



SMP Program Q and A

Who are the SMPs?

Senior Medicare Patrol programs, or SMPs, help Medicare and Medicaid beneficiaries prevent, detect and report health care fraud. They not only protect older persons, they also help preserve the integrity of the Medicare and Medicaid programs. Because this work often requires face-to-face contact to be most effective, SMPs nationwide recruit and train nearly 4,500 volunteers every year to help in this effort. Most SMP volunteers are both retired and Medicare beneficiaries and thus well-positioned to assist their peers.

SMP staff and their highly trained volunteers conduct outreach to Medicare beneficiaries in their communities through group presentations, exhibiting at community events, answering calls to the SMP help lines and one-on-one counseling. Their primary goal is to teach Medicare beneficiaries how to protect their personal identity, identify and report errors on their health care bills and identify deceptive health care practices, such as illegal marketing, providing unnecessary or inappropriate services and charging for services that were never provided.

In some cases, SMPs do more than educate: When Medicare and Medicaid beneficiaries are unable to act on their own behalf to address these problems, the SMPs work to address the problems, making referrals to CMS contractors, state attorney general's offices, local law enforcement, State Health Insurance Assistance Programs, state insurance divisions and other outside organizations that are able to intervene.

What is the background of the program?

In 1995, the Administration on Aging (AoA) became a partner in a government-led effort to fight fraud, error and abuse in the Medicare and Medicaid programs through the implementation of a ground-breaking demonstration project called Operation Restore Trust (ORT). ORT's purpose was to coordinate and target federal, state, local and private resources on those areas most plagued by abuse. Operation Restore Trust was announced at the 1995 White House Conference on Aging.

During its demonstration phase, ORT returned \$23 for every \$1 spent looking at the fastest-growing areas of Medicare fraud, including home health care, skilled nursing facilities and providers of durable medical equipment. This comprehensive anti-fraud initiative began in five states: California, Florida, Illinois, New York and Texas. It created a partnership in the Department of Health and Human Services between the Centers for Medicare & Medicaid Services, the Office of Inspector General and the Administration on Aging, which continue to work as a team in a coordinated anti-health care fraud effort at the local, state and national levels.

AoA became a key player in the fight against fraud through the enactment of P.L. 104-209, the Omnibus Consolidated Appropriations Act of 1997. Language in this legislation, offered by Senator Tom Harkin (D-IA), was adopted, directing the AoA to establish demonstration projects that utilize the skills and expertise of retired professionals in identifying and reporting error, fraud and abuse.



Based on the success of the demonstration projects, the SMP program has grown to 54 projects, including every state and the District of Columbia, Puerto Rico, Guam and the Virgin Islands. Under Title IV of the Older Americans Act, approximately \$10 million in grants was provided during FY 2009.

Tell me about SMP volunteers.

The SMP program provides an opportunity for seniors to step up and make an impact in the fight against fraud. The dedicated corps of SMP volunteers makes a difference. In 2009, the SMP projects had a total of 4,444 active volunteers.

SMP projects recruit and train retired professionals and other senior citizens. These volunteers work in their communities, senior centers and elsewhere to educate Medicare and Medicaid beneficiaries, family members and caregivers to actively protect themselves against fraudulent, wasteful and abusive health care practices.

Since 1997 more than 23.8 million people have been reached during community education events, more than 2.8 million beneficiaries educated and more than 19,400 volunteers have been active. Total savings to Medicare, Medicaid, beneficiaries and other payers attributed to the SMP projects is \$106 million. (Source: May 2010 OIG Performance Report)

www.smpresource.org

How can people volunteer?

Protecting older persons from criminals and saving precious health care dollars at the same time is a mission that attracts many civic-minded Americans. People wishing to volunteer for this cause can find their state SMP contact person on the homepage of www.smpresource.org. The SMP will match volunteers with a task that fits their time and interest. Volunteers can work with individual beneficiaries to review Medicare Summary Notices for accuracy, make presentations to groups about how to avoid getting taken by scam artists, help at an SMP exhibit at community health fairs and more.

What are examples of fraud and waste seen by SMPs?

- Equipment or insurance plan providers tricking senior center participants into giving up their personal information (including Medicare numbers) on “sign-in” sheets
- Medicare Summary Notices showing billing for services or supplies that were never provided
- Equipment suppliers providing expensive “scooter” wheelchairs not ordered by a physician or needed by the beneficiary
- Luring beneficiaries into providing their Medicare number for “free” services, then billing Medicare
- Kickbacks—paying beneficiaries to receive service from a particular provider or company

Where can I learn more?

Go to www.smpresource.org for detailed information about fraud and abuse as well as the SMP program.