

Cornerstone News

National Cornerstone Healthcare Services

Spring 2007



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Note from the President



Welcome aboard...

More and more, reimbursement is the key.

David S. Espinosa
President, NCHS

These days, with medical costs rising dramatically, reimbursement has emerged as a key ingredient of affordable health care. Nowhere is that recognized more acutely than at National Cornerstone Healthcare Services (NCHS), where our patients rely on the reimbursement they receive month in and month out. Fortunately, our reimbursement effort is in good hands—the hands of Lisa Espinoza and Loretta Molina. We're please to introduce these important reimbursement specialists to you this month.

Loretta was born in Loma Linda, California, and attended school in Redlands before enrolling at a financial training academy, where she received her banking certificate. She also attended Crafton Hills College in Yucaipa and worked for a medical clinic in Redlands for several years before working for a homecare company; she joined NCHS in November 2006. Her main contribution has been "to help streamline and structure the reimbursement process to ensure timely and accurate reimbursement." In that pursuit she enjoys both her job and the company. "NCHS has allowed me to utilize my existing skills while developing new skills and bettering my knowledge within the company to make sure that we provide the patient with quality service. I enjoy that."

She is married and has three children—one in middle school, one in high school and one in college. Loretta describes herself as "a baseball mom."

Lisa was born in Upland, California, and reared in Pomona, later attending a trade school to learn dentistry-related skills. She worked in the dental field before transitioning over to pharmacy with a pharmaceutical supply company, joining NCHS in February 2007.

As a reimbursement specialist she has two have very specific responsibilities: she is charged with verifying that eligibility is current with the payor, verifying whether authorizations must be obtained in order to receive product, and ensuring that all billing requirements necessary for reimbursement are in order.

"I believe that accuracy in all aspects of my work is the primary contribution I can make to NCHS," Lisa said. "I ensure that we can provide the services we offer, that the patient's policy is utilized correctly, that we are able to secure reimbursement for the company, and that patients maximize their benefits within reason."

She finds her position as a reimbursement specialist—and the company itself—enjoyable. "Many people are not very familiar with the hemophilia community, and they're intrigued by what I do," Lisa said. "I enjoy their interest and being able to impart to them the importance of what we do. It's very rewarding from that aspect."

Lisa has two children. She enjoys working out in the gym, playing co-ed softball, and attending movies.

We're pleased to welcome these important additions to National Cornerstone Healthcare Services and we are looking forward to a long and successful relationship with them both!

News & Updates

Impressions of the HFA Meeting

March 1-3, 2007

Barbara Chang

The Hemophilia Federation of America Symposium was held in a wonderful hotel; the Embassy Suites in Albuquerque, New Mexico. One might expect moderate weather in March but we were rather surprised to find veeeeeeeeery cold temperature (under 20 degrees) with blustery cold winds blowing during the meeting dates up until departure day on Sunday (just our luck) when it was nice and warm.

This was the first symposium I have attended as an associate of a healthcare services provider (NCHS) in addition to being an officer for HFA. There were many special moments at this years gathering and I will try to highlight some in this writing. During the early part of the first day, it was my pleasure to attend the New Families welcome. What a treat to meet with a large number of new families and observe the friendly networking and sharing. This moment was enhanced when several new members expressed their pleasure and thanked HFA for the many experiences they encountered during their few days at the symposium.

It was my greatest joy to participate in the childcare program for 5-8 year old boys and girls. To watch them actually use a needle and thread to sew their own "teddy bear" after they stuffed it with chosen objects such as hemophilia genes, special talents, hearts and whatever their imagination allowed. They demonstrated their medical knowledge and shared ideas with the other children when visiting teddy bear hospital. The children seemed to like placing cold packs on their bear and wrapping sore knees while giving advice to be more careful. The session with "Stuffy" was a wonderful learning experience about nutrition which correlated to "Granny Goodfoods" discussion. Everyone especially enjoyed the Indian Dance performers. It is my understanding that the other age group sessions provided a combination of fun, learning and networking.

All of the Speakers were well prepared, provided pertinent information and participated in vigorous question & answer sessions. Each guest speaker stayed around for most of the symposium and was often spotted in the hallways speaking with families. This interaction is strongly encouraged and appreciated; an excellent example of the friendly atmosphere of the symposium.

The Exhibit area was jam packed with folks exchanging information, ideas and goodies. Everyone utilized the exhibit time to enhance both knowledge and friendship.

In addition to the major speakers program, I attended the Adaptive Tai Chi where Dr. Klinger shared methods of chair exercise combined with relaxation techniques. In addition, I joined a standing-room-only crowd to hear Shawn & Gwenn Decker discuss their book, "My Pet Virus". There was a candid exchange of thoughts regarding very personal issues. At the Focus on the Feminine lunchtime gathering, the ladies were able to get their questions answered, they were treated to some tasty sweets, and went home with a gift bag.

NHF WASHINGTON DAYS

Jim Brown
Mid-West Cornerstone Healthcare

I recently attended the National Hemophilia Foundation's "Washington Days" in Washington D. C. The event was planned to update members of the bleeding disorders community on federal legislative issues impacting our community, state issues such as PDLs, and to arrange personal visits with members of congressional delegations so that they are aware of our issues. More persons attended this important event than ever before (150+), and more visits were scheduled on Capitol Hill than ever before (170+) – we are having an impact!

I met with Senators Chuck Hagel and Ben Nelson, as well as Representatives Jeff Fortenberry and Lee Terry or their Legislative Aides, and came away feeling that I had good visits and made an impact on the knowledge of bleeding disorders among the Senators and Representatives. It gives Congressmen and Senators a local, personal view and contact when issues related to bleeding disorders come before them.

PDLs (Preferred Drug Lists) -

Many states are faced with attempts by state government to limit the access to or payment for various factor products used in treating bleeding disorders. Generally a state will develop a list of drugs categorized as "Preferred" or "Not Preferred" and "Recommended" or "Not Recommended". The effect may be to limit the particular blood factors they will pay for, which may mean that the type of product recommended/ordered by your physician may not be allowed or paid for.

A "Case Study" was presented by one NHF chapter in Pennsylvania on how they were successful in heading off restrictions on access to factor products, and their efforts are now being used as a model for other states to use when faced with PDL efforts.

Access to Medigap Insurance "Medigap" insurance refers to private supplemental insurance policies that provide additional coverage to pick up certain health care costs not covered by Medicare. As it is now, persons who are elderly and qualify for Medicare have access to Medicare Supplemental Insurance or "Medigap" insurance, which in part covers co-payment for prescription drugs such as blood factor. Many persons with certain disabilities, such as genetic disorders like hemophilia, do not qualify for "Medigap" insurance because of their age. Currently, only 24 states mandate that Medigap insurance be offered to those eligible, while 26 states do not. This proposal would expand access to Medigap insurance open-enrollment

policies, without regard to age, to help ensure continued access to lifesaving therapies such as factor. You are encouraged to contact your Representative to support and co-sponsor H.R. 1282, THE MEDIGAP ACCESS IMPROVEMENT ACT OF 2007. It has bi-partisan sponsorship by Rep. Phil English (R-PA) and Rep. Bobby English (D-IL) as well as bipartisan support. It is hoped that similar legislation will be introduced in the U. S. Senate this session also.

World's First Book on Inhibitors

Families of children with hemophilia and inhibitors have long been ignored educationally in the bleeding disorders community. Attending the first Inhibitor Summit meeting in the fall of 2005, author and mother Laurie Kelley witnessed their deep pain and need for education and mutual connection. "I had not seen such collective anguish in over ten years in our community," she says. "It was like a well kept secret." Laurie knew it was time to reach everyone with inhibitors, everywhere. This year, Laurie will begin writing the world's first parenting book about inhibitors, called *Raising a Child With Inhibitors*. Funded with an unrestricted grant from Novo Nordisk, this book will cover all aspects of inhibitors, from diagnosis to teen years, from the medical to the psychosocial, in a language parents can understand. The book will be chockfull of practical information, advice, actual stories from families, and resources.

Laurie is requesting stories—and she would like any parent of a child with an inhibitor or patient with an inhibitor, to contact her to share their story. These collective stories will form the backbone of the book, addressing directly what parents want and need to know, based on what parents and patients tell her. If you'd like to be a part of this groundbreaking project, contact her at once at laurie@kelleycom.com or 800-249-7977. Now's your chance to tell the world your story and share what you've learned for future parents and generations, so no parent or patient ever feels isolated or helpless again.

An important point in discussing this proposed legislation is that the cost of the insurance would be paid by the insured, through premiums, so there is no direct additional financial burden on the government.

Increased Funding for HTC's

Centers for Disease Control and Prevention's Division of Hereditary Blood Disorders funding for HTC's Grant Program has remained at the current level of \$6.8 million for over 10 years. This request is for an increase of \$3 million, to support comprehensive care and research for people with bleeding disorders. This becomes even more important as more and more females are being diagnosed with von Willebrand disease (VWD). Today, the fastest growing population for HTC's is women with bleeding disorders. Studies have demonstrated a **40% reduction in mortality and morbidity associated with HTC care for various bleeding disorders!**

It is important to note that this is NOT "earmark" funding (sometimes referred to as "pork-barreling") allocating funds to a specific project identified by a member of Congress. These are "program" funds and HTC's must apply for funds, based on their provision of services to the bleeding disorders community and meet CDC requirements. Please urge your Congressman/Congresswoman to support increased program funding for CDC's Division of Blood Disorders in the Fiscal Year 2008 Labor, Health & Human Services, and Education Appropriations Bill.

GINA (Genetic Information Nondiscrimination Act

The Genetic Information Nondiscrimination Act (H.R. 493 & S. 358) prohibits health insurers and employers from discriminating on the basis of genetic information. This includes requesting that a person undergo a genetic test, denying enrollment or adjusting premiums on the basis of genetic information. It also prohibits employers from using genetic information to make hiring or firing decisions.

There are currently 200 cosponsors of the House bill, but it would be helpful to have even more. The House bill has been referred to three committees, with the Committee on Education and Labor having primary jurisdiction. The House bill was approved by the

Education and Labor Committee on February 14th. The Senate bill passed the Senate's Health, Labor and Pension Committee on January 31. Last year similar legislation passed the Senate by a 98-0 vote. The Bush administration, in its Statement of Administrative Policy (SAP) has indicated full support for the legislation.

If you wish to contact your Senators and Representatives, Background Information, Fact Sheets, Talking Points papers and even sample letters are available on each of these legislative issues on NHF's website: www.hemophilia.org. NHF staff has done an excellent job of putting this information together for all of us to use. The Hemophilia Federation of America also has an excellent website with contact information for Members of Congress and the Senate – go to: www.hemophiliafed.org and access HFA's Legislative Action Center.

Some think of highly paid lawyers roaming the halls of Congress as "lobbying", but the presenters at this event, including members of Congress and their legislative assistants emphasized that the truest form of advocacy is the grass-roots kind of input that

each of you can provide, as a member of the bleeding disorders community. You are the persons with first-hand knowledge of the impact hemophilia, vonWillebrands and other bleeding disorders have on the quality of your lives and those of your family. YOU are the voice of hemophilia or vonWillebrand disease!

One suggestion coming from the workshop that can help improve your effectiveness anytime you deal with a legislator or government agency representative is the use of the terms "access" as opposed to "choice". The point was made that "access" conveys that in fact the medication or treatment is a necessity, while "choice" may sound too much like a "luxury".

A list of Lobbying Dos and Don'ts was provided, and these suggestions are helpful anytime you are communicating with a member of Congress or your local state legislators.

These issues are important enough to the bleeding disorders community that EACH OF US should be involved and should contact members of our Congressional delegations – we are their constituents!

Camp schedule

Visit us @ www.nc-hs.com

State	Name of Camp	Date	Contact	Phone Number
Alabama	Camp Clot Not	July 22-27, 2007	Dana Abrams	866-269-8665
Arizona	Camp Honor	July 22-27, 2007	Cindy	602-955-3947
California	Camp Blood Brothers	June 16-21, 2007	Linda Corrente	800-371-4123
California, Northern	Camp Arroyo	November 9-11, 2007	Robin Bias	510-568-6243
California, Northern	Camp Hemotion	June 17-23, 2007	Robin Bias	510-568-6243
California, Northern	Hemophilia Adventure Camps		Todd Smith	707-622-1101
California, San Diego	Camp Pascucci	July 29-Aug 3, 2007	Teresa Ramirez	619-325-3570
Colorado	Colorado Mile High Camp	July 16-21, 2007	Erin Stang	303-724-0367
Connecticut	Hole in the Wall Camp	June 8-14, 2007 session #1 June 17-23, 2007 session #2 July 15-21, 2007 session #5 August 2-6, 2007 session #7	Matthew Cook	860-429-3444
Florida	Boggy Creek Hole in the Wall	June 4-9, 2007	Fran Hayes	407-629-0000
Georgia	Camp Wannaklot	July 22-27, 2007	Kim Wilson	770-515-8272
Hawaii	Camp E Ho'Omana Kakou		Jeanine	808-561-9360
Illinois	Camp Warren Jyrch	July 22-28, 2007	Faith Romono	312-427-1495
Indiana	Camp Brave Eagle		Jennifer Maahs	317-871-0011x212
Indiana	Camp Independence	June 17-24, 2007	Michelle Rice	317-570-0039
Kentucky	Camp Discovery	July 8-12, 2007	Ursela Lacer	502-456-3233
Louisiana	Camp Wounded Knee	July 22-27, 2007	Lori Kees	225-291-1675
Maine	Hemophilia Family Camp	July 25-28, 2007	Jane Smith	781-326-7645
Michigan	Camp Bold Eagle	July 15-19, 2007 session #1 July 21-28, 2007 session #2	Anne Henningfeld	734-544-0015
Michigan	Outpost Traveling Camp	August 12-18, 2007	Anne Henningfeld	734-544-0015
Minnesota	Camp Courage North	July 14-20, 2007	James Paist	651-406-8655
Mississippi	Camp Lake Stevens	July 23-28, 2007	Maggie Gallarno	601-984-2710
Missouri	Camp KIWIbleDi			800-431-7960
Nevada	Camp Independence	July 12-15, 2007	Jeannie Favish	702-564-4368
New Mexico	Zallente de Oro		Loretta Cordova	505-341-9321
New York	Camp High Hopes Hole in the Woods Camp	August 12-18, 2007	Bob Graham Max Yurenda	315-463-5354 578-696-5676
North Carolina	Camp Carefree			919-966-4733
Ohio	Camp Joy	July 23-27, 2007	Polly Partin-Welsh	513-636-4269
Oklahoma	Camp Independence	June 14-18, 2007	Beverly Stevens	405-271-3661
Oregon	Camp Tapawingo		Monica Dickey	503-297-7207
South Carolina	Camp Running Brave		Vic & Roberta Fisher	864-879-4681
Virginia	Camp Holiday Trails	June 24-29, 2007 session #1 July 1-13, 2007 session #2 July 15-27, 2007 session #3 July 29-Aug 3, 2007 session #4	Tina LaRoche	434-977-3781
Virginia	Camp Youngblood	June 24-29, 2007	Kelly Waters	804-740-8643
Washington	Camp I-VY	August 20-24, 2007	Cheryl Brower	206-292-6507
West Virginia	Camp Hemo Von	July 29-Aug 4, 2007	Anita Gram	304-293-1205
Pennsylvania	Camp Dragon Fly Forest	June 30-July 6, 2007		412-683-2231
Missouri	Wilderness Camp	July 30-August 4, 2007		314-729-0233
Virginia	Hole in the Wall Camp	June 9-15, 2007		703-352-7641
Utah	Camp Valor	July 30-Aug 3, 2007	Scott Muir	801-484-0325
Nevada-Elko	Camp Eagle Spirit	August 9-12, 2007	Jeanne Favish	702-564-4368