Young Adults and Insurance

Considerations When Deciding on a Health Coverage Plan



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For young adults with hemophilia, having insurance is a crucial step in becoming independent; the annual costs of treating hemophilia can make access to health care coverage a necessity. Appropriate health insurance can be provided through an employer and is an important factor to consider during a job search, but there are other options to explore for purchasing insurance outside of employment as well.

Timing can be key: There may be a waiting period before a recently hired employee is covered under a new policy, or there may be open-enrollment dates to keep in mind for other health insurance options.

Questions to Ask About Health Insurance Plans

When deciding on a health care plan, here are some of the important points to consider, as well as the definitions of some key terms in understanding health insurance.

What are the plan's exclusions and/or limitations? Exclusions are health care services for which your health insurance or plan doesn't pay.²

Is clotting factor covered?

Does the plan offer product choices for clotting factor?

Does the plan cover visits to your primary care provider and your hemophilia treatment center?

Are referrals required, and if so, for which services? A referral is a written order from your primary care doctor for you to see a specialist or get certain medical services.²

Is there a lifetime or yearly limit or cap? A limit or cap is the maximum benefit paid by the insurer; some insurance companies have caps on certain costs.

What are out-of-pocket costs for the in-network providers versus the out-of-network providers? Out-of-pocket costs are your expenses for medical care that aren't reimbursed by

insurance. Out-of-pocket costs include deductibles, coinsurance, and co-pays for covered services, plus all costs for services that aren't covered.²

What is the annual deductible for in-network providers versus out-of-network providers? A deductible is the amount you pay for covered health care services before your insurance plan starts to pay.²

How much is the monthly premium? A premium is the amount paid for the insurance coverage.²

"It is important for [young adults], especially those with a chronic condition, to realize the necessity of having health insurance, as well as knowing what it takes to maintain that insurance."

— Joy Mahurin

Reimbursement Specialist

Maintaining Health Insurance

People living with hemophilia should keep in mind the potential for a lapse or gap in health insurance. In most cases, young adults may stay on their parents' policies until age 26.3 However, it's important to be aware of the potential for a lapse in coverage after age 26 and prior to having a policy of one's own through an employer or the Health Insurance Marketplace. One option to retain medical coverage is Consolidated Omnibus Budget Reconciliation Act (COBRA) coverage. Other options may be state-sponsored individual Health Insurance Portability and Accountability Act (HIPAA) insurance plans and even Medicaid (for those who are disabled or who meet income requirements). In addition, for those who struggle to keep up with health care costs, some National Hemophilia Foundation (NHF) chapters have programs that can assist with paying deductibles, co-pays, and premiums.

References: 1. Chen SL. Economic costs of hemophilia and the impact of prophylactic treatment on patient management. *Am J Manag Care*. 2016;22(suppl 5):S126-S133.

2. US Centers for Medicare & Medicaid Services. Glossary. Healthcare.gov Web site. https://www.healthcare.gov/glossary/. Accessed March 28, 2019. 3. US Department of Health & Human Services. Young adult coverage. HHS.gov Web site. https://www.hhs.gov/healthcare/about-the-aca/young-adult-coverage/index.html. Accessed March 28, 2019.



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