

Lavinia Ross 2010 Medical Story for OHPB

By July of 2010, I knew I had a severe uterine bleeding problem that was producing more and more copious amounts of blood. There was a good chance I would probably need a hysterectomy based on family history, and I would have to find a doctor soon. I did not have insurance, so I wanted to make the best choice possible so as not to waste precious health care dollars. I obtained a recommendation from an older friend who had been through the procedure, and made the initial appointment.

The uterus did turn out to be rather enlarged, with many growths, and a hysterectomy was recommended. Bloodwork indicated severe anemia due to heavy bleeding, and surgery was put off until the end of August in an attempt to raise my blood count to the point I would not be in danger of needing a transfusion. The initial biopsy was negative for cancer. Due to family history, I opted to have the cervix removed at the same time, as my mother had cervical cancer at my age. It was suggested to me that I keep the fallopian tubes and ovaries, even though my mother's sister was diagnosed with ovarian cancer in her late 80s. I would only be 52 years old in a few months. Laparoscopy was determined to be the best surgical method, as it would require just an overnight stay in the hospital, and get me back to work sooner. I knew I would have a sizable bill I would have to cover myself, but just how much was unknown. Doctors are not involved in billing, cannot quote prices, nor tell you who all the other parties are who will be sending bills requiring immediate payment. They just don't have that information available to give their patients. In short, all my first surgeon was able to tell me was that the conventional bikini cut method would be cheaper, but would incur about 5 days in the hospital and recovery time would be longer. She indicated she would try not to open or use any packages of tools that weren't needed to keep the costs down. I believe she tried to do the best she could for me, and have no issue with her, or my second surgeon. I am grateful to both for their care.

Just prior to hospitalization, the forms for OHP and Samaritan assistance were filled out, as required for self-pay patients. I went through the surgery, with the only difficulty being the size of the uterus was on the upper limit for what was possible to do by laparoscopy, presenting some difficulty. There were vaginal tears, and I oozed blood for almost 10 weeks. The following week, I received notice that a grade II adenocarcinoma had been found, and she had selected an oncologist at a cancer institute in Eugene. My nightmare had just begun. The uterus had been cut into pieces for removal, and there was now the potential for cancer cells to have escaped into the body cavity.

My husband and I did not qualify for OHP or Samaritan assistance on the first round. Both of us run a small farm, and work multiple part-time jobs. A diagnosis

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of cancer has a way of derailing one's plans for the future, and ability to think clearly at the time as to what options are possible, and what each will cost in terms of money, time and ability to work. I had a diagnosis of endometrial cancer, towards the top of the uterus, not cervical cancer. Cervical cancer automatically entitles a woman to OHP coverage, but not uterine cancer. My "recovery" period was comprised of making numerous phone calls, Internet research, compiling and screening bills, and applying for Financial Aid. Employers wrote letters on my behalf. I went to the cancer clinic in Eugene only one time, as I felt I was being pressured into unnecessary radiation therapy and other procedures that may not have been necessary. One of those unnecessary procedures that I did consent to all too readily, was to have my tissue slides stained for estrogen and progesterone receptors. Had I been thinking clearly, I would have realized that of course the slides would stain positively for both receptors, being uterine tissue. Cost? \$510 for the brief meeting with the oncologist, and \$620.50 to the outside pathology group, and yet another financial aid form. In short, wasted health care dollars. The cancer clinic in Eugene did finally discount the visit to \$252.16, but the pathology group, who indicated they would follow the cancer clinic's discount, only came down to \$447.46, and their billing department could not explain why the two discount rates differed. The oncologist was "sure" everything would be "free", and why not just get the treatments she recommended? My attempts with staff there to obtain pricing on CT scans, etc. were met with amusement, and they would never call back, only tell me, "Come see us when you are ready." I was not amused. I never went back to Eugene, and asked my surgeon to recommend a Samaritan oncologist I could work with.

The Samaritan oncologist was a much better experience, and also meant bills would at least fall under the same umbrella at a potentially lower price than the cancer institute in Eugene. After discussing options and much research on my part, we ended up with a chest x-ray, post-op pelvic CT scan, removal of tubes and ovaries, and removal of lymph nodes up the aorta for analysis. One point of interest is that even with a slip from a doctor and a CPT code, no one in Samaritan's billing department could tell me how much the CT scan as ordered would cost. I was told maybe between \$1200.00 and \$1800.00 depending on what the radiologist did. I was amazed to see the actual bill for the CT scan later at \$3182.00. I still do not understand the discrepancy and why no one could give a "reasonable" estimate.

The other surgeon in the same practice as the first was qualified to remove lymph nodes, so we went back in for surgery on November 3rd of 2010, approximately 10 weeks after the first. OHP finally kicked in at the beginning of November since I was not working much at all, and as I understand it, it was sheer luck the surgery

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was scheduled during the first week of enrollment, which meant the Open Plan under OHP would cover the costs. All went well, and all samples obtained from the second surgery were negative, including the pelvic washings. So far I have am cancer free, as best anyone can tell from the post-op exams and PAP smears.

Total cost I was initially billed for was \$69, 596.77, far greater than anything I had imagined for what started out as one routine hysterectomy. After filling out three different financial aid forms, obtaining some grants, discounts and write-offs, my bill in the end was \$2914.36, which I am still paying off. Although this was quite a savings with a lot of hard work, one must realize that monitoring bills, filling out forms, numerous phone calls, documenting all of the above so that I could be sure of what I owed to whom and when became a full-time job, leaving little time for "rest and recovery". I was subjected to humiliation at times, with one billing representative asking me what made me think that I deserved help? I am fortunate I had the ability and tenacity to self-advocate, document everything as well as follow it, and was not elderly, mentally impaired or unconscious. My husband and I would have most likely lost our home in this process.

In summary, there is no consolidation of medical debt, as can be seen from the Excel workbook, and it was difficult to find any kind of hospital ombudsman for disputing billing issues. After being referred back to the same front line that suggested I was undeserving of assistance, I ended up calling the switchboard and asking to speak to various people higher up in the organization. I was finally given the name of a call center supervisor who took care of the problem. I am sure there are many others out there with similar problems who are not so fortunate as I am, and their voices still go unheard. The people of Oregon are your infrastructure, your workforce. Take care of them with reasonable, rational health care for all.

Grand Total

Lavinia's 2010 Medical Expenses								
See following individual sheets								
	Tentative	Tentative	Current		My		Apply for	
Service	Total	Final	Bill	Due	Total	Accrued	Financial	Status
	Amount	Amount	Date	Date	Payments	Interest	Aid	
Samaritan – Hospital and Doctors	\$69,956.77	\$2,914.36	05/16/12	on receipt	-\$1,180.61	\$181.12	yes	Granted 90% discount, some write-offs
Willamette Cancer Institute – paid off	\$510.00	\$252.16	02/09/11	on receipt	-\$252.16	\$0.00	yes	Salud grant made 12/23/10
Pathology Consultants – paid off	\$650.50	\$447.46	08/01/11	on receipt	-\$447.46	\$0.00		Salud grant made 12/23/10
Oregon Anesthesiology – paid off	\$3,520.00	\$880.00	02/29/12	on receipt	-\$880.00	\$0.00	yes	Salud grant made 12/23/10
Corvallis Radiology – paid off	\$769.00	\$158.29	01/11/11	on receipt	-\$158.29	\$0.00		Salud grant made 12/23/10
Radiation Oncology Associates – paid off	\$210.00	\$21.00	11/01/10	on receipt	-\$21.00	\$0.00		90% discount based on Samaritan
Total outstanding before discounts	\$75,616.27							
Total remaining after discounts, OHP	\$4,673.27							
Total payments (me + Salud!)	-\$2,939.52							
Balance after total discounts	\$4,673.27							
Balance after total payments	\$1,914.87							Note – interest accrued is now figured in per Health First Financial supplied amortization tables
Note – bills from the 11/3 surgery sent to OHP Open Plan								
WVCI, PC and Corvallis Radiology all submitted to Salud! as final bills								
Salud! Grants processed for WVCI, PC, CR								
See Health First Financial tab for Samaritan payments								
1/18/11 – faxed remaining Samaritan bills now on HFF loans to Salud! For any additional grants.								
4/19/2012 – Still waiting for Salud! on HFF grant								
5/3/2012 – Salud! committee has indicated that the 90% from Samaritan was sufficient and there will be no grant towards these bills.								