

# Care, Comfort and Hope

## Wisconsin Hospitals Community Benefits

### Uncompensated Care

Fear of a bill should never prevent a patient from seeking care at a Wisconsin hospital. Wisconsin hospital charity care programs provided \$216 million to an average of 700 patients a day in 2008. The stories that follow illustrate the deep commitment and continuing concern that hospitals have to their patients to ensure they receive the care they need regardless of their ability to pay.

#### **Mr. D's story**

As a teen, Mr. D. was diagnosed with Crohn's disease, a lifelong inflammation of the intestines that can lead to other chronic health problems such as fissures and narrowing of the intestines. This disease requires good preventive care and frequent monitoring to avoid scarring and life-threatening intestinal blockages.

Mr. D. Said, "I've had Crohn's disease since I was 18 years old. It's a tough disease to manage but I've done it for 32 years. In order to stay healthy I need to have a colonoscopy once every year to keep ahead of problems related to Crohn's." He continued, "Over the years the costs for care have risen incredibly. Colonoscopies have tripled in cost and the drugs I have to take to manage this condition are also very expensive. I stopped taking one of the drugs because I could not afford it, and the doctor helped me find another drug that was less expensive."

In January 2009, Mr. D. was laid off from his job as a plumber. He said, "The construction industry is slow so we were all laid off. I've not had health insurance now or in the past because I work for a small employer, and they cannot afford to offer health insurance to their employees. I've tried to get insurance on my own, but no one will insure me with Crohn's disease. It's tough, really tough. I worry about going bankrupt."

Mr. D said, "St. Mary's has been wonderful; they were able to provide colonoscopies for me for the past few years through a charity program—this is life-saving for me! I could never afford this on my own. My doctor says it's a necessity so that he can monitor what's going on; we're trying to prevent having surgery—which would completely wipe me out financially. It's unbelievable what St. Mary's has done for me, I don't know what I'd do otherwise—it's a God-send!"

**St. Mary's Hospital Medical Center, Green Bay**

#### **Fight for life became fight for financial health**

Overwhelming debt can be as indiscriminating as cancer – it can happen to anyone. Dennis and Mary Smith\* of Hudson know both conditions all too well these days.

When the Smiths moved from Apple Valley, Minnesota six years ago, they were a healthy, two-income family enjoying a home they had built in Hudson. Dennis was an attorney who worked as an independent contractor in downtown Minneapolis. Mary had a full-time career as a representative for a national company in the medical field.

As they settled into their new home, Dennis started experiencing unbearable neck and shoulder pain and unexplained deteriorating health. The Smiths were aggressive in pursuing the cause of the pain and consulted with innumerable specialists in several states, including a neuro-spine specialist. It wasn't until a friend, a registered nurse from California specializing in cancer and transplants, visited them in 2007 and told Mary she believed Dennis was deathly ill. Within a few days, they were back at the oncologist's office asking for more tests and, a week later, received a confirmed diagnosis that it was kidney cancer.

"It was an insidious onset of his health problems," said Mary. "Our friend was the guardian angel that literally saved Dennis' life."

The past six years have been exhausting trying to diagnose Dennis' illness, and the most recent, life-threatening battle against his kidney cancer, included a grueling year-long chemotherapy regimen requiring many infusion sessions and other tests at Hudson Hospital & Clinics.

Prior to 2006, the Smiths were able to manage the costs of Dennis' many proposed treatment plans and medications. Medical insurance provided through Mary's employer paid all medical and procedure costs except co-payments (\$15 for a doctor visit, \$35 to see a specialist, \$75 for an ER visit, and no co-payment for laboratory and other screening tests.)

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## Wisconsin Hospitals Community Benefits (continued)

However, in 2007, she was informed that her plan was being modified and that insurance coverage was changing from a co-payment plan to an 80/20 plan; the Grosenicks were now responsible for 20 percent of all Dennis' medical costs – every physician or specialist appointment, test and procedure.

“That’s when it became unmanageable,” said Mary.

And that’s where Charlene Barnes, the hospital’s patient financial services representative, entered the picture.

“I told her ‘we don’t qualify for anything,’” said Mary, who was trying to deal – calmly – with a growing mountain of debt while concerned that her own anxiety and fear would further burden her husband of 22 years. “Charlene said, ‘Yes, I can help.’”

With Barnes’ assistance, the Smiths were able to manage their past-due debt and establish a payment plan for new medical costs.

“Talking about finances is difficult at any time,” said Mary. “But Charlene is a compassionate, caring and considerate person. At no time did she make me feel uncomfortable or embarrassed to discuss our financial crisis.”

Barnes said many families find themselves struggling with medical costs. For many years now, she said, insurance premiums, co-pays and deductibles have risen for nearly everyone.

“People get caught up in trying to balance getting well and paying the bills,” said Barnes. “In an average case, chemotherapy drugs can cost \$35,000. It’s like adding insult to injury.”

Did the Smiths think they’d ever find themselves in the position of overcoming a mountain of debt? “Never,” said Mary. “I would like to say thank you to Hudson Hospital & Clinics and to Charlene Barnes, in particular, for her compassionate generosity on behalf of the hospital.” *\*name changed for confidentiality*

**Hudson Hospital & Clinics, Hudson**

### Help is out there

Jimmie White had not been to the doctor in years. But when he became violently ill in April, his nephew took him to the Wheaton Franciscan Healthcare – All Saints Emergency Department in Racine.

White had refused to go to the doctor himself because he did not have health insurance and was concerned he would not be able to pay for his care. While at the hospital, Jimmie learned from Financial Counselor Elizabeth Masik of Wheaton Franciscan Healthcare’s Community Care program which provides care to those who qualify.

“He sent in the paperwork and he got 100 percent approved, which surprised us,” recalled Jimmie’s sister, Shirley Johnson, who is caring for her brother. “We had no idea there was a way for him to get help like this.”

Jimmie then returned to the hospital for a battery of tests and learned that, among other problems, he was suffering from throat cancer. He is scheduled to begin treatment soon.

“Without the help he got from the program at the hospital, he would never have gone back for the tests,” Johnson said. “We’re very grateful.”

**Wheaton Franciscan Healthcare – All Saints, Racine**

### How Aurora’s Helping Hand and the Well Woman Program is bridging the gap

Each year, many women without insurance or in financial hardship are able to receive a free mammogram through the Wisconsin Well Woman Program (WWWP), which happens to have a local coordinator located at Aurora West Allis Medical Center (AWAMC). The guidelines to qualify for the free screening and diagnostics require a woman with demonstrated financial needs be 35 years of age or older. The Wisconsin Well Woman Program also is a resource for women whose findings are positive.

A young married woman with no children was diagnosed with breast cancer at the age of 32. She and her husband did not have health insurance. She turned to WWWP for help, but because of her age, she did not qualify for the Wisconsin Well Woman Program nor Well Woman Medicaid or any other Medicaid program. The WWWP program coordinator referred her to the Aurora Helping Hand Patient Financial Assistance program at AWAMC. She was accepted and the hospital covered this patient’s surgery and treatment.

When she needed to have a follow up mammogram two years later, the young woman was three months away from turning 35, the age at which she would become eligible for the Wisconsin Well Woman Program and Well Woman Medicaid. A special case approval to grant access to the Well Woman Medicaid program was filed on the young woman’s behalf by the WWWP coordinator. Her case was approved and she was enrolled into Well Woman Medicaid. Since then, Well Woman Medicaid has helped Kristina receive follow up care, medication and reconstructive surgery.

**Aurora West Allis Medical Center, West Allis**



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