

ASSOCIATION OF
COMMUNITY
CANCER CENTERS

FINANCIAL
ADVOCACY
NETWORK

Making the Case for Financial Advocacy/Navigation – Elements to Consider

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The NaVectis Group

Making the Case for Financial Advocacy

- Patient Experience
- ROI

Making the Case for Financial Advocacy

- **Financial Counselors**
 - Medicaid enrollment
 - Charity programs
- **Social Worker/Financial Advocate**
 - Copay and PAP assistance
 - Basic needs
- **Financial Navigation**
 - Insurance optimization
 - Part of multidisciplinary team
 - Involved with treatment plan
 - Navigates our complex health insurance landscape

Making the Case for Financial Advocacy

- **Patient Experience**
 - Psychosocial distress
 - Maslow's hierarchy of needs
 - Anxiety
 - Depression
 - Interpersonal relationships
 - Basic needs
 - Treatment adherence
 - Access to care
 - Low health insurance literacy

Making the Case for Financial Advocacy

- **Financial Advocacy**
 - PAP Programs
 - Are they overutilized?
 - Copay Assistance Programs
 - Are they underutilized?
 - Premium Assistance Programs
 - National Financial Support Programs
 - Family Reach
 - Pink Fund
 - Sam Fund

Making the Case for Financial Advocacy

- **Financial Navigation**
 - Insurance optimization
 - Part of multidisciplinary team
 - Involved with treatment plan
 - Navigates our complex health insurance landscape

Blue Care Network Of Michigan · Blue Cross® Select HMO Silver

Silver | HMO | Plan ID: 98185MI0180004

Estimated monthly premium \$1,732.99	Deductible \$2,400 Individual Total \$4,800 Family Total	Out-of-pocket maximum \$7,900 Individual Total \$15,800 Family Total	Copayments / Coinsurance Emergency room care: \$250 Copay after deductible/30% Coinsurance after deductible Generic drugs: \$4 Copay after deductible Primary doctor: \$30 Specialist doctor: \$50 Copay after deductible	Estimated total yearly costs ESTIMATE TOTAL YEARLY COSTS	Medical providers & prescription drugs covered Coverage details below SEE IF PROVIDERS & DRUGS ARE COVERED
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Documents

- [Summary of Benefits](#)
- [Plan brochure](#)
- [Provider directory](#)

Dental

- Child dental benefit not included
- Adult dental benefit not included

\$5,960: Typical cost for a healthy pregnancy and normal delivery.

\$3,960: Typical yearly cost for managing type 2 diabetes for one person.

\$1,900: Typical cost for treatment of a simple fracture.

Main Costs

Health care cost
Plan covers 70% of total average cost of care
Total premiums for the year
\$20,796

[List of covered drugs](#)

Doctors & Hospitals

Emergency room care

\$250 Copay after deductible/30% Coinsurance after deductible

Inpatient hospital services (like a hospital stay)

30% Coinsurance after deductible

Other Services & Prescriptions

Preferred brand drugs

25% Coinsurance after deductible

X-rays and diagnostic imaging

30% Coinsurance after deductible

Routine eye exam for adults

Benefit Not Covered

Routine eye exam for children

No Charge

Routine dental care for adults

Benefit Not Covered

Blue Care Network Of Michigan · Blue Cross® Select HMO Silver Saver

Silver | HMO | Plan ID: 98185MI0180012

<p>Estimated monthly premium</p> <p>\$317.87 Was: \$1,695.94</p>	<p>Deductible</p> <p>\$600 Individual Total</p> <p>\$1,200 Family Total</p>	<p>Out-of-pocket maximum</p> <p>\$2,400 Individual Total</p> <p>\$4,800 Family Total</p>	<p>Copayments / Coinsurance</p> <p>Emergency room care: \$250 Copay after deductible/10% Coinsurance after deductible</p> <p>Generic drugs: \$4 Copay after deductible</p> <p>Primary doctor: \$30</p> <p>Specialist doctor: \$50 Copay after deductible</p>	<p>Estimated total yearly costs</p> <p>ESTIMATE TOTAL YEARLY COSTS</p>	<p>Medical providers & prescription drugs covered</p> <p>Coverage details below</p> <p>SEE IF PROVIDERS & DRUGS ARE COVERED</p>
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Documents

- [Summary of Benefits](#)
- [Plan brochure](#)
- [Provider directory](#)

Dental

- Child dental benefit not included
- Adult dental benefit not included

\$1,960: Typical cost for a healthy pregnancy and normal delivery.

\$2,460: Typical yearly cost for managing type 2 diabetes for one person.

\$1,200: Typical cost for treatment of a simple fracture.

<p>Main Costs</p> <p>Health care cost Plan covers 87% of total average cost of care Total premiums for the year \$3,814</p> <p>List of covered drugs</p>	<p>Doctors & Hospitals</p> <p>Emergency room care \$250 Copay after deductible/10% Coinsurance after deductible</p> <p>Inpatient hospital services (like a hospital stay) 10% Coinsurance after deductible</p>	<p>Other Services & Prescriptions</p> <p>Preferred brand drugs 25% Coinsurance after deductible</p> <p>X-rays and diagnostic imaging 10% Coinsurance after deductible</p> <p>Routine eye exam for adults Benefit Not Covered</p> <p>Routine eye exam for children No Charge</p> <p>Routine dental care for adults Benefit Not Covered</p>
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Navigation

- A 67-year-old married male diagnosed with metastatic lung cancer. Monthly household gross income is \$1,680 and they have \$11,000 in assets. He has Medicare A and B only. He is not enrolled in part D. It is March 2018.
- Treatment regimen included radiation followed by immunotherapy.
- **Total treatment cost for one year estimated to be around \$380,000.**
- **Patient responsibility estimated to be around \$44,000.**

Navigation

- **Optimizing Insurance Coverage**

- LIS
- Medicare intervention (Medigap vs. MAPD)

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- **Optimizing External Assistance Programs**

- HealthWell - \$6,000
- MSP - \$3,252

- **Estimated Savings to the Patient** **\$47,000**
- **Estimated Savings to the Provider** **\$44,000**

Navigation

- **Navigating our complex healthcare system**

- Transitioning from Medicaid Expansion to Medicare
- Medicaid Expansion and SSDI payments
- Navigating ACA patients with advanced stage disease
- Utilizing LIS and MSP with Medicare beneficiaries
- Have a systematic process when navigating Medicare A/B only patients
- Navigating Marketplace or COBRA policies for Medicare eligible patients
- Navigating SSDI Medicare beneficiaries
 - Supplemental vs. MAPD
 - Turning 65



Making the Case for Financial Advocacy

- **ROI**
 - Direct Provider Savings
 - Guaranteed payments
 - Insurance optimization
 - External assistance programs

Making the Case for Financial Advocacy

- **ROI**
 - Indirect Provider Savings
 - Patient satisfaction
 - Collection expense
 - Reduced hospitalization rates
 - Maximizing employee skills
 - Dual roles
 - Burnout
 - Role priorities

ROI

FY 2017 Financial Navigation Report

	PAP	Replacement Programs	PREMIUM Assistance	Co-pay assistance	Part D Enrollment	Medicare Advantage	Medicare Only	Marketplace Enrollment	Community Assistance	TOTAL MHC IMPACT	Community Support
1st Quarter											
Number of patients assisted	2	0	11	37	3	3	2	3	75	61	136
\$ amount saved	\$ 134,536	\$ -			\$ 750					\$ 135,286	
Increased Revenue			\$ 228,669	\$ 115,000		\$ 10,500	\$ 10,000	\$ 66,403		\$ 430,572	
Premium Expense			\$ (1,742)							\$ (1,742)	\$ 1,742
Assistance to patients	\$ 403,608	\$ -	\$ 457,338	\$ 230,000	\$ 4,275	\$ 12,000	\$ 15,000	\$ 199,209	\$ 47,913		\$ 1,369,343
Total Benefit	\$ 134,536	\$ -	\$ 226,927	\$ 115,000	\$ 750	\$ 10,500	\$ 10,000	\$ 66,403	\$ 47,913	\$ 564,116	\$ 1,371,086
2nd Quarter											
Number of patients assisted	3	1	11	39	2	1	1	3	92	61	153
\$ amount saved	\$ 26,351	\$ 4,681			\$ 500					\$ 31,531	
Increased Revenue			\$ 153,134	\$ 170,075		\$ 3,500	\$ 5,000	\$ 74,221		\$ 405,930	
Premium Expense			\$ (3,832)							\$ (3,832)	\$ 3,832
Assistance to patients	\$ 79,052	\$ 14,042	\$ 306,268	\$ 340,150	\$ 2,850	\$ 4,000	\$ 7,500	\$ 222,663	\$ 59,599		\$ 1,036,124
Total Benefit	\$ 26,351	\$ 4,681	\$ 149,302	\$ 170,075	\$ 500	\$ 3,500	\$ 5,000	\$ 74,221	\$ 59,599	\$ 433,629	\$ 1,039,957
3rd Quarter											
Number of patients assisted	4	0	11	51	1	2	5	6	120	80	200
\$ amount saved	\$ 266,660	\$ -			\$ 250					\$ 266,910	
Increased Revenue			\$ 171,251	\$ 267,675		\$ 7,000	\$ 25,000	\$ 123,857		\$ 594,783	
Premium Expense			\$ (2,374)							\$ (2,374)	\$ 2,374
Assistance to patients	\$ 799,979	\$ -	\$ 342,501	\$ 535,350	\$ 1,425	\$ 8,000	\$ 37,500	\$ 371,571	\$ 72,932		\$ 2,169,259
Total Benefit	\$ 266,660	\$ -	\$ 168,877	\$ 267,675	\$ 250	\$ 7,000	\$ 25,000	\$ 123,857	\$ 72,932	\$ 859,319	\$ 2,171,632
4th Quarter											
Number of patients assisted	12	3	8	42	6	7	2	16	80	96	176
\$ amount saved	\$ 757,482	\$ 17,091			\$ 1,500					\$ 776,073	
Increased Revenue			\$ 97,329	\$ 219,750		\$ 24,500	\$ 10,000	\$ 142,642		\$ 494,221	
Premium Expense			\$ (2,225)							\$ (2,225)	\$ 2,225
Assistance to patients	\$ 2,272,446	\$ 51,272	\$ 194,659	\$ 439,500	\$ 8,550	\$ 28,000	\$ 15,000	\$ 427,926	\$ 42,817		\$ 3,480,170
Total Benefit	\$ 757,482	\$ 17,091	\$ 95,105	\$ 219,750	\$ 1,500	\$ 24,500	\$ 10,000	\$ 142,642	\$ 42,817	\$ 1,268,069	\$ 3,482,395
FY 2014 Total Impact											
FY 2016 Total Patients	21	4	41	169	12	13	10	28	367	298	665
FY 2016 Total Benefit	\$ 1,185,028	\$ 21,771	\$ 640,210	\$ 772,500	\$ 3,000	\$ 45,500	\$ 50,000	\$ 407,123	\$ 223,262	\$ 3,125,133	\$ 8,065,070
FY 2016 Premium Expense			\$ (10,173)								

Making the Case for Financial Advocacy

- Benefits
 - Treatment adherence
 - Decreased stress
 - Patient and staff experience
 - Improved patient flow
 - ROI
 - 7 x cost of position
 - Within two months of start of position
 - \$500 savings for every oncology patient being treated within program
 - Millions.....

Making the Case for Financial Advocacy

- Benefits
 - It all comes down to preparedness and integration
 - Training
 - Part of the multidisciplinary team
 - Passion

Discussion



Thank You

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www.NaVectis.com