

Cascade Hemophilia Consortium

Letter From Cascade's Clinical Care Managers

Happy 2020! With the holidays behind us, the New Year can be a time of many changes. Maybe it's a New Year's resolution to eat healthier foods or exercise. January can also bring changes in your health insurance. You might have a new insurance plan or maybe your deductible has re-started for 2020. As you think about your healthcare expenses for 2020, we have some tips that bear repeating to make using your insurance a smoother process. If you have questions about your health insurance situation, please don't hesitate to call one of us at 734-996-3300.



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Know Your Insurance Plan

Deductible

The amount you owe for health care services before your health insurance or plan begins to pay. For example, if your deductible is \$1,000 your plan won't pay anything until you've met your \$1,000 for health care services subject to the deductible. The deductible may not apply to all services.

→ WHAT IS YOUR INSURANCE DEDUCTIBLE?

Co-insurance

Your share of the costs of a covered health care service calculated as a percent (for example, 20%) of the amount your insurance allows for the service. You pay co-insurance plus any deductibles you owe. For example, if the health insurance or plans allowed amount for an office visit is \$100 and you've met your deductible, your co-insurance payment of 20% will be \$20. The health insurance or plan pays the rest of the allowed amount.

→ WHAT IS YOUR CO-INSURANCE AMOUNT?

Out-of-pocket Limit (or Max)

The most you pay during a policy period (usually a year) before your health insurance or plan begins to pay 100% of the allowed amount. This limit never includes your premium, balance-billed charges or health care your plan doesn't cover. Some health insurance or plans don't count all of your co-payments, deductibles, co-insurance payments, out-of-network payments or other expenses toward this limit; although some do.

→ WHAT IS YOUR OUT-OF-POCKET MAX?

Where Does Co-payment Fit In?

Fixed amount (for example \$15) you pay for a covered health care service, usually when you receive the service. (Doctor visits, etc.) The amount can vary by the type of covered health care service regardless of whether or not you have met the deductible.

→ WHAT ARE YOUR CO-PAYMENTS?

Credit: www.reginfo.gov

Cascade... A Trusted Partner in Your Circle of Care

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Language assistance services are available free of charge. Call: 1-800-996-2575.
 ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-996-2575.
 (1-800-996-2575) സഹായം: നിങ്ങളുടെ ഭാഷയിൽ സഹായം ലഭിക്കാൻ സൗജന്യ സേവനം ലഭ്യമാണ്. 1-800-996-2575 ന്റെ നമ്പർ വിളിക്കുക.

Cascade Mission Statement
 To enhance the system of care for people with bleeding disorders and related complications, by assuring the lowest possible price for the full range of treatments, HIV and hepatitis related therapies and other medications available to treat their disease; to provide access to these medications for those without insurance or inadequate insurance coverage; to support the comprehensive hemophilia treatment centers in treating and educating consumers and their families so they may become knowledgeable and proactive in managing their own care; to fund research.

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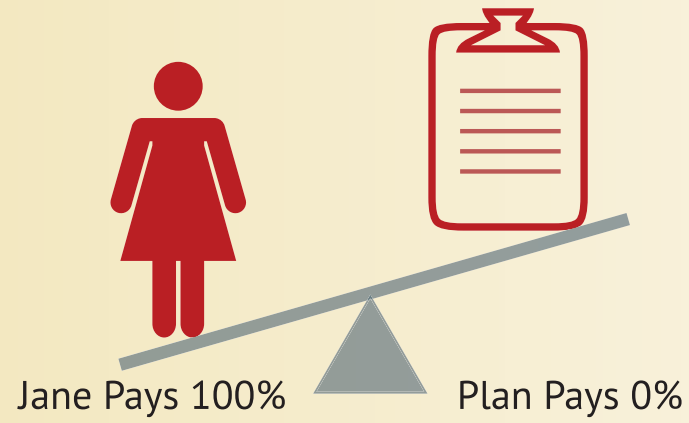
How You and Your Insurer Share Costs

A Review of Jane Doe's Insurance Plan

Based on: www.reginfo.gov

Beginning of Coverage Period January 1st

Before \$1,500 Deductible is Met

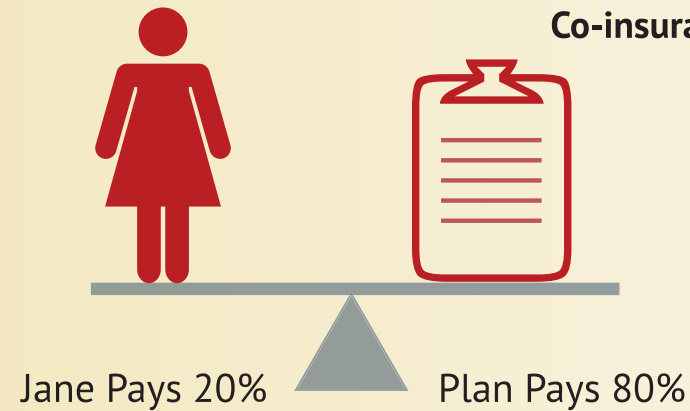


Jane's plan doesn't pay any of the costs.

Office visit costs:	\$125
Jane pays:	\$125
Plan pays:	\$ 0

Deductible Reached

\$1,500 Deductible Reached Co-insurance Begins

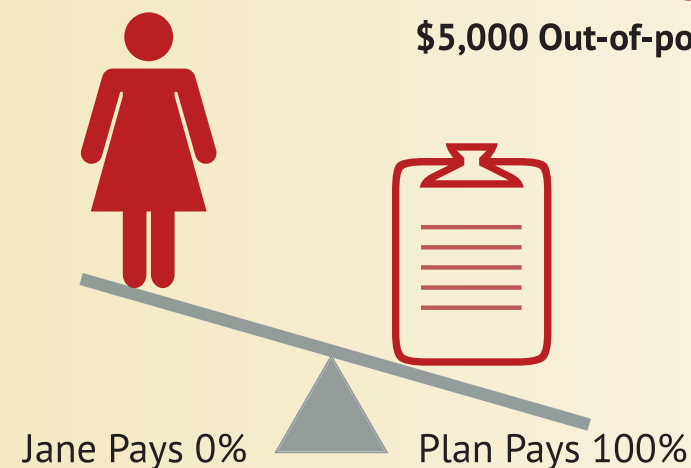


Jane has seen a doctor several times and paid a total deductible of \$1,500.
Her plan pays some of the costs for her next visit.

Office visit costs:	\$125
Jane pays 20% of \$125:	\$ 25
Plan pays 80% of \$125:	\$100

End of Coverage Period December 31st

\$5,000 Out-of-pocket Limit is Met



Jane reaches her \$5,000 out-of-pocket limit.

Jane has seen the doctor often and paid \$5,000 in total.

Her plan pays the full cost of her covered health care services for the rest of the year.

Office visit costs:	\$125
Jane pays:	\$ 0
Plan pays:	\$125

Start the New Year Right!

2020 Insurance Checklist

Understand Your Insurance

- ✓ Does your insurance require a Primary Care Physician (PCP) and referrals to specialists? If so, have you seen your PCP?
- ✓ Does your insurance cover your factor product and/or medication? Is your factor covered by the medical or pharmacy benefit?
- ✓ Many insurances cover preventative health services such as annual physicals, flu shots, and women's health, free of charge. Does yours?

What are Your Out-of-Pocket Costs? Do You Need Help Paying Them?

- ✓ Review your deductible, co-insurance and co-pay costs. Can you afford them?
- ✓ Do you have an out-of-pocket maximum? Do the deductibles, co-insurance, and co-pays count toward your maximum out-of-pocket costs?
- ✓ Have you explored state programs such as BCMH (Ohio) or Children's Special Health Care Services (Michigan) to help with extra bleeding disorder expenses?
- ✓ Have you explored the Manufacturer's Co-pay Assistance Programs to help cover factor costs? (No income guideline required).
- ✓ If you have Medicare, have you explored assistance with costs? Ask your HTC social worker or Cascade care manager if you qualify.

Know Your Network! (Providers Approved by Your Insurance Company)

- ✓ Are all of your providers in your insurance network? (Primary Care, HTC, Specialty Pharmacy, Home-Care)
- ✓ Are you able to go outside of the network? If so, at what cost?

Multiple Insurance Plans? Coordinate Your Benefits. It's the Law!

- ✓ Call all of your **insurance plans** and tell them about all other plans, as they will eventually find out about each other and deny your claims. Nobody wants a big bill coming back at you!
- ✓ Tell all of your **health care providers** about all of your insurance plans! There are rules about which plan is primary. Not following those rules could mean that you will be responsible for payment.
- ✓ Understand that Children's Special Health Care, BCMH or Medicaid are always the *payer of last resort*, when you have two or more plans.

Is Your Insurance Changing?

Tell Cascade Right Away!

Let ALL of your providers know right away if your insurance changes.

They may be out of network or your new insurance may require time-consuming prior authorizations for your factor.

Letting us know could save you a longer wait to get your factor/medications in the end!