

**LEGAL
HANDBOOK
FOR
CANCER
SURVIVORS**



This Handbook has been developed out of a partnership between the Virginia State Bar Young Lawyers Conference and the Legal Information Network for Cancer

The Virginia State Bar Young Lawyers Conference consists of all active and associate Virginia State Bar members in good standing, age 36 and under, as well as those members admitted to the Virginia State Bar as their initial bar for fewer than three years. Through a diverse group of programs and projects, the YLC focuses on service: service to its members; service to the bar; and service to the communities of the Commonwealth of Virginia.



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Legal Information Network for Cancer is a nonprofit, community-based organization dedicated to helping people with the business side of cancer. Serving the Central Virginia community, LINC provides information, education, counseling and referral services for legal and financial assistance to individuals confronted with the overwhelming issues that arise from the diagnosis and treatment of cancer.



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In the United States, one in three women and one in two men will be diagnosed with cancer during their lifetime. More than 1.4 million Americans will be diagnosed with cancer this year. More than 12 million Americans are currently living with cancer.

For patients and their loved ones, receiving a cancer diagnosis may be a frightening and overwhelming experience. While receiving proper medical care is the most immediate need, you may have other concerns that arise during treatment.

In an effort to address some of these concerns and to identify available resources, the [Virginia State Bar Young Lawyers Conference](#) (YLC) and the [Legal Information Network For Cancer](#) (LINC) have partnered to bring you this handbook.

The information contained in this Handbook is general legal information for informational purposes only. It is not intended to be a precise statement of law. It does not establish an attorney-

If you or someone you know needs LINC's help, please call:

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www.cancerlinc.org.*

client relationship and should not be construed as a legal opinion or legal advice. If you have a question about how this applies to you or a specific factual situation, you should consult with an attorney.

The YLC is part of the Virginia State Bar, the state agency charged with regulating lawyers licensed to practice in Virginia. The mission of the YLC is to allow young lawyers to participate in Virginia State Bar activities and serve the legal profession and the public.

LINC is a non-profit organization founded by cancer survivors. LINC is dedicated to assisting cancer survivors in navigating the various systems of public and private benefits, working through their employment and debt issues, and most of all, helping them find the means to provide food and shelter while in treatment. LINC also has a network of attorneys and financial counselors who volunteer their services to low income cancer survivors. These attorneys are familiar with the legal issues confronting cancer survivors. You pay nothing for LINC's referral services.

Although each cancer survivor is likely to have different concerns, you may find the following tips helpful as you begin your journey through cancer treatment.

- Remember that you are not alone. There are community resources, support groups, and social services designed specifically for cancer survivors. An appendix containing sample forms and documents as well as a list of helpful resources may be found at the back of this handbook.
- Accept help when necessary. Allowing others to assist you with chores or projects may help you maintain a sense of normalcy during treatment.

INTRODUCTION

- Establish a filing system for important documents. Save copies of medical records, bills, insurance information, and employment benefit program handbooks. Identify a trustworthy family member or friend and inform them where to find these documents.
- Before discussing the diagnosis with your employer, consider having a frank discussion with your health care providers about what limitations, if any, you may experience during treatment. Knowing what to expect may help you communicate your needs more clearly with your supervisor or your employer's human resources manager.
- Consider contingency plans for children or others for whom you are a caretaker, as well as pets. Regardless of your prognosis, there may be days during treatment that you need assistance. Planning in advance who can pick up your children or walk your dog may help to alleviate anxiety and allow you to focus on your health needs.
- Review, and update as necessary, your future planning documents. These documents may include advance medical directives, powers of attorney, and estate plans.
- Treatment for cancer can be expensive and some treatments or tests may not be covered under all insurance policies. Regardless of whether you have health insurance, discuss any financial concerns with your health care providers. Many hospitals or health care providers' practices may be able to make payment arrangements.
- If you have health insurance, review your policy to confirm what treatment costs will be covered. Ask your health care provider about treatment costs.

- Establish a monthly budget and review current debts. It can be difficult to plan for the expense of cancer treatment and financial stress may impair your ability to focus on your health. Contact the Virginia Department of Social Services or LINC to discuss what programs or services the Commonwealth of Virginia may be able to provide in your situation.
- When it comes to your needs during this time, no question is insignificant. If you do not understand the answer to a question, whether it is about your medical treatment, insurance coverage, employment benefits, or any other issue, keep asking until you receive an answer that you understand. Take notes during appointments for later reference. Understanding your options may prevent these issues from interfering in your recovery.

It is our sincere hope that this handbook will assist you during your journey through cancer treatment.

PAYING FOR MEDICAL CARE

Paying for medical care is one of the most obvious, yet most complex, hurdles faced by cancer survivors. This issue continues throughout treatment and many years later for follow-up care and monitoring. This section addresses the various ways to pay for medical care. It also explains both government-provided and private health insurance programs.

HOW TO PAY IF YOU DO NOT HAVE INSURANCE

Receiving a cancer diagnosis is always frightening. But it is even scarier when you do not have health insurance. There are, however, options available. The options include becoming insured after receiving such a diagnosis or receiving financial as-

sistance for your medical bills. To take advantage of these options, you need to act as quickly as possible to seek out the available resources. The sooner you do so, the greater the chance you have of receiving assistance.

If you are uninsured and receive a cancer diagnosis, you should immediately attempt to find coverage. This may be a challenge, but there are a number of possibilities. You should consider getting health insurance coverage by: obtaining continuation coverage through COBRA (as discussed below); obtaining an individual policy; or locating group health plan coverage through community organizations, such as religious, civic, fraternal, or professional organizations. Medicare and Medicaid are also options for those who qualify. If you are married and fear you may become unemployed or otherwise ineligible to continue receiving health insurance through your employer, investigate opportunities to become insured through the plan offered by your spouse's employer. Be aware, however, that a lapse in coverage may result in the denial of payments for treatment related to medical conditions that existed prior to the time insurance was obtained. These "pre-existing condition" exclusions are discussed further below.

If you are uninsured, you should tell your health care providers as soon as possible. Many health care providers and/or hospitals have support systems in place for patients struggling to pay for medical care. For example, social workers employed by the hospital may know resources that can help ease the burden of paying for cancer treatments. Hospitals can also often establish payment plans or, in some cases, may be willing to provide your care at a reduced rate. Prescription drug companies and some pharmacies have programs that allow individuals to receive the medication they need at reduced cost. The sooner you discuss your insurance situation with your health care providers, the sooner you may discover – and be in a position to make use of – these invaluable resources.

UTILIZING GOVERNMENT-PROVIDED INSURANCE

Medicare and **Medicaid** are government-provided insurance plans that provide coverage to individuals meeting certain established criteria. This section addresses the criteria for participation in each, the benefits provided under each, and the application process to enroll. Because both Medicare and Medicaid are detail oriented programs with specific eligibility requirements, you may want to seek assistance to enroll in either program. You can ask individuals employed by the agencies charged with the administration of these programs for help.

MEDICARE

Medicare is a national health insurance program. Eligibility for participation in Medicare is not based on need, but is based upon age, disability, or medical condition. There are four categories of individuals who are eligible to participate in the Medicare program. First, those aged 65 or older are eligible if they are (a) entitled to Social Security Retirement Insurance or Railroad Retirement Benefits; (b) government employees who have paid Medicare taxes for a sufficient period of time; or (c) not within categories (a) or (b) but who elect to pay monthly premiums to secure coverage. Second, disabled individuals are also entitled to Medicare coverage if they have been entitled to Social Security Disability or Railroad Retirement Disability Benefits for 24 months. Third, individuals with kidney disease or Lou Gehrig's disease are eligible. Fourth, surviving spouses with dependent children are eligible.

The Medicare program is administered by the Centers on Medicare and Medicaid Services ("CMS"), with the assistance of insurance companies who serve as intermediaries between program beneficiaries and CMS. There is no state agency responsible for any part of the Medicare program.

Medicare provides four types of coverage to eligible individuals. Each serves a separate function:

- **Part A** — Hospital insurance that covers inpatient hospital services, skilled nursing facilities, home health services, and hospice care. This coverage is free for some. If an individual does not have enough Social Security work quarters to be eligible for free coverage, it is possible to enroll in Part A coverage with the payment of a monthly premium.
- **Part B** — Voluntary additional medical insurance that helps defray the costs of physician services, outpatient hospital services, medical equipment, supplies, and other health services. Anyone electing to enroll in Part B coverage must pay a monthly premium for that coverage.
- **Part C** — Medicare Advantage Plans – such as HMOs and PPOs – that are made available to Medicare beneficiaries.
- **Part D** — Voluntary prescription drug insurance. Most individuals must pay a premium for enrollment in this coverage, but there is a “low income subsidy” available to those who qualify.

Applications for Medicare are available at and taken by the local Social Security Administration (“SSA”) office, or online at the SSA website, www.ssa.gov. To avoid delays in processing due to application errors, it is advisable to contact the local office to make an appointment to apply for Medicare coverage. During this call, it is also wise to ask for a list of items to bring with you to complete the application process.

MEDICAID

Medicaid is a joint federal-state program that provides health insurance to individuals who satisfy established income criteria. Individuals who receive Medicaid benefits may not be billed for any amounts other than Medicaid-allowed co-payments. Payment received by a provider for Medicaid is considered to be payment in full. The Medicaid program covers medically necessary services – including prescription drugs.

In Virginia, the Medicaid program offers coverage to individuals who are disabled, blind, elderly, children, pregnant women, and very low income parents. In addition, the Virginia Medicaid Program also provides benefits to women who need treatment for breast or cervical cancer. Each category of individual is subject to differing financial eligibility requirements.

The Virginia Medicaid Program is administered by the [Virginia Department of Medical Assistance Services](#) (“DMAS”). DMAS is also responsible for handling any appeals that involve Medicaid coverage.

Individuals who are applying for Social Security Disability benefits or for Social Security Income must still file a separate application for Medicaid. This application can be completed at the local Department of Social Services office. Medicaid has the ability to retroactively cover costs for medical services received in the three months before applying to the program, as long as you can show that you were eligible for Medicaid during those prior months.

Because the eligibility criteria for Medicaid are much more complex than for the Medicare program, it is not possible to outline a comprehensive list of those criteria here. However, there are a number of items that apply to most adults who have cancer and who seek to enroll in Virginia’s Medicaid Program:

- Individuals must have countable resources – such as bank accounts, property, or investments – that total less than \$2000. For couples, this amount must be less than \$3000. The Program does not take into account assets such as a car, home, some life insurance or burial funds, or property that cannot be sold when determining the amount of collectible resources held by a person or couple.
- Monthly income for individuals or couples must be under 80% of the Federal Poverty Line. If an individual has an income that exceeds this amount, he can spend it down if the medical bills incurred are very large.

Individuals with incomes up to 135% of the Federal Poverty Line have the option of receiving limited Medicaid assistance. This assistance will help defray the costs of Medicare out of pocket expenses, like premiums, deductibles, and co-insurance.

Different eligibility rules apply to the Virginia Medicaid Program for breast and cervical cancer. To qualify for this program, individuals must:

- Be screened by specific medical providers operating under the Center for Disease Control and Prevention’s Breast and Cervical Cancer Early Detection Program
- Be age 18 to 65
- Have an income under 200% of the Federal Poverty Line
- Have no health insurance that covers the necessary treatment.

Because of the complexity involved in determining Medicaid eligibility, you should contact the local office for assistance in completing the necessary application forms to apply for coverage.

UNDERSTANDING PRIVATE HEALTH INSURANCE

Although the majority of private health insurance plans provide coverage for many routine doctor visits and procedures, when faced with a cancer diagnosis it is essential that the patient and his family become fully acquainted with the specifics of his insurance policy. Each plan will define certain terms differently — including “pre-existing” and “experimental” — which are terms that come into play frequently in the world of cancer treatment. Before agreeing to a treatment or service, you should review the plan carefully in order to avoid pitfalls that may result in a coverage denial. Read the plan, and then call the plan administrator to determine if coverage is available for the recommended treatment. If it is not, talk to your physician about other treatment options that may be available.

There are a number of essential elements of private health insurance that should be understood – the distinction between common types of plans, how to handle denials, and how to avoid exclusions. Each of these topics is discussed in this section.

COMMON HEALTH INSURANCE PLANS

Health Maintenance Organizations

A Health Maintenance Organization (“HMO”) offers many kinds of health care services to its members in exchange for

payment from its members. This payment is generally in the form of a co-payment and/or yearly deductible. A co-pay is a set amount due to the provider – generally at the time of service – whereas a yearly deductible is an amount the HMO requires members to pay in a year before the HMO will pay for any services.

Members of an HMO must get their care from the health care providers within their HMO’s network. Members generally select a primary care physician from the network who will coordinate the patient’s care. If needed, the primary care physician will refer the patient to a specialist in the HMO’s network.

HMOs usually only pay for treatments or procedures that they can show to be effective. They may require their members to try less expensive tests or treatments before they will cover ones that cost more. HMOs also require members to get a referral from their primary care physician or approval from the HMO before the HMO will pay for some services and treatments. Receiving services without a referral or approval will result in the member having to pay for the service himself.

Point of Service Plans and Preferred Provider Organizations

A Point of Service Plan (“POS”) and a Preferred Provider Organization (“PPO”) give individuals greater flexibility in deciding such things as which doctors will treat them, which tests will be performed, and the type of treatment they will receive. Some patients want to be able to decide what doctors they see and what tests or treatments they get. These types of plans are offered by HMOs, but due to the greater flexibility afforded under them, they traditionally cost more to participate in than a traditional HMO.

A POS allows its members to be treated by doctors who are in the health plan network or doctors who are not in the network. If they choose doctors who are not in the network, they usually have to pay more for the services. Members in a POS are typically required to have a primary care physician who is in the health plan network, but may select specialists from outside the network to provide care and treatment for conditions.

PPO members usually have a bigger network of doctors and hospitals they can select from for treatment. These members are not required to have a primary care physician, and may elect to receive care from health care providers who are not in their network. But, as with a POS, if members see health care providers outside of the network, they are usually required to pay more for the services received.

ERISA Plans

The Employee Retirement Income Security Act of 1974 (“ERISA”) is a federal law that sets minimum standards for most self-insured health plans. It preempts any state laws requiring health insurance plans to provide certain benefits to their members, and sets out its own requirements for these self-insured plans. ERISA plans are not regulated by the Virginia Bureau of Insurance.

In general, ERISA does not cover group health plans established or maintained by governmental entities, churches for their employees, or plans which are maintained solely to comply with applicable workers compensation, unemployment, or disability laws. ERISA also does not cover plans maintained outside the United States primarily for the benefit of nonresident aliens or unfunded excess benefit plans.

HANDLING DENIALS

At the outset, your best strategy would be to avoid situations that are likely to lead to denials. Most importantly, before treatments or procedures are done, ask your physician to contact your health plan for official approval and confirmation of coverage for the treatment or procedure. Doing so can help you avoid a denial down the road, but as some health insurance plans require pre-approval of treatments or procedures, it can also help you ensure that you have satisfied any such pre-approval requirements.

If a denial is received, the first step to take is to thoroughly examine the “Explanation of Benefits” statement received from the plan. This statement will give the reasons for the denial. After reviewing the Explanation of Benefits, contact the plan to find out as much information as possible about the basis for the denial – including the billing code (ICD-9/CPT) used by the physician in submitting the claim. It is possible that a simple coding error resulted in the denial and, if so, knowing the code used is essential to having the error fixed as quickly as possible. Check with your physician’s office or hospital’s billing office to determine that the code the plan provides to you is the correct code for the type of service billed for. If not, ask that a corrected claim be submitted.

Where the denial was not the result of a simple coding error, the plan’s appeal process must be followed. Generally, appeals must be filed within a specific time period – often 30 days. The steps in the appeal process will be set out in your plan documents and/or on the plan’s website. It is crucial that the appeal steps are reviewed and carefully followed.

PAYING FOR MEDICAL CARE

An initial appeal is often informal – a simple letter asking that the plan reconsider or review its denial decision. You may submit additional or corrected information for the plan to include in its review process. If you choose to do so, request your appeal within the timeframe required by the plan's appeal process, and then request an extension of time to permit you to compile all relevant information that will support your request – letters from physicians, medical literature, and documents detailing your diagnosis and treatment plan. Whenever you communicate with a plan representative regarding your appeal, ask that confirmation of that discussion be sent to you in writing. When communicating with your plan by mail, always use certified or registered mail or another form of delivery that will provide you with a receipt of delivery.

When appealing a decision from your health insurance plan, utilize all of the resources available to you. Your health care providers can provide you with additional information about your health history and the effectiveness of the treatment protocol they are recommending. The agent or plan administrator for your health insurance plan can provide you with useful assistance and can also advocate on your behalf. The Consumer Services Unit of the Virginia Bureau of Insurance is available to assist members of the public with the denial of health insurance coverage. Depending on the urgency of your appeal and/or the cost associated with the treatment or procedure, you may also want to enlist the help of an attorney who can help you compile additional information to include in your appeal request and draft a clear statement of why your appeal should be granted.

If you proceed through all levels of appeal offered by your plan and are still unsuccessful, the only recourse left is to consult an attorney regarding other available avenues for relief. Generally, two options will remain – filing a lawsuit against the

plan challenging the decision or using the Independent External Appeals process established by the Virginia Bureau of Insurance. This second option is available only if the denial was premised on the notion that the service or treatment was not “medically necessary” or is “experimental/investigative.” This process is not available to those insured by self-insured ERISA plans, Medicare, Medicaid, or federal or state employee health plans.

Decisions reached through the Independent External Appeals process are binding and cannot be challenged later using a lawsuit. In order to qualify for this process, the claim at issue must exceed \$300 and the appeal must be filed within 30 days of the final decision reached by the health plan. For cases of medical emergency, it is possible to request an expedited review using the Independent External Appeals process, without having to exhaust all of the steps required by the health plan.

AVOIDING EXCLUSIONS

One of the safest ways to ensure that coverage for your treatment is not barred by the pre-existing condition exclusion, in the event that you no longer qualify for coverage under your current group health insurance plan, is by ensuring that you take advantage of Consolidated Omnibus Budget Reconciliation Act (“COBRA”). Under COBRA, former employees and their spouses and dependent children may continue to participate in the employer's health plan for 18 months – or longer depending upon the circumstances – after a qualifying event occurs. Such qualifying events include those that result in the loss of eligibility for participation in the employer's health insurance plan due to reasons such as voluntary or involuntary termination, reduction of work hours, or death of the covered employee. It is important to understand that COBRA does not apply to each and every employer. Only those employers with 20 employees or more fall under COBRA's scope.

PAYING FOR MEDICAL CARE

You should be aware that COBRA can be expensive. You will be responsible for paying the cost of the continuation of coverage. However, the law restricts this cost to 102% of the employer's cost. This cost is well worth the peace of mind that comes with knowing that you are protected against the pre-existing condition clause that may appear in your next insurance policy. After group coverage ends – whether initially or after the COBRA period concludes – you will receive a “Certificate of Credible Coverage” that will allow you to enroll in another health insurance plan or convert to an individual policy without a period of coverage exclusion for pre-existing conditions.

The Virginia Code permits those who are not eligible for COBRA to convert their health insurance coverage to an individual policy. You will then be responsible for paying the cost of the premiums of your individual policy, which can also be expensive. If you elect to convert to an individual plan, the plan cannot deny you coverage based on health related factors including pre-existing conditions or claim experience.

It is also possible to enroll in a spouses' group health plan. If you have lost coverage previously available to you under another plan, it is not necessary to wait until your spouse's open enrollment period. You must, however, request enrollment within 30 days after termination of your prior coverage.

Exclusions can also be easily avoided by being aware of them. It is far easier to learn up-front which exclusions are contained in your health plan than to work through the time and expense of attempting to appeal a decision based upon an exclusion after treatment has already been provided. As soon as you receive your diagnosis – or, even better, as soon as your physician suggests that tests to determine if a condition is cancer should be performed – read your plan documents. Call for an

interpretation of anything you do not understand. And ensure that you and your health care providers follow all necessary rules. It is much easier to ask permission than to beg forgiveness in the case of health insurance coverage.

OTHER CONSIDERATIONS

Virginia law generally requires that individual health insurance plans and small employer health insurance plans provide coverage for certain treatments and procedures but there may be some exceptions. With respect to cancer survivors, these include reconstruction screening, clinical drug trials, hospice care, and hospital stays for mastectomies, among many others. If you have questions about the benefits that the law requires your plan to provide to you, contact the Bureau of Insurance for guidance and assistance.

Virginia law also does not permit health insurance plans to treat breast cancer as a preexisting condition if you have been cancer free for five years.

Many of the Virginia laws that apply to private health plans do not apply to health plans that are provided to state or local government employees. The Commonwealth of Virginia's employee benefit plan is not regulated by Virginia's insurance laws because it is a self-funded plan. For questions regarding this plan, contact the Virginia Department of Human Resource Management.

Remember that the best way to ensure that you are able to pay for the care and treatment related to your cancer diagnosis is to be proactive and to act quickly. There are a number of resources available to help cancer survivors obtain necessary care – but it is up to you to reach out to them and take the first steps toward receiving assistance.

FINANCIAL ISSUES

Unfortunately, when you are going through cancer treatment, money issues often arise. The financial impact of cancer treatment varies with cancer survivors.

Often, there are significant medical debts, costly medications, a reduction or loss of income, accumulation of credit card debt, and/or late or unpaid rent, mortgage, or vehicle payments. Some cancer survivors may be forced to obtain expensive sub-prime credit to cover expenses. These issues can create stress that can impair your recovery. But, there is hope; help is available if you need it. LINC provides assistance and referrals for financial issues, including volunteer financial planners who can help cancer survivors adjust their finances based on a reduced income.

If you are having financial troubles, you should first contact your local office of the Virginia Department of Social Services to determine if income subsidy and support benefits may be available. An eligibility worker will review your circumstances to determine what services the Commonwealth of Virginia may be able to provide. You may also have access to a social worker through your hospital that can help you determine what forms of assistance may be available to you.

The types of loans discussed in this section consist of both secured and unsecured loans. Secured loans are “backed” by something that the lender can take if the borrower cannot pay. The asset used to “back” the loan is called the collateral. Car loans and mortgages are examples of secured loans. Unsecured loans are not “backed” by anything. Credit cards loans are an example of unsecured loans. A bank is often willing to lend money at a lower interest rate for secured loans than for unsecured loans. In some cases, a bank may refuse to loan to a person on an unsecured basis. However, while it is generally less expensive to borrow on a secured loan, the risk is that you may lose your collateral if you cannot make payments on the debt.

BUDGETING

When facing financial challenges, such as cancer treatment, you should understand where your money goes each month. To help with this, you should create a monthly budget. The budget should show your monthly income and expenses. This can help you prioritize your expenses and identify any shortfalls you may have. Please refer to the appendix for a sample budget. Financial counselors can also help you prepare a budget.

MAINTAINING YOUR HOUSING

Maintaining shelter is critical during your cancer treatments. However, rent or mortgage payments are often the largest monthly expense that people face.

RENTERS

Because rental companies can move quickly to evict tenants who do not pay on time, your rent payments need to be a priority. You should make your rent payments if at all possible. However, if you find that you cannot pay rent, there are a few things you can do. First, talk to your landlord. Explain your situation and discuss setting up payment arrangements, including payments to cure any arrearage you may have. The sooner you are able to talk to your landlord, the better. It is much easier to negotiate an arrangement before your landlord has initiated legal proceedings against you. If you cannot reach an agreement with your landlord, you should contact a local non-profit organization that can provide rental assistance. You may also want to contact the Virginia Department of Housing and Community Development for their Homelessness Intervention Program (“HIP”). HIP provides temporary rental and mortgage assistance to low-income households at risk of homelessness due to a crisis situation.

HOME OWNERS

If you have missed mortgage payments, you should address your missed payments immediately. The more quickly you act, the more options you are likely to have and the cheaper and easier it will be to resolve. You should contact your mortgage provider as soon as possible to discuss the situation. You should also contact a foreclosure counselor to help you learn more about your options. The U.S. Department of Housing and Urban Development has a list of approved housing counseling agencies available at <http://www.hud.gov/offices/hsg/sfh/hcc/hcs.cfm>. You should also be on the lookout for foreclosure rescue scams.

To avoid default on your mortgage, you should consider the following options:

Reinstatement – you pay the mortgage company the total amount that you have fallen behind on your mortgage.

Repayment plan – the mortgage company agrees to allow you to maintain your regular mortgage payment, plus an additional amount for a set number of months to cure the arrears. These agreements are generally one year or less in duration.

Forbearance – the mortgage company agrees to accept lower or no monthly payments for a specific time frame. Typically at the end of the forbearance period, you must bring the account current.

Modification – the mortgage company agrees to change the terms of your initial agreement. These changes may include extending the term of the payback period or providing for the arrears to be added to the principal unpaid balance.

FINANCIAL ISSUES

Short sale – the mortgage company and any other lien holder agree to accept less than the total amount owed on the loan and foreclosure is avoided.

Refinance – obtain a new loan to payoff existing liens against the property. If you are currently behind on your mortgage, it is unlikely that a reputable mortgage company will do this. Be careful of predatory lenders who will charge high fees and interest rates.

Deed in Lieu of Foreclosure – give the property back to the mortgage company.

Private Mortgage Insurance (“PMI”) – PMI will need to pay a claim to the mortgage company if the property were to foreclose. Therefore, your PMI company may assist you in bringing the mortgage current by providing a loan.

Bankruptcy – bankruptcy can be an effective way of protecting your real estate and providing for late mortgage payments.

DEALING WITH CREDITORS

The key to addressing financial issues is communication. You should contact your creditors before any legal actions have been started. Explain to them your situation and attempt to set up arrangements for minimum payments to be made.

MEDICAL DEBTS

Ask your insurance company what services are covered under your insurance plan and what you need to do to qualify.

To deal with medical creditors, you should consider the following options:

Ask your health care provider for assistance. Some hospitals and pharmaceutical companies provide free or low cost care and medicines, but these are available only through your doctor.

Ask your hospital’s social worker or look into community and government resources that may be able to help you with co-payments, medical equipment, and transportation.

Speak with your health insurance company’s billing department. If you are not having success, ask to speak with the supervisor. You need to speak with someone who has the authority to set up feasible payment arrangements. Be prepared when you call by having your budget and other supporting documents such as your last pay stub, most recent bank statement, and tax return available. Explain to them that you would like to work with them, but you only have a certain amount of money available. If you have a short-term reduction in income, explain to them that you will be able to increase payments in the future.

If you have health insurance through your employment, ask your employer’s human resources department for assistance. Contact a credit counseling organization to help you set up a payment plan. These companies can analyze your financial situation and discuss with your creditors if repayment is viable, and under what terms. You should be careful when selecting a credit counseling organization to find one that is reputable. LINC can provide referrals to credit counseling agencies that have experience working with cancer survivors.

Bankruptcy may be an option to gain relief from your medical creditors.

CREDIT CARDS

Credit card debt is similar to medical debt, as both are unsecured debts. However, credit card companies are more likely to participate in plans set up by credit counseling organizations. To deal with credit card debt, you should consider the following options:

Communicate with the creditor directly to set up a payment plan. Be sure to get an agreement in writing and then comply exactly as stated in the agreement. Be sure to pay by a method that allows for you to provide proof that the payments were made according to your agreement (i.e., wire transfer such as Western Union Payments or by Certified Mail).

If possible, roll over your current credit card balances to cards with lower rates. Always make the minimum payment to avoid costly late fees.

Credit counseling organizations offer programs called debt management plans. These plans allow you to reduce the interest you pay on your credit card debt. These plans generally are successful for people who have good income, but would like to pay the debt off in a quicker time frame than if they continued to maintain minimum payments.

Credit counseling organizations may offer debt settlement plans. The credit counseling organization will negotiate with the creditors to reach a lump-sum settlement with them and then collect funds from you to settle the debt. These plans are risky because during the negotiations, no payments will be made on the debt until the lump-sum payment is made. So, you will continue to be delinquent on your credit cards and amass late payment fines. Meanwhile, the creditors can continue to make reports to credit reporting agencies, and may even take legal action against you.

Bankruptcy may be a way for you to gain relief from your credit card debt.

Use the equity in your home or other assets to pay your debts. This will allow you to consolidate the debt under one loan that will be paid back over a longer period of time. This can reduce your regular monthly expense on the debt. This is a risky alternative and should only be used after much study. Although it provides easier access to cash, there are consequences as it changes the nature of the debt from unsecured to secured by your real estate. If you fail to make regular payments, you could lose your home.

Borrowing against your home should be your last resort.

AUTOMOBILE LOANS

Your car is probably essential in getting to work and to treatments. Unless you own your car outright, you should make your car loan payments. If you miss payments, the automobile financing company can repossess your vehicle and sell it at auction. After the vehicle is sold, you would be held liable for any unpaid portion of the balance owed on the vehicle (deficiency balance). To avoid the repossession of your car, you should consider the following options:

Forbearance – the financing company may agree to accept regular payments, plus an additional amount to cure the amount that you are behind on your loan.

Refinance – obtain a loan to payoff your current auto loan. These can be difficult to obtain if you currently are behind on the loan for your vehicle. Avoid high fees and interest rates.

Sale – prior to repossession you can sell your vehicle. You must pay off the loan in full to pass the title to the purchaser.

Deferment – request that payments be moved to the end of your loan.

Bankruptcy – Bankruptcy can sometimes be an effective way to keep your car.

BANKRUPTCY

Bankruptcy may be an option to gain relief from your creditors. It should be done only with legal advice and as a last resort. However, in order to protect your assets, you should get advice as soon as you know that you will be unable to pay all your debts. Many debtors make the mistake of waiting too long to file for bankruptcy. You cannot protect your home, car, and other assets if you've already liquidated them to pay bills.

There are two types of bankruptcy proceedings that an individual can use: Chapter 7 liquidation; and Chapter 13 adjustment. Both bankruptcy proceedings bring all of your creditors together into a single proceeding. The Bankruptcy court will grant exemptions from collection for certain amounts of equity in your home, car, and personal belongings. This prevents your creditors from taking everything, allows you to make a fresh start, and may allow you to keep your home, car, and other belongings.

The differences between the two types of Bankruptcy lie in how long the process takes. In Chapter 7 bankruptcy, all of the debtor's assets, except those protected by exemptions, are

sold and the money is split among the creditors. After this, the remaining debts are discharged and the creditors no longer have any claim on the debtor. In a Chapter 13 bankruptcy, the court formulates a three or five year payment plan, depending on your income. After the debtor has made payments for the entire plan, the remaining debts are discharged.

Bankruptcy is a powerful, but often unforgiving, process that should only be handled by an attorney who specializes in the process. While bankruptcy offers the opportunity for a fresh start, there are many aspects of the process that must be handled correctly, or you could end up right where you started, but without the option of performing a bankruptcy correctly. Before taking this step, you should contact an attorney who specializes in bankruptcy or contact a local legal aid agency.

AVOIDING PREDATORY LENDING AND FORECLOSURE RESCUE SCAMS

Because of the dire situations arising out of a cancer diagnosis, some cancer survivors may be forced to obtain expensive sub-prime lending such as payday loans, title loans, short term, high interest rate line of credit loans, or high rate home equity loans to finance their treatment. In addition, homeowners who are facing foreclosure are often the target of foreclosure rescue scams.

PREDATORY LENDING

While they appear to make credit easily available, payday loans, title loans, and other short-term, high interest loans are often an expensive mistake. Payday loans are an especially expensive way to borrow money. The Federal Trade Commission (FTC) has noted that borrowing just \$100 for two weeks at the standard \$15 “finance fee” is the equivalent of paying 391% annual interest. Most payday lenders also allow the borrower to “roll over” their loans, adding a new “finance fee” each time, resulting in ever larger interest rates.

When the high interest rates are allowed to compound by rolling over these loans, borrowers may find themselves trapped. The FTC suggests that borrowers consider small loans from a credit union or small loan company, shop for credit offers to see who can offer the lowest rates, and contact their other creditors before resorting to payday loans.

If you absolutely must use a payday loan or other expensive form of credit, be sure to pay the loan off as soon as is possible to avoid being swamped by the high interest rate.

FORECLOSURE RESCUE SCAMS

Many advertisements that promise to save homeowners from foreclosure are invitations by scam artists. These scams use straightforward messages like “Stop Foreclosure Now!” and “We guarantee to stop your foreclosure!” The scammers prey on people worried about losing their homes and take their money through a variety of methods. Scams include: phony counseling where the scammer pockets the fees; bait-and-switch scams where the scammer has the homeowner sign documents to turn over the house; and rent-to-buy schemes where the homeowner sells the home to the scammer, who then rents it back to the homeowner for much higher rates and evicts the homeowner when they can no longer pay. Some scammers even file bankruptcy on behalf of the homeowner, but pocket their fees and do not represent the homeowner, who can then lose the ability to file a real bankruptcy petition. The most important thing to do to avoid these scams is to use a legitimate credit or foreclosure counseling service. The U.S. Department of Housing and Urban Development has a list of approved housing counseling agencies available at <http://www.hud.gov/offices/hsg/sfh/hcc/hcs.cfm>

You should also be wary of any foreclosure service that guarantees to stop the foreclosure process, one that charges a large amount of money for their service, or one that recommends that you not contact your lender, a lawyer, or a credit or housing counselor. You should always read and understand any paperwork before signing it, and be wary if the counselor tries to pressure you into signing something. Make sure you talk to an attorney before signing anything that transfers the title of your home.

The Federal Trade Commission has a brochure that describes these scams and their warning signs in more depth at <http://www.ftc.gov/bcp/edu/pubs/consumer/credit/cre42.pdf>

EMPLOYMENT ISSUES

Other hurdles faced by cancer survivors are employment issues. This section addresses employment-related issues faced by cancer survivors, outlining the various options and explaining the laws that can help cancer survivors.

Treatment for cancer may involve hospital stays, frequent and/or lengthy appointments, or side effects that make it difficult, if not impossible, to continue to work. On the other hand, you may be able to continue to work while undergoing cancer treatment. Whether you can or want to continue working is a difficult and personal decision. You should consult with your health care providers regarding your treatment options and the anticipated effects of any treatment. Cancer treatment affects people differently, so you should consider what is best for you at each stage in your journey.

As you consider whether you can or want to continue working during cancer treatment, here are some questions to consider: Do you enjoy your work? Do you find your work to be a welcome distraction? Can you perform all or part of your work

functions while undergoing cancer treatment? What do your health care providers recommend? What accommodation(s), if any, do you need to continue working? Are you eligible for leave under the Family and Medical Leave Act? How much paid time off do you have available to you? If you stop working for a period of time, how will it affect your income? Do you have private disability benefits (either short-term disability benefits or long-term disability benefits)? Are you eligible for public disability benefits? If you stop working, what will you need to do to maintain your health insurance?

WORKING DURING CANCER TREATMENT

REASONABLE ACCOMMODATION

If you decide to work during cancer treatment, you may be entitled to reasonable accommodations under the Americans with Disabilities Act (“ADA”), the Rehabilitation Act, the Virginians with Disabilities Act, or a similar local law. To be legally entitled to a reasonable accommodation, you need to answer “yes” to the following two questions:

Is your employer covered by a law requiring reasonable accommodation?

In Virginia, the answer to this question is “yes.” The ADA applies to companies with 15 or more employees as well as state and local government employers. The Rehabilitation Act applies to the federal government as an employer, programs/organizations receiving federal financial assistance, or companies that contract with the federal government. The Virginians with Disabilities Act applies to all employers in Virginia, except those covered

by the Rehabilitation Act. In addition, many local jurisdictions have ordinances or codes requiring employers to provide reasonable accommodation.

Are you entitled to reasonable accommodation?

The answer to this question will depend on your own circumstances, the type of accommodation you are seeking, and your employer's circumstances. The ADA, the Rehabilitation Act, and Virginians with Disabilities Act require employers to provide reasonable accommodations to qualified employees and applicants with a disability unless such accommodations would pose an undue hardship.

Cancer is generally considered to be a disability because it substantially limits one or more major life activities or because it was substantially limiting some time in the past. However, even though you have cancer, you still must be able to perform the essential functions of the job with or without a reasonable accommodation in order to be considered a "qualified" employee or applicant.

If you need an accommodation, you must ask your employer. There are no "magic words" that you must use to request an accommodation. Rather, you simply have to tell your employer that you have a disability and need an accommodation. Your accommodation request does not have to be in writing, but it is advisable to do so in order to document when you made your request and what you requested. Please refer to the Appendix for a sample accommodation request letter.

- Reasonable accommodations may include:
- Leave for doctor's appointments, treatments, or recuperation;
- Adjustments to your work schedule (changes to your work hours, a reduction in work hours, etc.);
- Periodic breaks for rest or to take medication;
- Redistribution of marginal/non-essential functions to another employee;
- Permission to use the work telephone to call doctors;
- Reassignment to another position.

Please note that your employer does not have to provide the accommodation that you ask for or even what your doctor recommends, as long as the accommodation offered is reasonable and effective. Please also note that your employer does not have to provide an accommodation that would result in "undue hardship." Undue hardship means that providing the accommodation would result in significant difficulty, disruption, or expense to your employer. If the accommodation that you request is too difficult or expensive, you should ask your employer to determine whether there is an easier or less costly accommodation that would work for you.

If you request an accommodation, your employer may request documentation from your health care provider showing that you have a disability and explaining why an accommodation is needed. An employer cannot, however, request your entire medical file. Your employer must keep your medical information confidential. Your employer may, however, disclose your medical information to supervisors/managers if necessary in order to provide you with a reasonable accommodation.

If you believe that you have been discriminated against because of your disability, or if your employer will not reasonably accommodate your cancer, you can file a charge of discrimination with the Equal Employment Opportunity Commission (“EEOC”), the Virginia Human Rights Council, or a local human rights agency. For your charge to be timely, it must be filed within 300 days of the alleged discriminatory act or denial of reasonable accommodation. If you are a federal employee and you want to file a charge of disability discrimination, you must contact an EEO counselor at your agency within 45 days of the alleged discriminatory act or denial of reasonable accommodation.

INTERMITTENT FMLA LEAVE

The Family and Medical Leave Act (“FMLA”) may allow you to take short periods of time off from work for cancer treatment (including medical appointments) or as a result of the side effects caused by cancer treatment. A more detailed discussion of the FMLA and its eligibility requirements is below. When medically necessary, FMLA leave may be taken intermittently. If your employer requires a medical certification for you to take FMLA leave and you need intermittent FMLA leave, you should make sure that the medical certification documents the medical necessity for intermittent FMLA leave and identifies the expected schedule and duration of intermittent FMLA leave. If you are requesting intermittent FMLA leave, you need to make a reasonable effort to schedule medical treatments and appointments in a way that causes minimal disruption of your employer’s operations. So to the extent that you have control over your medical appointments and treatments, you should consult with your supervisor/manager to arrange a mutually acceptable time. Please note that if you request intermittent FMLA leave, your employer may temporarily transfer you to an alternative position with equivalent pay and benefits that is better suited to recurring work interruptions.

HOW TO KEEP YOUR JOB IF YOU CANNOT WORK

If you are unable to work, you may have several options to keep your job.

EMPLOYER LEAVE POLICIES

Many employers offer a variety of paid and unpaid leave benefits. Check your employee handbook and benefits plans, and contact human resources to explore your options. Please be aware that even if your employer allows you to take paid or unpaid leave, that does not necessarily mean that you are legally entitled to return to your job. So before you take leave, you should try to reach an agreement with your employer about your return to work.

FAMILY AND MEDICAL LEAVE

FMLA may allow you to take up to 12 weeks of job-protected, unpaid leave during any 12-month period while you are undergoing cancer treatment. To qualify for FMLA leave, you must:

Have worked for your employer for at least 12 months (not necessarily consecutively) within the past 7 years;

Have worked at least 1250 hours in the past 12 months; and

Work for an employer that has 50 or more employees located at your workplace or within 75 miles of your workplace.

If you are eligible for FMLA leave, you need to take the following steps to take FMLA leave:

EMPLOYMENT ISSUES

- Tell your employer that you are requesting time off under FMLA;
- Give notice of your need for FMLA leave at least 30 days in advance if possible or as soon as possible under the circumstances;
- Complete and return any paperwork required by your employer. Typically, your employer will require you to submit a medical certification from your health care provider.

FMLA leave is unpaid, unless you take it together with paid time off (such as vacation or sick leave) or you are covered under a short-term disability policy. Your employer may require you to use up all of your paid time off while on FMLA leave. Please note, however, that your employer cannot require you to use more FMLA leave time than you need.

While on FMLA leave, you may continue to receive the same health insurance benefits that you would be entitled to if you were an active employee. To continue your health insurance benefits, you must continue to make any required employee contributions. If you are taking paid leave at the same time as FMLA, your employee contributions for your health insurance benefits will continue to be deducted from your paycheck. Otherwise, because FMLA is unpaid, you must make arrangements to pay your employer for the required employee contributions. You should pay careful attention to the timing of any required payments, so that you continue to receive health insurance benefits. If you choose to discontinue health insurance benefits while on FMLA or you fail to make the required payments such that you lose your health insurance benefits while on FMLA, your health insurance benefits will resume (without having to re-qualify) when you return to work.

To return to work from approved FMLA leave, you may be required to provide your employer with documentation from your treating health care provider that certifies that you are able to return to work and that you are able to perform the essential functions of your job with or without a reasonable accommodation. If you need a reasonable accommodation to return to work, the documentation should specify the exact nature of the accommodation that you need. This documentation is usually called a Fitness for Duty Certification.

When you return to work after FMLA leave, you will be put back in your original job (or an equivalent position) with the same pay and benefits that you had before you took FMLA leave. There is an exception to this job restoration right for certain “key employees” (as defined in the FMLA), who are notified of their status when they first request FMLA leave. Key employees who take FMLA leave are reinstated to their former or equivalent positions only if their reinstatement does not cause their employer substantial and grievous economic injury. This is determined on a case-by-case basis. There are also limited business circumstances, such as a location closing or reduction in force, which could result in a loss of your position while you are on FMLA leave.

The FMLA may also allow your spouse, parents, or children to take up to 12 weeks of job-protected, unpaid leave during any 12-month period to care for you as you undergo cancer treatment. The same rules discussed above would apply.

If your employer denies you FMLA leave that you believe you are entitled to, you have a couple of options. You may file a complaint with the United States Department of Labor’s Wage and Hour Division. You may also file a lawsuit under the FMLA before the statute of limitations expires, which is generally two years from the alleged violation.

UNPAID LEAVE AS A REASONABLE ACCOMMODATION

If you are unable to work, you may be entitled to unpaid leave as a reasonable accommodation. As discussed above, the ADA, the Rehabilitation Act, and Virginians with Disabilities Act require employers to provide reasonable accommodation to qualified employees and applicants with a disability unless such accommodations would pose an undue hardship. Unpaid leave can be a reasonable accommodation depending on the length of leave needed, your position, and the employer's operational circumstances. Therefore, you should request that your employer provide you with an accommodation of unpaid leave. Please note that unpaid leave of an indefinite duration generally does not qualify as a reasonable accommodation. So if you expect to return to work on a certain date, you should provide that date to your employer along with your accommodation request for unpaid leave.

FINANCIAL ASSISTANCE IF YOU CANNOT WORK

If you are unable to work, you may be eligible to receive financial assistance through various disability benefits. There are two types of disability benefits: private and public. Private disability benefits are paid by: (a) an insurance company under a policy that has been purchased either by the individual or the individual's employer; or (b) an employer under a benefit plan. Public disability benefits are paid by the federal government through the Social Security Administration.

To receive private or public disability benefits, you must submit a written application for benefits. You will be required to submit medical documentation showing that you have a disability and how your work skills are limited. Each plan has a different definition of "disability."

SHORT-TERM DISABILITY BENEFITS, LONG-TERM DISABILITY BENEFITS, AND OTHER PRIVATE DISABILITY BENEFITS

Private disability benefits come in a variety of different forms. They can be short-term disability benefits or long-term disability benefits. You can purchase short-term or long-term disability benefits through an insurance carrier. You may also have short-term or long-term disability benefits through your employer (because your employer either has purchased group insurance plans or provides those benefits through a self-funded benefit plan). To qualify for private disability benefits, you must meet the specific disability criteria under the insurance agreement or your employer's benefit plan. To request private disability benefits (whether short-term or long-term), you must follow the specific application procedure detailed in the insurance agreement or in your employer's benefit plan. If you are denied, you can appeal. You must, however, follow the appeals process set forth in the benefit plan documents or the insurance contract. You must meet all time deadlines.

If you have short-term or long-term disability benefits that you have purchased through an insurance carrier, you should contact your insurance agent for additional information and assistance with the application process. If you have short-term or long-term disability benefits from your employer, you may find additional information about the benefits in your employee handbook. In addition, you should contact the human resources department for additional information and assistance with the application process.

GOVERNMENT-PROVIDED DISABILITY BENEFITS (“SSI” AND “SSDI”)

There are two types of public disability benefits available through the Social Security Administration: Supplemental Security Income (“SSI”) and Social Security Disability Income (“SSDI”). To qualify for either SSI or SSDI, you must:

Be unable to perform the kind of work for which you are otherwise qualified; and

Have a disability that will last for at least one year or will eventually result in death, unless you qualify for closed period benefits for non-permanent conditions.

In addition, to qualify for SSI, you must have minimal income and few assets, and to qualify for SSDI, you must have worked and made Social Security contributions for a specified period of time. You can apply for and receive both SSI and SSDI, provided that you meet all of the eligibility criteria.

You can apply for SSI or SSDI via the internet at www.ssa.gov or by obtaining an application from your local Social Security Administration office. You should complete the entire application. You should include your complete medical record and a statement from your treating physician detailing your diagnosis, your prognosis, how your condition limits your activities and work-related activities, what treatment you have received, and any side effects of that treatment. During the application process, you will be asked to identify your limitations on the Initial Application, the Functional Report, and/or the Daily Activities Questionnaire. On each of these documents, be sure to accurately represent your limitations. You should include details about your condition and its effects on your daily life

functioning. Specifically, you should identify how often you take breaks to rest, highlight tasks that you are unable to perform, and explain how your activities have changed because of your disability.

Applying for and receiving public disability benefits can be challenging. Because the process may take a while, patience is the key. Please consider the following suggestions:

- Keep a record of each conversation that you have with Social Security personnel (including the date of the conversation, the name of the person you spoke with, the contract information for the person you spoke with, and the substance of the conversation);
- Save all notices, documents, and other papers that you receive from or submit to the Social Security Administration;
- Write down and keep track of all deadlines, including appeal deadlines;
- Keep a list of all of your health care providers and their contact information;
- Keep a record of all hospitalizations, medical appointments, treatments, etc. as well as all medications and changes in medications; and
- Keep a diary of daily activities, including side effects of treatment (such as pain and fatigue) and details about your conditions and limitations.

EMPLOYMENT ISSUES

If your application for SSI and/or SSDI is denied, you may appeal within 60 days of your receipt of the denial letter. You should ask for reconsideration and/or a hearing, depending on the appeal level. If your claim is still denied at the hearing level, you can request an Appeals Council review. If your claim is denied by the Appeals Council, you can appeal to Federal court.

While public disability benefits are not per se available on a short-term basis, public disability benefits are available for non-permanent conditions in a closed period of disability. To qualify for a closed period of public disability benefits, you must have a disability that lasts a minimum of 12 months but that also has an anticipated duration. In other words, a closed period would be appropriate when an individual is disabled for more than 12 months because of cancer treatment but expects to eventually recover enough to return to work. In a closed period of disability, benefits are paid only for the period of time prior to the return to work.

It is a good idea to talk with your doctor soon after your diagnosis to determine whether your medical condition will currently or in the future be likely to qualify you for either permanent or closed period disability benefits. An early application can minimize the delay in obtaining benefits. Certain cancers will qualify for Social Security's Compassionate Allowances program which awards benefits more quickly and with less supporting evidence because of the severity of the condition.

LINC can provide referrals to attorneys to help you with the disability benefits application process.

PLANNING FOR THE FUTURE

Facing cancer is challenging, but you can make decisions now to have some certainty about the future. The law allows for you to make decisions about future events regarding your health care, financial and personal matters, estate distribution and funeral arrangements and who will care for your children in the event you cannot make those decisions later.

HEALTH CARE DECISIONS

WHAT IS AN ADVANCE DIRECTIVE?

An advance directive is a written document that allows you to explain the type of health care you want or do not want in case you later cannot make those decisions on your own. In an advance directive, you can designate an agent to make health care decisions for you if you cannot speak for yourself, provide written instructions about the health care you do or do not want to receive and direct what organs and other parts of your body may be donated after your death.

Your agent will make health care decisions for you in the event your doctor and another physician determine that you cannot make decisions for yourself. Once you can speak for yourself again, decision-making authority is restored to you. You can appoint any adult (18 years or older) to serve as your agent in the event you cannot speak for yourself. The agent does not have to live in Virginia, but should be someone who knows you well enough to make potentially difficult decisions about your health care. In addition, you should choose an alternate agent in case your first choice for agent is unavailable when needed.

An advance directive allows you to provide written instruction about all forms of health care. These include decisions about what hospital or other facility you may want to be admitted to, what sort of medications you may or may not take, and what chemotherapy or radiation therapy you will receive. In addition, an advance directive allows you to specify what sort of life prolonging procedures you may or may not want utilized in terminal situations. Your wishes regarding organ donation and other anatomical gifts also can be specified in an advance directive. An advance directive is frequently referred to as a “living will.”

Your advance directive should be included in your medical record. You should provide a copy of your advance directive to your physician to include in your medical record and bring a copy when you go to the hospital. In addition, you should provide copies to a designated agent, family members and close friends to ensure your wishes are honored. Copies of advance directives are effective as the original.

HOW DO I MAKE AN ADVANCE DIRECTIVE AND HOW DO I AMEND IT OR REVOKE IT?

To be effective, an advance directive needs only to be signed by its creator and two adult witnesses. No particular form is required, however, a model advance directive form is provided in the Appendix. For more information, you can also visit <http://www.vsb.org/site/public/healthcare-decisions-day/>

You can amend your advance directive at any time by creating a new advance directive. Be sure that you provide a new copy to your doctor, the hospital, and let friends and family members know that you have created a new advance directive so that the most current one is used. In addition, it is a good idea to make sure you date all of your advance directives so that it is clear which one is the most current.

If you no longer want an advance medical directive to be effective, you can revoke it in several ways. First, you can make a signed and dated written document revoking the advance directive. Second, you can orally express your intent to revoke the advance directive. Finally, you can physically destroy the advance directive.

IF I DO NOT HAVE AN ADVANCE MEDICAL DIRECTIVE, WHO WILL MAKE HEALTH CARE DECISIONS FOR ME?

If you do not have an advance medical directive, a judge can appoint a court-supervised individual called a guardian to serve as your medical decision-maker. A judge will appoint a guardian if your doctor determines that you are no longer capable of making decisions about your health care. You and your immediate family members must receive notice that a guardian will be appointed and you will have the opportunity to be present and represented before the judge. The judge will appoint a family member or close friend to serve as your guardian. However, if a family member or close friend is not available, an independent attorney will be appointed.

Payment for the guardian will come from your assets, so appointing an agent in an advance directive is wise.

FINANCIAL DECISIONS

It can be difficult when you are sick to take care of day-to-day chores like paying bills, filing your taxes or even selling your home. It is therefore important to consider who will handle these tasks for you if you are unable to do so yourself. For documents requiring attorney preparation, LINC can provide referrals within its service area.

POWER OF ATTORNEY

With a power of attorney, you may designate one or more individuals to make financial and certain legal decisions for you and to otherwise deal with your property during your lifetime. It relieves your loved ones from the burden of having to ask a court to appoint someone if you become incapacitated.

What type of power of attorney do I need?

Almost all modern powers of attorney are “durable.” That is, they will continue to be effective even if you are later incapacitated. If you would like to have the power automatically terminate upon your incapacitation, after a specified period of time or upon some other condition, you will need to sign a “non-durable” power of attorney that expressly provides for that. Both durable and non-durable powers of attorney terminate immediately upon your death.

There are several types of durable/non-durable powers of attorney. The proper choice or combination of these will depend on your particular circumstances:

A **GENERAL** power grants your agent the broadest possible powers to deal with any financial matter and all property you may own.

A **SPECIAL** power grants your agent only limited power to deal with a very specific issue, such as handling the sale of your house or signing your tax returns.

A **SPRINGING** power will become effective only upon your incapacitation or some other triggering event. (If it may be important for your agent to act quickly, a springing power is not usually recommended because proving that the triggering event has occurred can often cause a delay.)

A **NON-SPRINGING** power is immediately effective from the moment you sign it.

Most people choose to use a power of attorney that is durable, general and non-springing.

Who should I name?

Because a power of attorney normally gives the agent very broad powers over your assets at a time when you may not be able to monitor their actions, you should only name someone you completely trust to handle this responsibility. Your agent does not need to be a financial or legal expert, but he or she should ideally be someone who is responsible, organized and willing to seek advice when needed.

Should I name more than one person?

The answer to this question will depend on your circumstances. For example, many people with more than one child believe they should name all of their children to serve together. While this may be appropriate in some families, it can create unnecessary problems in others. Before deciding who to name, you should ask yourself:

- Do my children have problems getting along or communicating with each other?
- Are any of my children uncomfortable dealing with financial matters?
- Do any of my children live outside of the local area? Do any of them travel frequently, have extremely busy lives or might often be otherwise unable to sign documents on a timely basis?
- Would any of my children consider the appointment to be a burden?

If the answer to any of these questions is “yes” with respect to a particular child, it might be best not to include him or her as an

agent in your power of attorney. However, it is always a good idea to name someone to serve as a “back-up” agent if your first choice is unable to act for any reason. It may be appropriate (depending on your circumstances) to name a child who was omitted as a primary agent because of one of the factors above, to be the “back up” agent.

How do I make a power of attorney?

Although you may be able to obtain a basic power of attorney “form” online or from a software package, a store or a friend, there is no guarantee that such a document will be effective for your intended purposes. It is much better, therefore, to contact a qualified attorney for assistance. Your attorney will be better able to draft an appropriate power of attorney for your circumstances. He or she will also be able to ensure that your document will satisfy any particular State recording requirements if there is a possibility your agent will need to deal with the purchase or sale of real estate.

What will happen if I do not have a power of attorney?

In the absence of a valid power of attorney, your loved ones will need to go to court to have a conservator appointed to handle your property and financial and legal affairs if you become incapacitated. Even if you are married, your spouse will not have this authority unless it is expressly granted by a judge.

CONSERVATORSHIP

Once the court appoints a conservator to handle your legal and financial affairs, your conservator’s actions and decisions will be subject to ongoing court supervision. He or she will be required to prepare and submit formal annual reports to the local

Commissioner of Accounts each year. His or her ability to make investment and distribution decisions may also be limited by a very conservative standard. The cost of preparing and reviewing these annual reports can be substantial and will be paid from your assets.

Your conservator may take an annual fee of up to 1% of your assets and 5% of non-investment income. In addition, the court will usually require your conservator to purchase a surety bond (which is like an insurance policy that will protect you if the conservator runs off with your money). The annual premium for the surety bond, as well as the conservator’s annual fee, is also payable from your assets.

What is the process for naming a conservator?

If someone wishes to take over your financial and legal affairs, he or she will need to file a petition with the court to start the process. This usually requires an attorney’s assistance.

After the petition is filed, the judge will appoint an independent attorney experienced in guardianship situations (the “guardian ad litem”) to review your medical records, interview both you and the person who is seeking appointment and then submit a written report of his or her findings to the court. The guardian ad litem’s fees will be paid from your assets.

The judge will then set a court date and hear testimony in open court. If the judge determines from the evidence presented that you are incapacitated, he or she will sign an order granting the petitioning individual the right to make legal and financial decisions for you.

The newly appointed conservator must then take an oath that he or she will act in your best interests.

Will the court ask me what I want?

Anyone who wishes to file a petition for conservatorship must notify you and certain close family members in writing that he or she is doing so. You have the right to be present in court when the judge hears evidence, to have an attorney represent you in front of the judge, to present your own evidence and to have the case heard by a jury instead of a judge. Of course, if you are truly incapacitated, your role will be minimal.

Who may serve as my conservator?

The qualities of a good conservator are the same as those for a good agent under a power of attorney: trustworthy, reliable, responsible and organized. Typically, the court will prefer to name a family member or a close friend to serve as your conservator. But if a suitable family member or close friend is not available, the court may appoint an independent attorney.

How long does the appointment take?

Usually, four to six weeks, but it may take longer if the petition is contested. On the other hand, in emergency situations, a temporary appointment may be obtained in a matter of days.

How much does it cost to appoint a conservator?

The legal fees and court costs associated with a conservatorship proceeding will vary widely, depending on the circumstances. For example, will you or anyone else contest the appointment? It is not unusual for total costs to be in the range of \$5,000-

\$10,000, even for an uncontested appointment. This is one of the main reasons powers of attorney are preferred over conservatorships.

DECISIONS FOR AFTER YOUR DEATH

DISPOSITION OF YOUR BODY

In the hours immediately following a person's death, priority is given to determining the cause of death, issuing the death certificate and transporting the body to a funeral home or crematory.

Who should be contacted after I die?

If you die at home, your next of kin should immediately contact your primary physician, the police or the local coroner, who will issue the death certificate and, if circumstances require, order an autopsy. If you die in a hospital, these matters will be handled by their staff.

Of course, your family and friends will also need to be notified. In most cases, the family members and friends who remained near to you in your final days will take care of this. However, in the case of an unexpected death when family and friends are not present, there may be a delay while authorities attempt to identify and contact your family.

Who will decide what happens to my body?

Once cleared to do so by the authorities, any of your next of kin (that is, a spouse or any blood relative) may direct a funeral home or crematory to collect your body. Generally speaking,

your next of kin may select the service provider and the manner of disposition (burial vs. cremation), as well as make any funeral or memorial service arrangements. If you have made your own arrangements prior to death and/or if you are a member of a group (such as the military) that may entitle you to certain burial honors, be sure to make your next of kin aware of this and provide them with a copy of any related documentation.

FUNERAL/MEMORIAL ARRANGEMENTS

In most cases, your family members will agree as to who (for example, the surviving spouse) should make decisions regarding your burial or cremation. Unfortunately, this is not always the case. For example, if you have children from a prior marriage, they may disagree with your current spouse as to how your remains will be handled or where your funeral or memorial service will be held.

Such disagreements can be very disruptive because, by law, your “next of kin” is not just the person you would normally consider to be your closest relative. Rather, the term includes your spouse and essentially all of your blood relatives, any one of whom is entitled to make final arrangements for you. In the case of a conflict, it will often be the funeral home or crematory, or even a court, who decides which relative will be allowed to make the arrangements.

How can I designate somebody to make final arrangements?

If you believe your family will argue over these matters after your death, or if you would prefer to give a friend or other third party the right to make decisions, you should discuss your concerns with an attorney. He or she may advise you to purchase a preneed contract and/or to formally designate your

preferred choice to make final arrangements for you. Although under current law this designation will not necessarily prevent all conflicts, your family and the funeral home or crematory (or as a last resort, the court) will likely give it significant weight in resolving them.

The designation must be in writing and signed by both you and the person you are naming. Your signature must be notarized. It is also a good idea to provide a copy of the designation to your primary physician and, if you have purchased a preneed contract, to the contracting funeral home or crematory.

SETTLEMENT OF YOUR ESTATE

After your remains have been put to rest, attention will turn to settling your estate. This process will include securing your property and protecting it from waste, paying your debts and final expenses and, finally, distributing any remaining assets to your heirs or beneficiaries.

Because of the many rules governing the administration of a decedent’s estate and the potential personal liability for anyone who does not follow them, your family should consult a qualified attorney for advice before doing anything other than cleaning out your refrigerator or otherwise protecting your assets from theft or waste.

Who will settle my affairs after I have died?

You may name someone in your will to be your executor and handle your estate. This person is not required to accept your appointment, though, so it is a good idea to ask beforehand if he or she would be willing to serve. If he or she declines to serve and you have not named an alternate, or if you die without a will, a family member, friend or other individual may request appointment by the court.

Should I have a will?

It is always a good idea to have a will. A will allows you to:

- Decide who will handle the settlement of your estate. Without a will, the final choice will be left to the court.
- Decide who gets your property. Without a will, your property will pass to your next of kin as provided by State law. Be assured, though, that the State will not receive any of your property unless you (and your predeceased spouse, if any) have absolutely no living relatives, including extremely distant cousins several times removed.
- Decide how and/or when your beneficiaries will receive your property. Without a will, your heirs will receive your property outright, except that any property passing to a minor or incapacitated heir may be subject to continuing court supervision through a conservatorship.
- Designate who you would like to care for your children and possibly avoid a custody battle.
- Decide how much compensation, if any, your executor will receive for his or her services. Unless your will provides otherwise, State law may allow your executor to claim a significant fee.
- Avoid or reduce court fees and costs charged to your estate.

Is all of my property controlled by my will?

No. Any assets that have a beneficiary or payable-on-death designation, are jointly held with rights of survivorship, or are held in a trust, will be distributed as provided in the applicable designation, title documents or trust agreement. Examples of such property might be life insurance with designated beneficiaries, jointly-owned homes, or jointly-owned bank accounts. Any instructions in your will to distribute those assets otherwise will be ignored.

When do I make a will?

You may make (or amend) your will at any time. However, individuals who are of unsound mind, subject to undue influence or under the age of 18 may not make a valid will.

How do I make a will?

It is always best to have a lawyer write your will in order to ensure that your intentions will, in fact, be carried out. Too often home-made wills are improperly executed or lead to unintended consequences due to poor wording or unfamiliarity with State law. These problems may trigger family disputes and unnecessary costs and in extreme cases could make your will ineffective. But, if you must write your own will, you may do so in either of two ways:

Write out your wishes entirely in your own handwriting and clearly indicate that the document is your last will. Be sure to date and sign the document at the very bottom. It is also a good idea to have two witnesses sign, but it is not required.

Type out your wishes and clearly indicate that the document is your last will. Note, any handwriting on the document (other

than a signature) will, at best, be ignored or, at worst, invalidate the will entirely. Date and sign the document at the bottom in the presence of two adult witnesses (who must also sign the document while all three of you are together) and, if possible, a notary public. The notary should complete a “self-proving affidavit” to notarize your signature and the witnesses’ signatures and confirm that the will was executed properly. If this notarization is not done, one or both of your witnesses will be required to appear before the court after your death to attest to the circumstances surrounding the will’s execution.

DECISIONS REGARDING CARE AND CUSTODY OF CHILDREN

Providing for your child’s care and custody may become of paramount concern at some time. Often when the child’s other parent is not available, family members or friends may offer to provide child care. In those situations, you may want to sign a temporary power of attorney to allow the caretaker to authorize medical treatment or sign school forms. But if longer term care is necessary, it may be wise to consider more lasting legal arrangements. Legal documentation of a custody transfer is often required for children to receive health benefits under a caretaker’s policy, to attend a school in another district, or to have survivor’s benefits paid to a designated caretaker. You will also want to make sure that you have appointed a guardian for the child under your will to provide for your child’s needs should your treatment not result in a positive outcome.

When your child’s custody requires determination

You may consider finding a relative to share joint legal and physical custody of a child while you are undergoing treatment. Voluntary and uncontested transfer of the custody of your child

can easily be accomplished through the Juvenile and Domestic Relations Court where your child lives. You may wish to consult with an attorney to guide you through this process. Alternatively, you might make an appointment with the Court Service Unit and an intake officer might assist you. Options such as sharing joint legal and physical custody of your child with a chosen caretaker provide for flexibility when unexpected problems arise.

Standby guardianship

Another option is to file a petition requesting the Juvenile and Domestic Relations District Court to approve a “standby guardian.” A standby guardianship can also be obtained if a parent designates (in writing) a person to assume the duties of a guardian upon the occurrence of a triggering event. The written designation must state:

- The name, address, and birth date of the child affected;
- The triggering event or circumstances (e.g. hospice care); and
- The name and address of the person designated as the standby guardian.

After the triggering event has occurred, the standby guardian must petition the court for approval as the standby guardian. Whether the designation is first obtained by petitioning the court or through a written designation, the court will consider the rights of the child’s other parent or the interests of other relatives who solicit the court. A guardian ad litem may also be appointed to investigate and make recommendations to the court regarding the child’s best interest.

APPENDIX

A. Sample Letter To Appeal Health Care Denial

Your Name
 Your Address
 Your Telephone Number
 Your E-Mail Address (if you have one)

Date
 Re: Your Name
 Type of Coverage
 Group number/Policy number

Dear (Name of contact person at insurance company),

Please accept this letter as my appeal to (insurance company name) decision to deny coverage for (state the name of the specific procedure denied). It is my understanding based on your letter of denial dated (insert date) that this procedure has been denied because:
 (Quote the specific reason for the denial stated in denial letter)

I have been a member of your (state name of PPO, HMO, etc.) since (date). During that time I have participated within the network of physicians listed by the plan. However, my primary care physician, Dr. (name) believes that the best care for me at this time would be (state procedure name). At this time there is not a physician within the network who has extensive knowledge of this procedure. Dr. (name of primary care physician), a plan provider, has recommended that I have the procedure done outside the network by Dr. (name of specialist) at (name of treating facility).

I have enclosed a letter from Dr. (name of primary care physician) explaining why he recommends (name of procedure). I have also enclosed a letter from Dr. (name of specialist) explaining the procedure in detail, his qualifications and experience, and several articles that discuss the procedure.

Based on this information, I am asking that you reconsider your previous decision and allow me to go out of network to Dr. (name) for (name of specific procedure). The procedure is scheduled to begin on (date). Should you require additional information, please do not hesitate to contact me at (phone number). I look forward to hearing from you in the near future.

Sincerely,

Your Signature

Your Printed Name

*You should keep a copy of the letter that you send.

B. Sample Budget

Name:		Expense	Amount
		Mortgage Loan 1	
		Mortgage Loan 2	
		Mortgage Loan 3	
Income source	Monthly net income	Taxes / Insurance	
Wages/salary		Electricity	
Benefits		Gas / Oil Heat	
Food Stamps		Water / Garbage	
Child support		Cable / Satellite	
Other		Phone	
Total	\$ -	Mobil / Pager	
Secondary Source		Car Payment	
Income source	Monthly net income	Car Payment	
Wages/salary		Car Insurance	
Benefits		Gas / Fares / Parking	
Food Stamps	\$ -	Car Maintenance	
Child support		Groceries	
Other		Work Lunches	
Total	\$ -	School Lunches	
		Eating Out	
Other>18yrs		Toiletries / Cleaning Products	
Income source	Monthly net income	Dry Cleaning	
Wages/salary	\$ -	Laundry	
Benefits		Hair Care	
Food Stamps		Pet Care	
Child support		Child Support	
Other		Child Care	
Total	\$ -	Allowances	

		Medical / Life Insurance	
		Medical / Dental Care/Optical	
		Prescriptions	
		Clothing	
Summary		Entertainment	
Total Income		Tobacco / Alcohol	
Total Expense		Subscriptions / On line	
Debt Payment		Gifts	
Deficit/Surplus		Offerings / Donations	
		savings	
		Recreational	
		Credit Cards	
		Total	\$ -

C. Sample Accommodation Request Letter

Your Name
 Your Address
 Your Telephone Number
 Your E-Mail Address (if you have one)

Date

Your Employer's Name
 Your Employer's Address

Dear [Name of Supervisor/Manager or Address to Human Resources]:

- Identify yourself as a person with a disability
- State that you are requesting accommodation under the ADA, Rehabilitation Act, or the Virginians with Disabilities Act
- Specify the job tasks or functions that you are having difficulty performing or that create problems for you
- State your accommodation ideas
- Ask your employer for accommodation ideas
- Refer to attached medical documentation. You should consider attaching a letter from your health care provider that establishes that you are a person with a disability and documents your need for accommodation
- Ask that your employer respond to your request in writing within a reasonable, but specified period of time.

Sincerely,

Your Signature

Your Printed Name

*You should keep a copy of the letter that you send.

VIRGINIA ADVANCE DIRECTIVE FOR HEALTH CARE

I, _____, willingly and voluntarily make known my wishes in the event that I am incapable of making an informed decision about my health care, as follows:

(YOU MAY INCLUDE ANY OR ALL OF THE PROVISIONS IN SECTIONS I AND II BELOW.)

SECTION I: APPOINTMENT AND POWERS OF MY AGENT

(CROSS THROUGH THIS SECTION I IF YOU DO NOT WANT TO APPOINT AN AGENT TO MAKE HEALTH CARE DECISIONS FOR YOU.)

A. Appointment of My Agent

I hereby appoint _____ as my agent to make health care decisions on my behalf as authorized in this document.

If the primary agent named above is not reasonably available or is unable or unwilling to act as my agent, then I appoint as successor agent to serve in that capacity:

I grant to my agent full authority to make health care decisions on my behalf as described below. My agent shall have this authority whenever and for as long as I have been determined to be incapable of making an informed decision.

In making health care decisions on my behalf, I want my agent to follow my desires and preferences as stated in this document or as otherwise known to him or her. If my agent cannot determine what health care choice I would have made on my own behalf, then I want my agent to make a choice for me based upon what he or she believes to be in my best interests.

B. Powers of My Agent

(IF YOU APPOINTED AN AGENT ABOVE, YOU MAY GIVE HIM/HER THE POWERS SUGGESTED BELOW. YOU MAY CROSS THROUGH ANY POWERS LISTED BELOW THAT YOU DO NOT WANT TO GIVE YOUR AGENT AND ADD ANY ADDITIONAL POWERS YOU DO WANT TO GIVE YOUR AGENT.)

The powers of my agent shall include the following:

1. To consent to or refuse or withdraw consent to any type of health care, including, but not limited to, artificial respiration (breathing machine), artificial administered nutrition (tube feeding) and hydration (IV fluids), and cardiopulmonary resuscitation (CPR). This authorization specifically includes the power to consent to dosages of pain-relieving medication in excess of recommended dosages in an amount sufficient to relieve pain. This applies even if this medication carries the risk of addiction or of inadvertently hastening my death.
2. To request, receive and review any oral or written information regarding my physical or mental health, including but not limited to medical and hospital records, and to consent to the disclosure of this information as necessary to carry out my directions as stated in this advance directive.
3. To employ and discharge my health care providers.
4. To authorize my admission, transfer, or discharge to or from a hospital, hospice, nursing home, assisted living facility or other medical care facility.
5. To authorize my admission to a health care facility for treatment of mental illness as permitted by law. (If I have other instructions for my agent regarding treatment for mental illness, they are stated in a supplemental document.)
6. To continue to serve as my agent if I object to the agent's authority after I have been determined to be incapable of making an informed decision.
7. To authorize my participation in any health care study approved by an institutional review board or research review committee according to applicable federal or state law if the study offers the prospect of direct therapeutic benefit to me.
8. To authorize my participation in any health care study approved by an institutional review board or research review committee according to applicable federal or state law that aims to increase scientific understanding of any condition that I may have or otherwise to promote human well-being, even though it offers no prospect of direct benefit to me.
9. To make decisions regarding visitation during any time that I am admitted to any health care facility, consistent with the following directions: _____
10. To take any lawful actions that may be necessary to carry out these decisions, including the granting of releases of liability to medical providers.
11. To donate all or part of my body for transplantation, therapy, research or education.

ADDITIONAL POWERS, IF ANY: _____

SECTION II: MY HEALTH CARE INSTRUCTIONS

(YOU MAY USE ANY OR ALL OF PARTS 1, 2 OR 3 IN THIS SECTION TO DIRECT YOUR HEALTH CARE EVEN IF YOU DO NOT HAVE AN AGENT. IF YOU CHOOSE NOT TO PROVIDE WRITTEN INSTRUCTIONS, DECISIONS WILL BE BASED ON YOUR VALUES AND WISHES, IF KNOWN, AND OTHERWISE ON YOUR BEST INTERESTS.)

1. I provide the following instructions in the event my attending physician determines that my death is imminent (very close) and medical treatment will not help me recover:

(CHECK ONLY 1 BOX IN THIS PART 1.)

- I do not want any treatments to prolong my life. This includes tube feeding, IV fluids, cardiopulmonary resuscitation (CPR), ventilator/respirator (breathing machine), kidney dialysis or antibiotics. I understand that I still will receive treatment to relieve pain and make me comfortable. (OR)
- I want all treatments to prolong my life as long as possible within the limits of generally accepted health care standards. I understand that I will receive treatment to relieve pain and make me comfortable. (OR)
- (YOU MAY WRITE HERE YOUR OWN INSTRUCTIONS ABOUT YOUR CARE WHEN YOU ARE DYING, INCLUDING SPECIFIC INSTRUCTIONS ABOUT TREATMENTS THAT YOU DO WANT, IF MEDICALLY APPROPRIATE, OR DON'T WANT. IT IS IMPORTANT THAT YOUR INSTRUCTIONS HERE DO NOT CONFLICT WITH OTHER INSTRUCTIONS YOU HAVE GIVEN IN THIS ADVANCE DIRECTIVE.)*

2. I provide the following instructions if my condition makes me unaware of myself or my surroundings or unable to interact with others, and it is reasonably certain that I will never recover this awareness or ability even with medical treatment:

(CHECK ONLY 1 BOX IN THIS PART 2.)

- I do not want any treatments to prolong my life. This includes tube feeding, IV fluids, cardiopulmonary resuscitation (CPR), ventilator/respirator (breathing machine), kidney dialysis or antibiotics. I understand that I still will receive treatment to relieve pain and make me comfortable. (OR)
- I want all treatments to prolong my life as long as possible within the limits of generally accepted health care standards. I understand that I will receive treatment to relieve pain and make me comfortable. (OR)
- I want to try treatments for a period of time in the hope of some improvement of my condition. I suggest _____ as the period of time after which such treatment should be stopped if my condition has not improved. The exact time period is at the discretion of my agent or surrogate in consultation with my physician. I understand that I still will receive treatment to relieve pain and make me comfortable. (OR)
- (YOU MAY WRITE HERE YOUR INSTRUCTIONS ABOUT YOUR CARE WHEN YOU ARE UNABLE TO INTERACT WITH OTHERS AND ARE NOT EXPECTED TO RECOVER THIS ABILITY. THIS INCLUDES SPECIFIC INSTRUCTIONS ABOUT TREATMENTS YOU DO WANT, IF MEDICALLY APPROPRIATE, OR DON'T WANT. IT IS IMPORTANT THAT YOUR INSTRUCTIONS HERE DO NOT CONFLICT WITH OTHER INSTRUCTIONS YOU HAVE GIVEN IN THIS ADVANCE DIRECTIVE.)*

3. I provide the following other instructions concerning my health care:

(YOU MAY WRITE HERE STATEMENTS AND INSTRUCTIONS ABOUT TREATMENTS THAT YOU DO WANT, IF MEDICALLY APPROPRIATE, OR ABOUT TREATMENTS YOU DO NOT WANT UNDER SPECIFIC CIRCUMSTANCES OR ANY CIRCUMSTANCES. IT IS IMPORTANT YOUR INSTRUCTIONS HERE DO NOT CONFLICT WITH OTHER INSTRUCTIONS YOU HAVE GIVEN IN THIS ADVANCE DIRECTIVE.)

AFFIRMATION AND RIGHT TO REVOKE: By signing below, I indicate that I understand this document and that I am willingly and voluntarily executing it. I also understand that I may revoke all or any part of it at any time as provided by law.

Date _____ Signature of Declarant _____

The declarant signed the foregoing advance directive in my presence. *(TWO ADULT WITNESSES NEEDED)*

Witness Signature _____ Witness Printed _____

Witness Signature _____ Witness Printed _____

This form satisfies the requirements of Virginia's Health Care Decisions Act. If you have legal questions about this form or would like to develop a different form to meet your particular needs, you should talk with an attorney. It is your responsibility to provide a copy of your advance medical directive to your treating physician. You also should provide copies to your agent, close relatives and/or friends. This form is provided by the Virginia Hospital & Healthcare Association as a service to its members and the public. (March 2010, www.vhha.com) ▲◆◆

RESOURCE LIST

RESOURCES FOR CHAPTER 1: PAYING FOR MEDICAL CARE

ASSISTANCE PROGRAMS

American Cancer Society

Visit http://www.cancer.org/docroot/MLT/MLT_0.asp, and click on the “Medical Insurance and Financial Assistance for the Cancer Patient” link.

ACS may provide free wigs, head coverings, financial referrals and resources to patients in need. Call 1-800-ACS-2345 or find your local chapter (see below under “General Resources”).

Medically Indigent Drug Assistance Information Booklet — published by the American Cancer Society, this booklet lists companies with indigence programs, the drugs available, and the guidelines of procedures. Booklet available free to health care providers. Call the American Cancer Society at 1-800-ACS-2345 or contact your local chapter.

Patient Advocate Foundation

help@patientadvocate.org
700 Thimble Shoals Blvd
Suite 200
Newport News, VA 23606
(800) 532-5274

Provides direct assistance with co-payments for pharmaceutical products to insured patients who qualify financially and medically. Assistance is available only for certain cancer diagnoses. Visit the website at <http://www.copays.org/> for an online application.

Virginia Department of Social Services

801 E. Main St.
Richmond, VA 23219-901
(800) 552-3431
(804) 726-7000 (Richmond)
<http://www.dss.virginia.gov/benefit/>

Provides qualified individuals with insurance for a variety of medical services, including prescription drugs, doctor visits, nursing facility care, and hospital care.

Local offices may provide you with copies of a written application. To locate the nearest Social Services office, call 1-800-552-3431, visit <http://www.dss.virginia.gov/benefit/>, or find an office listed below:

Accomack Department of Social Services

22554 Center Parkway
Accawmacke Office Park
P.O. Box 210
Accomack, VA 23301
(757) 787-1530

Albemarle County Department of Social Services

1600 Fifth St., Suite A
Charlottesville, VA 22902
(434) 972-4010

Alexandria Division of Human Services

2525 Mount Vernon Ave.
Alexandria, VA 22301
(703) 746-5700

Alleghany-Covington Department of Social Services

110 Rosedale Ave., Suite B
Covington, VA 24426-1244
(540) 965-1780

RESOURCE LIST

Amelia Department of Social Services
16360 Dunn Street Suite 201
P.O. Box 136
Amelia, VA 23002
(804) 561-2681

Amherst Department of Social Services
224 Second St.
P. O. Box 414
Amherst, VA 24521-0414
(434) 946-9330

Appomattox Department of Social Services
318 Court St.
P. O. Box 549
Appomattox, VA 24522-0549
(434) 352-7125

Arlington County Department of Social Services
3033 Wilson Blvd., Suite 600A
Arlington, VA 22201
(703) 228-1550

Bath County Department of Social Services
65 Courthouse Hill Road
P.O. Box 7
Warm Springs, VA 24484
(540) 839-7271

Bedford Department of Social Services
Burks-Scott Building
119 E. Main St.
PO Box 1187
Bedford, VA 24523-7750
(540) 586-7750

Bland County Department of Social Services
612 Main St.
P.O. Box 55
Bland County Court House, Suite 208
Bland, VA 24315
(276) 688-4111

Botetourt County Department of Social Services
20 S. Roanoke St., Suite 102
P. O. Box 160
Fincastle, VA 24090-0160
(540) 473-8210

Bristol City Department of Social Services
621 Washington St.
Bristol, VA 24201-4644
(276) 645-7450

Brunswick County Department of Social Services
201 Sharp St., Suite 100
Lawrenceville, VA 23868
(434) 848-2142

Buchanan County Department of Social Services
3174 Slate Creek Road
Grundy, VA 24614-0674
(276) 935-8106

Buckingham County Department of Social Services
13360 West James Anderson Highway
Route 60
P. O. Box 170
Buckingham Court House, VA 23921-0170
(434) 969-4246

Campbell County Department of Social Services
69 Kabler Lane
P.O. Box 860
Rustburg, VA 24588-0860
(434) 332-9585

Caroline Department of Social Services
17202 Richmond Turnpike
P.O. Box 430
Bowling Green, VA 22427
(804) 633-5071

Carroll County Department of Social Services
Carroll Co. Governmental Complex
605-8 Pine St.
Hillsville, VA 24343
(276) 730-3130

Charles City Department of Social Services
10600 Courthouse Road
P.O. Box 98
Charles City, VA 23030-0098
(804) 652-1708

Charlotte County
400 Thomas Jefferson Hwy
PO Box 440
Charlotte Court House, VA 23923
(434) 542-5164
(434) 542-5248

Charlottesville Department of Social Services
120 Seventh St., N.E.
P.O. Box 911
Charlottesville, VA 22902-0911
(434) 970-3400

Chesapeake Department of Social Services
100 Outlaw St.
P.O. Box 15098
Chesapeake, VA 23320
(757) 382-2000

Chesterfield/Colonial Heights Department of Social Services
9501 Lucy Corr Circle
P.O. Box 430
Chesterfield, VA 23832-0430
(804) 748-1100

Clarke County Department of Social Services
311 E. Main St.
Berryville, VA 22611
(540) 955-3700

Craig County Department of Social Services
Court St.
P. O. Box 330
New Castle, VA 24127-0330
(540) 864-5117

Culpeper County Human Services
219 E. Davis St., Suite 10
Culpeper, VA 22701
(540) 727-0372

Cumberland County Department of Social Services
71 Community Center Drive
P. O. Box 33
Cumberland, VA 23040-9803
(804) 492-4915

Danville Division of Social Services
510 Patton St., Danville, VA 24543
P. O. Box 3300
Danville, VA 24541
(434) 799-6543

RESOURCE LIST

Dickenson County Department of Social Services

Brush Creek Road
120 Clover Street
P.O. Box 417
Clintwood, VA 24228-0417
(276) 926-1661
(276) 926-1664

Dinwiddie Department of Social Services

14012 Boydton Plank Road
P.O. Box 107
Dinwiddie, VA 23841
(804) 469-4524

Essex Department of Social Services

772 Richmond Beach Road
P.O. Box 1004
Tappahannock, VA 22560-1004
(804) 443-3561

Fairfax County Department of Family Services

12011 Government Center Parkway
Suite 232
Fairfax, VA 22035
(703) 324-7500

Fauquier County Department of Social Services

320 Hospital Drive, Suite 11
P.O. Box 300
Warrenton, VA 20186-3037
(540) 347-2316

Floyd County Department of Social Services

Courthouse Building
120 W. Oxford St.
P.O. Box 314
Floyd, VA 24091-2222
(540) 745-9316

Fluvanna County Department of Social Services

8880 B James Madison Highway
P.O. Box 98
Fork Union, VA 23055
(434) 842-8221

Franklin City Department of Social Services

306 N. Main St
PO Box 601
Franklin, VA 23851
(757) 562-8520
(757) 516-6683

Franklin County Department of Social Services

11161 Virgil H. Goode Highway
Rocky Mount, VA 24151
(540) 483-9247

Frederick County Department of Social Services

107 N. Kent St., Third Floor
Winchester, VA 22601
(540) 665-5688

Fredericksburg Department of Social Services

608 Jackson Street
Suite 100
Fredericksburg, VA 22401
(540) 372-1032

Galax City Department of Social Services

105 E. Center St
P.O. Box 166
Galax, VA 24333-0166
(276) 236-8111

Giles County Department of Social Services

211 Main St., Suite 109
Narrows, VA 24124
(540) 726-8315

Gloucester Department of Social Services

6641 Short Lane
P.O. Box 1390
Gloucester, VA 23061-0186
(804) 693-2671

Goochland Department of Social Services

1800 Sandy Hook Road, Suite 200
P.O. Box 34
Goochland, VA 23063-0034
(804) 556-5880

Grayson County Department of Social Services

129 Davis St.
P.O. Box 434
Independence, VA 24348-0434
(276) 773-2452

Greene County Department of Social Services

10009 Spotswood Trail
Stanardsville, VA 22973-0117
(434) 985-5246

Greensville/Emporia Department of Social Services

1748 E. Atlantic St.
P.O. Box 1136
Emporia, VA 23847-1136
(434) 634-6576

Halifax County Department of Social Services

1030 Cowford Road
P. O. Box 1189
Halifax, VA 24558-0666
(434) 476-6594

Hampton Department of Social Services

1320 LaSalle Ave.
Hampton, VA 23669
(757) 727-1800

Hanover County Department of Social Services

12304 S. Washington Highway
Ashland, VA 23005
(804) 365-4100
(800) 770-0837 (Hanover residents only)

Harrisonburg-Rockingham County Department of Social Services

110 N. Mason St.
P.O. Box 809
Harrisonburg, VA 22803
(540) 574-5100

Henrico County Department of Social Services

8600 Dixon Powers Drive
P.O. Box 27032
Henrico, VA 23273
(804) 501-4001

Henry-Martinsville Department of Social Services

20 Progress Street
P.O. Box 832
Martinsville, VA 24114
(276) 656-4300

Highland County Department of Social Services

Courthouse Annex
P.O. Box 247
Monterey, VA 24465-0247
(540) 468-2199

Hopewell Department of Social Services

256 E. Cawson St.
Hopewell, VA 23860
(804) 541-2330

RESOURCE LIST

Isle of Wight
Department of Social Services
17100 Monument Circle, Suite A
Isle of Wight, VA 23397-0110
(757) 365-0880

James City County
Department of Social Services
5249 Old Towne Road
Williamsburg, VA 23188
(757) 259-3100

King and Queen
Department of Social Services
241 Allen Circle
P.O. Box 7
King and Queen Courthouse, VA 23085
(804) 769-5003
(804) 785-5977

King George
Department of Social Services
10069 Kings Highway
P.O. Box 130
King George, VA 22484-0130
(540) 775-3544

King William
Department of Social Services
172 Courthouse Lane
P.O. Box 187
King William, VA 23086-0187
(804) 769-4905

Lancaster County
Department of Social Services
9049 Mary Ball Road
P.O. Box 185
Lancaster, VA 22503
(804) 462-5141

Lee County
Department of Social Services

Main St.
P.O. Box 348
Jonesville, VA 24263-0346
(276) 346-1010

Loudoun County
Department of Family Services
102 Heritage Way, N.E., Suite 200
Leesburg, VA 20176
(703) 777-0353

Louisa County
Department of Social Services
103 McDonald St.
P.O. Box 425
Louisa, VA 23093-0425
(540) 967-1320

Lunenburg County
Department of Social Services
11387 Courthouse Road
Lunenburg, VA 23952
(434) 696-2134

Lynchburg
Department of Social Services
P.O. Box 6798
99 9th St.
Lynchburg, VA 24505
(434) 455-5850

Madison County
Department of Social Services
101 S. Main St.
P.O. Box 176
Madison, VA 22727-0176
(540) 948-5521

Manassas City
Department of Family Services
9324 West Street
Manassas, VA 20110
(703) 361-8277

Manassas Park
Department of Social Services
City Hall
1 Park Center Court
Manassas Park, VA 20111
(703) 335-8898

Mathews Department of Social Services
Route 611
536 Church Street
P.O. Box 925
Mathews, VA 23109-0925
(804) 725-7192

Mecklenburg County
Department of Social Services
911 Madison St.
P.O. Box 400
Boydton, VA 23917
(434) 738-6138

Middlesex County
Department of Social Services
2893 General Puller Highway
P.O. Box 216
Urbanna, VA 23175-0216
(804) 758-2348

Montgomery County
Department of Social Services
210 S. Pepper St.
P.O. Box 789
Christiansburg, VA 24073
(540) 382-6990

Nelson County
Department of Social Services
203 Front St.
P.O. Box 357
Lovingson, VA 22949
(434) 263-7160

New Kent Department of Social Services
12025 Courthouse Circle
Suite 100
P.O. Box 229
New Kent, VA 23124
(804) 966-1853

Newport News
Department of Human Services
Rouse Tower
6060 Jefferson Ave.
Newport News, VA 23605
(757) 926-6300

Norfolk Department of Human Services
Franklin Building
741 Monticello Avenue
Norfolk, VA 23510-1506
(757) 664-6000

Northampton County
Department of Social Services
5265 The Hornes
P.O. Box 568
Eastville, VA 23347-0568
(757) 678-5153

Northumberland County
Department of Social Services
6373 Northumberland Highway, Suite A
P.O. Box 399
Heathsville, VA 22473-0399
(804) 580-3477

Norton City
Department of Social Services
938 Park Ave.
P.O. Box 378
Norton, VA 24273-0378
(276) 679-4393
(276) 679-2701

RESOURCE LIST

Nottoway County
Department of Social Services
288 W. Courthouse Road
P. O. Box 26
Nottoway, VA 23955-0026
(434) 645-8494

Orange County
Department of Social Services
146 Madison Road, Suite 201
Orange, VA 22960
(540) 672-1155

Page County
Department of Social Services
215 W. Main St., Suite A
P.O. Box 47
Stanley, VA 22851
(540) 778-1053

Patrick County
Department of Social Services
106 Rucker St., Suite 128
Stuart, VA 24171
(276) 694-3328

Petersburg Department of Social Services
400 Farmer St.
P.O. Box 2127
Petersburg, VA 23804
(804) 861-4720

Pittsylvania County
Department of Social Services
220 H. G. McGhee Drive
P.O. Box E
Chatham, VA 24531
(434) 432-7281

Portsmouth
Department of Social Services
1701 High St., Suite 101
Portsmouth, VA 23704
(757) 405-1800

Powhatan County
Department of Social Services
3908 Old Buckingham Road
Suite 2
Powhatan, VA 23139-0099
(804) 598-5630

Prince Edward County
Department of Social Services
111 South St.
P. O. Box 628
Farmville, VA 23901-0628
(434) 392-3113

Prince George
Department of Social Services
6450 Administration Drive, Building 12
P.O. Box 68
Prince George, VA 23875-0068
(804) 733-2650

Prince William County
Department of Social Services
7987 Ashton Ave., Suite 200
Manassas, VA 20109
(703) 792-7500

Pulaski County
Department of Social Services
143 Third St., N.W.
P.O. Box 110
Pulaski, VA 24301-0110
(540) 980-7995

Radford City
Department of Social Services
928 W. Main St.
Radford, VA 24141
(540) 731-3663

Rappahannock County
Department of Social Services
354 Gay St.
P.O. Box 87
Washington, VA 22747-0087
(540) 675-3313

Richmond City
Department of Social Services
Marshall Plaza Building
900 E. Marshall St.
P.O. Box 10129
Richmond, VA 23240
(804) 646-7212

Richmond County
Department of Social Services
5579 Richmond Road
P.O. Box 35
Warsaw, VA 22572-0035
(804) 333-4088

Roanoke City
Department of Social Services
1510 Williamson Road, N.E.
Roanoke, VA 24012
(540) 853-2591

Roanoke County
Department of Social Services
220 E. Main St.
P. O. Box 1127
Salem, VA 24153-1127
(540) 387-6087

Rockbridge-Buena
Vista-Lexington Area Social Services
20 E. Preston St.
Lexington, VA 24450
(540) 463-7143

Russell County
Department of Social Services
79 Rogers St.
P.O. Box 1207
Lebanon, VA 24266-1207
(276) 889-2679
(276) 889-3031

Scott County
Department of Social Services
190 Beech Street, Suite 101
P.O. Box 637
Gate City, VA 24251-0637
(276) 386-3631

Shenandoah County
Department of Social Services
Shenandoah County Government Center
600 N. Main St., Suite 108
Woodstock, VA 22664
(540) 459-6226

Shenandoah Valley Department of Social Services (Staunton-Augusta Office)
68 Dick Huff Lane
P.O. Box 7
Verona, VA 24482-0007
(540) 245-5800

Shenandoah Valley Department of Social Services (Waynesboro Office)
1200 Shenandoah Ave.
Waynesboro, VA 22980
(540) 942-6646

Smyth County
Department of Social Services
121 Bagley Circle
Suite 200
Marion, VA 24354
(276)783-8148

RESOURCE LIST

Southampton County
Department of Social Services
26022 Administration Center Drive
P.O. Box 550
Courtland, VA 23837-0550
(757) 653-3080

Spotsylvania
Department of Social Services
10304 Spotsylvania Ave., Suite 410
Fredericksburg, VA
Mailing: P.O. Box 249
Spotsylvania, VA 22553
(540) 507-7898

Stafford County
Department of Social Services
Stafford County Government Center
1300 Courthouse Road
P.O. Box 7
Stafford, VA 22555-0007
(540) 658-8720

Suffolk Department of Social Services
135 Hall Avenue, Suite B
Suffolk, VA 23434
P.O. Box 1818
Suffolk, VA 23439
(757) 514-7450

Surry Department of Social Services
Route 626
45 School Street
P.O. Box 263
Surry, VA 23883-0263
(757) 294-5240

Sussex Department of Social Services
20103 Princeton Road
P.O. Box 1336
Sussex, VA 23884-1336
(434) 246-7020

Tazewell County
Department of Social Services
253 Chamber Drive
P.O. Box 149
Tazewell, VA 24651
(276) 988-8500

Virginia Beach
Department of Human Services
3432 Virginia Beach Blvd.
Suite 342
Virginia Beach, VA 23452-4420
(757) 437-3200

Warren County
Department of Social Services
912 Warren Ave.
Front Royal, VA 22630-0506
(540) 635-3430

Washington County
Department of Social Services
15068 Lee Highway, Suite 100
Bristol, VA 24202
(276) 645-5000

Westmoreland
Department of Social Services
18849 Kings Highway
P.O. Box 302
Montross, VA 22520-0302
(804) 493-9305

Williamsburg Social Service Bureau
401 Lafayette St.
Williamsburg, VA 23185
(757) 220-6161

Winchester
Department of Social Services
24 Baker Street
Winchester, VA 22601
(540) 662-3807

Wise County
Department of Social Services
5612 N. Bear Creed Rd
P.O. Box 888
Wise, VA 24293-0888
(276) 328-8056
(276) 328-8057

Wythe County
Department of Social Services
275 S. Fourth St.
Wytheville, VA 24382
(276) 228-5493
(276) 228-5912

York/Poquoson Social Services
301 Goodwin Neck Road
Yorktown, VA 23692-0917
(757) 890-3787

**The Leukemia & Lymphoma Society –
Virginia Patient Services**
Provides grants of up to \$500 a year for
some uncovered expenses, including
prescriptions, certain medical tests, and
transportation costs.

Visit <http://www.lls.org> for general
information, [http://www.leukemia-lym-
phoma.org/all_page?item_id=5848#_pa-
tientf](http://www.leukemia-lym-
phoma.org/all_page?item_id=5848#_pa-
tientf) for Virginia-specific information,
or contact one of the Virginia chapters
listed below.

The National Capital Area
5845 Richmond Highway
Suite 800
Alexandria, VA 22303

(703) 399-2900
The Virginia Chapter
5511 Staples Mill Road
Suite 202B
Richmond, VA 23228
(800) 766-0797
(804) 627-0400

INDIGENT PATIENT ASSISTANCE PROGRAMS

Adria Patient Assistance Plan
Provides chemotherapy drugs to
patients with financial need. Call
(614) 764-8000 for more information.

Air Charity Network (formerly AirLifeLine)
Free air transportation for those in need
of medical treatment who cannot afford
commercial travel.

Contact the Air Charity Network at (877)
621-7177, or visit its website at [http://
aircharitynetwork.org](http://
aircharitynetwork.org)

**AstraZeneca AZ&Me Prescription
Savings Program**
This drug manufacturer offers savings
for people without insurance and with
Medicare Part D on the breast cancer
drugs Arimidex and Faslodex, and
Zoladex, which treats breast and prostate
cancers.

RESOURCE LIST

Information and applications are available by calling (800) 292-6363 or visiting <http://www.astrazeneca-us.com/help-affording-your-medicines/prescription-saving-program>

AstraZeneca also offers a Cancer Support Network with information on cancer treatments and support from oncology assistants. For this program, call (866) 992-9276.

Bristol-Meyers Squibb Indigent Patient Assistance Program

This program provides financial assistance for prescription drugs to individual who have an established financial hardship and lack public or private health insurance.

Among the included medicines are chemotherapy drugs BiCNU, CeeNU, Droxia, Etopophos, Lysodren, and Vumon. To apply, call (800) 736-0003 or complete an online application at <http://www.bmspaf.org/program0.html>

CancerCare Co-Payment Assistance Fund

This non-profit organization offers co-payment assistance for drugs that treat breast cancer, colon or colorectal cancer, glioblastoma, head and neck cancer, non-small cell lung cancer, pancreatic cancer, and renal cell cancer.

Call (866) 552-6729 or visit <http://www.cancercarecopay.org/> for more information.

Chronic Disease Fund

A non-profit organization that offers co-payment assistance for drugs that treat breast cancer, colorectal cancer, liver cancer, metastatic castrate resistant (hormone refractory) prostate cancer, multiple myeloma, myelodysplastic syndrome (MDS), non-small cell lung cancer, and pancreatic cancer.

Contact the Chronic Disease Fund at (877) 968-7233 or visit <http://www.cdfund.org/default.html>.

Corporate Angel Network, Inc.

Free air transportation on corporate aircraft. Call (914) 328-1313, or visit <http://www.corpangelnetwork.org/> for more information.

Genentech Patient Access Programs & the Roche Patient Assistance Foundation

Through this program, patients can receive prescription assistance for such medication as Avastin (several types of cancer), Herceptin (breast cancer), Rituxan (chronic lymphocytic leukemia and non-Hodgkin's lymphoma), and Tarceva (advanced non-small cell lung cancer and pancreatic cancer).

For information, call (866) 4-ACCESS (866-422-2377) or visit http://www.genentechaccesssolutions.com/index_pc.jsp

The HealthWell Foundation

This non-profit organization helps cover coinsurance, copayments, healthcare premiums and deductibles. The Foundation covers breast cancer, carcinoid tumors and their symptoms, chemotherapy-induced anemia or neutropenia, colorectal carcinoma, non-Hodgkin's lymphoma, and Wilms' tumor.

Call (800) 675-8416, email info@healthwellfoundation.org, or visit <http://www.healthwellfoundation.org/> for more information.

Merck Patient Assistance Program

Merck provides patient assistance to lower-income individuals through a Prescription Discount Program and a Patient Assistance Program. Call (800) 727-5400 for information on the drugs included in either program.

Applications are available by phone or by visiting <http://www.merck.com/merck-helps/patientassistance/home.html>.

NeedyMeds

Information regarding financial assistance for pharmaceuticals, including a listing by drug name as well as pharmaceutical company name. Visit <http://www.needymeds.com>

Novartis Oncology Patient Assistance Program

This program provides assistance to patients for drugs such as Afinitor (which treats renal cell carcinoma), Exjade (chronic anemia associated with blood transfusions), Femera (breast cancer), Gleevec (chronic myeloid leukemia), Sandostatin LAR (helps lessen symptoms of certain tumors), Tasigna (chronic myeloid leukemia), and Zometa (cancer that has spread to the bone).

Call (800) 277-2254 or visit <http://www.pharma.us.novartis.com/about-us/our-patient-caregiver-resources/index.jsp> for more information.

Information on Exjade is available at (888) 903-7277.

Information on Proleukin is available by calling (866) 385-4729.

RESOURCE LIST

Patient Access Network Foundation

This program is run by a non-profit organization to provide co-payment assistance with drugs for breast cancer, chronic lymphocytic leukemia, colorectal cancer, cutaneous T-cell lymphoma, multiple myeloma, myelodysplastic syndrome (MDS), non-Hodgkin's lymphoma, non-small cell lung cancer, pancreatic cancer, prostate cancer, and renal cell carcinoma.

For more information, call (866) 316-PANF (866-316-7263), email contact@patientaccessnetwork.org, or visit <https://www.panfoundation.org/index.php>

Pfizer, Inc. Patient Assistance Programs

Pfizer offers a variety of drug co-payment assistance programs, including options for the insured, the newly unemployed, the underinsured, and the uninsured. The company's website also links to two industry-wide programs and several others run by Pfizer partners.

For information, call (866) 706-2400 or visit the company's website at <http://www.pfizerhelpfulanswers.com/pages/Find/findall.aspx>.

Pharmaceutical Research and Manufacturers of America Partnership for Prescription Assistance

This program provides information a number of prescription programs

designed for qualifying lower-income individuals, and offers assistance for a variety of drug companies.

For more information, call (888) 4PPA-NOW (888-477-2669) or visit <http://www.pparx.org/>

Pharmaceutical Research and Manufacturing Association Directory

Provides financial assistance for certain medicines. Call (800) PMA-INFO (800-762-4636) for information.

RxAssist Patient Assistance Program Center

An information hub that has links to various resources for cancer patients, this website has a database that allows an individual to search for patient assistance programs by drug name and by company.

Visit the website at <http://www.rxassist.org>

Tricare

(formerly known as CHAMPUS)

This program, formerly The Civilian Health and Medical Program of the Uniformed Services, is a federally funded supplemental source of insurance for members of the armed forces, their family members, and individuals registered with the Defense Enrollment Eligibility Reporting System.

TRICARE covers certain medical procedures that may not be covered under the prescription drug assistance plans, such as clinical trials, radiation therapy, and bone marrow transplants in certain situations. For more information, visit <http://www.tricare.mil/mybenefit/home/overview?>

MEDICARE, MEDICAID AND SOCIAL SECURITY

Medicare Centers for Medicare & Medicaid Services

7500 Security Boulevard
Baltimore MD 21244-1850
<http://www.medicare.gov/>

1-800-MEDICARE (1-800-633-4227)
Medicaid Contact info same as for Medicare <http://www.cms.hhs.gov/home/medicaid.asp>

Social Security Administration
The Social Security Disability Insurance (SSDI) program pays benefits to eligible individuals and certain family members if the individual worked long enough and paid Social Security taxes.

The Supplemental Security Income (SSI) program pays benefits to disabled adults and children who have limited income and resources.

You can complete the application by visiting the Social Security Administration website at <http://www.ssa.gov>, by calling 1-800-772-1213 to request an appointment at your nearest Social Security Administration office. To decide which office is closest to you, visit <http://www.ssa.gov/phila/states/virginia.htm> or find an office listed below.

Accomack

Accawmacke Office Park
22581 Center Parkway
Accomack, VA 23301
(866) 964-1019
(800) 325-0778 (TTY)

Alexandria

Plaza 500 Suite 190
6295 Edsall Road
Alexandria, VA 22312

Arlington

1401 Wilson Blvd
Suite 200
Arlington, VA 22209

Bristol

2484 Lee Highway
Bristol, VA 24202
(866) 504-5013

Charlottesville

1470 Pantops Mountain Place
Charlottesville, VA 22911
(866) 613-3959

RESOURCE LIST

Chesterfield

Village at Waterford
13551 Waterford Place
Midlothian, VA 23112
(804) 744-0227

Covington

1010 S. Craig Ave
Covington, VA 24426
(540) 962-4941

Culpeper

1014 S. Main St.
Culpeper, VA 22701
(877) 531-4694

Danville

3295 U.S. Highway 29
Danville, VA 24540
(866) 331-5398

Fairfax

11212 Waples Mill Rd.
Suite 105
Fairfax, VA 22030

Farmville

324 Commerce Rd
Farmville, VA 23901

Fredericksburg

4954 Southpoint Parkway
Fredericksburg, VA 22407
(540) 898-1314

Hampton

1521 Hardy Cash Dr.
Ground Floor
Hampton, VA 23666
(866) 592-2669

Harrisonburg

227 E. Elizabeth St.
Harrisonburg, VA 22802
(866) 964-1718

Lynchburg

7618 Timberlake Rd
Lynchburg, VA 24502
(866) 964-6142

Manassas

9500 Center St.
Manassas, VA 20110

Martinsville

320 W. Commonwealth Blvd.
Martinsville, VA 24112
(276) 632-6446

Newport News

11706 Jefferson Ave.
Newport News, VA 23606
(757) 873-3914

Norfolk

5850 Lake Herbert Dr.
First Floor
Norfolk, VA 23502
(866) 858-6089

Petersburg

100 Poplar Dr.
Petersburg, VA 23805
(877) 803-6322

Portsmouth

3305 Airline Blvd.
Portsmouth, VA 23701
(866) 593-8851

Richmond (Downtown)

1834 W. Cary St.
Richmond, VA 23220
(804) 771-8125
(804) 771-2625 (TTY)

Richmond (East)

Interport Business Center
5360 S. Laburnum Ave.
Richmond, VA 23231
(804) 226-3708

Richmond (West)

4212 Park Place Ct.
Suite B
Glen Allen, VA 23060
(804) 934-4570

Roanoke

612 S. Jefferson St.
Suite 100
Roanoke, VA 24011

South Boston

2049 Hamilton Blvd.
South Boston, VA 24592
(888) 327-1407

Staunton

Greenbrier Office Park Building 2
1600 N. Coalter St.
Staunton, VA 24401
(540) 885-8959

Suffolk

502 Hillpoint Blvd.
Suffolk, VA 23434
(757) 934-0532

Virginia Beach

2875 Sabre St.
Suite 100
Virginia Beach, VA 23452
(757) 498-8726
(757) 431-3165 (TTY)

Winchester

12 Ricketts Dr.
Winchester, VA 22601
(866) 365-3035

Wise

253 Ridgeview Rd S.W.
Wise, VA 24293
(276) 679-7633

RESOURCE LIST

Wytheville

Mountain View Square
1480 E. Main St.
Wytheville, VA 24382
(276) 228-4699

OVERVIEW OF HMOs and PPOs

Insurelane

Website devoted to navigating health care insurance: Visit <http://www.insurelane.com/health/hmo-vs-ppo.html>

INSURANCE DENIALS

**Virginia State Corporation
Commission Bureau of Insurance**
Tyler Building
1300 E. Main St.
Mailing: P.O. Box 1157
Richmond, VA 23218
(800) 552-7945

Always try to resolve any issues with your insurance company first. Many times, a denial of coverage or other problem is simply a clerical oversight and can be corrected with minimal hassle. When speaking with your insurance company, always keep a record of any correspondence that you send or receive;

in the case of a telephone conversation, keep a record of the date and time of the call, the person with whom you spoke, and what was said during the call.

If you feel that you have been unfairly denied coverage or otherwise have received improper service and cannot resolve the issue with your insurer, you may speak with a representative of the Consumer Services division by calling (877) 310-6560 (toll free) or (804) 371-9691, or by email at bureauofinsurance@scc.virginia.gov

If these steps do not resolve your problem, you may file a complaint with the Bureau of Insurance. A guide to the necessary steps may be found online at <http://www.scc.virginia.gov/division/boi/webpages/boifilecomplaint.htm>

Patient Advocate Foundation
700 Thimble Shoals Blvd, Suite 200
Newport News, VA 23606
<http://www.patientadvocate.org>
(800) 532-5274

“How to Appeal a Health Insurance Denial”

This article from the Wall Street Journal provides helpful guidance for individuals dealing with an insurer’s denial of benefits, and provides links to other insurance-related resources. It is available at: <http://guides.wsj.com/health/health-costs/how-to-appeal-a-health-insurance-denial>

RESOURCES FOR CHAPTER 2: FINANCIAL ISSUES

BUDGETING

Cancer Care – Financial information
http://www.cancercare.org/pdf/fact_sheets/fs_financial_en.pdf
info@cancercare.org
(800) 813-HOPE

Clearpoint Credit Counseling Solutions
<http://www.clearpointcreditcounseling-solutions.org/>
(877) 422-9045

Kiplinger’s Budgeting Calculators
<http://www.kiplinger.com/tools/budget/>

HOUSING

Cancer Care
http://www.cancercare.org/get_help/assistance/tips_assist.php

Virginia Department of Housing and Community Development
HSNH@dhcd.virginia.gov
(804) 371-7100

Homeownership Preservation Foundation
<http://ww.995hope.org>
(888) 995-HOPE

Hospital Hospitality House
612 E Marshall Rd
Richmond, VA 23219
<http://www.hhhrichmond.org/hhh/>
(804) 828-6901

Hurst Hospitality House
1840 Amherst St
Winchester, VA
(540) 536-4470

RESOURCE LIST

The Johns Cancer Foundation

1401 Johnston-Willis Dr.
Richmond, VA 23235
(804) 327-8708
<http://www.johnscancerfoundation.org/>

Provides monetary support for individuals residing, or obtaining treatment, in the Richmond area.

Ronald McDonald Houses

<http://rmhc.org/>

Charlottesville

300 Ninth St., S.W.
Charlottesville, VA 22903
(804) 295-1885

Falls Church

3312 Gallows Rd
Falls Church, VA 22042
(703) 698-7080

Norfolk

404 Colley Ave.
Norfolk, VA 23507
(757) 627-538

Richmond

2330 Monument Ave
Richmond, VA 23220
(804) 355-6517

Roanoke

2224 S. Jefferson St
Roanoke, VA
(540)857-0770

Which Dollar, Inc.

235 Arcadia St.
Richmond, VA 23225
(804) 276-0640
<http://www.whichdollar.org/>

Helps patients and their families with funds for housing, food and groceries, utilities, transportation to the doctor, child care, and insurance premiums.

The Leukemia & Lymphoma Society

Mortgage/Rent/Utility Assistance
http://www.leukemia-lymphoma.org/all_page?item_id=571279

American Cancer Society

Housing during treatment
<http://www.cancer.org/docroot/subsite/hopelodge/index.asp>

DEALING WITH CREDITORS

Virginia Poverty Law Center

700 E Franklin St.
Suite 14T1
Richmond, VA 23219
(804) 782-9430
<http://www.vplc.org/index.html>

Blue Ridge Legal Services

P.O. Box 551
204 N. High St.
Harrisonburg, VA 22803
<http://www.brsl.org/>
(540) 433-1830 (Harrisonburg office)
(540) 463-7334 (Lexington office)
(540) 344-2080 (Roanoke office)
(540) 662-5021 (Winchester office)

Serving Alleghany, Augusta, Bath, Bedford, Botetourt, Buena Vista, Clarke, Covington, Craig, Franklin County, Frederick, Front Royal, Harrisonburg, Highland, Lexington, Page, Roanoke, Rockbridge, Rockingham, Salem, Shenandoah, Staunton, Warren, Waynesboro, and Winchester.

Clear Point Credit Counseling

<http://www.clearpointcreditcounseling-solutions.org/>
(877) 422-9045

Central Virginia Legal Aid Society

101 W. Broad St.
Suite 101
Richmond, VA 23220
<http://www.cvlas.org/>
(800) 390-9983 (Charlottesville office)
(800) 868-1012 (Richmond, Petersburg offices)

Serving Albemarle, Charles City, Charlottesville, Chesterfield, Colonial Heights, Dinwiddie, Fluvanna, Goochland, Greene, Hanover, Henrico, Hopewell, Louisa, Nelson, New Kent, Petersburg, Powhatan, Prince George, Richmond City, and Surry.

Legal Aid Society of Eastern Virginia

125 St. Paul's Blvd.
Suite 400
Norfolk, VA 23510
(888) 868-1072
<http://www.lawhelp.org/Program/1647/>

Serving Accomack, Chesapeake, Gloucester, Hampton, James City, Mathews, Middlesex, Newport News, Norfolk, Northampton, Poquoson, Portsmouth, Virginia Beach, Williamsburg, and York.

RESOURCE LIST

Legal Services of Northern Virginia – Debtor’s Rights and Bankruptcy Clinic

6606 Leesburg Pike, Suite 500
Falls Church, Virginia 22041
(703) 778-6800

<http://www.lsnv.org/index.htm>

Serving Alexandria, Arlington, Caroline,
Culpeper, Essex, Fairfax, Falls Church,
Fauquier, Fredericksburg, King & Queen,
King George, King William, Lancaster,
Loudon, Madison, Northumberland,
Orange, Prince William, Rappahan-
nock, Richmond County, Spotsylvania,
Stafford, and Westmoreland.

Southwest Virginia Legal Aid Society

227 W. Cherry St.
Marion, VA 24354
(800) 277-6754

<http://www.svlas.org/>

Serving Bland, Bristol, Buchanan, Car-
roll, Dickenson, Floyd, Galax, Giles,
Grayson, Lee, Montgomery, Norton,
Pulaski, Radford, Russell, Scott, Smyth,
Tazewell, Washington, Wise, and Wythe.

Virginia Legal Aid Society

P.O. Box 6200
513 Church St.
Lynchburg, VA 24505
(866) 534-5243
<http://www.vlas.org/>

Serving Amelia, Amherst, Appomattox,
Brunswick, Buckingham, Campbell,
Charlotte, Cumberland, Danville,
Emporia, Farmville, Franklin City,
Greensville, Halifax, Henry, Isle of
Wright, Lunenburg, Lynchburg,
Martinsville, Mecklenburg, Nottoway,
Patrick, Pittsylvania, Prince Edward,
South Boston, Southampton, Smithfield,
Stuart, Suffolk, and Sussex.

U.S. Government Publication on the Fair Debt Collection Practices Act

[http://www.ftc.gov/bcp/edu/pubs/
consumer/credit/cre27.pdf](http://www.ftc.gov/bcp/edu/pubs/consumer/credit/cre27.pdf)

BANKRUPTCY

U.S. District Court, Eastern District of Virginia Bankruptcy Court Alexandria

200 S. Washington St.
Alexandria, VA 22314
(703) 258-1200

Newport News

2400 West Ave.
Suite 110
Newport News, VA 23607
Mailing: 600 Granby St.
Room 400
Norfolk, VA 23510
(757) 222-7500

Norfolk

600 Granby St.
Room 400
Norfolk, VA 23510
(757) 222-7500

Richmond

701 E. Broad St.
Richmond, VA 23219
(804) 916-2400
<http://www.vaeb.uscourts.gov/>
General information at: <http://www.vaeb.uscourts.gov/geninfo.htm>

U.S. District Court, Western District of Virginia Bankruptcy Court Harrisonburg

116 N. Main St., Room 223
Harrisonburg, VA 22802
(540) 434-8327

Lynchburg

1101 Court St.
Room 166
Lynchburg, VA 24504

Roanoke

210 Church Ave. S.W.
Room 200
Roanoke, VA 24011
(540) 857-2391
<http://www.vawb.uscourts.gov/>

PREDATORY LENDING

Center for Responsible Lending

<http://www.responsiblelending.org/>

Predatory Lending Law

<http://www.predatorylendinglaw.org/>

Virginia Department of Agriculture and Consumer Services – Office of Consumer Affairs

102 Governor Street
Richmond, Virginia 23219
Consumer Protection HOTLINE
Toll free in Virginia: (800) 552-9963
or within the Richmond, VA area
(804) 786-2042

[http://www.vdacs.virginia.gov/
consumers/index.shtml](http://www.vdacs.virginia.gov/consumers/index.shtml)

RESOURCES FOR CHAPTER 3: EMPLOYMENT ISSUES

GENERAL INFORMATION

Cancer and Careers

<http://www.cancerandcareers.org>

RESOURCE LIST

REASONABLE ACCOMODATION AND DISABILITY DISCRIMINATION

Equal Employment Opportunity Commission

1801 L Street, N.W.
Washington, D.C. 20036
<http://www.eeoc.gov>
Fact Page regarding cancer: <http://www.eeoc.gov/facts/cancer.html>
(202) 275-7377

Virginia Office for Advocacy and Protecting

(formerly the Virginia Department of
Rights of Virginians with Disabilities)
1910 Byrd Avenue, Suite 5
Richmond, VA 23230
<http://www.vopa.state.va.us>
general.vopa@vopa.virginia.gov
(804) 225-2042
(800) 552-3962 (in Virginia, voice,
or TDD)

Virginia Human Rights Council

1220 Bank Street Jefferson Building,
3rd floor
Richmond, Virginia 23219
<http://www.chr.state.va.us>
(804) 225-2292

The Job Accommodation Network

P.O. Box 6080
Morgantown, WV 26506-6080
<http://www.jan.wvu.edu/indiv/index.htm>
(800) 526-7234
(877) 781-9403 (TTY)

Americans with Disabilities Act Guide to Disability Rights Laws

[http://www.ada.gov/cguide.
htm#anchor62335](http://www.ada.gov/cguide.htm#anchor62335)
Virginia Department of Human
Resource Management
[http://www.dhrm.virginia.gov/genlben-
efits/leavesofabsence.html](http://www.dhrm.virginia.gov/genlben-efits/leavesofabsence.html)
(804) 225-2131

FAMILY AND MEDICAL LEAVE ACT

U.S. Department of Labor Wage and Hour Division

Frances Perkins Building
200 Constitution Ave., N.W.
Washington, D.C. 20210
[http://www.dol.gov/dol/topic/benefits-
leave/fmla.htm](http://www.dol.gov/dol/topic/benefits-leave/fmla.htm)
1-866-4-USA-DOL
1-877-889-5627 (TTY)

DISABILITY BENEFITS

Social Security Administration

[http://www.ssa.gov/pgm/
links_disability.htm](http://www.ssa.gov/pgm/links_disability.htm)

Virginia Department of Rehabilitative Services

<http://www.vadrs.org/DDS.htm>
8004 Franklin Farms Drive
Richmond, VA 23229
(804) 662-7000

RESOURCES FOR CHAPTER 4: PLANNING FOR THE FUTURE

ADVANCE MEDICAL DIRECTIVES

Virginia.gov information

[http://www.vda.virginia.gov/
advmedir.asp](http://www.vda.virginia.gov/advmedir.asp)

POWER OF ATTORNEY

Fairfax Bar Association Lawyer Referral & Information Service

4110 Chain Bridge Road
Fairfax, VA 22030
(703) 246-3780

Alexandria Bar Lawyer Referral Service

520 King Street #202
Alexandria, VA 22314
(703) 548-1105

Arlington Bar Lawyer Referral

1425 N Courthouse Road #1800
Arlington, VA 22201
(703) 228-3390

Prince William County Bar Association Lawyer Referral Service

9311 Lee Ave., 3rd Floor
Manassas, VA 20110
(703) 393-2306

Virginia Lawyer Referral Service

(800) 552-7977

GENETIC INFORMATION NON-DISCRIMINATION ACT

Information from National Human Genome Research Institute

<http://www.genome.gov/24519851>

GUARDIANSHIP, ENTRUSTMENT, ADOPTIONS

Fairfax Bar Association Lawyer Referral & Information Service

4110 Chain Bridge Road
Fairfax, VA 22030

RESOURCE LIST

(703) 246-3780

Alexandria Bar Lawyer Referral Service

520 King Street #202

Alexandria, VA 22314

(703) 548-1105

Arlington Bar Lawyer Referral

1425 N Courthouse Road #1800

Arlington, VA 22201

(703) 228-3390

Prince William County Bar

Association Lawyer Referral Service

9311 Lee Ave., 3rd Floor

Manassas, VA 20110

(703) 393-2306

Virginia Lawyer Referral Service

(800) 552-7977

Jeanette Lipman Family Law Clinic

University of Richmond School of Law

28 Westhampton Way

University of Richmond, VA 23173

(804) 289-8000

(800) 700-1662

<http://law.richmond.edu/about/centers/childrens/family/index.html>

GENERAL RESOURCES FOR CANCER SURVIVORS

American Cancer Society

<http://www.cancer.org>

Local Chapters

Northern Virginia – Vienna Office

124 Park St., SE
Vienna, VA 22180
(703) 938-5550

Near Richmond – Glen Allen Office

4240 Park Place Ct.
Glen Allen, VA 23060
(804) 527-3700

Washington, D.C. Office

1875 Connecticut Ave. NW,
Suite 730
Washington, D.C. 20009
(202) 483-2600

Legal Information Network for Cancer

www.cancerlinc.org
1459 Johnston Willis Drive
P.O. Box 73281
Richmond, VA 23235
(804) 272-5462
(877) 644-5642 (toll free)
info@cancerlinc.org

National Cancer Alliance

<http://www.cancersociety.com/>
Cancer Survivors Online
<http://www.cancersurvivors.org/>

Life with Cancer

<http://www.lifewithcancer.org/>
8411 Pennell Street
Fairfax, Virginia 22031
(703) 698-2526

Cancer Legal Resource Center

<http://www.cancerlegalresourcecenter.org/>

Virginia Breast Cancer Foundation

<http://www.vbcf.org>
5004 Monument Ave.
Suite 102
Richmond, VA 23230
(804) 285-1200
(800) 345-8223

Susan G. Komen for the Cure

Richmond Division
Breast Cancer
Resource and Fundraising site
http://www.komenrichmond.org/site/PageServer?pagename=homepage_richmond_page
4905 Radford Ave. Ste. 209
Richmond, VA 23230
(804) 358-7223

Sisters Network, Inc.

2922 Rosedale St.
Houston, TX 77004
(713) 781-0255
(866) 781-1808
<http://www.sistersnetworkinc.org/>

OncoLink - Univ. of PA Cancer Center Resource

Comprehensive site regarding cancer
and cancer news: [http://www.oncolink.
upenn.edu/](http://www.oncolink.upenn.edu/)

American Pain Foundation

www.painfoundation.org

Bloch Cancer Foundation

Nat'l Cancer Hot Line
800-433-0464
www.blochcancer.org

Cancer Information Service,

Nat'l. Cancer Inst., NIH
800-4-CANCER
www.cancer.gov

Candlelighters Childhood

Cancer Foundation
800-366-2223 or
301-962-3520
www.candlelighters.org

Caregivers

608-256-0488
www.caregivers.com

Family Caregiver Alliance

800-445-8106
www.caregivers.org

Fertile Hope

www.fertilehope.org
(866) 965-7205

Greater Washington

Coalition for Cancer Survivorship
Internet Hotline
202-364-6422
www.gwccs.org

Group Room Radio Talk Show

(weekly for cancer)
800-GRP-7666
www.vitaloptions.org

Lance Armstrong Foundation

866-235-7205
www.Livestrong.org

Mautner Project for Lesbians with Cancer

202-332-5536
www.mautnerproject.org

Nat'l Center for Complementary & Alternative Medicine

888-644-6226
www.nccam.nih.gov

RESOURCE LIST

National Bone Marrow Transplant Link

800-546-5268
www.nbmtlink.org

National Coalition for Cancer Survivorship

301-650-9127
www.canceradvocacy.org

National Marrow Donor Program

888-999-6743
800-627-7692
www.marrow.org

Nueva Vida (Latinas with Cancer)

202-223-9100
www.nueva-vida.org

Ostomy Foundation, United Northern Virginia

703-802-3457
www.novachapteruoa.org

Patient Advocate Foundation

Newport News, VA
800-532-5274 or
757-873-0438
www.patientadvocate.org

Pregnant with Cancer Support Group

800-743-4471
www.pregnantwithcancer.org

American Brain Tumor Association

800-886-2282
www.abta.org

The Brain Tumor Society East Coast Office

800-770 –TBTS
ext. 8287
www.tbts.org

National Brain Tumor Foundation

800-934-CURE
www.braintumor.org

SHARE: Self-Help for Women with Breast or Ovarian Cancer

212-719-0364 or
866-891-2392
www.sharecancersupport.org

Breast Cancer Network of Strength Hotline

800-221-2141

Breast Cancer Network of Strength

Spanish language hotline
(Formerly Y-Me Services)
800-986-9505
www.yme.org/nationalcapitalarea/index.
php

Young Survival Coalition

Breast Cancer
646-257-3000
www.youngsurvival.org

Metastatic Breast Cancer Network

845-339-HOPE
www.breastcanceroptions.org

The Carcinoid Cancer Foundation

888-722-3132
www.carcinoid.org

Capital Area Carcinoid Survivors (CACS)

703-255-0519
www.members.cox.net/cacsva/index.htm

Colon Cancer Alliance

877-422-2030
www.ccalliance.org

Colorectal Cancer Network

301-879-1500
www.colorectal-cancer.net

Gynecologic Cancer Foundation

800-444-4441
http://www.thegcf.org/

Support for People with Oral & Head & Neck Cancer

800-377-0928
www.spohnc.org

Kidney Cancer Association

800-850-9132
www.kidneycancerassociation.org

The Leukemia & Lymphoma Society NY Northern Virginia chapter

800-955-4572
703-399-2900
www.lls.org

Lung Cancer Alliance

800-298-2436
www.lungcanceralliance.org

Lymphoma Foundation of America

800-385-1060
www.lymphomahelp.org

Lymphoma Research Foundation

800-500-9976
www.lymphoma.org

Melanoma Research Foundation

800-MRF-1290
www.melanoma.org

Aplastic Anemia & MDS International Foundation

800-747-2820
www.aplastic.org

International Myeloma Foundation

800-452-CURE
www.myeloma.org

RESOURCE LIST

Multiple Myeloma Research Foundation

203-229-0464
www.themmr.org

National Ovarian Cancer Coalition

888-682-7426
www.ovarian.org

Ovarian & Gynecological Cancer Coalition of Gr. Washington / Rhonda's Club

703-346-3893
www.cancer-ovarian.org

Rhonda's Club –Pres. Anne Mason

703-741-5204
www.ovariancancer.org

The Pancreatic Cancer Action Network

877-272-6226
www.pancan.org

Urologic Foundation Information Hotline (Prostate)

800-242-2383
www.urologyhealth.org

Prostate Cancer Foundation

800-757-2873
www.pcf.org

US-TOO International (Prostate)

800-808-7866
www.ustoo.com

Skin Cancer Foundation

212-725-5176
www.skincancer.org

The Testicular Cancer Resource Center

www.tcrc.acor.org

ThyCa: Thyroid Cancer Survivors' Association

877-588-7904
www.thyca.org

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