



AFFORDABLE Complementary Care

Alternatives to Insurance Cost Less

by Meredith Montgomery

The latest National Health Interview Survey available, from 2012, shows an annual expenditure of \$30.2 billion in out-of-pocket costs for complementary health approaches, benefiting 33 percent of adults and 12 percent of children, and representing about 10 percent of out-of-pocket U.S. healthcare costs. Insurance rarely covers complementary and alternative medicine (CAM) in full. As provider networks shrink, premiums rise and the future of healthcare reform remains uncertain, health-conscious consumers yearn for innovative ways to afford this kind of care.

Membership-Based Care

When Dr. Chad Krisel worked at an urgent care center, he saw up to 55 patients a day. Since opening Integrative Family Medicine of Asheville (IntegrativeAsheville.org), in North Carolina, with Dr. Brian Lewis, he averages 12 patients a day. His team provides a membership-based

practice in a payment model known as direct primary care (DPC).

Endorsed by the American Academy of Family Physicians, DPC is broadly accessible. By applying simplicity, sustainability, quality and collaboration, their integrative practice provides comprehensive care for less than what many pay for phone service. "DPC removes traditional financial incentives and conflicts of interest because membership fees fund us. Our only incentive is to help and heal patients," Krisel explains.

Paying for memberships out-of-pocket (often electing high-deductible plans) or via a health-sharing plan, clients value coverage that includes annual wellness exams, phone or virtual appointments and educational classes, plus follow-ups and urgent care at minimal costs.

The U.S. mainstream fee-for-service approach, whether paid by insurance or cash, has been criticized for encouraging unnecessary tests and procedures

because doctors are paid for services performed. To maintain income, they typically shorten appointments to increase the number of patients they see.

Lewis emphasizes, "Time is the valuable factor in DPC—healthy lifestyle changes, which can prevent or reverse 70 percent of health concerns, cannot be communicated in 10 minutes."

Medical Cost-Sharing

For generations, Christian communities have operated health care sharing ministries (HCSM) to collectively share the cost of each other's medical bills as an alternative to outside insurance. Members are exempt from current Affordable Healthcare Act (ACA) mandates.

Liberty HealthShare, a nonprofit HCSM chartered by the Mennonite church, believes that everyone has the right to practice religion as they see fit. Their members share a commitment to personal health and sharing in the burden of health expenses with others that have these values.

"Many in the functional and integrative medical arenas also believe in these principles," says Tom Blue, of Richmond, Virginia, a director with The Institute for Functional Medicine. "Cost sharing feels very familiar; you present your card to your provider, but there's no set network of providers, which is favorable for those seeking more progressive forms of care."

Expanding upon this model, Blue worked with the company to create its Liberty Direct program (Liberty-Direct.org). Individuals pay an annual membership fee plus a monthly share amount. After fulfilling their annual unshared amount of out-of-pocket expenses (similar to a deductible), participants' healthcare costs—including approved naturopathic and alternative treatments—can be submitted as expenses to be shared by the group.

Liberty Direct provides financial advantages to DPC practitioners and patients by subsidizing membership fees; it favors nutrition over chronic prescription dependence by reimbursing physician-prescribed nutritional

supplement and pharmaceutical expenses under the same terms.

Members must be in good health with a lifestyle that helps sustain wellness, including good nutrition, exercise and abstinence from tobacco use and drug and alcohol abuse. The program also accepts approximately 7 percent of applicants on provisional terms when pre-existing conditions such as hypertension, obesity and diabetes can be improved through lifestyle changes. They pay an extra fee per month to cover the cost of a health coach; when they achieve their goals, they become full members paying regular rates.

"The economics are staggering," says Blue, who used to pay \$760 a month for insurance with a \$12,400 deductible and now pays a monthly share of \$449 with a family unshared amount of \$1,500. HCSMs are affordable because of restricted overhead budgets. Plus, they appeal to natural-health conscious clients and can decline unsuitable applicants. "This concept of communal cost sharing works—Liberty's share amounts decreased in 2013 and have not changed since," comments Blue.

GreenSurance

Told she was past medical hope, Kari Gray, of Kahului, Hawaii, sought to heal from cancer using natural medicine. "When thousands of dollars spent for natural protocols were denied reimbursement by my insurance company, I saw that the system needs to change," Gray recalls.

CAM therapies still deemed "unproven" by traditional insurance companies gave Gray a second chance at life. Following remission, she began a 20-year search for alternative medicine insurance. Finding none, in 2014, she created GreenSurance (MyGreenSurance.com).

Serving people that proactively care for their health and prefer natural medicine as primary care, GreenSurance developed an evidence-based and science-backed list of 40-plus covered CAM modalities, including thermography, energy therapy,

biofeedback, essential oils and homeopathy. It also covers conventional medical and emergency care.

Enrollees of the member-owned organization are supplied third-party payer information for provider direct billing once the member's out-of-pocket amount is met. They use any state-licensed provider and the program is often more affordable than traditional insurance.

GreenSurance is currently investing resources to broaden consumer access to the tax advantages of a health spending account (HSA). H.R. 1752 would allow enrollees in any healthcare-sharing

program to open an HSA. "Simply, we're a co-op whose members empower us to create an exempt program that protects members from ACA penalties and traditional health insurance," says Gray. "More, we're a grassroots movement for change."

Krisel notes, "Doctors too, are livid about the current status of America's healthcare system. Be vocal about what's important to you. The more voices heard in Washington, the more change we'll see."

Meredith Montgomery publishes Natural Awakenings of Gulf Coast Alabama/Mississippi (HealthyLivingHealthyPlanet.com).

GETTING TO 'YES' WITH AN INSURER

Conventional insurance rules adversely affect Americans' consideration of Complementary and Alternative medicine (CAM). According to the 2012 National Health Interview Survey, acupuncture, chiropractic and massage therapy use increased over the prior decade, but only among those without insurance. For those with progressive policies, coverage for CAM approaches is usually only partial.

KNOW WHAT A POLICY COVERS

Before using a complementary or integrative service, inquire about specifics: Sometimes preapproval or a referral is required to qualify; coverage may be limited to a certain network of practitioners; verify visit limits or the number required; and get details of out-of-pocket costs. Keep insurance-related communications records, including notes on calls and copies of bills, claims and letters, to help with any claim disputes.

EXPLORE AVAILABLE OPTIONS

Ask the insurance provider about coverage of CAM approaches, including whether a rider or supplement to the standard plan is required to cover them. Inquire about discount programs, such as when members pay for fees and out-of-pocket costs, but at a lower rate. State insurance



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departments and professional associations for complementary health specialties may know which insurance companies cover specific CAM approaches.

ASK PRACTITIONERS ABOUT PAYMENTS

When seeing a complementary or integrative practitioner, clarify payment and

insurance details before the first visit. Learn the cost of initial and follow-up appointments; how many appointments are needed; additional costs such as for tests, supplements or equipment; and if they offer an income-based sliding scale. Also confirm which insurance plans are accepted and if the patient or provider files claims. When insurance doesn't cover a service, inquire about installment plans and discounts for cash payments.

SAVE WITH TAX-EXEMPT ACCOUNTS

Flexible spending accounts offered by some employers allow participants to set aside pretax dollars for health-related expenses. Health savings accounts can be established by individuals with high-deductible health plans to save for medical expenses. Contributions are tax-deductible and interest is tax-free.

Source: National Center for Complementary and Integrative Health