



AT&T Ameritech /SBC Retirees – We are AASBCR®

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Legislative Ledger

February 2022, NO 001

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This memo is to alert members that Medicare has started to shift patients to having their Medicare claims administered by a “Direct Contracting Entity,” or DCE, without patient consent. If your doctor joins a DCE, then you are automatically assigned to the same DCE. The only way to prevent that assignment is to change to a doctor who remains outside a DCE.

Once you are part of a DCE, the owner of that entity controls your Medicare claims. That owner could be a group of doctors, an insurance company or even a set of private equity investors. For standard treatments and benefits, you can still see any doctor who accepts Medicare, but your claims are handled by the DCE.

If you are not in a Medicare Advantage plan and you want to continue having your claims paid directly by Medicare and your Medicare Supplement plan, then you want to oppose the DCE initiative in general, and specifically you want to oppose being assigned to a DCE without your consent.

To voice your opposition and demand that the Center for Medicare and Medicare Services (CMS) is directed to discontinue its Medicare Direct Contracting Program, go to the “Action Alert” section of the NRLN website at [Action Alert - National Retiree Legislative Network \(nrln.org\)](http://nrln.org), select the issue entitled *Stop New Plan to Destroy Medicare* and click the “Take Action” button or, in the alternative, contact your Congressional representatives directly.

For more background information, we recommend these three sources:

Go to the Podcast section of the NRLN website at [NRLN Podcast Episodes - National Retiree Legislative Network](http://nrln.org) and click on *Wallstreet’s Takeover of Medicare | S2 E1*

Dr. Susan Rogers, President Physicians for a National Health Program, testimony before Congress: [Susan Rogers Written Testimony Senate hearing Feb 2 2022 \(nrln.org\)](http://nrln.org)

The Direct Contracting article on the Health Affairs website:
[Medicare Advantage, Direct Contracting, And The Medicare ‘Money Machine,’ Part 2: Building On The ACO Model | Health Affairs](http://healthaffairs.org)