HAS THE ACA HELPED PEOPLE WITH CANCER?

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TOPICS

- What are the main benefits of the ACA thus far?
- What remains at issue?
- Questions, Practice Tips, Concerns, etc.
What are the main benefits of the ACA for patients with cancer thus far?
Key Provisions of the ACA

- Limits on coverage amounts: lifetime and annual caps eliminated.
- No co-pays for preventive care
- Creates State Consumer Assistance Programs
- Better access to appeals for all with external review
- Medicaid expansion for more low income people
- Children can continue on parent policy until age 26
- Insurer must give specific reason if claim denied with notice of how to appeal
- Coverage available for patients who participate in clinical trials
Expansion of Coverage
Guaranteed Issue

- Insurers must sell and renew health insurance regardless of health status-called Guaranteed Issue
- Preexisting conditions: no more denials of coverage for children or adults
- Insurance companies prohibited from dropping patients when they get sick
- Health Plan Marketplace available for plan comparison and enrollment
PLANS AVAILABLE THROUGH THE EXCHANGE

- All plans sold through the Exchange will cover the “Essential Health Benefits” – the differences are in the cost-sharing.

- **EHB Includes:**
  - Outpatient services
  - Emergency services
  - Hospitalization
  - Maternity and newborn care
  - Mental health and substance use disorder services
  - Prescription drugs
  - Rehabilitative and habilitative services and devices
  - Laboratory services
  - Preventive and wellness services
  - Chronic disease management
  - Pediatric services (including dental and vision)
MEDICARE CHANGES WITH THE ACA

- Similar to private insurance, more preventive services, for less.
- No-cost screenings for cancer, diabetes, and other chronic diseases including mammograms or colonoscopies, without any coinsurance or deductible.
- Free yearly "Wellness" visit.
- Medicare coverage is protected. Life of the Medicare Trust fund will be also be extended to at least 2029
- Reducing expenses for those in the donut hole now and eliminating the Donut Hole gap by 2020. Recipients receive additional savings each year on their prescription drugs until the donut hole is closed. This includes the reduction of copayments for name brand and generic drugs which will decrease by a percentage annually.
Health Insurance Appeals and the ACA

- With ACA, insurer must give specific reason if claim denied with notice of how to appeal
  - Generally, two level of appeals/administrative review
  - Have a right to copy of insurance company file upon request
  - Must exhaust administrative remedies
  - Right to external review
What remains at issue?
Ongoing Struggles

- Insurance options on exchanges are opaque about coverage of cancer drugs
- Affordability remains an issue for those greater than 138% FPL (assuming expansion)
- Newly diagnosed patients who recently obtained coverage through exchange but now want or need to switch to treat with a specific provider are not eligible for special enrollment
- Many providers/specialists not accepting plans from the exchange
Questions, Practice Tips, Concerns, etc.