Growing and Sustaining a Robust Financial Navigation Program

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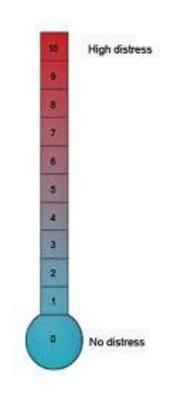


Financial Toxicity

Through the lens of a person facing cancer

What is Financial Toxicity?

The term financial toxicity is broadly used to describe the distress or hardship arising from the financial burden of cancer treatment. In much the same way as physical side-effects of treatment like fatigue, nausea or blood toxicities, financial problems after cancer diagnosis are a major contributor higher levels of stress, poorer quality of life, treatment non-adherence and delayed medical care.



Financial Toxicity: Multi-Faceted Impacts

A survey of breast cancer patients found that 94% of this population wanted to discuss cost of treatment but only 14% of them reported having that conversation Journal of Community and Supportive Oncology, 2016.

27% of adult insured cancer patients reported medication non-adherence due to COSt J of Oncology Practice 2019

Cancer patients demonstrate more anxiety over the cost of treatment than over dying from their disease Oncology Times, August 2009

Benchmark Employer
Survey Finds **Average**Family Premiums Now
Top **\$20,000**Kaiser Family Foundation

A 2015 study found that there is a direct correlation between Cancer Related Financial Burden and qualify of life. Higher CRFB scores correlates to lower Qualify of Life scores.

The Oncologist 2015

Maslow's Hierarchy of Needs

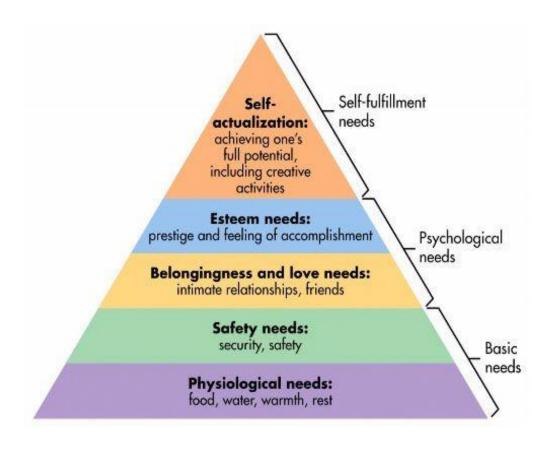
Interpersonal relationships

Ability to keep health coverage

Financial Security

Food, shelter, transportation

Health



The Oncology Care Model (OCM) 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 need
- 11. Survivorship Plan



Models of Financial Advocacy Programs

Financial Counselors

- Medicaid Enrollment
- Charity Programs

Social Worker/Financial Advocate

- Co-Pay and PAP Assistance
- Basic Needs

Financial Navigation

- Insurance Optimization
- Part of Multidisciplinary Team
- Involved with Treatment Plan
- Navigates our complex health insurance landscape



Financial Navigation

Treating financial toxicity by proactively guiding patients through our complex healthcare system to help them gain access to care by reducing financial barriers.

- Insurance Optimization
- Proactive Engagement
- External Assistance Optimization
- A part of the Multi-Disciplinary Team
- Advocate for the Patient



Financial Navigator Required Knowledge Base

Government Safety Net Programs



Health Insurance Policies



External Assistance Programs











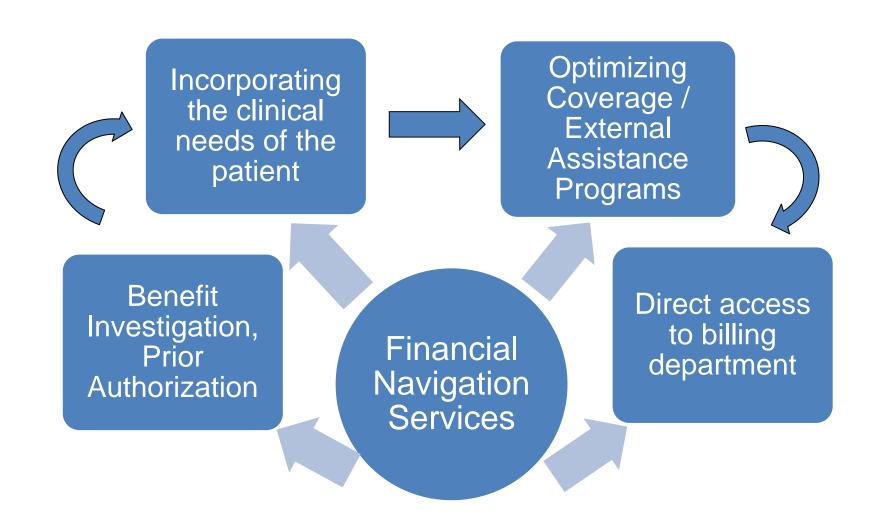
Disease Knowledge & Treatment Process



^{*}Logos are meant to illustrative not exhaustive of all options

Financial Navigation

A Central Part of of the Multi-Disciplinary Team



Patient Financial Responsibility Example BEFORE Insurance Optimization

Estimated monthly premium

\$1,003.97

Deductible

\$3,300 Individual total

\$6.600 Family Total

Out-of-pocket maximum

\$7,300 Individual total

\$14.600 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

Documents

Summary of Benefits Plan brochure

Provider directory

Dental

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

\$6,960: Typical cost for a healthy pregnancy and normal delivery.

\$5,760: Typical yearly cost for managing type 2 diabetes for one person.

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





Plan Administration



Details

Main Costs

List of covered drugs

Health care cost Plan covers 70% of total average cost of care Total premiums for the year \$12,048

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 (adults)

Benefit Not Covered

Patient Financial Responsibility Example AFTER Insurance Optimization

Estimated monthly premium

\$231.10 Was: \$718.73 Deductible

\$600 Individual total Out-of-pocket maximum

\$2,400 Individual total Copayments / Coinsurance

Emergency room care: \$250 Copay after deductible/10% 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

Documents

Summary of Benefits

Provider directory

Plan brochure

 Child dental benefit not included

Dental

 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.

Member Experience



edical Care

Plan Administration

★★★☆☆

Details

Main Costs

Health care cost
Plan covers 87% of total average cost of care
Total premiums for the year
\$2,773

List of covered drugs

Doctors & Hospitals

Emergency room care

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

Inpatient hospital services (like a hospital stay)

10% Coinsurance after deductible

Other Services & Prescriptions

Preferred brand drugs

25% Coinsurance after deductible

X-rays and diagnostic imaging

10% Coinsurance after deductible

Routine eye exam for adults

Benefit Not Covered

Routine eye exam for children

No Charge

Routine dental care (adults)

Benefit Not Covered

The Complexities of Medicare Coverage

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

KFF 2014





Case Study

A 67-year-old married male diagnosis with Metastatic Melanoma. 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 surgery followed by biologic therapies.

Total treatment cost for one year estimated to be around \$380,000

Patient responsibility estimated to be around \$44,000

Financial Navigation Intervention

Optimizing Insurance Coverage

- Low Income Subsidy (LIS)
- Medicare intervention (Medigap vs. MAPD)

Optimizing External Assistance Programs

0	Co-Pay Assistance Foundation	\$6,000
0	Premium Assistance	\$2,400
0	MSP	\$3,252

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

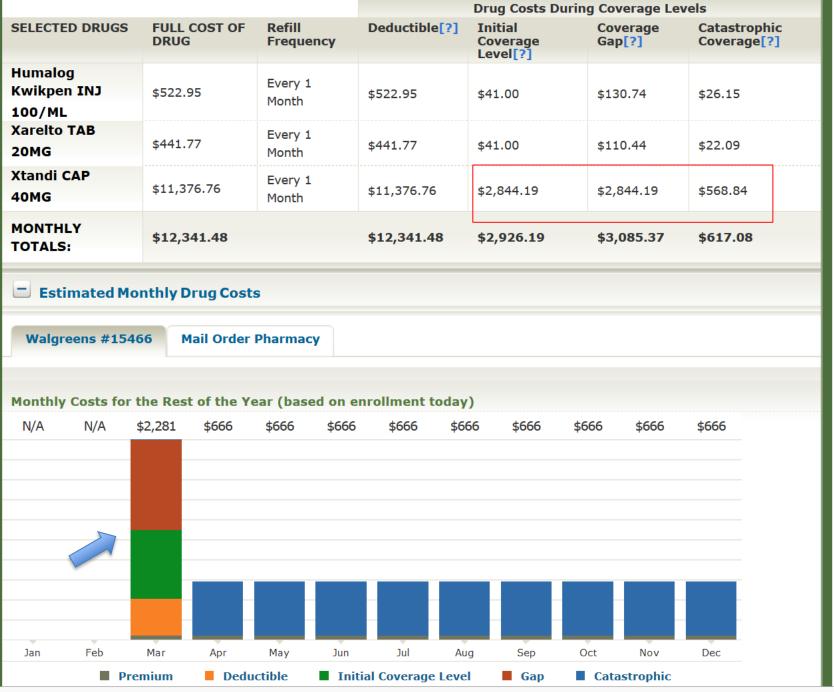
Part D Coverage Structure

Initial coverage \$3,820 **(4,020 in 2020)**Donut hole \$5,100 **(\$6,350 in 2020)**Catastrophic Coverage 5%



- Below 150% of FPL
- Assets below \$14,390 single / \$28,720 married

Without Low Income Subsidy (LIS)



With Low Income Subsidy (LIS)

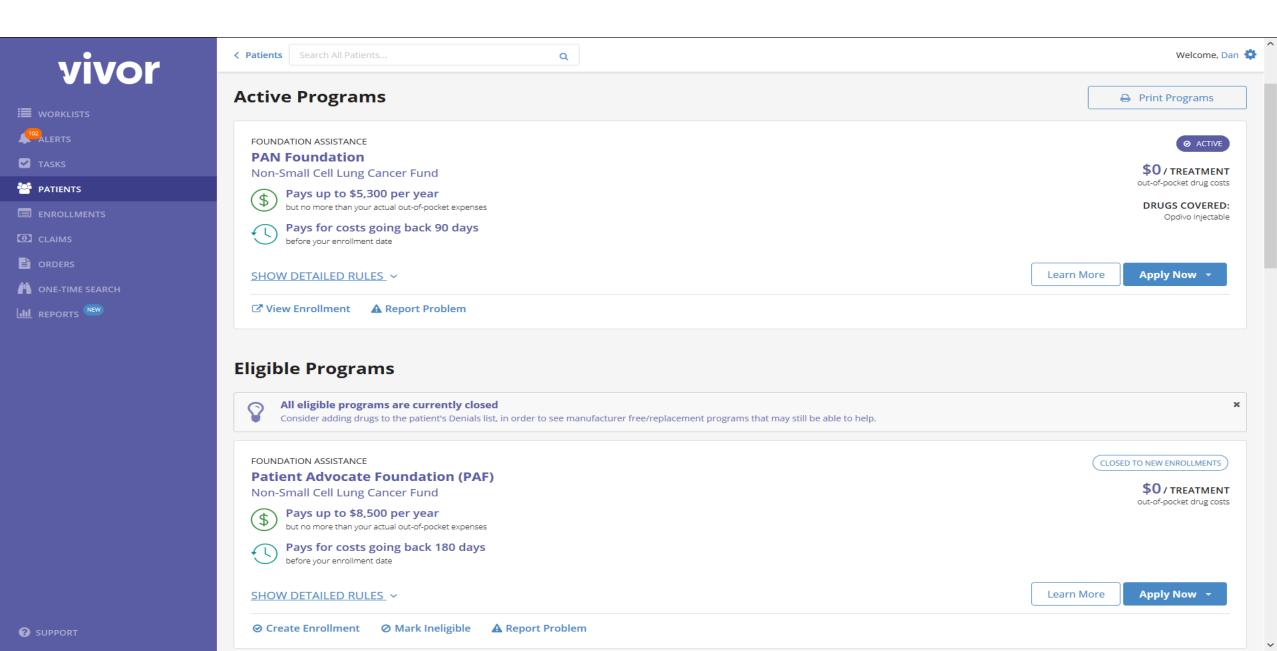


Optimizing External Assistance Programs

- Manufacturer Patient Assistance Programs
- Co-Pay Assistance Programs
- Premium Assistance Programs
- Patient Financial Support Programs
- Software platforms
 - AssistPoint
 - TailorMed
 - Vivor



Retroactive Opportunities to Decrease Financial Toxicity



Tracking and Reporting

- Patient Savings
- Provider Savings
- Total Patients Navigated
- o ROI



FY 2017 Financial Navigation Report

Premium Expense

Total Benefit 2nd Quarter

\$ amount saved

Increased Revenue

Premium Expense

Total Benefit

3rd Quarter

\$ amount saved Increased Revenue

Premium Expense

Total Benefit

4th Quarter

\$ amount saved Increased Revenue

Premium Expense

Total Benefit

Assistance to patients

FY 2014 Total Imact FY 2016 Total Patients

FY 2016 Total Benefit

FY 2016 Premium Expense

Assistance to patients

Assistance to patients

Assistance to patients

Number of patients assisted

Number of patients assisted

Number of patients assisted

1 1 2017 1 manolal Navigation Report							
		PAP	Replacement Programs				
1st Quarter							
Number of patients assisted		2	0				
\$ amount saved	\$	134,536	\$ -				
Increased Revenue				ľ			

403.608 \$

134,536 \$

26,351

79.052 \$

26.351 \$

266,660 \$

799.979 \$

266.660 \$

757,482 \$

757.482 \$

12

\$ 2.272.446 \$

21

\$ 1,185,028 \$

\$

3

\$

PREMIUM

Assistance

11

11

11

8

41

\$

\$

4,681

14,042 \$

4.681 \$

0

3

4

17,091

51,272

17,091 \$

21,771 \$

228,669

(1,742)

457,338

153.134

(3,832)

306,268 \$

149.302 \$

171,251

(2,374)

342,501

97,329

(2,225)

194.659

95,105 \$

640,210 \$

(10,173)

168.877 \$

\$

226,927 \$

Co-pay

assistance

37

39

51

42

169

219,750

439,500

219,750 \$

772,500 \$

115,000

230,000

170.075

340,150 \$

170.075 \$

267,675

535,350 \$

267.675 \$

115,000 \$

Part D

Enrollment

3

2

750

4,275

500

2,850

250

1,425 \$

1,500

8,550

1,500 \$

3,000 \$

6

12

250 \$

500 \$

750 \$

\$

\$

Medicare

Advantage

3

10,500

12,000

10,500 \$

3,500

4,000

7,000

8.000

24,500

28,000

13

24,500 \$

45,500

7.000 \$

2

3.500 \$

Medicare

Only

2

10,000

15,000

10,000 \$

5,000 \$

7,500 \$

5.000 \$

25,000

37,500 \$

25.000 \$

10,000

15,000

10,000 \$

50,000 \$

5

2

10

Marketplace

Enrollment

3

3

6

16

28

123,857

371,571 \$

123,857 \$

142,642

427,926 \$

142.642 \$

407,123 \$

66.403

199,209

74.221

222,663 \$

74,221 \$

66,403 \$

Community

Assistance

75

92

120

80

367

47,913

47,913

59,599

59.599

72,932

72.932

42,817

42,817

223,262

Community

Support

136

153

200

176

665

1.742

3,832

2,374

2,225

3,480,170

3,482,395

8,065,070

2,169,259

2,171,632

1,036,124

1,039,957

1,369,343

1,371,086

TOTAL MHC

IMPACT

61

61

80

96

298

135,286

430,572

564,116

31,531

405,930

433,629

266,910

594,783

859.319

776,073

494,221

1.268.069

3,125,133

(2,225) \$

(2,374) \$

(3,832) \$

(1,742)

Training opportunities

- ACCC Financial Advocacy Bootcamp
- Local SHIP
- Triage Cancer
- NaVectis Financial Navigation Training Program
 - On site classroom style training
 - 12-24 months of remote support
 - Tracking software



Financial Navigation Helps Decrease Financial Toxicity



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Financial Navigators on Patient
Out-of-Pocket Spending

Todd Yezefski, MD; Jordan Steelquist, BA; Kate Watabayashi, BA; Dan Sherman, MA; and Veena Shankaran, MD

Supplements > The Patient Assistance Safety Net: How Many Need Help? How Many Are Helped? — Published on: March 06, 2018

Impact of Trained Oncology Financial Navigators on Patient Out-of-Pocket Spending

Todd Yezefski, MD; Jordan Steelquist, BA; Kate Watabayashi, BA; Dan Sherman, MA; and Veena Shankaran, MD

Hospitals that used trained financial navigators were able to provide financial assistance for their patients with cancer, providing access to care that would otherwise be unaffordable.

ABSTRACT

Objectives: Patients with cancer often face financial hardships, including loss of productivity, high out-of-pocket (OOP) costs, depletion of savings, and bankruptcy. By providing financial guidance and assistance through specially trained navigators, hospitals and cancer care clinics may be able mitigate the financial burdens to patients and also minimize financial losses for the treating institutions.

Study Design: Financial navigators at 4 hospitals were trained through The NaVectis Group,

Financial Navigation Can Support:

- Improved access to care
- Reduction of financial toxicity
- Reduction in bad debt/charity
- Increased Patient Satisfaction Scores
- Reduction in stress / workload for the Social work department
- Significant ROI for provider





Thank you

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