Medicare Coverage of Cancer Treatment

A Medicare Scholar presentation



Cancer in America

- More than 16.9 million American's with a history of cancer were alive on January 1, 2019¹
- More than 1.8 million new cancer cases are expected to be diagnosed in 2020¹
- Cancer is the 2nd most common cause of death in the US¹



Cancer in America

- The four most common types of cancer are lung, colorectal, breast and prostate¹
- 80% of all cancers in the US are diagnosed in people 55 years of age or older¹
- In the US, 40% of men and 39% of women will develop cancer in their lifetime¹



Preventive Screening

Medicare Part B covers many preventive screening tests for cancer

- Cervical & vaginal cancer screening
- Colorectal cancer screening
- Lung cancer screening
- Mammograms
- Prostate cancer screenings



NEW – Genetic Testing

Medicare will now cover genetic testing if:

- You have recurring, relapsed, refractory, metastatic, or advanced stage III or IV cancer
- You have not used the same genetic test for the same cancer diagnosis previously
- You decided to seek further treatment such as chemotherapy and radiation
- You have signs or symptoms of a cancer that can be verified with diagnostic testing
- You have a first-degree relative who has a known genetic mutation



More Testing

Medicare also covers other medicallynecessary diagnostic tests like:

- X-rays
- CT scans
- MRIs
- Biopsy
- Blood tests



Treatment Options

A comprehensive cancer treatment plan will include one of more of the following, all of which can be covered by Medicare:

- Surgery
- Chemotherapy
- Radiation
- Hormone Therapy
- Immunotherapy
- Genetic Therapy



Part A Coverage

- Inpatient hospital stays
- Blood work
- Diagnostic testing while inpatient
- Inpatient surgical procedures to remove a cancerous mass
- Some costs of clinical research studies while inpatient
- Surgically-implanted breast prostheses after a mastectomy while inpatient



Part B Coverage

- Visits with your primary care physician, your oncologist, and other specialties
- Intravenous and some oral chemotherapy
- Radiation treatments in an outpatient facility
- Diagnostic tests
- Outpatient surgeries
- Some costs of clinical research studies at an outpatient facility
- Breast prostheses after a mastectomy if the surgery takes place in an outpatient setting



2nd/3rd Opinions

- Medicare Part B covers a second opinion for surgery (that isn't an emergency)
- Medicare Part B can also cover a third opinion, if the first and second opinions are different



Part D Coverage

- Prescription drugs for chemotherapy, only if taken by mouth
- Anti-nausea drugs
- Other prescription drugs used in the course of your cancer treatment, like pain medication
- NOTE: prescriptions must be included in your plan's formulary to be covered.



Alternative Therapy

- Medicare does not cover alternative or holistic therapy
- These can include
 - Dietary changes
 - Supplements
 - o Oils
 - Natural extracts
- Medicare does not cover experimental treatment



Make sure your doctors accept Medicare Assignment!

- Doctors that accept assignment consider Medicare's approved amount as "payment in full"
- Doctors who've opted out of Medicare may bill you over and above the Medicareapproved amount (called excess charges)



The average annual out-of-pocket costs for cancer treatment ranged from

\$2,116 to \$8,225

depending on what type of Medicare coverage you have.⁵



Part A Inpatient Costs

- \$1,408 deductible for each benefit period
- \$352 per day for days 61-90
- \$704 per day for each Lifetime Reserve Day (up to 60 days over your lifetime)
- All costs days 91+ after Lifetime Reserve Days have been exhausted



Part B

- \$198 calendar year deductible
- 20% of the Medicare-approved amount
- 15% Part B excess charges for providers that do not accept Medicare assignment
- NOTE: Medicare will reimburse you directly for doctor's that bill Part B excess charges, you're responsible for paying the doctor in full.



Part C (Medicare Advantage)

- 20% for outpatient chemotherapy
- 0-20% for outpatient surgeries
- Per day copayment/coinsurance for inpatient stays
- 0-20% for diagnostic testing
- Coverage varies by plan refer to your plan's Summary of Benefits or Evidence of Coverage for more information.



Other Coverage

- Medicare Supplement, or Medigap plans, may pay some or all of the costs associated with Medicare-approved cancer treatments (depending on plan benefits)
- First-Diagnosis Cancer plans provide a lumpsum payment upon diagnosis for a covered cancer.



Things to Consider

- Medicare pays a large portion of the cost of cancer treatment, but there could still be large expenses
- Many centers of excellence do not participate in Medicare Advantage networks
- Make sure your doctors, oncologist and specialists accept Medicare Assignment
- Medicare doesn't cover alternative or experimental treatments



Thank You for Attending!





Sources

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