

Health Insurance for the PI Community

Thursday, May 5, 2022





### WELCONE





#### MISSION

Improving the diagnosis, treatment, and quality of life of people affected by primary immunodeficiency through fostering a community empowered by advocacy, education, and research.

#### VISION

IDF seeks to ensure that everyone in the U.S. affected by PI has a fully informed understanding of

- 1. the PI diagnosis that affects them,
- 2. all available treatment options,
- 3. the expected standard of care,

4. all their opportunities for connection and support within the PI community.



#### THANK YOU TO OUR SPONSORS

**CSL Behring** 





HORIZON



















Health Insurance for the PI Community

Thursday, May 5, 2022



#### How It All Starts

See your doctor

Thorough work-up & diagnosis

Save your lab results and diagnosis letter from your doctor!!!



#### Health Insurance Plans

- Private
  - -Employer
  - -Marketplace
  - -Broker

- Public
  - -Medicare
  - -Medicaid



### Understand Your Rights

- Coverage for individuals with pre-existing conditions
- No out-of-pocket costs for preventative services when delivered by a provider in your plan's network
- No annual and lifetime caps on all plans
- Annual out-of-pocket limits
- Dependent coverage to the age of 26

### Every Plan is Different



#### Questions to Ask

- What is my premium?
- What is my out-of-pocket maximum?
- What are my deductibles?
- Is deductible included in the out-of-pocket maximum or is it in addition to the maximum? (Private insurance only)
- Is there a co-pay accumulator? (Private insurance only)

#### More Questions to Ask

Are my physicians in the plan's network?

Are there out-of-network benefits? (Private insurance only)

How is immunoglobulin (Ig) therapy covered?

–Do I have a coinsurance or a flat co-pay?

–Do I have options for site of care?

#### And... More Questions

- Do I need a referral to see a specialist?
- What services require prior authorization?

- Is Ig Therapy subject to a restrictive formulary?
  - -Will I be required to change products? (Least Cost Medically Necessary Brands)
- Does the plan offer case management to assist in navigating my benefits?

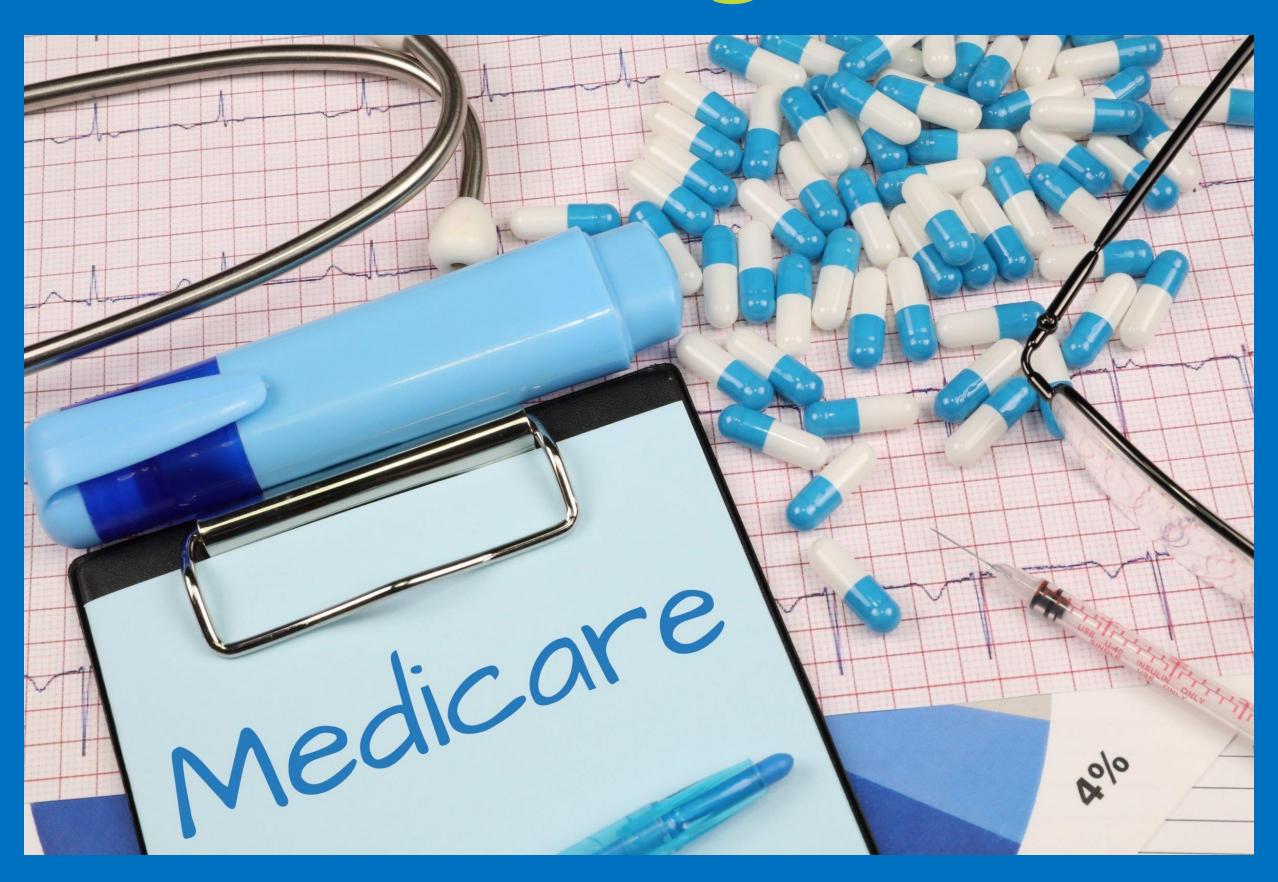
# Working with a Specialty Pharmacy

Your prescriber will send the prescription to the specialty pharmacy used by your insurance company

Benefits will be checked to see if meds will be filled through your medical or pharmacy benefit.

All insurance companies follow Medicare guidelines.

### Understanding Medicare



## Medicare Part B Pl Diagnoses Covered for Home Ig Replacement

- Ig replacement therapy is covered for PI diagnoses listed at
  - -https://primaryimmune.org/news/more-pi-diagnoses-covered-home-ig-replacement-therapy-under-medicare-part-b

#### IVIG Demonstration Project

- Contact
  - -https://med.noridianmedicare.com/web/ivig

#### Medicare Part B

Medical Coverage

Outpatient Care

Home Health Care

Durable Medical Equipment (walkers, hospital beds, wheelchairs)

Preventative services (screenings, vaccines, yearly "wellness" visits)

#### Medicare Part B

Part B deductible \$233

Part B covers 80%

Secondary or supplemental insurance, i.e., Medigap will pick up 20%

 No prior authorization is needed for lg therapy when utilizing Part B benefit

#### Medicare Part D

- Coverage for Ig replacement therapy for diagnoses <u>not</u> listed at
  - -https://primaryimmune.org/news/more-pi-diagnoses-covered-home-ig-replacement-therapy-under-medicare-part-b
- You pay the full amount of costs before the \$233 annual deductible is met.
- After the annual deductible, you pay a share of the costs according to the terms of your plan.
  - -Your share, which you typically pay to the pharmacy at the time of pickup (shipment), could be a flat amount (co-pay) or a percentage of the total amount.

#### Medicare Part D

#### Costs in the Coverage Gap

-IF you and your plan spend a combined \$4,430 in 2022, (an amount called the initial coverage limit), you'll enter a different Medicare Part D coverage phase. During this phase, you'll pay no more than 25% of the cost for each covered prescription. The initial coverage limit may change from year to year.

#### Medicare Part D

#### Catastrophic Phase

Once you have paid the maximum amount of your out-of-pocket (OOP) cost or "donut hole" (\$7,050), you have entered the catastrophic coverage phase. You will be responsible for 5% of the total cost of the drug per shipment. This amount changes each year. For example, in 2021 the donut hole was \$6,550.

Prior authorizations <u>are</u> needed when utilizing the Part D benefit.

# Ancillary Medications ALL billed through Part D benefit

#### Examples:

- Epinephrine, EPI-PEN
- Emla, LMX, lidocaine-prilocaine cream

#### Other Government Services

- Medicaid
  - -Apply through county Job and Family Service. Based on income.

- LIS (low-income subsidy)
  - -For those who have Medicare Part D coverage.
  - -Individuals must apply. Can receive partial or full coverage. Eligibility for Low-Income Subsidy | CMS

#### Insurance Denials

Denials happen more frequently than you would imagine.

Copies of denials are sent to patients and physicians, not specialty pharmacies.

Options are to appeal or request a peer-to-peer (P2P) review.
 Peer-to-peer is the best option.

After two denials, then must go to an external appeal

#### Prior Authorizations

- Prior authorizations are required for lg therapy
- These can take anywhere from a couple of days to a couple of months.

Insurance companies require re-authorizations including updated lab work and clinical notes (from an office visit) every 6-12 months. Some are becoming stricter and requiring this every one to three months.

Request to start samples

#### Managing Expenses

- Flexible Spending Account (FSA)
- Health Savings Account (HSA)
- Manufacturer's Assistance Programs (Private insurance only)
  - -https://primaryimmune.org/organization-type/manufacturers
- Hardship/Assistance programs offered by your infusion provider:
  - Specialty Pharmacies
  - -Infusion Centers

# Co-pay Assistance Programs: For Everyone (Based on available funds)

- The Assistance Fund (TAF)
  - –Website: <a href="https://tafcares.org/">https://tafcares.org/</a>
  - -Phone: 855-845-3663
- Patient Advocate Foundation (PAF)
  - -Website: <a href="https://www.patientadvocate.org/">https://www.patientadvocate.org/</a>
  - -Phone: 800-532-5274
- Patient Services, Inc. (PSI)
  - -Website: <a href="https://www.patientservicesinc.org/">https://www.patientservicesinc.org/</a>
  - -Phone 800-366-7741

# Advanced Beneficiary Notice (ABN)

The Advance Beneficiary Notice of Noncoverage is a form issued by providers in situations where Medicare payment is expected to be denied. It is issued in order to transfer potential financial liability to the Medicare beneficiary in certain instances.

Medicare Interactive

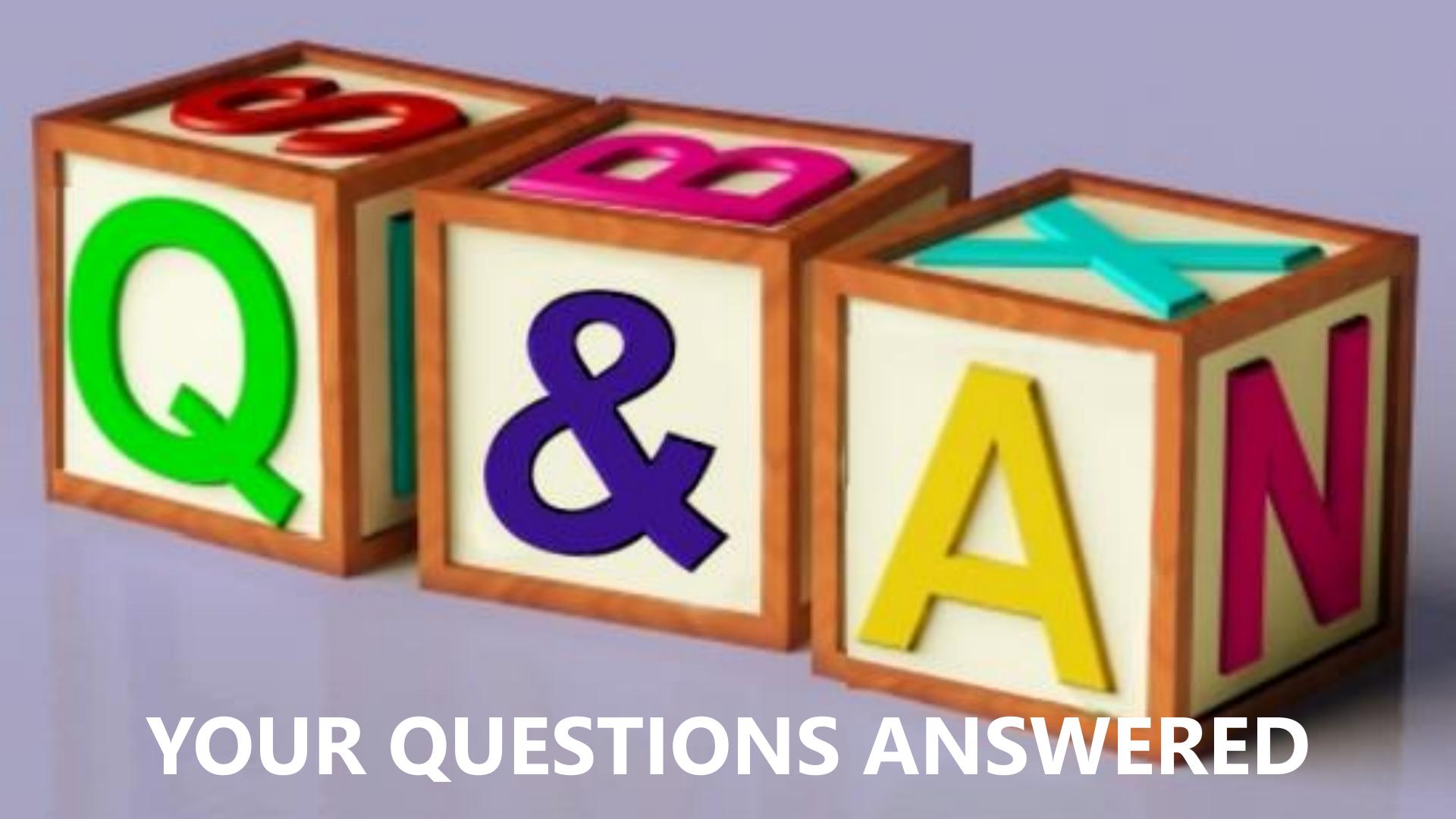
Powered by the Medicare Rights Center

https://www.medicareinteractive.org/

## THANK YOU!

#### Stephanie Steele Immune Deficiency Foundation





# Have more Questions?



primaryimmune.org/ask-idf 800-296-4433



## THANK YOU!

# Stephanie Steele Abraham Yunis, MBA Immune Deficiency Foundation



# CSL Behring CSL Behring



## Today's Featured Sponsors



