LEUKEMIA & LYMPHOMA SOCIETY*

ADVOCATE SPOTLIGHT

MEET KATRINA

At 26 years old, Katrina was on top of the world. About to finish law school, she had married the man of her dreams, a self-employed musician, and had just accepted her dream job. Katrina was finally in better health as well. She was on a university-provided health insurance plan which allowed her to see a specialist for the first time in her life who diagnosed her with endometriosis, a disease that had caused debilitating pain for as long as she could remember. She finally had some relief after two successful surgeries and was recovering well with physical therapy.

After graduation, the couple moved to Texas to await the start of her new job as a non-profit attorney. Unfortunately, Katrina's student health coverage was about to end, and she couldn't risk even a day without insurance. Knowing that she could qualify for a marketplace plan for the five months before her employer sponsored health coverage would begin, Katrina visited healthcare.gov to purchase insurance. However, when a popup appeared, she was unknowingly led out of the trusted marketplace.

"Patients should be able to focus on their recovery, and not have to battle with bill collectors."



Within minutes of entering her contact information her phone was ringing off the hook with solicitors trying to sell her a plan. One empathetic sales agent, called apologizing for all the solicitations and provided an inexpensive quote for a short-term limited duration plan. The couple took the time to compare several different options and decided to call the woman back. Her quote was the cheapest.

Katrina asked specific questions to be sure her endometriosis care would be covered. The agent assured her it would and sent pages of documents, some with very small font, for Katrina to review and sign. However, midsummer, Katrina started to receive concerning letters from her insurer saying that the physical therapy sessions she was attending three times a week would not be covered. She owed hundreds of dollars for each visit.

Katrina's plan refused to pay the bills, claiming her disease was a pre-existing condition. Between her denied claims and premiums, Katrina was forced to pay \$6000 for a plan that never actually provided the coverage she needed.

Katrina knew this was illegal under the ACA. She had been up front with the agent about the need for a plan to cover her endometriosis treatment. It's been a full-time job for Katrina to navigate the paperwork that her short-term plan continues to send. Short-term limited duration plans often practice deceptive marketing tricks causing even well-informed people to fall victim to their trap. That's why Katrina has become a passionate advocate for consumer protections.

