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How Well Do You Know Your Insurance?

by Kate Lindquist '27*

My family did not choose to switch from one health insurance company to another. We tried putting it off as long as we could. At the time, our family's health insurance plan was provided by my mom's job as an elementary school teacher. Our choice of health insurance lay in the hands of the people at the school district's central office who were trying to save the town as much money as possible. The town decided that University Health Plan, which we'd had for the past couple of years, was no longer in the best financial interest of the town. Instead, they provided incentives for all employees to switch to a new plan operated by First Health. The employees' contract between the teachers' union and the town didn't allow the school to move to First Health. Instead, employees who chose to stick with University Health would be responsible for 70% of the cost of their health insurance premiums, while employees who switched to First Health would only have to pay 30% of their health care premiums. Since this was a drastic difference (6,000 dollars!!!) my family decided to move to First Health. It was not until my dad suffered a serious shoulder injury that we realized the real cost of switching our insurance plan.

At the time, my family didn't have many ongoing health care needs. We put our health insurance to good use for annual physicals for our whole family and sick visits to the pediatrician for my sister and me. When I was younger, I had a lot

of ear infections and needed to see an ear, nose, and throat specialist, and had two sets of ear tubes. My dad also had a long history of shoulder issues; he'd torn his ACL when I was in elementary school and needed to see an orthopedic surgeon on occasion. However, we never had an issue obtaining any of the medical care we needed when we were covered by University Health Plan. Our doctors' visits and surgeries were covered, minus a small copayment; we'd always received the medications our doctors had prescribed, and we never had an issue finding doctors and hospitals within our health insurance network. However, as soon as we made the switch we noticed a difference.

We first encountered issues with our new coverage when renewing prescriptions. I'd been on a brand-name medication for a couple of years that our insurance covered based on my doctor's recommendation. However, once we switched to First Health, we ran into an issue. Without proof that I had tried the two brands of this medication covered by First Health's drug formulary, our insurance forced me to switch to a generic version of the drug. As a result, I experienced all the negative side effects that my doctor tried to avoid. After my doctor argued that this generic medication was not the right fit, First Health required me to try three additional brands - our new insurance plan never agreed to cover the only one that worked. In addition, I had a

*Note: Names have been changed to protect the privacy of patients and providers.



prescription for an asthma inhaler. First Health only covered one inhaler every three months, but this was not nearly enough because I would go through about one inhaler per month. Since this prescription was necessary, and not having it would be a very serious situation, my parents paid \$90 out of pocket for every additional inhaler I needed within those three months. With these medication issues, we started to wonder what we had gotten ourselves into by switching insurers. However, our big eye opener came when my dad suddenly needed major shoulder surgery.

Our insurance switched on July 1st, the official beginning of teachers' contract year. In August, my family went tubing down the Penobscot River in Portland, Maine. My sister and I discovered a rope swing tied to a tree and wanted to give it a try. We were nervous about going at first, so my dad decided to show us how it was done. When he let go of the rope, he dislocated his right shoulder. Due to many previous shoulder injuries from being a white-water rafting guide, he just popped it back in, and my sister and I were none the wiser. As we continued down the river, however, my dad's pain increased. By the end of the trip, we knew something was wrong. We discovered later that not only did the rope swing dislocate his shoulder, but it had also torn

his rotator cuff and his bicep brachii.

As soon as we got home my dad went to see his orthopedic surgeon who immediately recommended an MRI to determine the extent of the injury. He recommended getting it as soon as possible due to the amount of pain my dad was in, but also because the sooner they could do surgery to correct what was torn, the better the outcome would be. My dad left his appointment with a referral for an MRI, but when he went to schedule it, First Health refused to cover it. He called his doctor back and was told that he would have to call the insurance company and talk with them to get it covered. In the meantime, the doctor decided to prescribe him an anti-inflammatory medication to reduce the pain during the wait. This began a month of sparring with our insurance company...

When my mom went to pick up the anti-inflammatory medication, the pharmacist told her that our insurance denied coverage for it and asked if we would like to pay \$200 out of pocket. Thinking that it should be covered, my mom called First Health; the representative said that First Health would not cover the prescription because we did not have enough proof of injury. To obtain proof of injury, however, and to get the medication my dad would need, he needed to

have an MRI. We explained that we were trying to get an MRI, but it hadn't been approved. The medication was to help in the meantime. We were stuck in a Catch-22, since he couldn't get an MRI (to justify the need for the medication), and without the MRI, he couldn't get the medicine he needed for his pain. After First Health finally approved the MRI, my mom gave up and decided to pay for the medication out of pocket. She was told that she would be reimbursed after the MRI results.

After that phone conversation First Health revoked - and then reinstated - its approval for the MRI four times. They would approve it and schedule it; my dad would take the day off of work and go to the hospital to have it done, only to show up and be told that he was no longer approved. He'd call First Health again, get it reapproved and then repeat the cycle. After four failed attempts over the course of a month, he was finally able to have the MRI, which showed exactly what his doctor had expected. His surgery was scheduled soon after, but my mom was never reimbursed for the cost of his anti-inflammatory medication.

The next year when insurance open enrollment came back around my parents immediately reenrolled us in the University Health Plan. We chose to pay 70% of the premium cost, because we'd learned that it was better to pay more for

insurance that actually covered what we needed when we needed it, than to pay less for insurance that would do whatever it took to not cover what we needed. My family was fortunate enough that the additional costs of the medications and the days my dad had to take off from work did not cause us significant financial hardship. This is not the case for everyone, and many families have no choice but to opt for less-expensive coverage. Health insurance should do what its name suggests: to insure your health.

Since this point, my mom has switched jobs, and once again my family has switched health insurance. This move was a very stressful one. My family has become more reliant on our health insurance, as we've experienced more health issues over the past couple of years. Luckily, the school district my mom works in now understands the importance of good health insurance and our plan works well for our family. We are now on a Blue Cross Blue Shield Plan which has, for all intents and purposes, been very good. This current plan is a PCP plan, meaning it requires all members to have a primary care physician who will make any necessary referrals. Additionally, this plan covers us all over New England. This is incredibly important since I started college out of state this year. This plan guarantees my coverage at school. It also means it will cover us in Maine when we visit family. We are fortunate that my mom's new employer understands the importance of providing their staff with high quality insurance, but this is not the case for too many Americans. According to the Kaiser Family Foundation, in 2023 the average annual cost of health insurance in the United States for an individual was \$8,435; family coverage was nearly \$24,000. As my family saw firsthand, the high cost of health insurance leads employers to shop for better deals to save money, jeopardizing the health of their employees.

“It was better to pay more for insurance that actually covered what we needed when we needed it, than to pay less for insurance that would do whatever it took to not cover what we needed.”