

Health Insurance and Medical Bills

Health insurance is complicated, but it is important to understand how to choose and use your health insurance coverage to keep your costs lower and get the care you need.

*What to Consider When Choosing a Health Insurance Plan
Managing Medical Bills*



Health Insurance Terms to Understand ⓘ

ANNUAL DEDUCTIBLE

The fixed dollar amount you have to pay out-of-pocket each year, before your health insurance policy kicks in.

CO-PAYMENT

A fixed dollar amount you pay when you receive medical care (e.g. \$20 per doctor visit).

CO-INSURANCE (AKA COST-SHARE)

A percentage difference in what the insurance company pays for your medical expenses and what you pay. (e.g. 80% covered by insurance, 20% paid by you)

OUT-OF-POCKET MAXIMUM

A fixed dollar amount that is the most you have to pay out-of-pocket for medical expenses during the year. Once you reach your out-of-pocket maximum, your insurance pays 100% of your medical expenses for the rest of the year. Generally, it includes your deductible, co-payments, and co-insurance.



What to Consider When Choosing a Health Insurance Plan

- * What will the plan actually cost me? What premium, deductible, co-pays, co-insurance and out-of-pocket maximum does the plan have?

Don't just pick the plan with the lowest monthly premium, do the math for the total cost: $(\text{Plan's monthly premium} \times 12 \text{ months}) + \text{Plan's out-of-pocket maximum} = \text{Total annual cost}$

- * Are my health care providers and facilities included in the plan's network?
- * Does the plan cover my prescription drugs and the pharmacies I use?

Health Insurance Options

The health insurance options available to you depend on where you live, your age, your employment, your income level, and a number of other factors.



HEALTH INSURANCE MARKETPLACES: Provides private health insurance plans from insurance companies. You may qualify for financial assistance to help pay for the plan based on your income level. You can sign up during open enrollment or if you qualify for a special enrollment period (SEP) due to a qualifying event.



COBRA: A federal law that allows eligible employees to keep their existing employer-sponsored health insurance plan for 18-36 months after experiencing a "qualifying event," such as leaving your job. COBRA will cost 102% of the premium, including what your employer had been paying on your behalf.





MEDICAID: A federal health insurance program that covers low-income individuals. In states that have expanded Medicaid, you may be eligible if your household income is under 138% of the federal poverty level (FPL). If you live in a state that has not expanded Medicaid, eligibility is based on having a low-income level, a low resource level (e.g., assets), and meeting another category of eligibility, such as receiving SSI disability benefits. Medicaid applications are accepted year-round.

Medicare

MEDICARE: A federal health insurance program that covers individuals who are 65 or older, have received SSDI more than 24 months, or have been diagnosed with end-stage renal disease or ALS. Medicare coverage is broken down into 4 parts, each of which has different costs:

Parts A and B together are referred to as Original Medicare. Someone with Original Medicare may choose to buy a supplemental Medigap plan to help with out-of-pocket costs.

PART A • Hospital Insurance. Includes hospital care, skilled nursing facilities, nursing homes, hospice, and home health care.

PART B • Medical Insurance. Includes outpatient care from doctors, preventive care, lab tests, mental health care, ambulances, and durable medical equipment.

PART D • Prescription Drug Coverage. Plans are sold by private insurance companies and you have different options based on where you live.

PART C • Advantage Plans. An alternative to Parts A and B, these plans sold by private insurance companies include the care covered under A and B, and usually Part D.

If you have a low-income and low resources, you may be eligible for a Medicare Savings Program and/or the Extra Help Program to help pay for Medicare or you may be eligible for both Medicare and Medicaid.

ANOTHER GROUP HEALTH PLAN: You may be eligible for a special enrollment period to move to a group plan that is available to you through another job that you might have, your spouse's group plan, or a parent's group plan (if you are under 26). Check the other employer's plan for additional rules, and to see if you qualify for a SEP.

For more information on health insurance options, visit

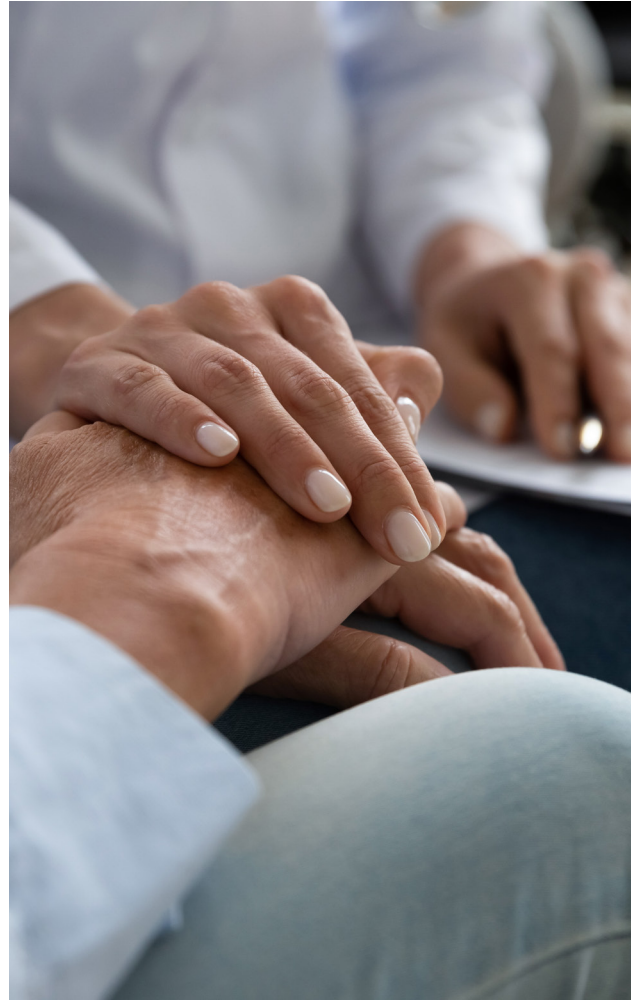
→ [TriageCancer.org/HealthInsurance](https://www.TriageCancer.org/HealthInsurance)



Managing Medical Bills

Cancer care is expensive. But knowing some key tips on how to manage your medical bills can help you avoid unnecessary expenses.

- ✔ Have adequate health insurance with lower out-of-pocket costs
- ✔ Discuss costs with your health care team before treatment
- ✔ Keep track of your out-of-pocket payments
- ✔ Get any required pre-authorizations before you receive care
- ✔ Go to in-network providers who are covered by your health plan



Reviewing Your Medical Bills

Once you've gotten a medical bill, it's important to review it to make sure it's correct and compare it to the Explanation of Benefits (EOB) from your insurance company. Ask your provider or insurance company if you have any questions.



Appealing Denials

At some point during cancer treatment, you may experience a denial of coverage from an insurance company. You have the right to appeal the denial. There are different rules for filing appeals depending on the type of health insurance coverage that you have. If you have a private individual health insurance policy or a health insurance policy through work, you generally have two chances to appeal a denial of coverage through an internal and external appeal. For details on appeals, visit: [TriageCancer.org/cancer-finances-appeals](https://www.triagecancer.org/cancer-finances-appeals).





Paying Your Medical Bills

If you receive a medical bill that you are unable to pay, it is important not to ignore it. Consider contacting your provider to ask for more time or see if your provider would be willing to negotiate a payment plan or accept a lower lump-sum payment. It is also important not to wait too long to contact your provider about an unpaid medical bill, or it may be sent to collections.



Finding Financial Help

Think broadly about the types of financial help that may be available to you. For example, you may be able to get utility assistance and shift those funds to help pay your medical bills. Consider:

- State, county, or local government programs (e.g., 2-1-1, utilities, food, housing, and transportation)
- Private financial assistance programs in the health care or cancer community
- Pharmaceutical company assistance programs
- Local service organizations and faith-based organizations

For more information about financial help, visit

→ [TriageCancer.org/Navigating-Finances](https://www.TriageCancer.org/Navigating-Finances)



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