How do I know if the insurance plan I’m buying will cover the care I need to treat my multiple myeloma?

Every patient with myeloma considering a new insurance plan must balance the need for adequate coverage with the cost and availability of policies. Insurance coverage varies greatly from region to region in the U.S., but there are some general guidelines that will help you find a policy that covers as many of your needs as possible.

- First and foremost, find out if your doctor accepts the insurance policy you’re interested in purchasing. Some insurers require that the patient be responsible for much, if not all, of the cost of seeing an “out of network” doctor—one who is not contracted to accept a particular type of insurance. If your doctor is out-of-network and your insurer will not pay for you to see him or her, you may want to look at a different type of policy or find a different doctor. It’s always a good idea to discuss payment issues with your doctor if s/he is out of network; some doctors will work with you rather than have you leave their practice.

- If you are not seeing a myeloma specialist on a regular basis, you may need to seek a second opinion with one from time to time during your treatment. Check any policy you are interested in to see if second opinions are covered.

- Plans can no longer limit the total medical costs they will cover in a year or in a patient’s lifetime, but they can set limits on the number or types of services (for example, covering a particular test or imaging study only once). Make sure you understand what these caps are in each policy you’re considering. Try to avoid policies that have such caps, or have low caps, if possible.
• Consult the IMF's Patient Handbook for an overview of lab tests, imaging studies, and therapies used in diagnosing, monitoring, providing supportive care, and treating myeloma. You should try to find a policy that covers as many of these options as possible. Do not panic if you can't find a policy that covers every test and treatment. Insurance companies frequently change covered items, and not every patient needs every available resource. Your doctor can write an appeal to the insurer if you need a test, scan, or treatment that is not covered. Some patients can benefit from assistance programs that help with accessing treatments, as well.

• Make sure that any policy you choose provides adequate mental health coverage. Many myeloma patients will consult with a mental health specialist at some point during the course of their treatment.

• Most plans now have to cover the costs of non-experimental aspects of a clinical trial. (The study drug or procedure and any tests used to assess response should be automatically covered for all participants by the sponsor of the trial.) Please double-check that your plan is compliant with this requirement.

• Buyer Beware: Please be aware of what you are purchasing. Many short term plans and association health plans do not provide adequate benefits for cancer patients.

• Consult an oncology social worker at your local cancer treatment center. Hospital social workers are trained to help you find the best medical care available to you and are familiar with private and public resources available in your region of the country.