

Navigating Cancer Rights



Joanna Fawzy Morales, Esq.
Cancer Rights Attorney & CEO, Triage Cancer

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1



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Cancer Survivorship



2



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Gaining Control Over the Puzzle



3



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Contributors to “Financial Toxicity”

- Health Insurance Status
 - Out-of-pocket Costs
 - Consumer Protections
 - Medical Bills
- Employment Changes
 - To work or not to work - accommodations
 - Disability Insurance
- Life Changes
 - Marriage/divorce, moving, retiring, graduating from school, etc.

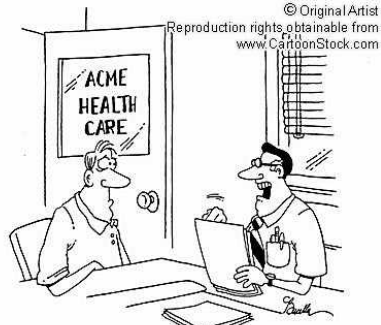


4



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Understanding How to Get & Use Health Insurance



"I'm sorry, but stress caused by trying to figure out your health insurance is not covered by it."

5



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Don't Understand Health Insurance? You are not alone.

- Only 23% understood terms used in their health policy
- Only 50% knew their monthly premium
- Only a few understood acronyms: HMO (36%), PPO (20%) & HSA (11%) (eHealth, 2008)
- When asked to define insurance terms and calculate their bill only 50% got it right (The Regence Group, 2008)



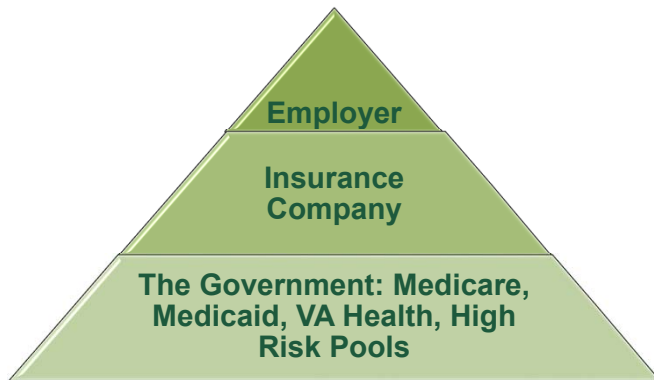
"Susan, hold all calls for the next six hours. I'm trying to comprehend the Affordable Care Act."

6



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Where We Get Health Insurance



7



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HOME TOOLKIT RESOURCES ABOUT CONTACT



Get personalized answers to questions about managing your finances after a cancer diagnosis at www.CancerFinances.org.

8



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Health Insurance Terms

Cost to Have Health Insurance

- Premium – each month

Costs When You Use Your Health Insurance

- Deductible – each year
- Co-Insurance or Cost-Share – each time you get care
- Co-Payment – each time you get care
- Out-of-Pocket Maximum =

deductible + co-payments + co-insurance

9



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Case Study: David

David's Plan: Deductible = \$2,000
 Co-insurance = 80/20 plan
 OOP Max = \$4,000

If David has a \$102,000 hospital bill, what does he pay?

1. His deductible of \$2,000
 $\$102,000 - \$2,000 = \$100,000$ left
2. His co-insurance amount of 20%
 $20\% \text{ of } \$100,000 = \$20,000$

But OOP max is only \$4,000. So, he would only pay the \$2,000 deductible + \$2,000 of the \$20,000 co-insurance amount, for a total of \$4,000.

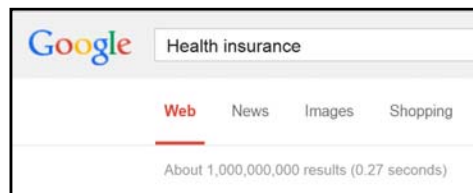
10



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Why Has it Been Hard to Get Health Insurance?

- Pre-existing conditions
- Cost
- Confusion



11



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Patient Protection & Affordable Care Act (ACA)



Signed into law on March 23, 2010

12




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Consumer Benefits


1. No rescissions (cancellations)
2. No lifetime or annual limits
3. Young adults can stay on parent's plan until 26
4. Free preventative care
5. Coverage for routine costs of a clinical trial
6. Minimum essential health benefits
7. External medical review
8. Standardized Summary of Benefits of Coverage
9. Medical loss ratio
10. Premium rating
11. Pre-existing condition protections
12. Improved Medicare benefits, including reduced Rx costs
13. Medicaid expansion
14. State Marketplaces – financial assistance, out-of-pocket caps

13



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2014 Protections




1. Premium Rating
 - Geographic Location (Ex: CA has 19 regions)
 - Age (64 year old can't be charged more than 3 times what a 21 year old can)
 - Tobacco (some states have eliminated this, too)
2. No Pre-Existing Condition Denials/Exclusions

Insurance companies **cannot** look at:


 - Pre-existing condition (physical or mental) or health history
 - Gender or age

14



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New Medicare Benefits




1. Free Wellness Visit
2. Free Preventative Care
3. Lowers the cost of prescription drugs

2017: Part D deductible = \$400; Donut hole between \$3,700 & \$7,425 (in total drug costs) www.medicare.gov/pubs/pdf/10050.pdf

Year	What you pay for brand name drugs in the coverage gap	What you pay for generic drugs in the coverage gap
2017	40%	51%
2018	35%	44%
2019	30%	37%
2020	25%	25%

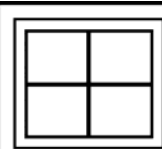
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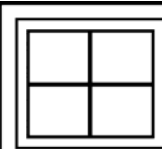
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Medicaid – Only Options Prior to 1/1/14

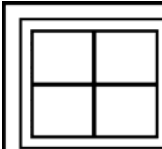
Eligibility: low income + low assets +



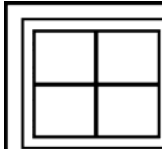
“Aged, Blind, Disabled”



Minor children




People with minor children



Pregnant women for up to 6 months after baby's birth

16



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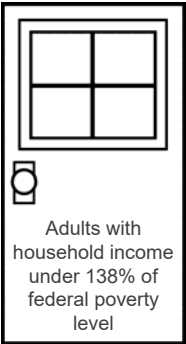
New Health Insurance Options - #1

Medicaid Expansion

New category (door) of eligibility:


- No asset / resource test

*Except Hawaii & Alaska



Adults with household income under 138% of federal poverty level

Household Size	138%*
1	\$16,642
2	22,411
3	28,179
4	33,948
5	39,716
6	45,484




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State Medicaid Expansion in 2017

Expanded 32	Not Expanded 19
AK ⁵ , AR ⁴ , AZ, CA, CO, CT, DC, DE, HI, IA ⁴ , IL, IN, KY, LA ⁷ , MA, MD, MI ¹ , MN, MT ⁶ , ND, NH ³ , NJ, NM, NV, NY, OH, OR, PA ² , RI, VT, WA, WV	AL, FL, GA, ID, KS, ME, MO, MS, NC, NE, OK, SC, SD, TN, TX, UT, VA, WI, WY

Updated: 7/7/2016 (information changes frequently, please check for updates)
¹ MI expansion began 4/1/14
² PA expansion began 1/1/15
³ NH expansion began 1/1/16
⁴ IA and AR implemented expansion through premium assistance & wrap around Medicaid
⁵ AK expansion began 9/1/15
⁶ MT enrollment began 11/2/15 for coverage that begins 1/1/16
⁷ LA Governor signed Executive Order for expansion that began 7/1/16





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NEW HEALTH INSURANCE OPTION #2

State Health Insurance Marketplaces

- “Exchanges” = insurance shopping mall
- Benefits:
 - Cap on OOP max: \$7,150 individual / \$14,300 family
 - Financial help
 - Premium tax credits
 - Cost-sharing subsidies





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Marketplace Plan Options

Standardized cost-share:

BRONZE PLANS	SILVER PLANS	GOLD PLANS	PLATINUM PLANS
Lowest monthly costs. Higher out-of-pocket costs when you receive care.	Higher monthly costs than Bronze plans. Lower out-of-pocket costs than Bronze plans.	Higher monthly costs than Silver plans. Lower out-of-pocket costs than Silver plans.	Higher monthly costs. Lower out-of-pocket costs than Gold plans when you receive care.
Plan Pays <input type="text"/> You Pay <input type="text"/>	Plan Pays <input type="text"/> You Pay <input type="text"/>	Plan Pays <input type="text"/> You Pay <input type="text"/>	Plan Pays <input type="text"/> You Pay <input type="text"/>
60% Coverage You pay 40%	70% Coverage You pay 30%	80% Coverage You pay 20%	90% Coverage You pay 10%

Catastrophic coverage (under 30 or \$ hardship)



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States Expanding Medicaid

Cost-Sharing Subsidies
(Silver Plans Only)

Household Size	100% (2017)	138% (2017)	250% (2016)	400% (2016)
1	\$12,060	\$16,642	\$29,700	\$47,520
2	16,240	22,411	40,050	64,080
3	20,420	28,179	50,400	80,640
4	24,600	33,948	60,750	97,200
5	28,780	39,716	71,100	113,760
6	32,960	45,484	81,450	130,320

↔ Medicaid
↔ Premium Tax Credits

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Avoiding Higher Medical Bills

www.HealthCare.gov/see-plans

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The Math Matters!

<p>BlueCross BlueShield Kansas Solutions, Inc. · BlueCare Solutions Simple Bronze</p> <p>Bronze HMO Plan ID: 27811K/S0300008</p> <p>Estimated monthly premium: \$173</p> <p>Deductible: \$6,000</p> <p>Out-of-pocket maximum: \$6,000</p>	<p>#1:</p> $\$173 \times 12 = \$2,076$ + OOP = \$6,000 Total = \$8,076	
<p>Blue Cross and Blue Shield of Kansas, Inc. · BlueCare Signature</p> <p>Silver PPO Plan ID: 18559K/S0300017</p> <p>Estimated monthly premium: \$271</p> <p>Deductible: \$2,500</p> <p>Out-of-pocket maximum: \$5,200</p>	<p>#2:</p> $\$271 \times 12 = \$3,252$ + OOP = \$5,200 Total = \$8,452	
<p>Blue Cross and Blue Shield of Kansas, Inc. · BlueCare Elite with pediatric dental</p> <p>Platinum PPO Plan ID: 18559K/S0300001</p> <p>Estimated monthly premium: \$398</p> <p>Deductible: \$0</p> <p>Out-of-pocket maximum: \$1,150</p>	<p>#3:</p> $\$398 \times 12 = \$4,776$ + OOP = \$1,150 Total = \$5,926	

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What are the differences between plans?

- Cost
 - Premium, Out of Pocket, Co-Pay, Cost-Share
- Networks of doctors and hospitals
 - Check to make sure your doctors are covered by the plan you choose
- Prescription drug coverage
 - Which drugs are covered?
 - Is there a separate drug deductible?

25



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Checking Providers, Facilities, & Drugs

UnitedHealthcare - Silver Compass Plus 2000-1
(Blue PPO) Plan ID: 88071A20020010

Estimated monthly premium \$232 <small>Premium before tax credit: \$238</small>	Deductible \$1,800 <small>Estimated Individual Total</small>	Out-of-pocket maximum \$4,900 <small>Estimated Individual Total</small>
Estimated total yearly costs CALCULATE	Your doctors, medical facilities, and prescription drugs EDIT	Copayments / Coinsurance <small>Emergency room care: \$500 Copay after deductible Generic drugs: \$10 Copay after deductible Primary doctor: \$25 Copay after deductible Specialist doctor: \$50 Copay after deductible</small>

People covered
 You (age 42)

Documents
[Summary of Benefits](#)
[Plan brochure](#)
[Provider directory](#)
[List of covered drugs](#)

26



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Elections Have Consequences



27



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What's on the Table? Everything.

- NCI & NIH - funding reductions
- FDA - roll back
- CHIP - reauthorization
- Medicare – privatization or vouchers
- Medicaid – block grants
- ACA
 - Medicaid Expansion
 - Marketplace + financial assistance
 - Consumer Protections
 - Individual & Employer Mandate
 - 21st Century Cures Act & Prevention Fund

28



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The Waiting Game

“We’re going to have insurance for everybody . . . much less expensive and much better.”



29



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Triage Cancer Educational Blog

Triage Cancer Blog

<http://triacancer.org/blog>

...helping navigate cancer survivorship

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A Post-Election Update: Health Insurance in the U.S.

Posted on November 10, 2016



There is no doubt about it, the results of the 2016 presidential election will bring significant changes to our country. Some of the most significant changes will likely be to our health care system and the way that many of us access health insurance coverage.

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30



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Think Creatively about Finances

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Investments and Financial Services



“All of my money is tied up in futures: Next month’s mortgage payment, next week’s car payment, tomorrow’s groceries...”

31



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Disability Insurance Options

- Disability Insurance
 - Private Disability Insurance
 - Purchase through employer
 - Purchase directly from company
 - State Disability Insurance
 - Short-term disability benefits
 - CA, NY, NJ, RI, HI, and PR
 - Federal Disability Insurance
 - Long-term disability benefits
 - Social Security Disability Insurance (SSDI)
 - Supplemental Security Income (SSI)

32



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Income for Caregivers

- State Paid Leave for Caregivers
 - Ex: CA, DC, NJ, RI, WA
 - May be other state laws that provide paid leave for specific employees
- IHSS
 - In-Home Support Services, but may be called something different in each state
 - Through state Medicaid program

<http://trriagecancer.org/stateresources>

33



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Other Sources of Income

- Supplemental insurance policies
 - Ex: AFLAC
- Can you adjust your tax deductions?
- Assistance programs from mortgages/credit cards/etc. that suspend payments when you have a disability or lose your job
- Loans from 401k plans/pensions/retirement accounts
- Life insurance loans
- Viaticals (life insurance sales)



34



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Financial Education Resources

Available at

www.TriageCancer.org/Resources

- Navigating Finances After Cancer



Available at

www.TriageCancer.org/Webinars

- Don't Drown in Medical Debt
- Managing Your Finances During and After Treatment

35



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Employment Rights

Federal Fair Employment Laws

- Americans with Disabilities Act (ADA)
 - Discrimination protections for patients and caregivers
 - Reasonable Accommodations for patients

State Fair Employment Laws

- Discrimination protections for patients and caregivers
- Reasonable Accommodations for patients

Leave Laws

- Family & Medical Leave Act (FMLA)
- State Leave Laws

Employment Contracts

- Employment Contract
- Union Contract

*Triage Cancer Quick Guides & Chart of State Laws

36



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Employer Policies

- Employee Benefits
 - Health/dental/vision insurance
 - Short-term and/or long-term disability insurance
 - Life and/or accidental death insurance
- Other Benefits
 - Sick time
 - Vacation time or paid time off (PTO)
 - Pool of donated hours
 - Flex time/job sharing/telecommuting
 - EAP programs
- Medical Leave Process
- Reasonable Accommodation Process



37



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Americans With Disabilities Act (ADA)

Eligibility:

- Private employers with 15 or more employees & State/Local Governments
 - Note: Federal employees covered by Rehabilitation Act of 1973 (similar to ADA)
 - ADA does not apply to tribal employers
- Be a “qualified individual”
- Have a disability under the ADA’s definition

38



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Employer Size - State Fair Employment Laws

1	2	3	4	5	6	8	9	12
AK	CO	CT	IA	CA	MA	KY	AR (but 15	WV
HI	WY		KS	ID	MO	TN	for RA's)	
IL			NM		NH	WA		
ME			NY		OR			
MI			OH					
MN			PA					
MT			RI					
NJ								
ND								
SD								
VT								
VA								
WI								

*If state is not listed, it requires 15 employees

39



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Disclosure Rights

Generally, not required, but may need to disclose information to use . . .

- ADA’s discrimination protections
- Reasonable accommodations
- Medical leave

For an in-depth discussion of this issue:

www.cancerandcareers.org/en/community/videos/BWC-2015/2015-webinar-online

40



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What Are Reasonable Accommodations?

“Any change in the work environment or in the way things are customarily done that enables an individual with a disability to enjoy equal employment opportunities”

41



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Reasonable Accommodations

Modifying Work Space

- Phone, fax, files within easy reach
- Switching offices
- Special furniture requests

Modifying Schedule

- Working from home
- Part or full-time
- Flexible schedule
- Schedule breaks
- Extended leave

Other Options

- Use of Technology
- Change in Policy
- Shift Job Responsibilities
- Change Job

42



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Family & Medical Leave Act (FMLA)

- Can take up to 12 weeks per year of unpaid (but job & health insurance protected) leave, for:
 - Employees with a serious medical condition
 - Employees with a spouse, parent, or child with a serious medical condition
 - Parents
 - Spouses (common law spouses & same-sex spouses as of 3/27/15)
 - » Note: not domestic partners
 - Children (biological, foster, adopted, step, or *in loco parentis*)
 - » 18+ only if “incapable of self-care because of a mental or physical disability”

43



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State Leave Laws

- FMLA type leave for smaller employers:
 - DC (20), ME (15 pvt, 25 public), MD (15), MN (21), OR (25), RI (30 for public employers), VT (15)
- Expanded definition of family:
 - CT, DC, HI, MD, NJ, OR, RI, VT, WI
- Expanded use of FMLA leave:
 - CT, ME, MD, OR
- Paid sick leave:
 - DC, CT, CA, MA, OR + Cities – see chart
 - Federal Contractors - EO
- Unpaid leave to take family members to routine medical visits:
 - MA, VT

*Triage Cancer Chart of State Laws

44



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Triage Cancer Quick Guides & Resources

Quick Guides on employment, disability, health insurance, finances, advocacy & more!

<http://trinecancer.org/resources/quickguides>

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Triage Cancer Webinars

<p>PRECISION MEDICINE: THE FUTURE OF PERSONALIZING CANCER CARE</p> <p>January 24, 2017 <i>Swati Sikaria, MD</i></p> <p>What is precision medicine? How does it relate to cancer? Is precision medicine available today?</p> <p>11am P / 1pm C / 2pm E</p>	<p>CAM & CANCER: SHOW ME THE PROOF!</p> <p>February 22, 2017 <i>Rita Abdallah LISW-S, ACSW</i></p> <p>Learn about 5 common complementary and alternative medicine (CAM) practices for those in active cancer treatment.</p> <p>12pm P / 2pm C / 3pm E</p>	<p>BUILDING A STRONGER RELATIONSHIP WITH YOUR PARTNER AFTER A CANCER DIAGNOSIS</p> <p>March 22, 2017 <i>Alli Schafer, LCSW</i></p> <p>Learn how to navigate a relationship with your partner after these changes in your life.</p> <p>1pm P / 3pm C / 4pm E</p>
<p>YOU AND YOUR BODY: CANCER, INTIMACY, & SEXUALITY</p> <p>April 19, 2017</p>	<p>ANTICIPATORY GRIEF & END OF LIFE CARE</p> <p>May 24, 2017</p>	<p>AN UPDATE ON OUR HEALTH CARE SYSTEM</p> <p>June 21, 2017</p>

Register: <http://trinecancer.org/webinars>

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Contact Information

Email
info@TriageCancer.org

Website
www.TriageCancer.org

Twitter
[@TriageCancer](https://twitter.com/TriageCancer)

Facebook
www.Facebook.com/TriageCancer

Blog
www.TriageCancer.org/blog

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