Your Circle of Care A Trusted Partner in wapvosva

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9955-966-757 \$257-966-008 Phone: 754-996-5500

Available for after hours emergencies Mours: M-F 9:00 am - 5:00 pm

> Ann Arbor, MI 48103 517 West William Street





Language assistance services are available free of charge. Call: 1-800-996-2575 Cascade's Limited English Proficiency Language Assistance Services

your old card for your protection and begin using your new card right away. Medicare number. (If you have an updated address, let Medicare know.) Please shred for the new card. It will come directly from Medicare, and include your unique new new cards in the mail beginning in April 2018 to April 2019. You do not have to pay don't display a person's social security number. If you are on Medicare, expect your To protect seniors from identify theft, Medicare is requiring new Medicare cards that

Medicare and identity Theit Protection

Cascade Hemophilia Consortium

Letter From Cascade Social Workers



Happy New Year!

The season for open enrollment has ended and many of you have done the hard work of choosing your plan for the year. Then why are we talking about it in January? Because we have some helpful tips to make using your insurance throughout the year a smoother process. Please take the time to review them.

If you have questions about your individual situation, please don't hesitate to call us at 734-996-3300.



Debbie Whelan, LMSW Colleen Joiner, LMSW

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 YOUTZ INSUTZANCE 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 YOUT CO-INSUTANCE 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 YOUTZOUT-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 ATZE YOUTZ CO-PAYMENTS?

Credit: www.reginfo.gov

Cascade Staff

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Ted Beimel, PharmD **Pharmacist**

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> (Volume 3, Issue 1) - January 2018 -

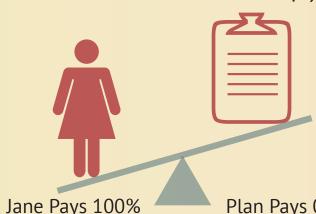
How You and Your Insurer Share Costs

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: Plan pays:

Plan Pays 0%

Plan Pays 80%

Deductible Reached



Jane Pays 20%

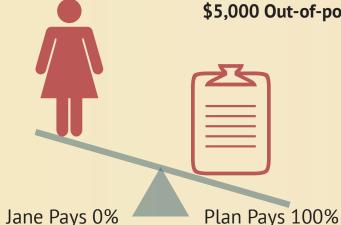
\$1,500 Deductible Reached **Co-insurance Begins**

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: 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:

Start the New Year Right!

2018 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?
- \checkmark 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?
- \checkmark 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 or Cascade social worker 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)
- \checkmark Are you able to go outside of the network? If so, at what cost?

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

- \checkmark 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.
- \checkmark 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!