

FEATURE STORY

Before Treatment: Insurance Issues

Strategies to make sure you're getting the most out of your insurance plan

It is important to have and keep good medical insurance. Many patients have private insurance through employee group plans or individual plans. There are several types of health insurance plans, so it's important for you to become familiar with your individual insurance plan and its provisions.

Many expenses are associated with management of most cancers. Some insurance plans provide for additional coverage under a "catastrophic illness" clause. These policies cover major medical care needs and usually have a very high deductible and fairly low premiums. They are useful when a person's primary medical policy has a low lifetime limit and are appealing to people with chronic illnesses.

Some insurance policies pay a fixed amount for each day a person is hospitalized. There is usually a limit on the total number of hospital inpatient days that are covered in a calendar year. The money received from a hospital indemnity policy can be used as the insured wishes, but it is often used for the other expenses that families face when one member is ill.

Keeping Records of Insurance and Medical Care Costs

Keeping accurate records of medical bills, insurance claims, and payments will help families manage money better and keep stress levels lower. Record-keeping is also important for those who wish to take advantage of the deductions available in filing itemized tax returns. The [Internal Revenue Service](#) can provide information and free publications regarding tax exemptions for cancer treatment expenses.

KEEP RECORDS OF THE FOLLOWING:

- > Medical bills from all health care providers
- > Claims filed
- > Reimbursements and explanations of benefits
- > Dates, names, and outcomes of contacts made with insurers and others
- > Non-reimbursed or outstanding medical costs

- > Meals, lodging, and travel expenses, including gas
- > Long-distance telephone calls related to medical or other types of care, including psychosocial care
- > Admissions, clinic visits, lab work, diagnostic tests, procedures, and treatments
- > Drugs given and prescriptions filled

SUGGESTIONS FOR RECORD-KEEPING:

- > Decide who will be the family record-keeper or how the task will be shared.
- > Seek the help of a relative or friend. This may be especially important for people who are single.
- > Set up a file system in a file cabinet, drawer, box, or three-ring notebook.
- > Check all bills and explanations of benefits paid for accuracy.
- > Review bills promptly after receiving them.
- > Save and file all bills, payment receipts, and canceled checks.
- > Keep a daily log of events and expenses; a calendar with space for writing is useful.
- > Maintain a list of phone numbers for cancer care team members and other contacts.

Handling a Claim Denial or Refusal to Cover a Prescribed Service

It is not unusual for particular claims to be denied or for insurers to say they will not cover a test, procedure, or service a doctor orders. If this occurs it is important to have a working relationship with a case manager who can discuss your situation.

The first step should be to resubmit the claim with a copy of the denial letter. It may be necessary for the patient's doctor to explain or justify what has been done or is being requested. Sometimes the test or service only will need to be "coded" differently. If challenging the denial in these ways is not successful, then you may need to:

- > Postpone payment until the matter is resolved.
- > Resubmit the claim a third time and request a review.
- > Ask to speak with a supervisor who may have authority to reverse a decision.
- > Seek help from the consumer services division of your state insurance department or commission.
- > Consider legal action.

Make sure you keep originals of correspondence. Your record-keeping team may be able to help make copies. Also keep a record of dates, names, and conversations you have about the denial.

Options for the Uninsured

If you are not insured, the following are options to consider in seeking coverage:

Determine whether you can apply for group insurance through fraternal or professional organizations, such as those for retired people, teachers, social workers, or real estate agents.

Explore your eligibility for Medicare, which covers most people who are 65 or older or who are permanently disabled and have been receiving Social Security benefits for about two years.

Check your eligibility for state or local benefits, such as Medicaid, if you are in a low-income bracket or are unemployed.

Adapted with permission of the American Cancer Society