Every Thursday, they welcome people to the center and prepare coffee for the group. Dot also serves as the Secretary for the St. Croix Valley Senior Center.

The Wisconsin SMP and CWAG are very fortunate to have Russ and Dot on our team. Thank you so much for the work that you do in District 6!

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*Advocacy ■ Membership ■ Elder Law*

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## **Wisconsin SMP to Hold Volunteer Training in Two Rivers**

**By Kevin Brown, Wisconsin SMP Capacity Building Grant Manager/Trainer**

Wisconsin has 72 counties, 190 cities, 405 villages, and 1,259 towns. The area of our state is 56,154 square miles, which is a great deal of ground for our grassroots project to cover. Fortunately, Wisconsin SMP (Senior Medicare Patrol) has dozens of dedicated volunteers who help us spread our message of fraud prevention to Medicare beneficiaries, family members, caregivers, and professionals across the state.

On the other hand, there are a number of areas in Wisconsin where we need volunteers. For example, Wisconsin SMP would like to recruit and train new volunteers in Racine, Kenosha, and Walworth Counties. We also need SMP volunteers in several Southwestern Wisconsin counties, including Iowa, Grant, Crawford, and Lafayette. Wisconsin SMP conducts volunteer training sessions throughout the state on a regular basis. If you are interested in helping us bring an SMP volunteer training to one of the seven counties mentioned above or to your community, please contact me at (800) 488-2596, ext. 315 or [kbrown@cwag.org](mailto:kbrown@cwag.org).

The next Wisconsin SMP Volunteer Training will be held on June 21 at the Two Rivers Senior Center from 9:30 a.m. until 3:30 p.m. The workshop is open to all interested volunteers and professionals, but pre-registration is required.

SMP volunteers are concerned citizens (often retired professionals) who empower seniors to prevent healthcare fraud through outreach and education. The Wisconsin SMP Volunteer Training is an in-depth workshop that provides participants with a foundation of knowledge in three main areas: the SMP program, Medicare basics, and Medicare fraud, waste, and abuse. After they are trained, SMP volunteers make presentations to groups and/or distribute materials at community events to educate Medicare beneficiaries, caregivers, and professionals how to prevent, detect, and report healthcare fraud, waste, and abuse.

For more information about Wisconsin SMP and to download our volunteer application form, please go to [www.wisconsinsmp.org](http://www.wisconsinsmp.org).

## **Durable Medical Equipment and Medicare Fraud**

In searching for online information on the subject of “Durable Medical Equipment and Medicare Fraud,” 51,000 items pop up. With a number like that, it is easy to understand that it is a huge problem, and vital Medicare dollars are being stolen on a daily basis. The scams may be different, but the loss is still real. Estimates show Medicare loses between \$60 and \$70 billion annually due to fraud, errors, and abuse.

The New Mexico SMP recently reported a call from a client stating that someone who said they were with “National Medical Equipment Company” attempted to engage her in conversation about a back brace and other durable medical equipment. During the course of the conversation, the client provided her Medicare number. Once the crooks have an individual’s Medicare number, they can bill Medicare for services never received and equipment never delivered. Also, if someone’s Medicare number has been used to bill for things they never received, it can create errors in their medical history records that could deny covering those items when they might actually need them. Finally, in most cases, one’s Medicare number is the same as one’s Social Security number, so identity theft could become an issue.

Be smart! If someone calls and states that they need your Medicare or Social Security number – hang up and report the call to your local authorities. You could try to get the caller’s name and phone number prior to hanging up, but in most cases neither will be valid.

## **Former Waukesha County Employee Guilty of Stealing Meal Site Donations**

Kham Sisaleumsak, of Waukesha, was convicted of stealing more than \$300,000 donated by senior citizens for their meals at nutrition sites over six years. A former Waukesha County account clerk, Sisaleumsak told authorities she gambled away the money. She was charged in February 2010 with 13 counts of felony theft in a business setting. Sisaleumsak pleaded guilty to nine counts. The remaining four counts were dismissed as part of the plea agreement, but the judge will consider them when sentencing Sisaleumsak on June 13.

Waukesha County Assistant District Attorney Mary C. Brejcha said the state will ask the court to impose eight years in prison and 14 years of probation, consecutive to the prison term. The state will also ask that the ex-account clerk be ordered to pay restitution.

Sisaleumsak was responsible for reconciling bank statements of 12 different checking accounts, accounts into which each meal site manager would make daily deposits of collected donations. After a supervisor opened a bank statement in Sisaleumsak’s absence, the supervisor found a check made out to Sisaleumsak with the same supervisor’s forged signature. Sisaleumsak was confronted and said she had written two checks for a total of \$1,350 and was fired. She had told county officials she couldn’t repay the money because she had gambled it away.

The county conducted an investigation in December 2009 and found that 278 checks totaling \$303,053 were forged between 2002 and 2009. In early 2010, the county reported that the total amount of the forged checks had reached \$360,000.

Sisaleumsak made \$36,899 a year. She had worked for the county’s Department of Aging as an account clerk since July 1990 and had been employed by the county since 1988.

*Source: Milwaukee Journal Sentinel (4/22/2011)*

*Reprinted with permission from the Wisconsin Department of Agriculture, Trade and Consumer Protection*

## **Consumer Protection Announces 2010 Top Complaints**

May 24, 2011

MADISON – For the eighth year in a row, no call violations top the list of consumer complaints released today by the Wisconsin Department of Agriculture, Trade and Consumer Protection. Consumers filed 2,240 telemarketing complaints in 2010.

“More than two million Wisconsin consumers have said ‘no’ to intrusive and unwanted telemarketing calls by signing up for the state’s No Call List,” said Sandy Chalmers, Administrator of the Division of Trade and Consumer Protection. “Residential consumers can register their phone numbers – including cell numbers – by calling 1-866-9NOCALL or online at [nocall.wisconsin.gov](http://nocall.wisconsin.gov).”

Once again, landlord/tenant issues took the second spot on the complaint list, with 1,696 written complaints filed in 2010. Security deposit and lease provision disputes made up the largest portion of these complaints.

Telecommunications retained the number three position on the list with 1,423 complaints.

“Review your phone and cable bills carefully and question any charges you are unsure about,” added Chalmers. “Read the fine print and make sure you fully understand your responsibilities before entering into any sort of service agreement. When you are uncertain about something, ask.”

Home improvement issues moved up one spot from 2009 to the fourth most common complaint in 2010.

“Consumers can lose thousands of dollars on home improvements,” Chalmers said. “Protect yourself by getting everything you want and agree to it in writing, and insist on receiving lien waivers when payments are made. Before you sign a contract, contact the Bureau of Consumer Protection to see if there are complaints against a contractor.”

Issues with satellite dish services come in number five on the list. Billing disputes and misrepresentations about cost were the primary problems reported in this category.

Rounding out the “Top 10” in 2010 are motor vehicle sales (6); motor vehicle repair (7); travel/tourism (8); mail order sales (9); collection agency (10).

“In 2010, Consumer Protection provided information to more than 150,000 Wisconsin consumers and businesses on how to identify, stop, and avoid fraud,” concluded Chalmers. “Consumer knowledge is the best defense against fraud.”

For more consumer information, or to file a consumer complaint, visit the Bureau of Consumer Protection’s website at [datcp.wi.gov](http://datcp.wi.gov); via e-mail at [datcp hotline@wisconsin.gov](mailto:datcp hotline@wisconsin.gov); or call toll-free at 1-800-422-7128.

## **May is Older Americans Month**

As a result of a meeting with the National Council of Senior Citizens, President John F. Kennedy first designated May in 1963 as Senior Citizens Month. Every President since has issued a formal proclamation during or before the month of May asking the entire nation to pay tribute to older persons in their communities. In 1980, President Jimmy Carter’s proclamation changed the name to Older Americans Month.

The theme of this year’s Older Americans Month is *Older Americans: Connecting the Community*. You can learn about this year’s activities by visiting <http://www.olderamericansmonth.org/>.

When Older Americans Month was established in 1963, only 17 million living Americans had reached their 65th birthday. About a third of older Americans lived in poverty. Now, the number of people 65 and older in the United States (as of July 1, 2009) is 39.6 million, accounting for 13 percent of the total population. Here are some other interesting statistics from the 2010 census count, compiled as part of the U.S. Census Bureau's *Facts for Features* highlight for Older Americans Month, May 2011:

**88.5 million**

Projected population of people 65 and older in 2050.

**545 million**

Projected 2011 midyear world population of people 65 and older. The percentage of the world's population 65 and older is projected to increase from about 8 percent to about 17 percent from 2011 until 2050.

**35**

The projected number of people 65 and older to every 100 people of traditional working ages (ages 20 to 64) in 2030, up from 22 in 2010\*. This time period coincides with the time when baby boomers are moving into the 65 and older age category.

**42%**

The percentage of the 65 and older population expected to be a minority – i.e., a group other than single race, non-Hispanic white – in 2050, more than double the percentage in 2010 (20 percent)\*.

**8.9%**

Poverty rate for people 65 and over in 2009, down from 9.7 percent in 2008. There were 3.4 million seniors in poverty in 2009, down from 3.7 million the previous year.

**9 million**

Estimated number of people 65 and older who were veterans of the armed forces in 2009.

**6.5 million**

Number of people 65 and older who were in the labor force in 2009. Projections indicate that by 2018, the number will reach 11.1 million.

**55%**

The percentage who worked full-time among people 65 or older who were employed in 2009.

**16%**

Percentage of people 65 and older in the labor force in 2009.

**77%**

Proportion of people 65 and older in 2009 who had completed high school or higher education.

**20%**

Percentage of the population 65 and older in 2009 who had earned a bachelor's degree or higher.

**70%**

Percentage of citizens 65 and older that reported casting a ballot in the 2008 presidential election. Along with those 45 to 64, people 65 and older had the highest turnout rate of any age group.

**81%**

Percentage of householders 65 and older who owned their homes as of 4th quarter 2010.

**5.6 million**

The number of people 85 and older in the United States on July 1, 2009.

**71,991**

Estimated number of centenarians in the United States on Dec. 1, 2010.

**601,000**

Projected number of centenarians in the United States in 2050.

**4.1 million**

Number of people 65 and older living in California on July 1, 2009, the highest total of any state. Florida, with 3.2 million, and New York, with 2.6 million, were the runners-up.

\*The figures for 2010 are not census counts

*Sources:*

[http://www.census.gov/newsroom/releases/archives/facts\\_for\\_features\\_special\\_editions/cb11-ff08.html](http://www.census.gov/newsroom/releases/archives/facts_for_features_special_editions/cb11-ff08.html) and [http://www.aoa.gov/aoaroot/press\\_room/observances/oam/archive/archive.aspx](http://www.aoa.gov/aoaroot/press_room/observances/oam/archive/archive.aspx)

## **How Long Will You Live?**

Northwestern Mutual Life Insurance Co. has developed a 13-question lifespan calculator that it hopes will help people find ways to live longer. The calculator begins with your current age, then adds or subtracts years from your projected lifespan. The calculator takes into account such details as whether a person is overweight, smokes, buckles his/her seatbelt, exercises regularly, and the amount of fruits and vegetables consumed on a daily basis. The calculator allows you to go backwards to change an answer, to see how it could positively or negatively affect your lifespan. You can try the lifespan calculator online at <http://media.nmfn.com/tnetwork/lifespan/>.

*Source:* Milwaukee Journal Sentinel (3/21/2011)

## **Trustees: Medicare Funding Secure Until 2024**

The federal government released a report on May 13 that predicts that Medicare's largest trust fund will run out of money in 2024, five years earlier than was projected last year. Social Security, on the other hand, will not exhaust its funds until 2036, according to an annual report by trustees who oversee both programs.

Medicare provides health care for nearly 50 million elderly and disabled Americans. "Americans are living longer, and health care costs are continuing to rise. And if we do not do more to contain the rate of growth in health care costs, then our commitments will become unsustainable," said Treasury Secretary Timothy Geithner, who chairs the board of trustees. Medicare's financial problems are also a result of the weaker economy.

Republicans and Democrats, who have repeatedly figured out ways to preserve Medicare and Social Security over the last several decades, have different ideas on how to address the problem.

House Republicans last month approved a plan that would essentially privatize Medicare starting in 2022. Seniors would receive vouchers to shop for private insurance plans. The plan would save the federal government billions, in large part by shifting the cost to seniors, who would pay nearly twice as much as they do currently. The nonpartisan Congressional Budget Office estimates seniors would pay more than \$12,510 a year in 2022 if the House Republican plan were adopted.

The Obama administration and its Democratic congressional allies prefer to impose a series of initiatives that would slow the growth of health care costs while also improving the quality of medical care (e.g., the initiative that is described in the next article of this publication: “Medicare to Reward Hospitals for Quality Health Care”).

The trustees report suggested such efforts would slow the growth of Medicare costs by 25 percent over the next 75 years. But there is widespread recognition that this would not do enough. “Even if the recent legislation’s cost-saving measures are sustainably implemented, Medicare will still experience a financing shortfall,” stated two of the public trustees in a message separate from the report.

*Source:* Wisconsin State Journal (5/14/2011)

## **Medicare to Reward Hospitals for Quality Health Care**

On April 29, the Obama administration finalized its plans to reward hospitals that provide high-quality care to consumers. Under this new initiative, one of several authorized in the Affordable Care Act, Medicare will pay more to medical institutions that score well on a series of measures that estimate the quality of patient care and will pay less to those that don’t meet the quality standards.

Although it is common among many industries to determine compensation based on reaching quality benchmarks, it is a new approach for many of the nation’s hospitals. It is also a strategy Medicare has never used before on a regular basis.

Many consumer advocates see this kind of initiative as important not only because it could improve medical care, but also because it helps control costs. “Today’s payment system is riddled with perverse incentives that reward volume and high profit margin services, regardless of value, outcomes or appropriateness,” said Christine Bechtel, head of the Campaign for Better Care. “This rule is a much needed effort to begin attacking this problem at its root.” (To learn more about the Campaign for Better Care, please visit [http://www.nationalpartnership.org/site/PageNavigator/cbc\\_index](http://www.nationalpartnership.org/site/PageNavigator/cbc_index).) The Obama administration also sees it as a way to help programs like Medicare and Medicaid balance their budgets.

There is evidence mounting that shows that tens of thousands of patients receive poor care, which can drive up health care costs by requiring additional treatments and re-hospitalizations. One recent study published in the journal *Health Affairs* estimated that 1 in 3 hospital patients experienced an “adverse event” such as acquiring an infection, receiving the wrong surgical procedure, or being given the wrong medication.

Hospitals that fall short of the new standards could lose as much as 1% of what Medicare would pay them in 2013. While this is a relatively small penalty for an industry that receives more than \$150 billion a year from the government for treating Medicare patients, the stakes could become significant as the government moves to implement its full series of quality initiatives.

Medicare provides insurance to nearly 50 million elderly and disabled Americans and paid for 12.4 million hospitalizations in 2009, according to the Centers for Medicare and Medicaid Services.

**CWAG runs Wisconsin's Blue Ribbon Citizen Task Force on Patient Centered Care.** To learn about how you can get involved in Wisconsin, visit <http://cwagwisconsin.org/programs/wi-campaign-for-better-care/>

*Sources:* Milwaukee Journal Sentinel (4/29/2011) and Wisconsin State Journal (4/30/2011)

## **Medicare-Medicaid “Dual Eligibles”**

According to the Centers for Medicare and Medicaid Services, there were 9.2 million individuals eligible for both the Medicare and Medicaid programs in 2008. “Dual eligibles,” a term coined for Medicare-Medicaid enrollees, are among the most chronically ill and costly individuals enrolled in the two programs. Many dual eligibles have a number of chronic conditions and/or long-term care needs. Forty-three percent of Medicare-Medicaid enrollees have at least one mental or cognitive impairment, and 60 percent have multiple chronic conditions. Nineteen percent live in institutional settings compared to only three percent of Medicare beneficiaries who are not eligible for Medicaid. More than half of Medicare-Medicaid enrollees have incomes below the poverty level compared with eight percent of other Medicare beneficiaries. Dual-eligibles must navigate two separate programs: Medicare for coverage of basic acute health services and drugs, and Medicaid for coverage of long-term care supports and services, and help with Medicare premiums and cost-sharing.

Dual eligibles account for a disproportionately large share of expenditures in both the Medicare and Medicaid programs. They comprised 16 percent of Medicare enrollees in 2006 and represented 27 percent of Medicare spending. In 2007, they made up only 15 percent of Medicaid enrollees but accounted for 39 percent of Medicaid expenditures.

There were 215,227 dual eligibles in Wisconsin in 2007 according to statistics from the [www.statehealthfacts.org](http://www.statehealthfacts.org) website. They comprised 22 percent of the total Medicaid enrollment in the state, and they represented 55 percent (over \$2.7 billion) of the total Medicaid expenditures. The Wisconsin Medicaid program spent \$14,542 per person for dual-eligibles compared to \$2,123 per person for non-disabled adults.

*Sources:* Centers for Medicare and Medicaid Services and [www.statehealthfacts.org](http://www.statehealthfacts.org)

## SMP & CWAG Activities

Date	Activity	County
May 2	25 <sup>th</sup> Annual State Alzheimer's Conference-Wisconsin Dells	Sauk
May 3	SMP Presentation-River Falls Hospital Auxiliary Luncheon-River Falls	Pierce
May 3	SMP Presentation to Women's Group-Shawano County Pavilion	Shawano
May 3	SMP Presentation at the Shawano Public Library	Shawano
May 4	RSVP Meeting-WI Volunteer Coordinators Conference-Milwaukee	Milwaukee
May 4	SMP Volunteer Foundations Training-Madison	Dane
May 5	9 <sup>th</sup> Annual Renaissance Experience Expo 2011-Janesville	Rock
May 5-6	Wisconsin Volunteer Coordinators Conference-Milwaukee	Milwaukee
May 9	Wesleyan Church SMP Presentation-Eau Claire	Eau Claire
May 10	SMP Presentation-Milwaukee Jewish Men's Club	Milwaukee
May 11	2 <sup>nd</sup> Annual Wisconsin Women's Health Policy Summit-Madison	Dane
May 19	Vital Aging Conference Booth-La Crosse	La Crosse
May 20	6 <sup>th</sup> Annual Multicultural Senior Health Fair Booth-Madison	Dane
May 21-22	CWAG Annual Convention-Madison	Dane
May 25	Manitowoc County Health Fair-Manitowoc	Manitowoc
May 26	Neenah-Menasha Kiwanis group presentation	Winnebago
June 1	SMP Volunteer and Professional Partner Luncheon-Eau Claire	Eau Claire
June 3-4	SMP Booth-Supermarket of Veterans Benefits-Green Bay	Brown
June 7	SMP Presentation-Menomonee Falls Library	Waukesha
June 8	SMP Volunteer and Professional Partner Luncheon-Rhineland	Oneida
June 14	9 <sup>th</sup> Annual Ozaukee County Senior Conference-Grafton	Ozaukee
June 15	SMP Volunteer and Professional Partner Luncheon-Madison	Dane
June 21	SMP Foundations Volunteer Training-Two Rivers	Manitowoc
June 22	SMP Volunteer and Professional Partner Luncheon-Appleton	Outagamie
June 23	Preventing Elder Fraud-Froedtert Health Community Memorial Hospital	Waukesha
July 12-14	Wisconsin Farm Technology Days-Marshfield	Marathon
July 13-17	La Crosse County Interstate Fair-West Salem	La Crosse
August 9-11	National SMP (Senior Medicare Patrol) Conference-Washington DC	
September 21	Presentation-Kelly Senior Center-Cudahy	Milwaukee
October 11	23 <sup>rd</sup> Colloquium on Aging Conference & Health & Resource Fair	Dane

**We are always looking for opportunities to support our colleagues in the aging network. Please contact Wisconsin SMP and let us know about your upcoming 2011 activities.**

## FRAUD ALERT – ELECTRONIC VERSION

In previous issues, we told you that Wisconsin SMP *Fraud Alert* will be sent electronically unless we receive a “request for a paper copy” from you.

Contact Patti Wiersma at [pwiersma@cwag.org](mailto:pwiersma@cwag.org),  
giving her your e-mail address,  
to add to our list.

Your cooperation is greatly appreciated.

Check out the new Wisconsin SMP web site  
[www.wisconsinsmp.org](http://www.wisconsinsmp.org)

You Can also Access Our Publication by visiting our new web site [www.wisconsinsmp.org](http://www.wisconsinsmp.org)  
Or you can visit the Coalition of Wisconsin Aging Groups web site [www.cwag.org](http://www.cwag.org)  
Click on Publications then click on Wisconsin Senior Medicare Patrol (SMP) and scroll down  
and click on the edition you wish to view.

## ATTENTION: All of you with E-mail...

In an effort to save paper, postage and be “volunteer friendly,” we will E-mail issues of the *Fraud Alert* to those who have E-mail. Please contact Patti Wiersma at [pwiersma@cwag.org](mailto:pwiersma@cwag.org), giving her your e-mail address to add to our list. **WE DO SUGGEST THAT YOU PRINT EACH ISSUE AND SAVE IT IN YOUR MEDICARE BINDER FOR FUTURE USE. Thank you!**

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