

**FIGHT YOUR
HEALTH INSURER
AND WIN**

**Secrets of the
Insurance Warrior**

Laurie Todd



**Healthwise
Publications**

Kirkland, Washington

Fight Your Health Insurer and Win: Secrets of the Insurance Warrior

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Prologue

- Have you been diagnosed with cancer or some other expensive disease or condition?
- Do you wonder how to find the best-qualified doctor to treat your disease/condition?
- Do you feel as if nobody is managing your case?
- Do you face financial ruin because your health insurer refuses to pay?

Then, this is the book for you.

In the olden days—before the advent of managed care in 1970—you could count on your doctor to manage your case, keeping abreast of the latest treatments for your disease/condition and referring you to a specialist as necessary. He/she also ran interference with the insurance company, making sure that you got the care you needed to maintain your health or save your life.

Just in case you haven't checked since 1970 . . . the delivery of medical care has changed. With the explosion of new drugs and treatments, your doctor would be hard-pressed to keep up with the cutting-edge information about your disease. He probably has plenty to do just keeping up with the flood of patients, paperwork, and new insurance-company directives coming over his desk.

Directives from the insurance company to the doctor? How could this be? Well, nowadays the doctor is often employed by—or contracted with—the insurance company. If your doctor works for the system, it could be very inconvenient for him to buck the system. No more check and balance on the health insurer. Some bean counter armed with a list of symptoms gets to decide what care you receive. What are you going to do?

When I was suddenly diagnosed with a particularly difficult, so-called rare cancer, I soon discovered that not only did my in-network doctors not know anything about my disease, but the insurer was not about to pay for any treatment. Cancer? No treatment? It happens every day.

When I went looking for books to help me find my way through this healthcare swamp, I found one book by a lawyer, and one by an insurance expert. I discovered useful nuggets in both books, but precious little to arm me for the Clash of the Titans which was to come.

I am not a lawyer, nor am I an insurance expert. As soon as the tsunami of cancer tore through my life, I was left with no money, no job, no advantages. Quite frankly, I had the most inadequate insurance coverage this side of the Rockies. However, I did have the most important qualities necessary to

defeat a health insurer: a serious will to live, an aversion to injustice, and a talent for persuasive letter-writing. As soon as I realized that my health insurer was trying to kill me, I rose up on my hind legs and became a lion of courage.

And, as soon as I recovered from treatment for my “rare” cancer—treatment by the foremost expert on this cancer, I might add, paid for by my reluctant insurer—I began to help others win their insurance wars. As this book goes to press, I have coached sixteen “helpees” on how to make their insurers pay . . . we have always won. What I am is a strategy expert and coach. I specialize in helping people to write appeals which get accepted.

I wrote this book in order to show you how to face off against your health insurer and to get the lifesaving treatment that you deserve. I will give you the grand strategy, the tactics, the language that you will need to win your own Clash of the Titans.

I have walked in your shoes—I fought my health insurer all alone while also fighting my cancer. My battle involved a tremendous amount of research, intellectual heavy-lifting, and reinventing of the wheel.

With this book, the fight will be much easier for you.

CHAPTER 1

Drafted:

How I Became the Insurance Warrior

I had a magic bullet to protect me forever from Bad Medical Trouble . . . my grandmother and all of her seven brothers and sisters lived to be over a hundred years old. In their last decades, these hearty souls were out fishing, gardening and canning tomatoes. Like all people in the Land of the Living, I found good reason to feel blessed, protected and safe.

And then, one day, I was felled like a giant redwood. Geezered overnight, I learned that cancer is no respecter of heartiness. Unbeknownst to me, I had been drafted into the Army of the Seriously Afflicted.

In order to get to boot camp, I had to tumble down a dizzying rabbithole and land with a great thud at Camp Cancer. When you enter Camp Cancer, you leave all logic behind. Everything is ironic—you are empowered by becoming a victim, you must open your heart to win a fierce battle and, in the process of letting go of hope, you may find peace. Just when doctors are quoting odds for your survival, you finally learn how not to be attached to outcomes. The people who control

your new world—doctors, nurses and insurance company bureaucrats—may say things which defy logic, insult your intelligence, or just plain boggle the mind. I had to embark upon a letter-writing campaign in order to find out the truth about my condition; I had to search the entire United States to find a doctor who treated me as an equal. Since my draft notice into this army was a Stage IV cancer, my basic training had to be short, very short. I learned how to mastermind my own treatment, how to trust my own judgment and how to call for support. The cavalry galloped in—in the form of family, friends and colleagues. New friends appeared who steered me in the right direction. Over time, I was privileged to encounter selfless dedication, help with no conditions, and dazzling feats of compassion.

I came to the first few awful bad-news doctor appointments like a tender recruit. Weeks to live, months to live, 30% chance of five years to live, two good years left. It was the “two good years” that burst my bubble of civilian innocence. Two years? In that moment, I rose up on my hind legs and started questioning my doctors. How come? Says who? Based on what? From that moment on, I started to perfect my strategy and to take charge of my own survival.

Thankfully, people can change. In Camp Cancer, they shape up at lightning speed. Within three months, I had grown from a shell-shocked victim to a feisty, crusty, shameless, blameless old soldier who was not afraid of anybody.

Now, when I walk into a doctor's office, I come as a colleague. I am the officer in charge of my treatment. After a few minutes batting the medical ball back and forth over the net with me, my latest new doctor asked, “What kind of

work do you do?” “Don’t worry,” I replied, “I’m not a doctor, and I’m not a lawyer.”

As I was afflicted with a so-called “rare” cancer, I also had to maneuver through a battalion of local doctors who, while sounding extremely persuasive, had very little information about my cancer and only palliative treatment to offer me. What does “palliative” mean? It is treatment intended to help relieve the symptoms of terminal cancer patients. In other words, no cure for you, you are going to die.”

As I countered their objections one by one, I began to suspect that some of what passed for medical advice was actually a bureaucratic reaction to a potentially costly situation.

The health insurer, with a primary mission of cost containment, was subjecting me to a strategy of exhaustion. Perhaps a better word for it would be “strategy of annihilation.” If cost containment was the imperative, their primary goal was then to get me and my expensive and difficult cancer to just go away. Have no treatment, have locally available treatment, have only palliative treatment. And die—the sooner, the better.

Of course, in the modern world, the doctor who is a provider for the insurance company must answer to the insurance company. And my insurer set up an escalating set of roadblocks as I pressed on to receive treatment, curative treatment. Their first plan was really no plan at all: Let’s sit around and wait to see how fast it grows—that deceptively benign expression—“watchful waiting.” In other words, fiddling while Rome burns. Sitting around eating bon bons while your belly fills with cancer.

Friends often said, “You must spend a lot of time angry and resentful, bemoaning your fate and asking, “Why me?” Never. I have felt—since day one—that this mission, in all its particulars, was tailor-made for me.

Not for me the standard breast cancer or colon cancer, where you have to follow the regimen prescribed by your local health insurer and either live or die by it. Instead, I am issued this crazy appendix cancer—pseudomyxoma peritonei. It doesn’t look like any other cancer, it doesn’t act like any other cancer, and I have to engage in a spelling bee every time anybody asks what I have.

Knowing what I know now, I would follow the same path of questioning the medical and insurance powers-that-be, doing my own research, finding the world’s expert on my illness/injury, exploring all options, pressing on until I received the finest care—even if I had the most common cancer in the world.

As the weeks pass after my diagnosis and the plot thickens, I will be required to engage in high-level diplomacy with my doctors until they think that it was their idea to refer me to an out-of-network expert. Befuddled by conflicting diagnoses, I will have to deploy persuasive letters to expert surgeons all over the country, soliciting their assistance and advice. Then, as I am single, self-employed, out of business and out of funds, I will need to muster up a network and call upon it for everything from haircuts to frequent flyer miles. After I have been accepted for treatment by the world’s expert in appendix cancer, my health insurer will say, “No way, we won’t pay!”

So . . . I will have to go on the offense. I will turn myself

into the finest lawyer that money can buy, read the studies, make the phone calls, twist the arms. And write a document so powerful that the only thing left for my health insurer to ask is, "Where do we send the money?"

Researching, writing, persuading. Outsmarting the smarties. Perfecting my strategy. Exposing the hidden agendas. These are my very best skills . . . I relish using them. I am the Warrior Queen of persuasive letter-writing; and there is no bureaucracy that can stone-wall me. I will make a hundred phone calls—scheming, scamming, playing my little chess game—until I find the double agent within the bureaucracy who will help me win the battle. Why me? I am uniquely qualified for the mission.

It took me three months to secure my expert, face off against the health insurer, write the appeal and emerge victorious. Another nine months was spent undergoing two massive surgeries plus chemotherapy, getting myself declared officially geezered by Social Security Disability and finding my new physical and emotional bearings in the Land of the Living.

Yes, during this year I have often been in Bad Trouble. More than once I slid perilously close to death. However, my year of cancer turned out to be my finest hour. I did the highest-paid, most exhilarating and worthwhile work of my life. I won the respect of doctors, lawyers, bureaucrats of all types and stripes. During the dark nights and long days, I was sustained by the love of family, associates and friends. I won great victories decisively. After the Clash of the Titans with the health insurer was over and the dust had settled, my bill for a year of massive medical intervention—two

major abdominal surgeries, chemotherapy and over a month in hospital—was nine dollars. Not nine-hundred thousand, not nine thousand, but NINE.

After the asking for help and the receiving of help comes the giving of help. It's natural, like seed to flower to fruit.

Within a week of winning my appeal, another person popped up in my town, with my “rare” cancer, at my same HMO. Michael and Sandy lived about ten minutes from me. What could I do . . . I galloped over there on my white horse, told them everything, handed over my appeal and said, “Take it, use it, plagiarize it. Ride in on my coat-tails.” Michael threw my name around at the HMO, and they paid for his out-of-network treatment with nary a peep. Michael and Sandy said, “How can we thank you, what would we have done without you, etc., etc.?” I replied, “Helping you makes my suffering worthwhile.” Sandy dubbed my insurance appeal “Laurie’s War Documents.” Thus began my career as the Insurance Warrior.

New people are appearing every week with a variety of cancers. They ask me, “How could my doctor not know? How could my insurer not pay for my treatment? Could my doctor be wrong? How could my doctor recommend a treatment that is not the current standard of care for my disease? How come I learned all about this disease on the Web in twenty minutes, and my doctor says that nobody knows anything about it?” “Shocking, isn’t it?” I say, “First, you need to fire the doctor who will not work with you to find the best treatment. If your doctor knows nothing about your illness, you need to run, not walk, to an expert.”

Within a two-week period recently, I engaged in insurance appeals with three “helpees.” We had five days to defeat Blue Cross—we did it in four. We had a month to make Cigna cry uncle—they gave up in three weeks. Then, a couple came to me with military insurance. I seriously questioned whether we could bully them into paying, and whether the patient himself would be able to rise up and fight the military bureaucracy which had sustained him for twenty-four years. I did my usual research. Then, for the first time, I applied some serious tough-love: “This is your hero’s journey. You can either do what I say, or pay a malpractice lawyer \$20,000 to do it!” I admonished them. Within two days, the military insurance was vanquished, and he was on his way to his lifesaving treatment.

Somehow, after those two weeks of glorious victories, people with other cancers and conditions began to find me. Esophageal cancer, pancreatic cancer, multiple myeloma, splenic marginal zone lymphoma. I have learned more with each case, but I always use the same battle plan and the same tactics. Often, the insurer keeps up their refusals until the day before the surgery . . . the strategy of exhaustion. We are still fighting while the patient is preparing to go under the knife.

I have never lost a case. The insurer always, always pays. I am not a lawyer, and I do not propose to turn you into one. I am not a medical billing and coding expert; you do not have to be one, either. You are fighting cancer, it is a week before your surgery date, and the insurance states that they are not going to pay. You do not need a comprehensive course in the fine points of insurance law. What you need

is the crash course, the quick-and-dirty, cut-and-paste, hit-and-run method of making the insurance company do the right thing. It's all you need.

I had no job, no money, no lawyer in the family. I had no partner, nobody to fight my battles for me. I knew nothing about medical malpractice law nor about the inner workings of insurance companies. And yet, I was able to secure treatment from the finest, most renowned surgeon in the world for my disease.

By my own efforts, I turned "two good years" into an 80% chance of twenty good years. It was a huge, terrifying, potentially fatal war that I had to fight. The best that I could do was put my head down, embrace the battle, and forge ahead. Don't get me wrong . . . I'm not ready to get down on my knees and thank my health insurer for the learning experience. However, this has turned out to be the most empowering experience of my life.

You can do the same; it will be even easier for you.

This is an advice book for anyone who finds himself in the Army of the Seriously Afflicted, or who finds a friend or loved one there. In other words, it is a book for everyone. It is a book for anyone who will ever tangle with their health insurer—in time, most of us will. I will share with you the fruits of my labors: the letters that made the phone ring, the appeal which made the HMO roll over and cry uncle. The approach, the tricks, the ways around the bureaucracy. You are Shameless and Blameless now, and I will show you how to exploit every opportunity. Whom to call, whom to write and exactly what to say that will spur the bureaucracy into action.

Welcome to the war of Big Medical Involvement. If we live long enough, most of us will be drafted and serve there. Some have said, "You scare us. You are too blunt. You must give us hope." There are many books that offer hope: the Chicken Soup series, the Kitchen Table Wisdom books. They do this much better than me. This book is a field guide; it will show you the maneuvers and give you the weapons to survive the slings and arrows that your insurance company and its foot-soldiers will hurl at you.

You are the raw recruits, and I am the drill sergeant. Is the drill sergeant sweet and gentle with the new soldiers? Does the drill sergeant say, "I hope you win the war?"

No. He is relentless and tough; he whips them into shape. He gives them the weapons which they will need to actually win the battles and survive the war. Without these weapons, there is no hope. With these weapons, you can win the war, receive your lifesaving treatment, and return home to ponder the notion of hope in peace and health.

Let me be the fierce voice, the one who exhorts you to put on your warrior garb and prepare to come out of this struggle with your dignity, your self-respect, and your bank account intact. And, far more important, to come out of it alive.

My helpees have taught me that the loving pep-talk is as valuable as the information. Perhaps more. One of the guiding principles of military strategy is: "Maintain positive morale even in the face of set-backs." So, I will share just enough of my own story to light a fire under you. Then, I will follow with all of the Grand Strategy, tactics, maneuvers, diplomacy, tricks of deception. (Yes, deception—All's fair in love and war!) that you will need to win your own fine victory.

CHAPTER 2

Prelude to Battle:

Clarify Your Mission

“I think I would have visited the doctor a little sooner,” delivered by a friend as we sat having tea after my first operation. She had just finished questioning me . . . what were my symptoms, how long had I been having them, what had finally caused me to get medical advice.

Was I in denial? Of course I was. Just like every other oblivious person waltzing around in the Land of the Living. Who thinks that they will be getting appendix cancer? Who even heard of appendix cancer?

But there is something deeper. The organism simply does not want to believe that it could be in Bad Trouble. The muscles, the immune system, the orchestra of organs inside who make up the living community that is us, send us messages that something is Bad Wrong. But, at the same time, they deny it. We, the organs, do not want something to be Bad Wrong with us. Maybe a food allergy. Symptoms of menopause. Diabetes, perhaps?

So . . . do you believe that you would have the presence of mind to sort out sooner than I the mixed messages of the living organism?

I first started feeling poorly about ten years before All This started. At the time, I was a massage therapist, working at a health club, doing six massages a day, five days a week. One Sunday I realized that I never felt rested, never felt well. I was forty-five years old. I was doing a massage marathon every day . . . ample reason to be exhausted, yes?

I continued on in this fashion for ten more years. Then, one day, I noticed that I was even more tired than usual. Really tired, dragging-yourself-around tired. Bone-weary.

Like many people in the modern world, I could only afford a catastrophic health insurance policy with a sky-high deductible, so I thought twice before ever darkening the door of the HMO. I called them to find out if a physical exam would be subject to the deductible. The financial advice person chued me in, "We will pay 80% for a routine physical, not subject to deductible. However, you must not ask any questions about your health. Do not breathe a word of it. If you bring up any concerns whatsoever, it will become a medical visit and you will have to pay cash out of pocket for it." Go to the doctor but don't ask any medical questions . . . right.

In I went, convinced that I would be diagnosed with diabetes. After doing a thorough exam and blood work, the doctor pronounced me the healthiest fifty-five-year-old on the planet. Three months later, I would be undergoing emergency surgery for cancer which had spread throughout the abdomen.

I had a clean bill of health. If you were me, would you have done more?

One day I opened my office door to a client who had been a nurse for forty years. She took one look at me and said, "Oh

no. Something is wrong.” The next day, I marched myself, my gaunt face and my huge stomach into the HMO. I didn’t have any trouble persuading them that there was something Bad Wrong with me.

* * *

You have been drafted—this is the prelude to the battle.

Size up your opponent

The “beat the insurer” books that I studied during my Clash of the Titans with the insurance company all emphasized the importance of scrutinizing your benefits booklet and choosing your insurance carefully.

CHOOSING YOUR INSURANCE??? Who has any choice about their insurance anymore? HMO, PPO . . . like so many other aspects of insurance these days, it is pretty much all illusion. All insurances have co-pays (sometimes for everything), deductibles (sometimes multiple deductibles for different services), co-insurances. Some have prescription drug coverage, some do not. However, prescription coverage may also be an illusion.

Have you ever heard of a *formulary*? That is the list of prescription drugs that your insurer covers. Can you guess which drugs do not appear on the formulary, and therefore are not covered? The most common ones and the most expensive ones.

I recently saw a story on the news . . . a couple in their fifties, she had brain cancer. They had “top-of-the-line” health insurance, and they were both working when All This started for them. She had undergone two surgeries for brain cancer,

and she had had to stop working. The drugs for her cancer cost \$16,000 per month. Gee, do you suppose those drugs were on the formulary?

The couple had already spent most of their savings and had completely depleted his 401K. They were getting ready to sell their house to pay for her care.

I don't know if any insurer anywhere would have paid for her chemotherapy drug . . . it was just too expensive. What could they have done? Find the right decision-maker at the drug company and write a brilliant letter throwing themselves on their mercy and asking for the drug at a reduced rate. Write a brilliant appeal to the insurer, pointing out all the mistakes that had been made during her medical treatment and requesting that they pay for the drug. If all else failed, I would spend down all of my assets, get on Medicaid, and save my house.

Get the Insurance Commissioner mixed up in it. Go to the media. Go all out. This is war, people!

So . . . what to do if you are "choosing" insurance, once you know that you are really not covered for the most devastating drugs, treatments, or surgeries no matter what insurance you choose? Take a deep breath, read the fine print, and go right to the bottom line . . . THE LIFETIME MAXIMUM.

As far as I am concerned, the lifetime cap is the biggest pitfall hidden in our health insurance. Lifetime caps were part of the grand scheme called "managed care," which was dreamed up in the early 1970s in order to curb spiraling healthcare costs. To me, "managed care" really means "limited care" and/or "care denied." The lifetime cap is the way for

the insurer to limit costs for each and every patient. After the lifetime maximum is reached, you are cut off. No notice, no ceremony . . . cut off. Are you in the hospital when you reach your maximum? Tough luck . . . cut off. If you cap out your insurance while you are hospitalized, they will keep treating you. However, while you are recuperating at home, you will start receiving bills for \$18,000 . . . \$92,000 . . . \$247,000.

What kind of insanity is this? How are people supposed to pay mammoth bills when they just got out of the hospital, haven't worked in months, and probably cannot work now? Obviously, the actuaries or insurance executives who instituted these measures didn't think beyond their guiding principle: cost containment.

A pretty standard lifetime maximum in 1970 was one million dollars. Over the last thirty years, healthcare costs have sky-rocketed. Not only has "managed care" not solved healthcare cost inflation, it has undoubtedly contributed to it. It would cost you \$18 million to buy the same services today. Take a look at your benefits booklet—I'll bet that your lifetime maximum is nowhere near \$18 million. If your insurance is anything like mine, the cap is \$2 million.

If you have cancer, a heart transplant, a serious injury, ongoing expensive treatments/medication, you can easily run through \$2 million dollars in six months to a year.

In my dealings with health insurers, I have found that just about everything is negotiable except the lifetime cap. About the only way to overcome the lifetime maximum would be to prove that they had grievously injured you, and that your ongoing treatment was THEIR FAULT.

The lifetime cap is, in my estimation, the most important

variable in your health insurance policy. If you can find a policy with a cap of more than \$2 million, go for it.

People believe that health insurance is like a store. There is a television set in the store with a marked price of \$100. If you want the television, you must pay \$100. WRONG. Health insurance is like a swap meet . . . you will argue and haggle and horse-trade back and forth. And, ultimately, YOU will decide what treatment you are going to get and how much your insurer is going to pay for it.

Clarify your mission

I did not go to the doctor sooner, partly because I had my priorities wrong. I had no money, and a policy with a high deductible. This was enough to keep me from going to the doctor until it was nearly too late. Granted, I would not have been saved from my appendix cancer even if I had marched into the HMO and hollered and screamed about exhaustion years before my crisis. No health insurer is going to give you a CT scan for a complaint of exhaustion. However, it wouldn't have been quite such a dire emergency if I had received treatment six months or a year before.

Don't be like me—penny wise and pound foolish. We all have high deductibles. Get to the doctor if you feel strongly that something is Bad Wrong; and lean on them until they do all possible diagnostic tests for you.

My larger point is this. As you advance further into the Clash of the Titans against the health insurer, remember that—for you—it is not about money. Your objective—your only objective—is to get the best and most effective treatment for your disease/condition.