

MEDICARE MATTERS

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MEDICARE 2003 NATIONAL MULTI-MEDIA CAMPAIGN



The Centers for Medicare & Medicaid Services (CMS) will launch the multi-media element of its national education campaign during the first week in November. The multi-media campaign will reinforce Medicare as an important source for health care information.

The core campaign goals are to build awareness of **1-800-MEDICARE** as an official information source and to get beneficiaries and caregivers to call **1-800-MEDICARE** with their questions about Medicare. The general market campaign will consist of national television and Internet advertising. The campaign will also include Spanish language national television, radio, print, and Internet advertising. A publicity/promotion campaign will be implemented to leverage the national advertising efforts to promote **1-800-MEDICARE**.

The **1-800-MEDICARE** general market television spot will air in two test markets from late September through early October. Based on feedback from the market test, we will make any necessary changes to the advertisement prior to national implementation. The national multi-media education campaign will run this Fall for the **1-800-MEDICARE** message and extend into 2004 with plans to promote a potential Medicare drug discount card, pending legislative passage.

DHHS QUALITY INITIATIVE



Quality health care for people with Medicare is a high priority for President Bush, the Department of Health and Human Services, and the Centers for Medicare & Medicaid Services (CMS). We are committed to assuring quality health care for all Americans. Under Secretary Thompson's leadership, CMS has developed the **Quality Initiative**. The initiative aims to (a) empower consumers with quality of care information to make more informed decisions about their health care, and (b) stimulate and support providers and clinicians to improve the quality of health care they provide. The **Quality Initiative** was launched nationally in November 2002 for nursing homes (the Nursing Home Quality Initiative) and will be expanded in 2003 to the nation's home health care agencies (the Home Health Quality Initiative) and hospitals (the Hospital Quality Initiative).

Through the quality improvement efforts, consumers have access to expanded health care quality performance information available at the CMS consumer web site, **www.medicare.gov**. Consumers can use the quality information to be better informed when making important health care decisions about nursing homes, home health agencies, and hospitals.

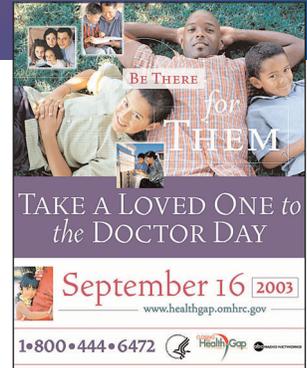
As part of the initiative, **Medicare's Quality Improvement Organizations (QIOs)** provide assistance to consumers in helping them better use the quality information, as well as work with local nursing homes, home health agencies, and hospitals to improve the quality of care.

For more information on the **Quality Initiative**, visit **www.cms.hhs.gov/quality/**.

TAKE A LOVED ONE TO THE DOCTOR DAY

"Take A Loved One to the Doctor Day" is an opportunity to take initiative in your community to address racial and ethnic disparities in health. It is part of the **U.S. Department of Health and Human Services' Closing the Health Gap** information and education campaign, which focuses on major areas in which racial and ethnic minorities experience serious disparities in health access and outcomes, some of which include diabetes; heart disease and stroke; cancer; infant mortality; child and adult immunization; and HIV/AIDS.

Regular health care, including preventive care, can enhance and extend the lives of the individuals living in your community. By using *"Take A Loved One to the Doctor Day"* as a launching point, you can play an essential role in encouraging people to visit a health professional—or at least make an appointment to visit one. For more information on **Closing the Health Gap** and minority health information, visit www.healthgap.omhrc.gov/ or call **1-800-444-6472**.



SEPTEMBER IS NATIONAL FLU/ PNEUMONIA MONTH



Each year CMS conducts a consumer information campaign to make people with Medicare aware that Medicare Part B covers influenza immunizations. In addition, the campaign actively promotes

the use of the pneumococcal vaccination among beneficiaries (covered since 1981).

CMS, with its national partners, design and implement culturally sensitive and appropriate interventions to address those areas of need, with the ultimate goal being to increase the rate of immunizations among the Medicare population.

For more information on our **Influenza/ Pneumococcal Campaign**, visit www.cms.hhs.gov/preventiveservices.

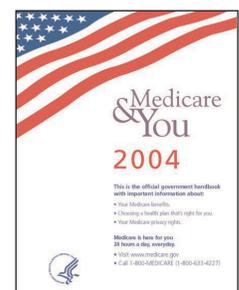
OCTOBER IS NATIONAL BREAST CANCER AWARENESS MONTH

The **Centers for Medicare & Medicaid Services' (CMS)** national effort works to educate women about breast cancer screening and Medicare's annual screening mammography benefit. Physicians and other clinicians are also targeted to improve their recommendation of breast cancer screening. More information about the **National Medicare Mammography Campaign**, including a six issue/year internet-based newsletter, *"Not Just Once,"* can be found on the web at www.cms.gov/preventiveservices/1a.asp.



2004 HANDBOOK MAILING

The area-specific versions of *Medicare & You 2004* will be mailed to 50% of beneficiary households on October 24, and the remaining 50% on October 31. Copies for partners who pre-ordered *Medicare & You 2004* will be shipped on October 15. The national version will be available for order after October 10, 2003. Call **1-800-MEDICARE (1-800-633-4227)** to request up to 25 copies, or fax an order to **410-786-1905** for more than 25 copies.



SEPTEMBER IS THE TIME TO PREPARE TO FIGHT THE FLU



COVERAGE CLIPBOARD

During the flu season, CMS issues educational material to assist professionals and information intermediaries with their questions about Medicare coverage for immunizations. The *2003-04 Immunizers' Question & Answer Guide to Medicare Coverage of Influenza and Pneumococcal Vaccinations* includes information on the vaccination benefit, immunization guidelines, coverage policy, payment policy, mass immunization, centralized billing, and managed care. CMS also provides **Step-by-Step Instructions** and a **Video** explaining how to bill Medicare (roster or provider) for these vaccinations. For more information and to access these materials, please visit www.cms.hhs.gov/preventiveservices.

COVERAGE CRITERIA

Q. WHAT ARE MEDICARE'S COVERAGE CRITERIA FOR FLU VACCINATIONS?

A. Effective for services performed on or after May 1, 1993, Medicare will pay for flu virus vaccines and their administration. Generally, only one flu virus vaccination is medically necessary per year. Medicare beneficiaries may receive the vaccine once each flu season without a physician's order and without the supervision of a physician. However, state laws regarding who can administer vaccines still apply. The Medicare Part B deductible and coinsurance do not apply. Additional vaccination may be covered if medically necessary.

Q. WHAT ARE MEDICARE'S COVERAGE CRITERIA FOR PNEUMOCOCCAL POLYSACCHARIDE VACCINE (PPV) VACCINATIONS?

A. Effective for services performed on or after July 1, 1981, Medicare began paying for PPV and its administration. Typically, this vaccine is administered once in a lifetime except for persons at highest risk.

Effective for claims with dates of service on or after July 1, 2000, Medicare no longer requires the PPV to be ordered by a doctor of medicine or osteopathy. However, state laws regarding who can administer vaccines still apply. Therefore, the beneficiary may receive the vaccine upon request without physician's supervision. However, state laws regarding who can administer vaccines still apply.

Medicare will only cover an initial vaccine administered to persons at high risk of pneumococcal disease. Considered at high risk are persons 65 years of age or older and immunocompetent adults who are at increased risk of pneumococcal disease or its complications because of chronic illness.



NATIONAL MEDICARE TRAINING

Did you know that CMS offers a no-cost **National Medicare Training Course**? The online course is designed for independent study, and will enhance your knowledge of the Medicare Program as it relates to beneficiaries. The classroom materials used in the national *Train-the-Trainer* workshops can be downloaded and/or printed from this site.

These materials include PowerPoint presentations (with speakers' notes), handouts, and related activities. To access the training course, please visit www.cms.hhs.gov/partnerships and select "**National Medicare Training**".



BRIGHT IDEAS TO PASS THE WORD ABOUT MAMMOGRAPHY



BRIGHT IDEAS

OCTOBER IS NATIONAL BREAST CANCER AWARENESS MONTH

Program Leaders who work as health care providers have a tremendous opportunity to boost mammography use. In one study, 94 percent of women whose physicians had recommended mammograms had obtained one in the last two years, while only 36 percent of women whose physicians had not made the recommendation had done so.

During **National Breast Cancer Awareness Month's (NBCAM)** 19-year history, Program Leaders have developed many creative ways to reach women. This section provides bright ideas to reach women in the clinic, at the workplace, and in the community. Some of these ideas may work for you or inspire new thoughts.

In 2003, NBCAM's educational campaign is entitled **"Pass the Word,"** and consists of communication initiatives to facilitate a woman's decision to engage in early detection of breast cancer. As program leaders, you can help women and the community understand the importance of a breast cancer screening, particularly regularly-scheduled mammography.

The following are just some of the NBCAM success stories:

SUCCESSSES

- October begins flu shot season. The Las Vegas chapter of the American Cancer Society with other partners reached 7,000 women who attended flu shot clinics throughout Las Vegas. Women received onsite enrollment for mammography and clinical breast exams.
- One clinic's staff wore pins that read "Ask Me About Mammography" to prompt discussions with patients and make office staff seem approachable.



- On National Mammography Day and at other times during October, members of the

American College of Radiology with mobile mammography units partner with the CDC to bring mammography to underserved neighborhoods, others provide a free first-time mammogram in October. Some mammography facilities schedule one day a week when no appointments are necessary—women can walk in the door and receive a discount.

- Y-ME National Breast Cancer Organization Affiliates travel to corporations, women's organizations, churches, synagogues, temples, and conferences to present "Adult Breast Health Awareness" workshops. The program educates women about the importance of the three-step approach of early detection, mammography, clinical breast examination (CBE), and the correct methods for practicing breast self-examination (BSE). Y-ME empowers women to take an active role in their health care.
- Church bells rang and congregations stood silent during Sabbath services on the first Saturday of National Breast Cancer Awareness Month in northern New England to heighten attention about breast cancer. The events, called "Bells and Silence for Remembrance," received good local media attention.
- A Hopi tribe in Arizona partnered with local wellness groups to sponsor a "Walk the Hopi Mesas for Breast Cancer."

You will find other ways to **"Pass the Word"** on www.nbcam.org.

BUILDING CAREGIVER COALITIONS

Mark Tuesday, September 30, 2003 on your calendars as the date for the ***“Building Caregiver Coalitions”*** satellite broadcast/webcast. The broadcast will be held from 1-3pm (ESDT).

There are four types of people: 1) Those who have been caregivers. 2) Those who currently are caregivers. 3) Those who will be caregivers. 4) Those who will need caregivers. Today, one out of every four households (22.4 million) is involved in providing help to an older person. Eighty percent of all care received by older adults is provided by family and friends. Sixty-four percent of caregivers work. About one-third of the workforce is engaged in caregiving for older or disabled loved ones and by 2008, the percentage will have increased to 54%. As the population continues to age, the number of caregivers in the workforce will grow, placing tremendous burdens on both workers and their employers. In the aggregate, employee caregivers cost U.S. industries between \$11 and 29 billion per year in lost productivity. Caregiving is a major issue confronting our country.

“Building Caregiver Coalitions” will feature a diversified 12-member panel representing caregiver organizations, coalition builders, business community representatives, and potential partners to develop strategies and share experiences in building state-focused coalitions to reach caregivers. There will be a question and answer session after the roundtable discussion to allow viewers to discuss coalition building issues with the panelists. The objective is to motivate organizations to develop, join, and sustain caregiver coalitions to help provide services and information to caregivers.

Satellite coordinates will be distributed closer to the broadcast time. Please be aware that in order to view this broadcast through satellite, you must have access to an analog steerable dish that receives a Ku- or C-band signal. Please visit www.cms.gov/partnerships closer to broadcast time for connectivity information.

For your convenience, online registration is available at www.cms.gov/partnerships or contact **Spencer Schron** at (410) 786-1075, sschron@cms.hhs.gov, or **Betty Burrier** at (410) 786-4649, bburrier1@cms.hhs.gov.



2003/2004 ENHANCEMENTS ON MEDICARE.GOV

The official U.S. Government Site for Medicare Information is at www.medicare.gov. The site currently hosts 12 search tools, and experiences at least 6 major releases each year. The following enhancements are planned for 2003/2004:

- Launch of the new Medicare Eligibility Tool
- National quality data rollout on Home Health Compare
- Release of the 2004 cost/benefit and 2002 quality data on Medicare Personal Plan Finder
- Launch the new Hospital Compare tool
- Launch of certain e-transactions for beneficiaries (i.e., looking up claims status)
- Addition of Long-Term Care information

WWW.MEDICARE.GOV

GETTING HELP WITH YOUR MEDICARE QUESTIONS

(NAPS)—Tommy G. Thompson, Secretary of Health and Human Services, answers readers' questions about Medicare.

- Q.** I have questions about my Medicare coverage. Where can I get information to answer my questions?
- A.** To help you with your Medicare questions, the Centers for Medicare & Medicaid Services (CMS), our Federal agency that runs the Medicare program, has resources that can provide you with fast, reliable and accurate information right at your fingertips. Below are three important resources to help you get the information you need:
- **1-800-MEDICARE (1-800-633-4227), 24 hours of personal assistance in English or Spanish.** This toll-free helpline is available seven days a week to help with your questions. When you call, customer service representatives are available to provide assistance. The helpline also allows you to do some things automatically, like get important phone numbers, order publications and get answers to frequently asked questions. If you use a teletypewriter (TTY), you can call 1-877-486-2048.
 - **www.medicare.gov for up-to-date, easy-to-access healthcare information.** This Web site allows you to get information and answers to your questions about your Medicare at any time. It offers many tools to help you get the information you need to make healthcare decisions that are right for you. One of these tools is the "Medicare Personal Plan Finder." It lets you compare Medicare health



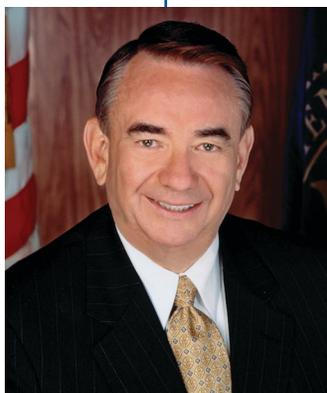
FOR PEOPLE WITH MEDICARE QUESTIONS, THERE ARE SEVERAL WAYS TO GET ANSWERS

plans and Medigap policies available in your area, out-of-pocket costs, benefits and the quality of health plan care. It helps you find the plan that's right for you. This site also provides basic information about Medicare, including what's covered, how to enroll and answers to common questions. You can search for telephone numbers of other organizations that can answer your questions. Some information on the site is available in Spanish and Chinese. Information on the site is updated regularly.

- **Medicare & You handbook, important Medicare information delivered to your door.** This handbook is mailed each fall to all people with Medicare. It provides basic information about the Medicare program, including health plan information for each state. In addition, the handbook provides information on Medicare rights and other available programs that may help pay some healthcare costs. The **Medicare & You** handbook is available in many different formats to meet the needs of all people with Medicare. You can get a copy of the handbook in English, Spanish, audiotope (English and Spanish), large print (English and Spanish) and braille.

These and other information resources are available to help you understand as much about the Medicare program as possible. CMS and I want you to have all the information you need to make important healthcare decisions.

This article is the first in a series of six. To download this article for your own local placement, and other Medicare information materials, visit www.cms.hhs.gov/partnerships/tools





REGION IV MEDICARE PARTNER NEWS

The Changing Faces of Medicare in the Southeast

There are currently over 300,000 refugees in the eight southeastern states of Region IV. Refugees have resettled in the Southeast as a result of fleeing war, civil strife, famine, and environmental disasters in their countries of origin.

Miami-Dade County, Florida and Dekalb County, Georgia is home to the majority of refugees located in Region IV. However, all of the major metropolitan areas in the six other states of the Region have experienced remarkable increases in this population. Refugees are coming to Region IV from over 50 different countries and speaking over 100 different languages according to the 2003 International Rescue Committee.

Refugees who are elderly or disabled receive Social Security benefits, the same as U.S. citizens. However, recent changes by Congress limits the eligibility of non-citizens to their first seven years in the United States. Time limits do not apply for non-citizens once they become U.S. citizens.

This new changing face of Medicare as represented by the refugee population now resettling in the eight states of Region IV offers CMS and its partners an invaluable opportunity to discover and serve the many cultural diverse senior citizens of our regional communities. The variety of available resources for refugees in the Southeast may be a conduit for the establishment of partnerships in reaching this new audience of seniors.

For more information on refugees resettling in Region IV, contact the Office of Refugee Resettlement at www.acf.hhs.gov/lprograms/orr.

New Demonstration Project Available for Medicare Seniors Who Smoke

The new CMS sponsored **“Medicare Stop Smoking Program”** is now available for seniors with Medicare who smoke and desire to quit. In CMS Region IV, only seniors living in Alabama and Florida may currently participate. This Department of Health and Human Services program is designed to study approaches for helping seniors to stop smoking. As a part of the demonstration project a variety of “quit smoking” services are offered. These services may include counseling, “quit smoking” alternatives such as the nicotine patch, special consumer booklets and a telephone information line staffed by professional counselors.

The **“Medicare Stop Smoking Program”** is a great way for seniors in the demonstration project states to take control of their own health and quality of life. Seniors who are interested in quitting smoking may join the program from now until September 30, 2003.

Medicare participants interested in participating must: be 65 years or older; have Medicare Part B coverage; be in the Medicare fee-for-service program; live in Alabama or Florida; and be a cigarette smoker who is thinking about quitting.

Smoking is the single most preventable cause of disease and death in the United States. It can cause and worsen many conditions including heart attacks, strokes, lung disease, high blood pressure, cancer and complications from diabetes. Reports show that the body can enjoy immediate benefits from quitting, even after 30 or more years of heavy smoking. These benefits include improvements in breathing and circulation. In fact, seniors can reduce their risks for heart disease and stroke to that of a non-smoker’s within one to five years of quitting. Also, older smokers have been shown to be more successful in their attempts to quit than younger smokers.

Results of the project will be used to understand how to best help seniors help themselves with their efforts to stop smoking.

Seniors who would like more information about the **“Medicare Stop Smoking Program”** demonstration project should call **TrailBlazer Health Enterprises** toll-free at **1-866-65BEGIN (1-866-652-3446)**.



HealthyAging

Medicare Stop Smoking Program





REGION IV MEDICARE PARTNER NEWS (cont.)

New Medicare Therapy Services Limits

Beginning September 1, 2003, Medicare will limit its coverage for outpatient physical therapy (PT), speech-language pathology (SLP), and occupational therapy (OT). The limits are \$1,590 each year for PT and SLP combined. It is also \$1,590 each year for OT.

Medicare beneficiaries will continue to pay the \$100 annual Medicare Part B deductible. Medicare pays its share of eighty (80%) per cent and the beneficiary pays his or her share of twenty (20%) per cent of the cost.

In 2003, the limits only apply to therapy services received between September 1, 2003 and December 1, 2003. This means that Medicare beneficiaries can get the full benefit of the new annual limits for this four months period.

These limits, generally, do not apply to the therapy services received at hospital outpatient departments. Medicare will continue to pay for the therapy services, if received in a hospital outpatient department unless the Medicare patient resides in a Medicare-certified bed of a skilled nursing facility.



Region IV Partners Calendar of Events

SEPTEMBER

- 10-12 SHIP Annual Volunteer Training
Louisville, KY
- 9 CMS ROIV Medicare Congressional Briefing
(for KY Congressional Staff)
Elizabethtown, KY
- 9 & 30 Senior Day at McRae's Meadowbrook Store and
Metrocenter Stores
Jackson, MS
- 12 St. Joseph Hospital Community Education Workshop
Lexington, KY
- 15 AARP Health & Independent Living Festival
Williamsburg, KY
- 17 Kentucky Seniors Saving Medicare Volunteer Training
West Liberty, KY
- 18 Franklin County Senior Center Medicare Presentation
Frankfort, KY
- 25 Kentucky Seniors Saving Medicare Volunteer Training
Louisville, KY
- 27 Body & Soul Festival
Lexington, KY

OCTOBER

- 1-12 Mississippi State Fair
Trademart Building, Jackson, MS
- 4 Alzheimer's Walk
Jackson, MS

- 15-17 12th Annual Conference on Long-term Care
Jackson, MS
- 1-12 Mississippi State Fair
Trademart Building, Jackson, MS
- 17 ASAP (All About Seniors & Prevention) Tour
Carrollton, KY
- 20 ASAP (All About Seniors & Prevention) Tour
Lexington, KY
- 21 ASAP (All About Seniors & Prevention) Tour
Booneville & Hyden, KY
- 21 & 11/11 Senior Day at McRae's Meadowbrook Store and
Metrocenter Stores
Jackson, MS
- 22 ASAP (All About Seniors & Prevention) Tour
Albany, KY
- 23 ASAP (All About Seniors & Prevention) Tour
Hopkinsville, KY
- 24 ASAP (All About Seniors & Prevention) Tour
Elizabethtown, KY
- 28 Johnson Mathers Health Care Medicare Presentation
Carlisle, KY
- 31 Fall Festival Event at Northpark Mall
Jackson, MS

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WHAT'S THE BUZZ?



The FAQs on www.medicare.gov are continuously updated to reflect the most popular topics of interest about Medicare. Want to know what's hot in Medicare? Go to www.medicare.gov and select Frequently Asked Questions. Want to use the Q & A's for your own publication? Simply copy and paste the text. There's even a feature to email the question & answer column to yourself or a friend.