

Treatment Denied—What Can You Do?

by John Y. Richardson Jr., 2007–08 Conference of Local Bar Associations Chair



As someone who has been involved with my local bar for many years, I know finding intriguing and timely topics for local bar meetings can be challenging. As an organization intended to provide assistance, training, and resources to local and specialty bars, the Conference of Local Bar Associations offers resources that can be used for bar programs.

A topic your local bar might explore in the coming months is the options available to those who are denied medical coverage by an insurance company.

Consider the following predicament: Your spouse is diagnosed with cancer and undergoes concentrated treatments for several months. The treating oncologist does not recommend further treatment. The doctor believes continued treatment will not stop or slow progression of the cancer and will diminish the patient's quality of life during what he believes will four to eight months remaining. He says a program in a nearby city successfully treats patients with similar symptoms under a new protocol. He suggests getting clearance from your health-care provider, which you do. The new treatment requires hospitalization for three weeks, and a three-day follow-up assessment two weeks later. Halfway through the initial three-week program, you get a letter from your insurance company denying coverage for the treatment. What do you do?

A few years ago, there were few alternatives. Litigation was possible, but the applicable law made the insurance determination virtually unassailable.

Success was many times bittersweet; the likelihood of settlement increased if your client lost his or her battle with the disease. Little progress has been made in making the patient more likely to be covered. The consolidation of many hospitals under one operating entity and the reduction in the number of charitable hospitals makes it less likely that the patient will be covered.

During my occasional venture into this minefield, I did discover a new ally who proved invaluable—the patient advocate. In many cases, the position was filled by a volunteer or someone employed at a particular hospital or in a locality. In many cases, the advocate knew what outcomes were possible and how to succeed.

Since then, the need for the advocates has increased, and more sophisticated treatment protocols are available. Some organizations provide advocacy and other related services. One of these is the Legal Information Network for Cancer (LINC), which assists in insurance disputes, employment issues, child custody and care, estate planning, debtor-creditor matters, and federal and state benefits. LINC is nonprofit and depends on donations and volunteer attorneys. It provides speakers and

continuing legal education presentations. Contact LINC by phone at (804) 644-5462 or by e-mail at info@cancerline.org, or visit its Web site at www.cancerline.org.

Another service, the Patient Advocate Foundation (PAF), helps solve insurance and health-care access problems. It maintains an advocate network. Contact the PAF by mail at 700 Thimble Shoals Boulevard, Suite 200, Newport News, VA 23606, or by phone at (800) 532-6274, or visit its Web site at www.patientadvocate.org.

I encourage bar leaders to contact these organizations for more information and consider inviting them to local bar meetings. For other programs that have been successful with local bars, please contact Paulette J. Davidson, the Virginia State Bar's liaison to the Conference of Local Bar Associations, at (804) 775-0521.