



RESOURCES FOR UNINSURED PATIENTS

2018 ASPN MULTIDISCIPLINARY
SYMPOSIUM

Heidi L. Colbert, MSW, LICSW,
CCTSW, NSW-C
Nephrology Social Worker
Social Work Team Leader
Family Services Department
Children's National Health System

The materials are the property of Children's National Health System and are provided for the use of ASPN Symposium attendees. These materials may not be copied, distributed, or otherwise used without the express permission of the presenter(s).

OBJECTIVES

1. Illustrate a model for safe discharge planning.
2. Identify healthcare assistance for uninsured patients.
3. Identify specific ESRD resources to assist uninsured patients.

2018 ASPN MULTIDISCIPLINARY
SYMPOSIUM



Uninsured Patients

An uninsured patient is a person without active insurance coverage who is not eligible for federal, state or local benefits.

In the context of ESRD, we must expand our definition of uninsured to include a person who has active insurance coverage that does not include dialysis or transplant benefits.

Many of the patients who come to our hospitals/facilities are uninsured because their families can not afford to purchase health insurance policies, but do not meet medical assistance criteria.

Many are uninsured due to their legal status.



2017 Statistics:

- Number of persons under age 65 uninsured at the time of interview: 28.9 million
- Percent of persons under age 65 uninsured at the time of interview: 10.7%
- Percent of children under age 18 uninsured at the time of interview: 5.0%
- Percent of adults aged 18-64 uninsured at the time of interview: 12.8%

Source: Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey, 2017, tables I, II [PDF – 530 KB](<https://www.cdc.gov/nchs/data/nhis/earlyrelease/insur201805.pdf>)



EMERGENCY MEDICAL TREATMENT & LABOR ACT (EMTALA)

In 1986, Congress enacted the Emergency Medical Treatment & Labor Act (EMTALA) to ensure public access to emergency services regardless of ability to pay. Section 1867 of the Social Security Act imposes specific obligations on Medicare-participating hospitals that offer emergency services to provide a medical screening examination (MSE) when a request is made for examination or treatment for an emergency medical condition (EMC), including active labor, regardless of an individual's ability to pay. Hospitals are then required to provide stabilizing treatment for patients with EMCs.

<https://www.cms.gov/regulations-and-guidance/legislation/emtala/>



Discussion Question:

Where do you think transplant benefits fall in this discussion?

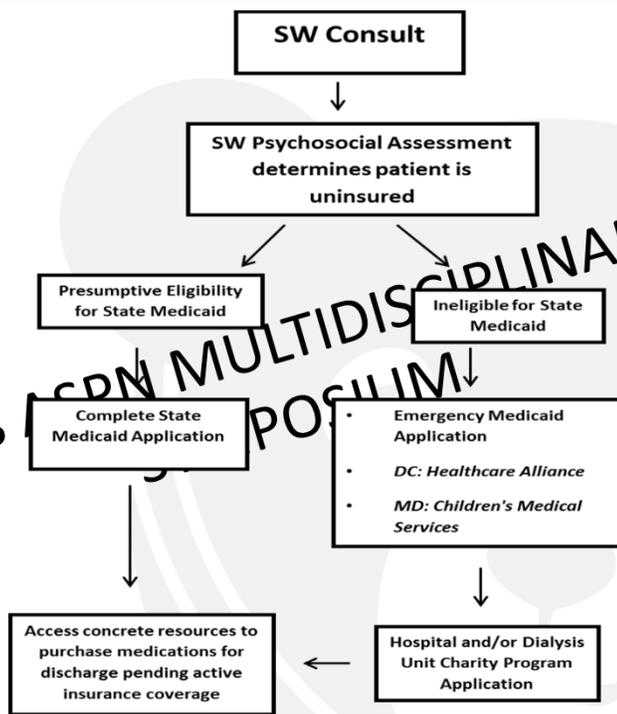


IS ESRD CONSIDERED EMERGENCY MEDICAL CARE?

Yes, ESRD is considered an emergency medical condition. However, emergency coverage is limited to renal dialysis services.



A MODEL FOR DISCHARGE PLANNING



AFTER DISCHARGE

Following discharge, patients who do not qualify for Medicaid will need major medical coverage for dialysis and transplant.

These patients can obtain commercial insurance policies with a subsidy on the Healthcare Exchange.

- www.healthcare.gov

Dialysis companies have Financial Coordinators who assist with this process.

American Kidney Fund (AKF) has a grant that will pay the premium for patients who are on dialysis through the end of the year following transplant.



Children's National.

POST-TRANSPLANT ACCESS TO CARE

When patients do not have insurance coverage after transplant, Patient Assistance Programs (PAP) can cover post-transplant immunosuppressant medications.

- Eligibility is based on patients having no coverage for immunosuppressant medications.
- PAP's generally have generous income guidelines.
- PAP's generally require basic income verification annually.
- Medications can be approved and delivered within a week.



Children's National.

MOST COMMONLY PRESCRIBED IMMUNOSUPPRESSANT MEDICATIONS

CellCept (mycophenolate mofetil):

<https://www.cellcept.com/patient/cost-and-financial-assistance.html>

Prograf (tacrolimus):

<https://www.astellasupportsolutions.com/>

Valcyte (valganciclovir):

To find out about the patient assistance options available, call 1-888-754-7651, (Mon-Fri).



UNDOCUMENTED IMMIGRANTS

"An undocumented immigrant is a foreign-born person who doesn't have a legal right to be or remain in the United States. Some undocumented immigrants enter the US illegally, while others enter legally with visas as visitors or students, and fail to leave."

Healthcare.gov clearly states that undocumented immigrants are not eligible to apply for coverage on the healthcare exchange nor are they eligible for subsidies.

<https://www.healthcare.gov/immigrants/coverage/>



Who qualifies to apply on the Marketplace?

Immigrants with the following statuses qualify to use the Marketplace:

- Lawful Permanent Resident (LPR/Green Card holder)
- Asylee
- Refugee
- Cuban/Haitian Entrant
- Paroled into the U.S.
- Conditional Entrant Granted before 1980
- Battered Spouse, Child and Parent
- Victim of Trafficking and his/her Spouse, Child, Sibling or Parent
- Granted Withholding of Deportation or Withholding of Removal, under the immigration laws or under the Convention against Torture (CAT)
- Individual with Non-immigrant Status, includes worker visas (such as H-1, H-2A, H-2B), student visas, U-visa, T-visa, and other visas for citizens of Micronesia, the Marshall Islands, and Palau
- Temporary Protected Status (TPS)
- Deferred Enforced Departure (DED)
- Deferred Action Status (Except for: Deferred Action for Childhood Arrivals (DACA) is not an eligible immigration status for applying for health insurance)
- Lawful Temporary Resident
- Administrative order staying removal issued by the Department of Homeland Security
- Member of a federally-recognized Indian tribe or American Indian Born in Canada
- Resident of American Samoa

Applicants for any of these statuses qualify to use the Marketplace:

- Temporary Protected Status with Employment Authorization
- Special Immigrant Juvenile Status
- Victim of Trafficking Visa
- Adjustment to LPR Status
- Asylum (see note below)
- Withholding of Deportation or Withholding of Removal, under the immigration laws or under the Convention against Torture (CAT) (see note below)
- Applicants for asylum are eligible for Marketplace coverage only if they've been granted employment authorization or are under the age of 14 and have had an application pending for at least 180 days.
- People with the following statuses and who have employment authorization qualify for the Marketplace:
 - Registry Applicants
 - Order of Supervision
 - Applicant for Cancellation of Removal or Suspension of Deportation
 - Applicant for Legalization under Immigration Reform and Control Act (IRCA)
 - Legalization under the LIFE Act
- Remember: Information about immigration status will be used only to determine eligibility for coverage and not for immigration enforcement.

<https://www.healthcare.gov/immigrants/coverage/>



DMV HEALTHCARE PROGRAMS THE UNINSURED

DC

The DC Healthcare Alliance ("the Alliance") is a health coverage program that is offered to individuals and families who are not eligible for Medicaid. The Alliance is a locally funded program that includes a range of health care services to include primary care services, doctor visits, prescription drugs, dental services and wellness programs. To be eligible for the Alliance, you must be a resident of the District of Columbia, have no other health insurance, including Medicaid and Medicare and meet a certain income threshold.

The Immigrant Children's Program (ICP) is a health coverage program that is offered to children under age 21 who are not eligible for Medicaid due to citizenship or immigration status. The ICP includes a range of health care services to include primary care services, doctor visits, prescription drugs, dental services and wellness programs. To be eligible for the ICP, you must be a resident of the District of Columbia, have no other health insurance, including Medicaid and Medicare and meet a certain income threshold. Services covered under the Immigrant Children Program are very similar to the services covered under Medicaid for children under age twenty-one (21).

<https://dhcf.dc.gov/page/medical-assistance-programs-information-and-eligibility>

MD

Children's Medical Services, also called CMS, is a program of the Maryland Department of Health. CMS can help low-income, uninsured or underinsured Marylanders ages 0-21 years get specialty care for a chronic illness or disability by paying for needed services.

https://phpa.health.maryland.gov/genetics/Pages/CMS_Program.aspx

In Partnership with Kaiser Permanente the **Kaiser Care for Kids** program provides free healthcare services to uninsured children who live in Prince Georges County.

<https://www.princegeorgescountymd.gov/2593/Kaiser-Care-for-Kids>



CASE PRESENTATIONS

2018 ASPN MULTIDISCIPLINARY SYMPOSIUM



QUESTIONS?

2018 ASPN MULTIDISCIPLINARY SYMPOSIUM

