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A Greater Understanding

Help! I’m Uninsured



PAF Patient Advocate
Foundation

A Greater Understanding

Patient Advocate Foundation

■ MISSION STATEMENT

Patient Advocate Foundation is a national non-profit organization that serves as an active liaison between the patient and their insurer, employer and/or creditors to resolve insurance, job retention and/or debt crisis matters relative to their diagnosis through case managers, doctors and attorneys. Patient Advocate Foundation seeks to safeguard patients through effective mediation assuring access to care, maintenance of employment and preservation of their financial stability.

Editors Note:

This is the ninth in the series “A Greater Understanding” brochures developed by the Patient Advocate Foundation. The information contained herein is in response to frequently asked questions (FAQ’s) by patients. This brochure is intended to provide a general yet informative response to these inquires. Any incident, inquiry or issue may vary according to these specific facts and circumstances relating to the individual.

Help! I’m Uninsured... has been written in response to the many concerns that have been identified by PAF patients. This guide should assist those patients who are medically uninsured and experiencing trouble with accessing proper healthcare. We hope that many patients will benefit from this guide and will ultimately feel more capable of navigating America’s complex healthcare system. It is our sincerest hope that *Help! I’m Uninsured...* will provide you with the necessary tools to both educate and assist you in your time of need.

■ Hill-Burton Free Hospital Care

The Hill-Burton program was established in 1946, when Congress passed a law which gave many hospitals and other health care facilities federal funds to meet their construction and/or modernization needs. In return, these facilities are required to provide a specific amount of free or reduced cost health care. Eligibility for Hill-Burton services may be based on your household income. You should call the business office of the facilities which are of interest to you to ensure that they are still participating in the Hill-Burton program. For more information, visit www.hrsa.gov or call 1-800-638-0742.

■ Medicaid

Medicaid is a federally-funded, state-run program that provides medical coverage for individuals and families with limited income and resources that meet certain eligibility guidelines. Since Medicaid coverage varies from state to state, a person who is eligible for Medicaid in one state may not be eligible in another state and the services provided by one state may differ. Check with your local Social Services agency to see if you qualify.

The Breast and Cervical Cancer Mortality Prevention Act of 1990 established the National Breast and Cervical Cancer Early Detection Program, which provides screening and diagnostic services such as mammograms and pap smears for women who are uninsured. For more detailed information you may call 1-888-842-6355 or contact your local health department. If diagnosed under this program, Medicaid benefits will be provided to uninsured patients. A financial counselor or social worker at your local hospital should be able to assist you with applying.

■ Charity Care

If you have not yet started treatment, you may want to find a facility that offers charity care or has a financial assistance program. Call the billing office of a selected facility and ask if they have a hardship, charity or an indigent program. These are most likely found at public hospitals and faith-based facilities. Be prepared to offer the facility details about your health and financial status.

There are many programs available to assist you with getting your medications. Many medications are available through patient assistance programs offered by the pharmaceutical companies. Each company has their own

eligibility requirements and applications. You can visit www.needymeds.com or www.helpingpatients.org for complete listings of all drugs available through indigent programs.

■ Individual Insurance Plans

Depending on your medical history, you may be able to purchase an individual plan. If you have had a previous health condition, you may face a pre-existing condition waiting period. The length of the waiting period must be disclosed to you if it is imposed. Individual plans are subject to state laws. To learn more about state laws, contact your state insurance commissioner.

■ Risk Pool Coverage

Some states offer Risk Pool Coverage which provides health insurance options for high risk individuals. These are state programs that serve people who have pre-existing health conditions and often are denied or find it difficult to obtain affordable coverage in the private market. Contact your State Insurance Commissioner for further information.

■ Group Health Insurance Plans

Most Americans obtain health insurance coverage through an employer as part of a group health benefit. The primary reason people are uninsured, is because they simply cannot afford the coverage. For many uninsured individuals, the cost of health insurance is compared against the need for living necessities. Check with your local Medicaid office to find out if your state offers a HIPPP (Health Insurance Premium Payment) program.

If you are self-employed check to see if your state has any health insurance companies that offer group health plans for groups of one. This will vary by state and requirements will vary by

insurance company. To learn if your state offers this coverage you can contact your state insurance commissioner or local insurance agent.

If you lose your group health coverage benefits, check with your local Medicaid office to determine if your children are eligible for coverage through the SCHIPS (Children's Health Insurance Program). This program is typically administered on a sliding fee scale, allowing the parent(s) to have a higher income. For more information, visit www.insurekidsnow.gov.

■ COBRA

The Consolidated Omnibus Budget Reconciliation Act (COBRA) contains provisions giving certain former employees, retirees, spouses, former spouses and dependent children the right to temporary continuation of healthcare coverage under the employer's group plan. There are five qualifying events where COBRA election would be necessary:

- 1) Voluntary or involuntary termination of employment for reasons other than "gross misconduct"
- 2) Reduction in the number of hours of employment
- 3) Divorce or legal separation of the covered employee
- 4) Death of the covered employee
- 5) Loss of "dependent child" status under the plan rules

■ Clinical Trials

A clinical trial is a type of research study that uses volunteers to test new methods of prevention, screening, diagnosis or treatment of a disease. Clinical trials are a way for those to access other therapy after they have exhausted traditional or standard of care but also for those who may be uninsured or underinsured. Some trials absorb most or all of the treatment cost and can be a cost effective way to access care. The National Institute of Health (NIH) and National Cancer Institute (NCI) offer a broad range of clinical trials.

NIH focuses on all trials regardless of disease where NCI only does cancer related trials. In order to be prescreened for their trials you must call NCI at 1-888-624-1937 and NIH at 1-800-411-1222 to determine if you fit their criteria.

Patient Advocate Foundation is dedicated to ensuring that all Americans have access to healthcare. Case Managers are available to assist patients affected by debilitating or life threatening illnesses by empowering them to be able to make informed decisions regarding their healthcare options.

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