



Financial Counseling: Optimize Your Patient's Health Insurance Benefits

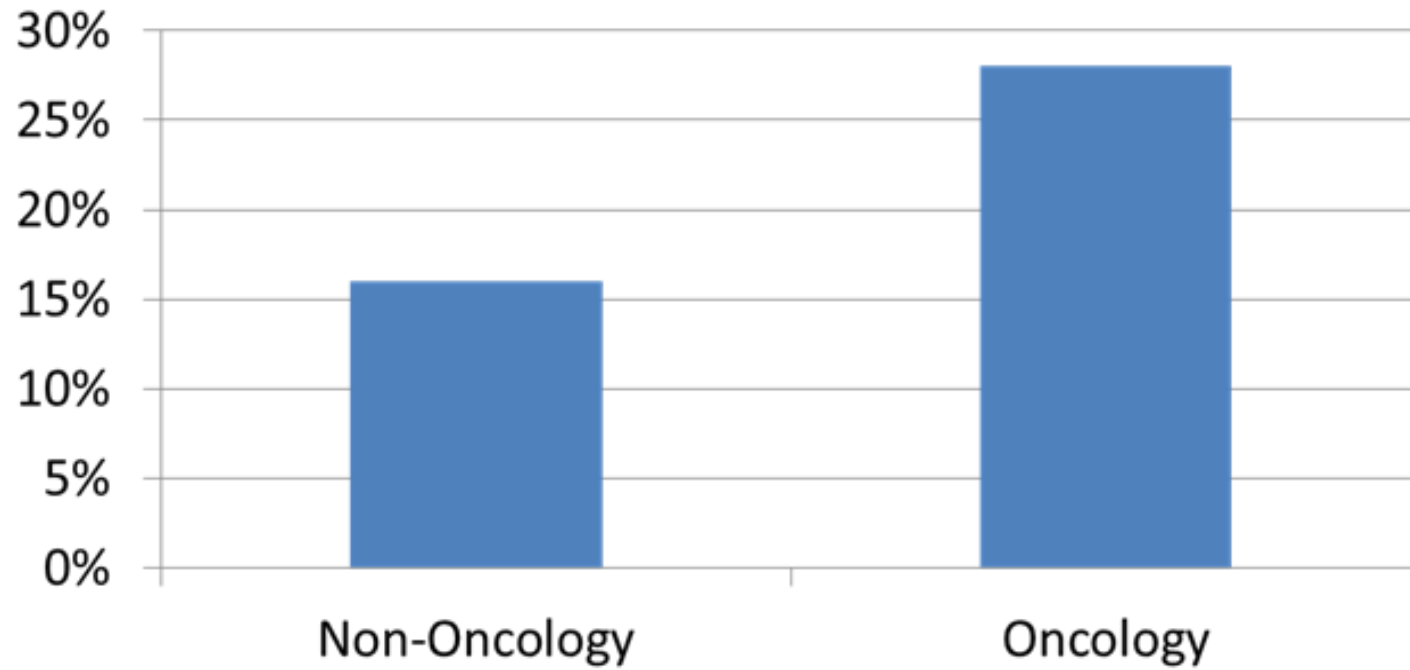


Dan Sherman, MA, LPC

The
NaVectis
GROUP

- 
- Cancer patients demonstrate more anxiety over the cost of treatment than over dying from their disease. Oncology Times, August 2009
 - 42% of insured cancer patients express a significant or catastrophic financial burden. The Oncologist, 2013
 - Medicare patients have on average \$4,727 in out-of-pocket expenses for oncology care. Cancer, 2012
 - A recent study found that patients with high copays (more than \$54) were 70% more likely to discontinue treatment within 6 months. Journal of Clinical Oncology 2014
 - The probability of experiencing OOP burden of at least 20% of income is 75% higher for Medicare oncology patients compared to Medicare beneficiaries without cancer. Cancer 2012
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Medicare beneficiaries with Out of Pocket responsibility of greater than 20% of income



Maslow's Hierarchy of Needs

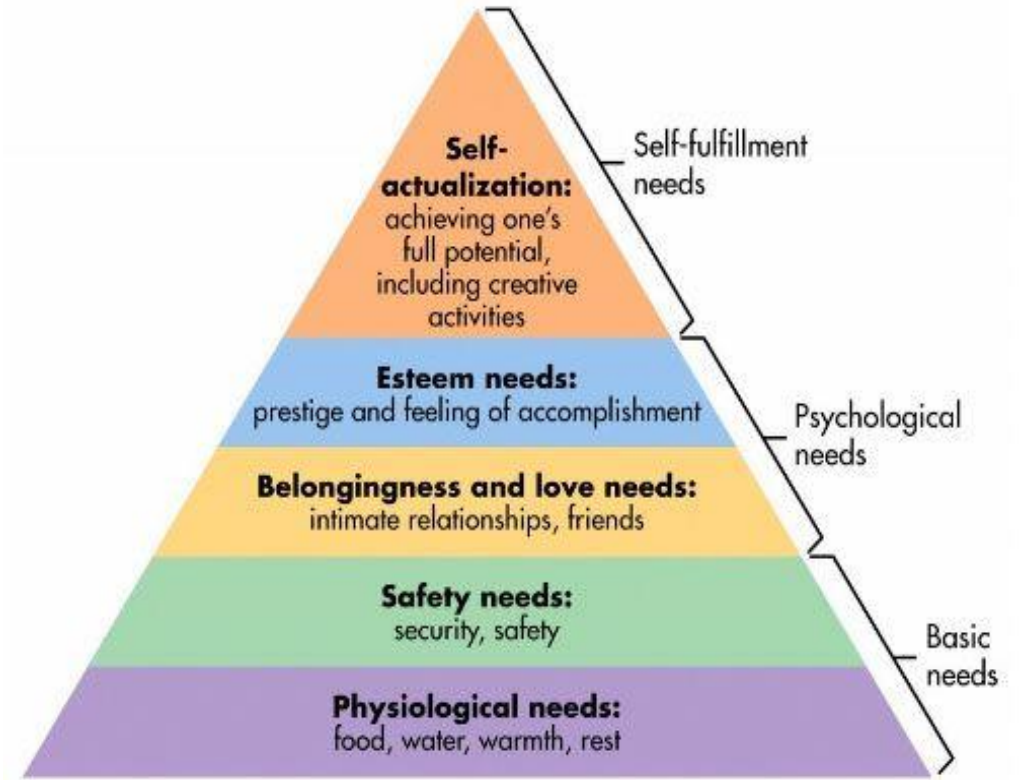
Interpersonal relationships

Ability to keep health coverage

Financial security

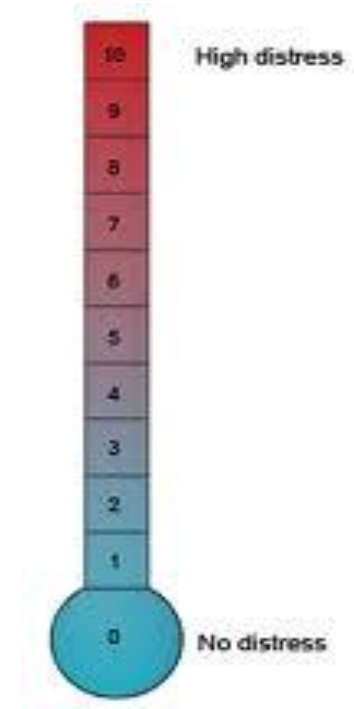
Food, shelter, transportation

Health



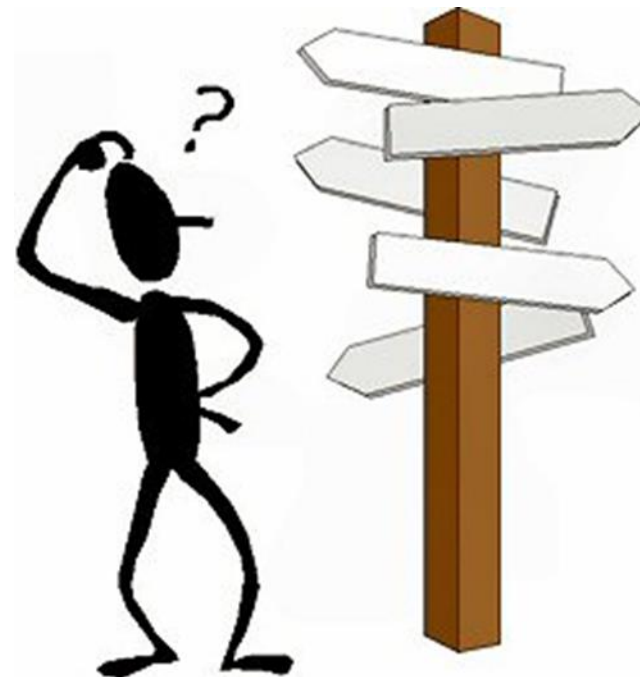
Financial Toxicity

- Decrease in treatment adherence
- Decrease in overall sense of well-being
 - Emotional
 - Depression
 - Anxiety
 - Relationships
 - Physical
 - Needless suffering
 - Basic needs



Response from Providers

- Caught off-guard
- Basic knowledge
 - Charity
 - Medicaid
- Learning by default



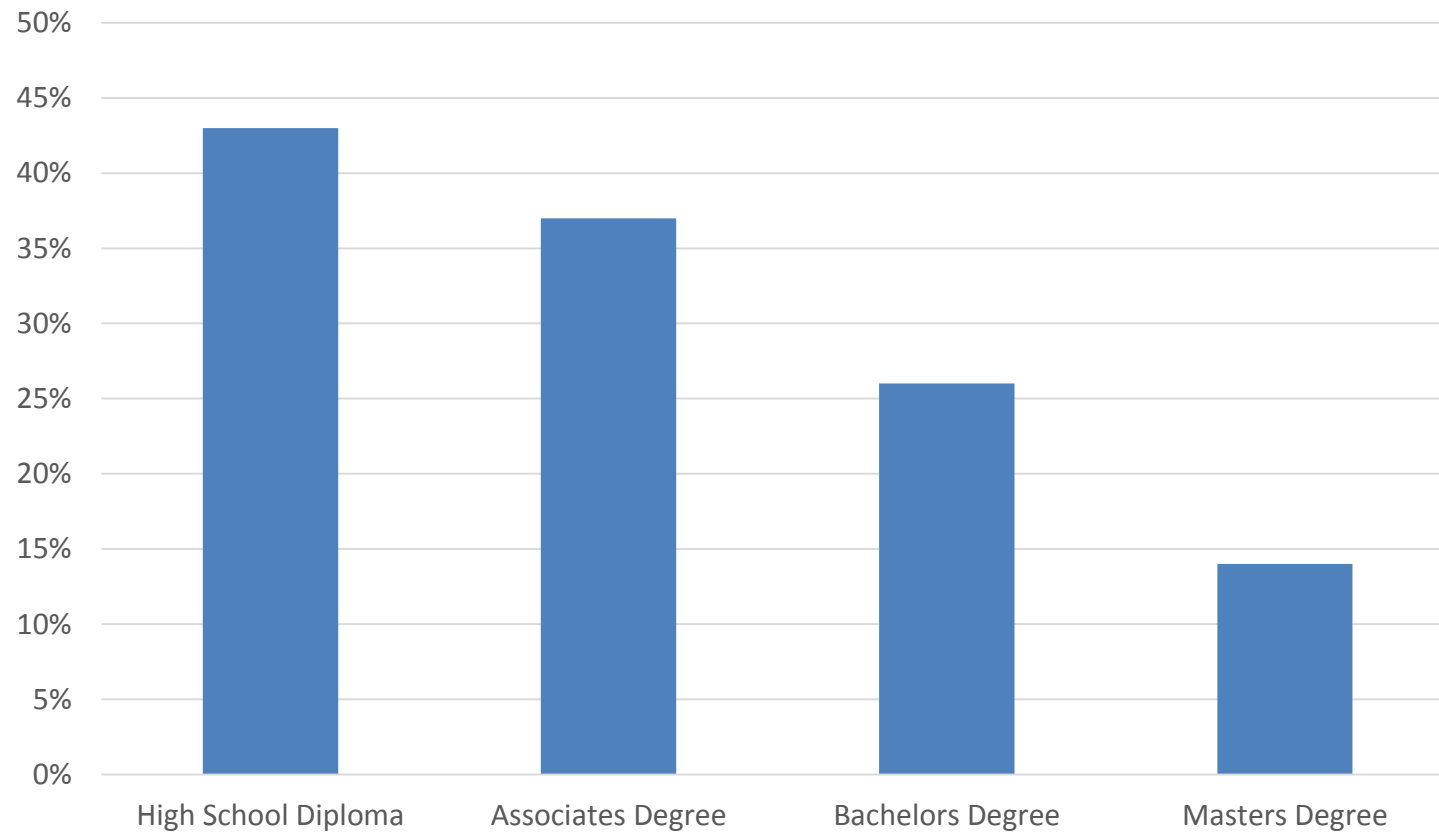
Financial Navigation and the IOM Care Management Plan

1. Diagnosis
2. Prognosis
3. Treatment Goals
4. Treatment Duration
5. Expected Response
6. Treatment Benefits/Harm
7. Quality of Life
8. Advanced Care Planning
9. Estimated Cost
10. Plan to Address Psychosocial Needs



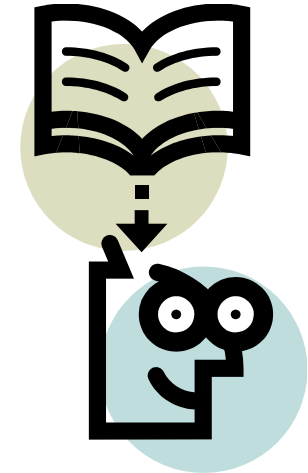
Financial Counselor Level of Education

Advisory Board 2014



Knowledge Base

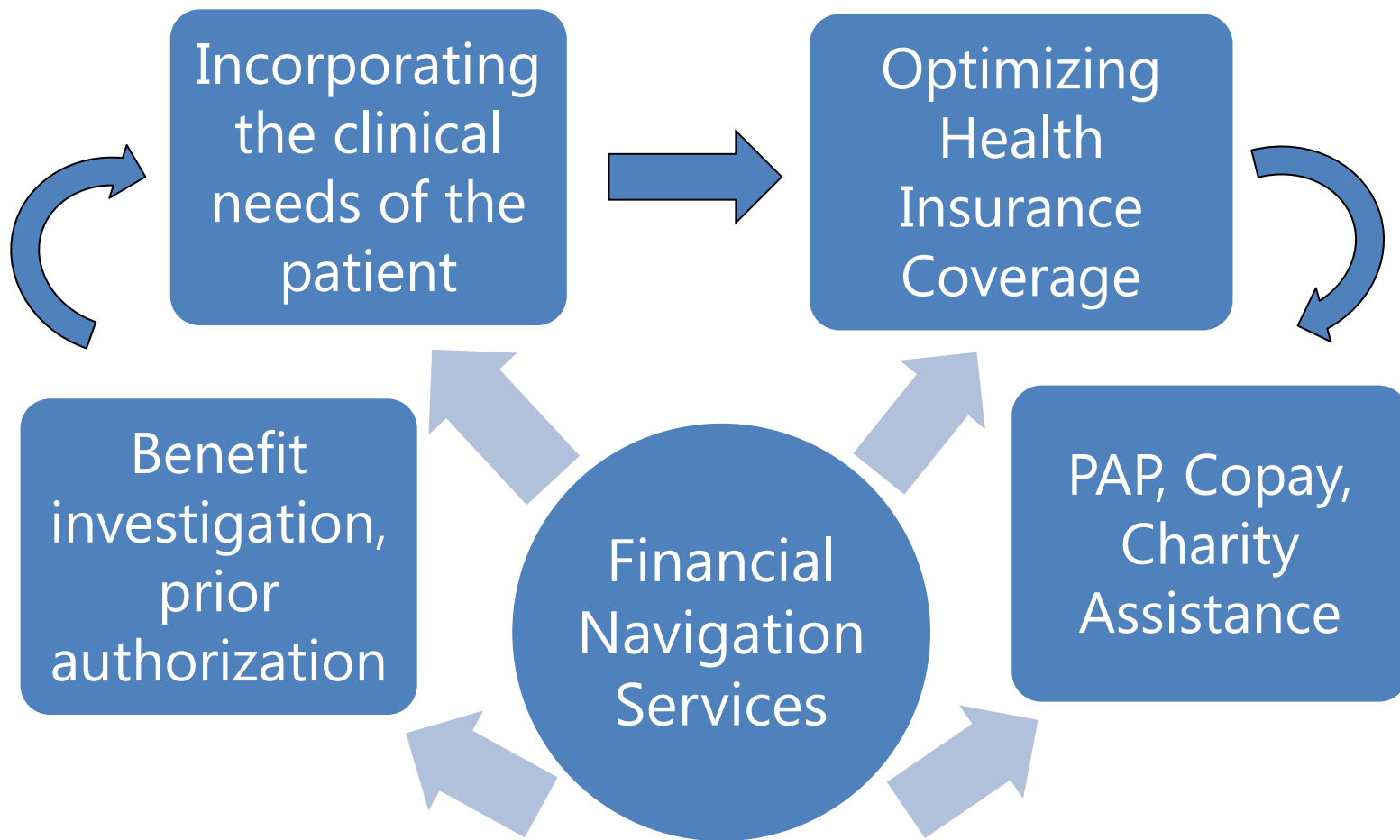
- Essential to have knowledge of basic concepts and programs:
 - STD, LTD, SSI, SSDI, FMLA, COBRA, Copay, Co-Insurance, Deductible, Max Out of Pocket, PAP, Copay Assistance, MSP, QMB, SLMB, QI, LIS, MAPD, PD, Medigap A, B, C, D, F, G, K, L, M, N, Medicare Part A, B, C, D, HMO, PPO, SNP, HSA, Viaticals, ACA...
 - Need expert knowledge of these programs in order to apply them to the appropriate patient at the appropriate time



What if we focus our attention on taking a proactive approach on....

- Developing expertise within the role
- Combining the clinical needs of the patient with the patient's financial circumstances
- Improving financial communication between provider and patient
- Optimizing health insurance coverage
- Optimizing external assistance programs








Optimizing Health Coverage

➤ **Marketplace:**

- Individuals/families are provided federal subsidies on the monthly premium of the health insurance policy 100 – 400% of FPL
 - 100-133% FPL 2% of income (No Medicaid Expansion)
 - 133-150% FPL 3 – 4% of income
 - 150-200% FPL 4 – 6.3% of income
 - 200-250% FPL 6.3 – 8.05% of income
 - 250-300% FPL 8.05 – 9.5% of income
 - 300-400% FPL 9.5% of income
 - **(Based upon cost of second cheapest silver plan)**
- 




Optimizing Health Coverage

➤ Marketplace:

- Individuals/families with income between 100% – 250% of FPL will be provided cost-sharing subsidies (**Silver plans only**)

FPL	AV	2016 OOP
➤ Under 100%	70%	\$6,850 / \$13,700
➤ 100% –150%	94%	\$2,250 / \$4,500
➤ 150% – 200%	87%	\$2,250 / \$4,500
➤ 200% – 250%	73%	\$5,400 / \$10,800
➤ Over 250%	70%	\$6,850 / \$13,700



[BACK TO QUESTIONS](#)

Viewing:

HEALTH PLANS DENTAL PLANS

Sort:

BY MONTHLY PREMIUM BY DEDUCTIBLE

NARROW YOUR RESULTS

See only plans with these features

[Clear All Filters](#) ✕

Premium

less than \$400 (3)

less than \$500 (15)

less than \$600 (28)

less than \$700 (30)

[Get more details about premiums](#)

Coverage categories

Silver plans ✕

[Get more details about categories](#)

Plan Types

PPO (14)

HMO (11)

POS (5)

Blue Care Network of Michigan · Blue Cross® Partnered Silver

[Compare](#)

Silver | HMO

Plan ID: 98185MI0180007

ESTIMATED MONTHLY PREMIUM

\$322

Premium before tax credit: \$464

ESTIMATED DEDUCTIBLE

\$3,300

Estimated family total

ESTIMATED OUT-OF-POCKET
MAXIMUM

\$12,700

Estimated family total

COPAYMENTS / COINSURANCE

Primary doctor:

\$30 Copay before deductible

Specialist doctor:

\$50 Copay after deductible

Emergency room care:

\$250 Copay after deductible/30%

Coinsurance after deductible

Generic drugs:

\$4 Copay after deductible

PEOPLE COVERED

1 (Age 45): Covered

2 (Age 10): Covered

3 (Age 8): Covered

MORE INFORMATION

[Summary of Benefits](#)

[Plan brochure](#)

[Provider directory](#)

[List of covered drugs](#)

[BACK TO QUESTIONS](#)

Viewing:

HEALTH PLANS DENTAL PLANS

Sort:

BY MONTHLY PREMIUM BY DEDUCTIBLE

NARROW YOUR RESULTS

See only plans with these features

[Clear All Filters](#) ✕

Premium

less than \$200 (9)

less than \$300 (30)

[Get more details about premiums](#)

Coverage categories

Silver plans ✕

[Get more details about categories](#)

Plan Types

PPO (14)

HMO (11)

POS (5)

[Get more details about plan types](#)

Insurance companies

Blue Care Network of Michigan · Blue Cross® Partnered Silver

[Compare](#)

Silver | HMO

Plan ID: 98185MI0180007

ESTIMATED MONTHLY PREMIUM

\$122

Premium before tax credit: \$247

ESTIMATED DEDUCTIBLE

\$450

Estimated individual total

ESTIMATED OUT-OF-POCKET
MAXIMUM

\$1,450

Estimated individual total

COPAYMENTS / COINSURANCE

Primary doctor:

\$30 Copay before deductible

Specialist doctor:

\$50 Copay after deductible

Emergency room care:

**\$250 Copay after deductible/10%
Coinsurance after deductible**


Generic drugs:


\$4 Copay after deductible


PEOPLE COVERED

 1 (Age 45): Covered

MORE INFORMATION

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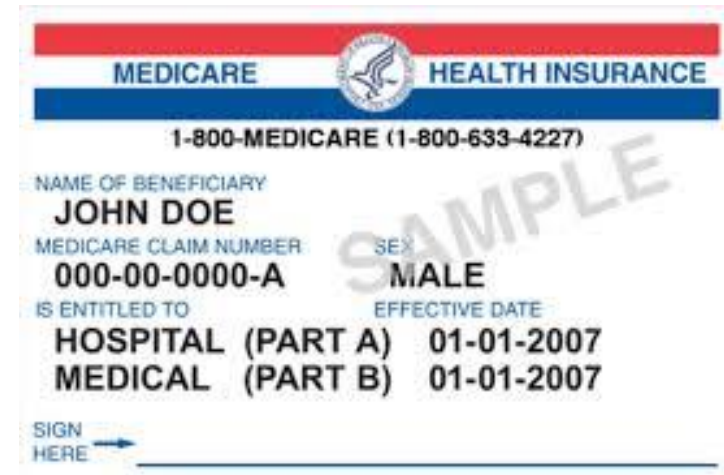
 [List of covered drugs](#)

50% of Medicare beneficiaries fall below 200% of FPL. KFF 2014



Optimizing Health Coverage

- Medicare A and B only
 - Medigap
 - MAPD
 - MSP
 - LIS
- Medicare Advantage Plans (MAPD)
 - LIS
 - Yearly open enrollment
 - 5 star rule



Optimizing Health Coverage


- Medicare Part D
 - Initial coverage \$3,700
 - Donut hole \$4,950
 - Cat. coverage 5%
 - LIS
 - Below 150% of FPL (\$17,820 single / \$24,030 married)
 - Assets below \$13,820 single / \$27,600 married
 - Can enroll or change plan any time of year





Optimizing Health Coverage

➤ LIS

- Category One. This category includes individuals eligible for Medicaid whose income is under the FPG. They pay no premium or deductible, have no gap in coverage, and have reduced per-prescription copayments.
 - Category Two. This category includes individuals eligible for Medicaid but with incomes above the FPG. They pay no premium or deductible and have no coverage gaps, but pay a higher per-prescription copayment than other Medicaid recipients.
 - Category Three. This category includes individuals not eligible for Medicaid but with income less than 135% of the FPG and assets (not including a home) of less than \$8,890 and \$14,090 for a married couple living together). They pay no premium or deductible, have no gap in coverage, and have reduced per prescription copayments.
 - Category Four. This category includes individuals with incomes of 136% to 149% of the FPG and assets less than \$13,640 (\$27,250 for a married couple). They pay a reduced premium and deductible, and have reduced per-prescription copayments.
- 

Optimizing Health Coverage

- LIS
 - No open enrollment for:
 - Part D
 - MAPD plan



Optimizing External Assistance Programs

- Patient Assistance Programs
(should be decreasing)
- Copay Assistance Programs
(should be increasing)





Case Study

A 71-year-old married male diagnosed with stage IV colon cancer. Monthly household gross income is \$1,590 and they have \$10,000 in assets. He has Medicare A, B, and D only.

Treatment regimen included surgery followed by bevacizumab, Oxaliplatin (twice monthly), and oral capecitabine for 12 months, along with anti-nausea and pain medications. He will also need palliative radiation treatments. He is struggling with affording his oral medications.

Total treatment cost for one year estimated to be around \$350,000

Patient responsibility estimated to be around \$40,000





Case Study

Optimizing Insurance Coverage

- LIS
- Medicare intervention (Medigap vs. MAPD)

Optimizing External Assistance Programs

- PAN - \$7,500
- MSP - \$2,900

Estimated Savings to the Patient **\$43,000**

Estimated Savings to the Provider **\$40,000**



Screening patients

- Does patient distress screening work?
- Focus on specific patient populations
 - Self-pay
 - Medicare only
 - New to Medicare patients
 - High out-of-pocket Medicare Advantage Plans
 - Medicare beneficiaries with no Part D coverage
 - ACA with advanced stage disease
 - Advanced stage disease with commercial coverage
 - High out-of-pocket commercial



How do we get there?

- Training
- Timing
- Trust
 - Professionalism
 - Competency
 - Goal of Intervention



Resulting in:

- Reduction in financial toxicity
- Reduction in bad debt/charity
- Reduction in stress/workload for social work department
- Increased patient satisfaction scores
- **Average \$500 in savings/increased revenue for every oncology patient seen in your clinic**





Thank You

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