

HMOs Continue Making Headlines . . .

The thousands of seniors affected by the HMO exodus are now searching for alternative coverage. Don't pass up this opportunity! Tell prospects that United American's guaranteed renewable Medicare Supplements offer dependable, comprehensive protection plus unique features like ACF Partners. With UA's high industry ratings and more than 50-year history, customers can be assured we'll be here to meet their insurance needs for many years to come!

National Underwriter
February 1, 1999

"... enrollment in health maintenance organizations dropped for the first time ever.

HMOs have been the lightning rod for the public's dissatisfaction with managed care.

... HMOs have reached their high point and will decline from now on in comparison to those options that provide greater choice."

USA Today

April 27, 1999

"... poor planning and profit-seeking by HMOs were the real reasons behind many health plans' decisions to pull out and leave seniors in a lurch.

As for HMOs' claims that low payment rates and heavy regulations caused the massive exodus? The report found little supporting evidence."

National Underwriter

March 29, 1999

Managed Care Cos.' Net Income Plunged In '98

Best's Review

April 1999

"HMOs will continue to limit their presence in certain markets. HMOs also are taking other actions, such as reducing benefit options, eliminating zero-premium plans in low reimbursement rate areas, reconfiguring provider networks or withdrawing from additional markets.

"If HMOs raise premiums to the levels required to meet profitability targets, they may face higher than expected disenrollments. Another risk is that groups with better experience may leave, while poorer-performing business stays on the books."

. . . So does Medicare Fraud!

National Underwriter

May 10, 1999

"Citing an epidemic of fraud in health care programs in a state with a large elderly population, federal and state officials launched a multimillion-dollar effort in Florida to fight abuse involving such programs as Medicare and Medicaid.

"... Medicare fraud alone will cost taxpayers an estimated 10 percent of the \$220 billion to be spent nationally on the program in 1999.

"The crackdown will bring together under one roof a dozen separate agencies that now track and prosecute medical care fraud on the local, state and national levels. The federal government is due to spend \$3 million over the next year to lease a facility housing the anti-fraud effort and hire staff."

HELP FIGHT MEDICARE FRAUD AND KEEP PREMIUMS DOWN!

If your customers suspect billing fraud have them call the Department of Health and Human Services Fraud line at 1-800-447-8477 or 1-800-377-4950 for the hearing impaired.