Volume 4 2011

State of Michigan Employees

For Your Benefit

provides a variety of timely information related to your health care benefits and needs

Safeguard against health care fraud

Millions of people are taken in each year by health care fraud. Health care fraud is a serious business in the U.S. — and a serious crime. Estimates put the amount lost to health care fraud at between 3 and 10 percent of overall health care spending — between $68 billion and $226 billion. With health care costs on the rise, the price tag for fraud is likely to climb unless efforts to combat it are successful.

For consumers, health care fraud adds up to higher premiums and out-of-pocket costs and reduced benefits and coverage. Fraud also hurts employers by driving up the costs of providing benefits to employees and increasing the cost of doing business.

The variety of health care fraud is vast. Common examples include:

- Using an expired or fraudulent identification card to obtain medical services or medications
- Lending an ID card to someone who is not entitled to it
- Adding someone who is not eligible for coverage to a contract
- Providers who bill for services never rendered
- Performing medically unnecessary services to receive payment from insurers
- Billing for more expensive services or procedures than were actually provided
- Accepting kickbacks for patient referrals

Here are a few tips to help you protect yourself.

- **Don't divulge information —** Treat your insurance card like a credit card and don't give out information to solicitors.
- **Ask questions —** Ask your doctor about the costs for the services, tests or treatments you receive and why they are being administered.
- **Nothing is free —** Beware of any offer for a "free" service. Often there are other charges for services you didn't actually receive.
- **Beware of "copayment waiver" —** Dishonest health care providers may bill for inflated costs when they waive your copayment.
- **Get a second opinion —** If the service, treatment or test seems unreasonable, get a second opinion before rushing into something.
- **Keep track of medical visits —** Be vigilant and keep track of all your doctor appointments, tests and procedures. If the services listed on your Explanation of Benefit Payments statement doesn't match your records, immediately contact your BCBSM State of Michigan Customer Service Center at 1-800-843-4876.

If you suspect health care fraud, call the BCBSM Anti-Fraud Hot Line at 1-800-482-3787 or go to **bcbsm.com** to complete an online form.

BCBSM's Fraud Unit is working to protect you

Here's what we've done

The following data represents BCBSM's fraud investigation unit activity from	***July 1980 to September 2011***
Cases opened	40,276
Cases closed	38,416
Referred for recovery/cost savings	$298,973,188.24
Law enforcement referrals	3,888
Warrants issued	2,936
Arrests	2,791
Convictions	2,316

Many cases handled by BCBSM's fraud investigation unit result in further action by law enforcement agencies. The unit coordinates investigations with the Federal Bureau of Investigation, Drug Enforcement Administration, the Office of Inspector General for the U.S. Department of Health and Human Services, Michigan State Police and local police departments. It also assists with state and federal prosecutions.

Eat better for a better life

A healthy lifestyle is made up of lots of small choices. Below are a few ways you can improve your eating habits by choosing to do things just slightly differently.

If you normally...	Try this instead!
Use whole or 2% milk	Use fat free milk
Drink soda	Drink diet soda or 100% juice
Eat lusciously sweet desserts	Eat juicy fruit for dessert
Have second helpings	Put the food away as soon as you serve it so you won't be tempted
Eat big portions	Use a smaller plate
Eat white bread or pasta	Go for a variety of whole-grain foods
Use butter	Try oils low in saturated fats
Eat fast food on the road	Pack fruit and veggies for car rides
Eat red meat	Prepare lean cuts of beef or pork, skinless chicken or turkey, or fish
Snack on chips and junk food	Keep fruits and veggies in the fridge to munch on
Skip breakfast	Grab a bagel, some peanut butter, some fruit or a cup of yogurt on your way out of the door
Fry your food	Grill or roast your food

Source: United State Dept. of Health and Human Services

When a cure isn't possible, care is

Medical advances have found ways to treat or cure many illnesses that were previously terminal. Still, there are cases where treatment can neither cure nor improve a patient's condition. For these patients, hospice may be an alternative.

Hospice is a voluntary program of care for terminally ill patients. The patient or his or her family decides when to enter the program, and may withdraw at any time to resume aggressive medical treatment.

The program focuses on comfort, or "palliative," instead of "curative" care intended to prolong life. The care seeks to relieve the symptoms of the terminal illness. The hospice approach embraces the physical, emotional and spiritual needs of the patient and the patient's family. The patient's primary physician, along with the hospice physicians, nurses, home health aides, social workers, speech-language pathologists and counselors form the hospice team. They provide a customized plan of care, and are on-call 24 hours a day, seven days a week to give the patient and the family support and care.

Your hospice benefit

Hospice services must be provided by a BCBSM- or Medicare-participating hospice program. Services are payable for four 90-day periods. Written statements and certifications are required. Covered benefits for conditions related to the terminal illness are not in force while hospice benefits are being used. Benefits for conditions not related to the terminal illness remain in effect to keep the patient as comfortable as possible.

Pre-hospice counseling

Before electing hospice care services, the patient and his or her family are eligible to receive counseling, evaluation, education and support services from the hospice staff. These services are limited to 28 visits.

Types of care

The hospice program offers several types of care:

- Routine home care which includes counseling, home health aid and physical therapy for less than eight continuous hours per day.
- Continuous home care during crisis periods for care provided eight or more hours per day.
- Inpatient respite care provides short-term inpatient services to allow the patients' home-care providers short periods of relief.
- General inpatient care provides pain control or acute or chronic symptom management that cannot be provided in other less-intensive settings.

Benefit limitations

Hospice care is intended for patients with six months or less to live if the terminal illness runs its normal course. Hospice services are payable for four 90-day periods. At the start of each period, the hospice medical director or other hospice doctor must recertify that the patient is terminally ill.

While there is no deductible or copayment for covered hospice benefits, there is a dollar maximum that's adjusted annually by the state of Michigan. Other limitations apply. Please call the BCBSM State of Michigan Customer Service Center at 1-800-843-4876 for details.

Hospice care is health care for patients at the end of life. The services treat the patient's symptoms while providing support for the family. For more information on hospice care, contact the BCBSM State of Michigan Customer Service Center.

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State of Michigan Employees

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How to reach us

For benefit information or claim inquiries, call or write the BCBSM State of Michigan Customer Service Center.

To call

1-800-843-4876

Our customer service representatives are available from 8 a.m. to 6 p.m. Monday through Friday excluding holidays.

To write

Please send all correspondence to:
State of Michigan Customer Service Center
Blue Cross Blue Shield of Michigan
232 S. Capitol Avenue L04A
Lansing, MI 48933-1504

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