

§ 1395b-2. Notice of medicare benefits; medicare and medigap information

(a) Notice of medicare benefits

The Secretary shall prepare (in consultation with groups representing the elderly and with health insurers) and provide for distribution of a notice containing—

- (1) a clear, simple explanation of the benefits available under this subchapter and the major categories of health care for which benefits are not available under this subchapter,
- (2) the limitations on payment (including deductibles and coinsurance amounts) that are imposed under this subchapter, and
- (3) a description of the limited benefits for long-term care services available under this subchapter and generally available under State plans approved under subchapter XIX of this chapter.

Such notice shall be mailed annually to individuals entitled to benefits under part A or part B of this subchapter and when an individual applies for benefits under part A of this subchapter or enrolls under part B of this subchapter.

(b) Medicare and medigap information

The Secretary shall provide information via a toll-free telephone number on the programs under this subchapter. The Secretary shall provide, through the toll-free telephone number 1-800-MEDICARE, for a means by which individuals seeking information about, or assistance with, such programs who phone such toll-free number are transferred (without charge) to appropriate entities for the provision of such information or assistance. Such toll-free number shall be the toll-free number listed for general information and assistance in the annual notice under subsection (a) of this section instead of the listing of numbers of individual contractors.

(c) Contents of notice

The notice provided under subsection (a) of this section shall include—

- (1) a statement which indicates that because errors do occur and because medicare fraud, waste, and abuse is a significant problem, beneficiaries should carefully check any explanation of benefits or itemized statement furnished pursuant to section 1395b-7 of this title for accuracy and report any errors or questionable charges by calling the toll-free phone number described in paragraph (4);
- (2) a statement of the beneficiary's right to request an itemized statement for medicare items and services (as provided in section 1395b-7(b) of this title);
- (3) a description of the program to collect information on medicare fraud and abuse established under section 1395b-5(b) of this title; and
- (4) a toll-free telephone number maintained by the Inspector General in the Department of Health and Human Services for the receipt of complaints and information about waste, fraud, and abuse in the provision or billing of services under this subchapter.

(Aug. 14, 1935, ch. 531, title XVIII, § 1804, as added Pub. L. 100-360, title II, § 223(a), July 1, 1988, 102 Stat. 747; amended Pub. L. 103-432, title I,

§ 171(j)(1), Oct. 31, 1994, 108 Stat. 4450; Pub. L. 105-33, title IV, § 4311(a)(1), Aug. 5, 1997, 111 Stat. 384; Pub. L. 108-173, title IX, § 923(d)(1), Dec. 8, 2003, 117 Stat. 2394.)

AMENDMENTS

2003—Subsec. (b). Pub. L. 108-173 inserted at end “The Secretary shall provide, through the toll-free telephone number 1-800-MEDICARE, for a means by which individuals seeking information about, or assistance with, such programs who phone such toll-free number are transferred (without charge) to appropriate entities for the provision of such information or assistance. Such toll-free number shall be the toll-free number listed for general information and assistance in the annual notice under subsection (a) of this section instead of the listing of numbers of individual contractors.”

1997—Subsec. (c). Pub. L. 105-33 added subsec. (c).

1994—Pub. L. 103-432 inserted “; medicare and medigap information” in section catchline, designated existing provisions as subsec. (a), and added subsec. (b).

EFFECTIVE DATE OF 1997 AMENDMENT

Pub. L. 105-33, title IV, § 4311(a)(2), Aug. 5, 1997, 111 Stat. 384, provided that: “The amendment made by this subsection [amending this section] shall apply to notices provided on or after January 1, 1998.”

EFFECTIVE DATE OF 1994 AMENDMENT

Amendment by Pub. L. 103-432 effective as if included in the enactment of Pub. L. 101-508, see section 171(l) of Pub. L. 103-432, set out as a note under section 1395ss of this title.

EFFECTIVE DATE

Pub. L. 100-360, title II, § 223(d)(1), July 1, 1988, 102 Stat. 748, provided that: “The Secretary of Health and Human Services shall first distribute the notice required by the amendment made by subsection (a) [enacting this section] not later than January 31, 1989.”

MONITORING ACCURACY

Pub. L. 108-173, title IX, § 923(d)(2), Dec. 8, 2003, 117 Stat. 2395, provided that:

“(A) STUDY.—The Comptroller General of the United States shall conduct a study to monitor the accuracy and consistency of information provided to individuals entitled to benefits under part A [probably means part A of title XVIII of the Social Security Act which is classified to part A of this subchapter] or enrolled under part B [probably means part B of title XVIII of the Social Security Act, 42 U.S.C. 1395j et seq.], or both, through the toll-free telephone number 1-800-MEDICARE, including an assessment of whether the information provided is sufficient to answer questions of such individuals. In conducting the study, the Comptroller General shall examine the education and training of the individuals providing information through such number.

“(B) REPORT.—Not later than 1 year after the date of the enactment of this Act [Dec. 8, 2003], the Comptroller General shall submit to Congress a report on the study conducted under subparagraph (A).”

STATE REGULATORY PROGRAMS

For provisions relating to changes required to conform State regulatory programs to amendments by section 171 of Pub. L. 103-432, see section 171(m) of Pub. L. 103-432, set out as a note under section 1395ss of this title.

DEMONSTRATION PROJECTS

Pub. L. 101-508, title IV, § 4361(b), Nov. 5, 1990, 104 Stat. 1388-141, provided that: “The Secretary of Health and Human Services is authorized to conduct demonstration projects in up to 5 States for the purpose of establishing statewide toll-free telephone numbers for providing information on medicare benefits, medicare

supplemental policies available in the State, and benefits under the State medicaid program.”

NOTICE OF CHANGES UNDER REPEAL OF MEDICARE
CATASTROPHIC COVERAGE

Pub. L. 101-234, title II, §203(c), Dec. 13, 1989, 103 Stat. 1984, provided that: “The Secretary of Health and Human Services shall provide, in the notice of medicare benefits provided under section 1804 of the Social Security Act [42 U.S.C. 1395b-2] for 1990, for a description of the changes in benefits under title XVIII of such Act [42 U.S.C. 1395 et seq.] made by the amendments made by this Act [see Tables for classification].”

BENEFITS COUNSELING AND ASSISTANCE DEMONSTRATION
PROJECT FOR CERTAIN MEDICARE AND MEDICAID
BENEFICIARIES

Pub. L. 100-360, title IV, §424, July 1, 1988, 102 Stat. 812, which directed Secretary of Health and Human Services to establish a demonstration project to demonstrate that its volunteers were adequately trained and competent to render effective benefits counseling and assistance to the elderly, was repealed by Pub. L. 101-234, title III, §301(a), Dec. 13, 1989, 103 Stat. 1985.

**§ 1395b-3. Health insurance advisory service for
medicare beneficiaries**

(a) In general

The Secretary of Health and Human Services shall establish a health insurance advisory service program (in this section referred to as the “beneficiary assistance program”) to assist medicare-eligible individuals with the receipt of services under the medicare and medicaid programs and other health insurance programs.

(b) Outreach elements

The beneficiary assistance program shall provide assistance—

- (1) through operation using local Federal offices that provide information on the medicare program,
- (2) using community outreach programs, and
- (3) using a toll-free telephone information service.

(c) Assistance provided

The beneficiary assistance program shall provide for information, counseling, and assistance for medicare-eligible individuals with respect to at least the following:

- (1) With respect to the medicare program—
 - (A) eligibility,
 - (B) benefits (both covered and not covered),
 - (C) the process of payment for services,
 - (D) rights and process for appeals of determinations,
 - (E) other medicare-related entities (such as peer review organizations, fiscal intermediaries, and carriers), and
 - (F) recent legislative and administrative changes in the medicare program.
- (2) With respect to the medicaid program—
 - (A) eligibility, benefits, and the application process,
 - (B) linkages between the medicaid and medicare programs, and
 - (C) referral to appropriate State and local agencies involved in the medicaid program.
- (3) With respect to medicare supplemental policies—

(A) the program under section 1395ss of this title and standards required under such program,

(B) how to make informed decisions on whether to purchase such policies and on what criteria to use in evaluating different policies,

(C) appropriate Federal, State, and private agencies that provide information and assistance in obtaining benefits under such policies, and

(D) other issues deemed appropriate by the Secretary.

The beneficiary assistance program also shall provide such other services as the Secretary deems appropriate to increase beneficiary understanding of, and confidence in, the medicare program and to improve the relationship between beneficiaries and the program.

(d) Educational material

The Secretary, through the Administrator of the Centers for Medicare & Medicaid Services, shall develop appropriate educational materials and other appropriate techniques to assist employees in carrying out this section.

(e) Notice to beneficiaries

The Secretary shall take such steps as are necessary to assure that medicare-eligible beneficiaries and the general public are made aware of the beneficiary assistance program.

(f) Report

The Secretary shall include, in an annual report transmitted to the Congress, a report on the beneficiary assistance program and on other health insurance informational and counseling services made available to medicare-eligible individuals. The Secretary shall include in the report recommendations for such changes as may be desirable to improve the relationship between the medicare program and medicare-eligible individuals.

(Pub. L. 101-508, title IV, §4359, Nov. 5, 1990, 104 Stat. 1388-137; Pub. L. 108-173, title IX, §900(e)(6)(G), Dec. 8, 2003, 117 Stat. 2374.)

CODIFICATION

Section was enacted as part of the Omnibus Budget Reconciliation Act of 1990, and not as part of the Social Security Act which comprises this chapter.

AMENDMENTS

2003—Subsec. (d). Pub. L. 108-173 substituted “Centers for Medicare & Medicaid Services” for “Health Care Financing Administration”.

MEDICARE ENROLLMENT ASSISTANCE

Pub. L. 110-275, title I, §119, July 15, 2008, 122 Stat. 2508, as amended by Pub. L. 111-148, title III, §3306, Mar. 23, 2010, 124 Stat. 470; Pub. L. 112-240, title VI, §610, Jan. 2, 2013, 126 Stat. 2351; Pub. L. 113-67, div. B, title I, §1110, Dec. 26, 2013, 127 Stat. 1198, provided that:

“(a) ADDITIONAL FUNDING FOR STATE HEALTH INSURANCE ASSISTANCE PROGRAMS.—

“(1) GRANTS.—

“(A) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the ‘Secretary’) shall use amounts made available under subparagraph (B) to make grants to States for State health insurance assistance programs receiving assistance under section 4360 of the Omni-