

Smart Patients Get Smart Care™

# Money Matters: Help is There to Prevent Financial Toxicity

June 4, 2019

10:00 – 11:00 AM PDT

1:00 PM - 2:00 PM EDT

# Housekeeping Notes

Welcome to the CLL Society Webinar!
The presentation will start momentarily

- Please direct your questions to CLL Society faculty or staff using the Q&A function (located at the bottom of your screen) at any time throughout the presentation
- You will receive a short email survey after the webinar. Your response will help CLL Society plan future webinars.
- The webinar is being recorded and all recorded webinars and the presentation slides will be available on our website via the Support Groups/Education page on cllsociety.org.















# Speakers

**Moderator:** Brian Koffman, MDCM, DCFP, FCFP, DABFP, MSEd

Executive Vice President and Chief Medical Officer, CLL Society



Speaker: Karli Bergheer, MBA

Oncology Financial Counselor, OHSU Knight

**Cancer Institute** 



Speaker: Megan Karam

Oncology Financial Counselor, OHSU Knight

**Cancer Institute** 









I worry about the medical bills related to treatment.

- a. Strongly agree
- b. Agree
- c. Neutral
- d. Disagree
- e. Strongly disagree





As a result of having cancer, what is your main financial concern?

- a. Paying Insurance Premiums
- b. Medical bills
- c. Prescription Medications
- d. Living costs





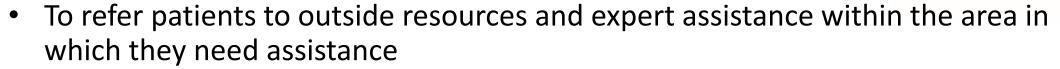
The cost of treatments is an important factor in determining which therapy is chosen.

- a. Strongly agree
- b. Agree
- c. Neutral
- d. Disagree
- e. Strongly disagree

# Clarifying our role



- We have comprehensive and broad knowledge we share with patients:
  - To help patients and caregivers be more fully informed
  - To activate self-advocacy



- We provide objective information and guidance
- Our patients typically reside in Oregon and Washington:
  - Our knowledge of local resources is therefore specific to OR & WA
  - We are aware that many states offer the same resources but may have different names for them
  - Most cancer centers have financial counselors/navigators
    - We recommend you ask your treating oncologist or social worker to be connected with that resource at your center







Are you connected with a Financial Counselor or Navigator at your current cancer center?

- a. Yes
- b. No
- c. I'm not sure if my center currently offers this service



# Activate your Inner Advocate



- Knowledge is power and it helps reveal and determine your path forward
- Breathe, stay present and be engaged (you are in the driver's seat):
  - It has been clinically proven that patients who do this move through the process more smoothly
- Determine your care team:
  - Family and friends who's in and who's not
  - Support groups
  - Medical team doctor, nurse, social worker



# Activate your Inner Advocate



- Ask questions:
  - Of your health care team
  - To find resources to help with medical and other bills
    - Financial counselor/Navigator
    - Social Worker
  - So you can focus on healing and regaining your health
- Roadblocks will appear; many will be artificial:
  - Be proactive to prevent a possible setback
    - Ex: Insurance transition
  - No doesn't always mean No
    - Escalate issues up to higher levels of authority

# Casting YOUR net:

# Resources we've had experience with



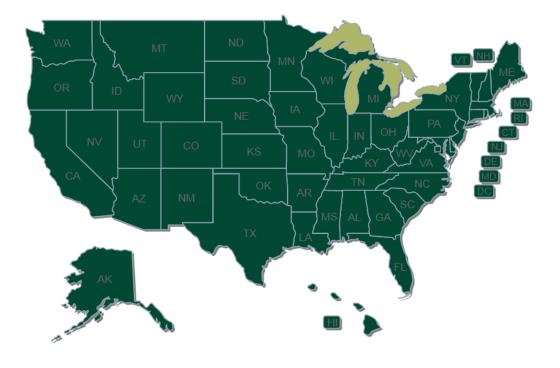
- Financial Assistance
- Billing End Options
- Medication Assistance Programs
  - Usually require doctor documentation for enrollment
- Diagnosis Specific Based Programs
  - LLS
  - PANF
- Travel and Lodging Assistance
  - Check with your social worker
- http://211.org/



# Resources detailed for each state:

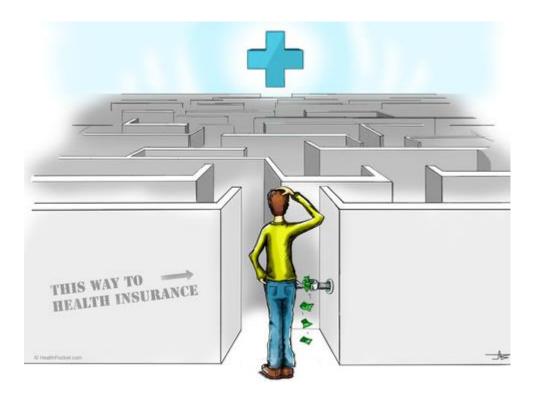


RESOURCES BY LOCATION



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https://triagecancer.org/resources/stateresources











Do you feel like you have a good understanding of your benefits in relation to your current treatment plan?

- a. Yes
- b. No
- c. I'm not sure

# **Insurance Types**

- Group:
  - Insurance that covers a defined group of people
  - Most typically associated with employer
  - Cobra coverage may be offered by your employer if the company size is at least 20 full time employees





### Commercial:

- Insurance obtained directly from an insurance company
- Marketplace/Affordable Care Act/Obama Care:
  - The health insurance marketplace is a platform which offers insurance plans to individuals, families or small businesses
  - Depending on income, premium tax credits and cost reductions may be possible





# The Marketplace in your state

No matter what state you live in, you can enroll in affordable, quality health coverage.



### Where to apply for health coverage

People in most states use HealthCare.gov to apply for and enroll in health coverage.

If your state appears on the list below, you won't use HealthCare.gov. You'll use your state's website to enroll in individual/family or small business health coverage, or both.



Tip:

Work with a qualified Marketplace health insurance agent

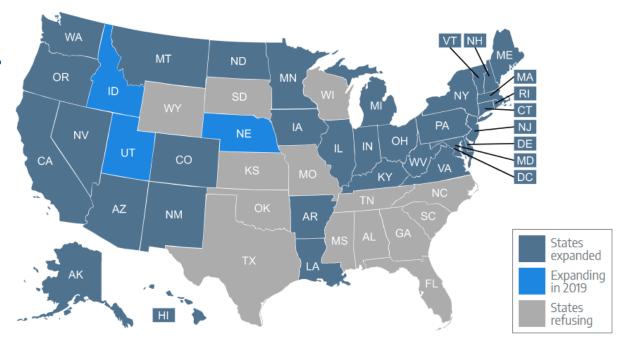
https://www.healthcare.gov/marketplace-in-your-state/

# Medicaid State by State:

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# Medicaid coverage in your state

Select your state:

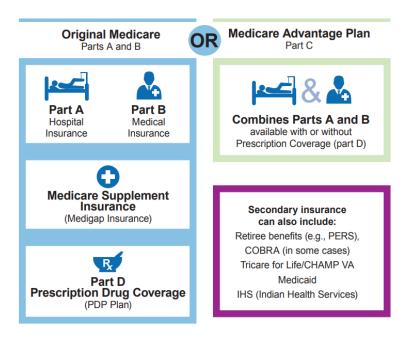


https://www.healthinsurance.org/medicaid/

## Medicare

- Two pathways:
  - Parts A&B, Part D and Supplement/Medigap
  - Medicare Advantage Plans

**START HERE:** Choose one option





Source: <a href="https://healthcare.oregon.gov/shiba/Documents/2019-medicare-guide-web.pdf">https://healthcare.oregon.gov/shiba/Documents/2019-medicare-guide-web.pdf</a>

<sup>\*</sup>Note: This guide is specific to Oregon, but one should be available in your state.





Do you know that every state has a dedicated program to assist with Medicare enrollment?

- a. Yes
- b. No
- c. I'm not sure

# Find your State's Health Insurance Assistance Program for Medicare patients:

### What is SHIP?

SHIP is a free health benefits counseling service for Medicare beneficiaries and their families or caregivers. SHIPs mission is to educate, advocate, counsel and empower people to make informed healthcare benefit decisions. SHIP is an independent program funded by Federal agencies and is not affiliated with the insurance industry.

### SHIP Counseling is FREE of charge

State Health Insurance Assistance Programs (SHIPs) provide free help to Medicare beneficiaries who have questions or issues with their health insurance. You can call a counselor or attend a workshop/presentation in your area

### A Few Reminders ...

- Some states call their SHIP programs by a different name so we have added a topic called "Program Name."
- Many of the State SHIP websites have calendars listings workshops or 'Medicare Monday' events.
- · SHIP Counseling is free of charge.
- . If you are calling from out-of-state to a different State note that many of the State's 'Toll Free' numbers are for instate-use only.
- If you are eligible for Medicare, you are eligible for SHIP Counseling.
- Medicare health and drug plans can change each year in regard to cost, coverage and what providers and pharmacies are in their networks. October 15th to December 7th is when all people with Medicare can change their Medicare health plans and prescription drug coverage for the following year to better meet their needs.
- The State Health Insurance Assistance Programs (SHIPs) Website Click Here

All State specific programs located here:

https://www.seniorsresourceguide.com/directories/National/SHIP/





# Do you know...

### You can have Medicaid and Medicare coverage at the same time

### Medicare Savings Programs

You can get help from your state paying your Medicare premiums. In some cases, Medicare Savings Programs may also pay Medicare Part A (Hospital Insurance) and Medicare Part B (Medical Insurance) deductibles, coinsurance, and copayments if you meet certain conditions. These conditions are listed below under "How do I apply for Medicare Savings Programs?"

### 4 kinds of Medicare Savings Programs

If you have income from working, you may qualify for these 4 programs even if your income is higher than the income limits listed below.

- Qualified Medicare Beneficiary (QMB) Program
- Specified Low-Income Medicare Beneficiary (SLMB) Program
- Qualifying Individual (QI) Program
- Qualified Disabled and Working Individuals (QDWI) Program

If you qualify for the QMB program, SLMB, or QI program, you automatically qualify to get Extra Help paying for Medicare prescription drug coverage.

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# Prescription Resources:

- Medication Assistance Programs/Patient Assistance Programs:
  - Most pharmaceutical companies offer co-pay assistance
    - Contact them directly to see if you qualify
    - Generally you need to have commercial insurance, but not MEDICARE
    - One example of many examples is:
    - Ibrutinib (IMBRUVICA®)
      - YOU&i™ Support Program
- PAN Foundation:
  - <a href="https://panfoundation.org/index.php/en/patients/assistance-programs/chronic-lymphocytic-leukemia">https://panfoundation.org/index.php/en/patients/assistance-programs/chronic-lymphocytic-leukemia</a>
- Leukemia Lymphoma Society Copay Assistance Program:
  - <a href="https://www.lls.org/support/financial-support/co-pay-assistance-program">https://www.lls.org/support/financial-support/co-pay-assistance-program</a>
- Needymeds.org
- Triage Cancer NeedyMeds Drug Discount Card
  - https://triagecancer.org/wpcontent/uploads/2018/04/Triage Cancer downloadable ddc.pdf





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- You can save money by price shopping different pharmacies
  - Always ask for the cash price
- During open enrollment, or when searching for new coverage, be sure to check the plan's formulary to confirm your prescription medications are covered
- When speaking to your physician, you may be able to receive a formulary showing possible future medications that could be prescribed to you based on your diagnosis
  - You can use this to price shop insurance plans, specific to prescription medication coverage
- Sometimes obtaining medications outside of insurance can be the most cost effective
  - Needymeds.org
  - GoodRX.com





I feel confident in my understanding of the different types of health insurance plans available.

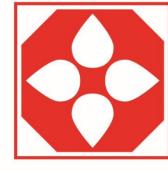
- a. Strongly agree
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# Terminology

### **HMO**

A health insurance carrier with a network of contracted healthcare providers and facilities.





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### <u>PPO</u>

A type of managed care health insurance plan that provides maximum benefits if you visit an in-network physician or provider, but still provides some coverage for out-of-network providers.

### **EPO**

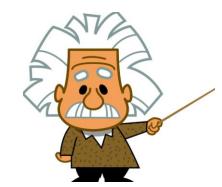
As a member of an EPO, you can use the doctors and hospitals within the EPO network, but cannot go outside the network for care. There are no out-of-network benefits.

### <u>POS</u>

A mix between an HMO and a PPO-style health insurance policy. With a POS health plan, you have more choices than with an HMO. You may need to select a primary care provider and need a referral to see a specialist. But with a POS plan you have the choice to use doctors, hospitals, and other providers that are not in your health plan's network. However, you will have to pay more for using out-of-network providers.

### <u>FFS</u>

The most traditional payment model where physicians and healthcare providers are paid by government agencies and insurance companies (third-party payers), or individuals, based on the number of services provided, or the number of procedures ordered.



# **Benefits**

### Premium:

The monthly cost of maintaining active insurance



### • Deductible:

- How much you pay before your health insurance starts to share the cost of your medical bills.
- Once claims accumulate to this amount, insurance will begin to cover coinsurance

### Coinsurance:

• A percentage of a medical charge you pay, with the rest paid by your health insurance plan, after your deductible has been met. For example, if you have a 20% coinsurance, you pay 20% of each medical bill, and your health insurance will cover 80%.

### Copayment:

 Your copay is a predetermined rate you pay for health care services at the time of care.

# **Benefits**

- Out of Pocket Maximum:
  - The most you have to pay in one year, out of pocket, for your health care before your insurance covers 100% of authorized services



- Excludes premium
- In-Network:
  - Health care providers who've contracted with your insurance company to accept certain negotiated rates.
  - You will typically pay less with an in-network provider
    - Ex: 80/20
- Out-of-Network:
  - Health care providers who are not contracted with your insurance company
    - Ex. 70/30
  - Check your health insurance plan to see if you are covered to see out of network providers, some plans do not offer this type of benefit

# Transitioning to Medicare

# When Are Medicare Enrollment Periods?

There are several times when you can enroll in Medicare, and each of those times has certain rules around applying and when your coverage will begin. Understanding when you can enroll and the best time to do so is an integral part of getting your Medicare.

### Initial Enrollment Period

The Initial Enrollment Period (IEP) is the first time you can sign up for Medicare. You may join Medicare Parts A, B, C and D during this time:

- · The 3 months before your 65th birthday,
- · The month of your birthday, and
- · The 3 months after your birthday.

### When Is My 7-Month Initial Enrollment Period?



- Eligibility determined by age or disability
  - By age, see opposite chart for enrollment time frame
  - By disability, a person may be eligible to enroll prior to age 65
- Triage Cancer Medicare Quick Guide for 2019: <a href="https://triagecancer.org/wp-content/uploads/2018/11/2019-">https://triagecancer.org/wp-content/uploads/2018/11/2019-</a>
   <a href="https://triagecancer.org/wp-cancer.org
- For more information about other types of enrollment periods visit <u>www.medicare.gov</u> or reach out to your State's SHIP Program (information on slide 12)



# And finally...

