

Finances

If you are dealing with a cancer diagnosis, you may have a lot of concerns and worries on your mind. Some of these concerns may be about money since cancer treatment can involve many unexpected expenses, such as medication and travel costs. It is important to remember that help is available.

Who Can Help Me if I'm Worried About Money

There are members of your health care team that can help you with your financial questions.

The drug access facilitator can help you and your family understand your drug coverage options. A social worker can help you find sources of financial help and services in your community. See the section called 'Counselling' to learn more about social workers.

Drug Access Facilitator (By Appointment only)
Telephone: **519-685-8600 extension 54519**

What Can I Do If I Need Help Claiming My Expenses

If you need more help claiming your medical expenses on your income tax return, contact a chartered accountant or your financial advisor. You can also contact Canada Revenue Agency for more information.

Understanding Your Drug Coverage

It is important to know the type of drug coverage you have as early as possible. Knowing your drug coverage options can prevent delays in your cancer treatment. If you are admitted to the hospital as an inpatient, most medications are covered by the hospital. If you are being treated as an outpatient, you may have to pay for the medications that you take home.

The information below will help you understand what you need to know before your doctor gives you a prescription.

Private Coverage

Definition: You, your spouse or your parent may have a drug plan through work or you may pay for one privately.

- Private coverage does not mean it covers everything.
- When contacting your private plan about drug coverage, it is good to have the DIN (Drug Identification Number) ready for each drug.

- On your first visit, bring your insurance paperwork and your plastic insurance card (if you have one).

Questions to ask your drug plan provider:

- Does your plan cover the full cost of all medications prescribed? If not, what percentage does your plan cover?
- Do you pay a deductible? If yes, how much?
- Is there an annual or lifetime maximum for medication coverage? If yes, what is the maximum and how much is remaining?

Provincial Coverage

Definition: Financial coverage available through the Ontario Drug Benefit Program (ODB)

Ontario residents with an OHIP card are eligible for drug benefits through the ODB program. Not all drugs are covered. To be eligible, one of the following must apply to you:

- You are 65 years of age or older.
- You are receiving social assistance (e.g., Ontario Works (OW) or Ontario Disability Support Program (ODSP)).
- You have nursing support at home through the Ontario Health Care at Home program and have a temporary drug card.
- If you do not qualify for any of the above, you can apply for the Trillium Drug Program.

No Coverage

Definition: If you do not have extra coverage, you will have to pay for your medicines.

- You should apply for provincial coverage through the Trillium Drug Program. Everyone can apply to this plan. Pick up a form at any pharmacy or call 1-800-575-5386. You can also get the form at www.health.gov.on.ca.

Ontario Health Insurance Plan (OHIP): For more information on health card registration, renewal, and out-of-province/country claim submission, please see the OHIP contact information under 'Financial contacts'.

OHIP+: OHIP+ makes more than 4,400 drug products free for anyone age 24 years or younger who is not covered by a private plan. You can check medication coverage online at: <http://www.health.gov.on.ca/en/pro/programs/drugs/ohiplus/>

Other Expenses

Call your private insurance provider to find out if they pay for services such as a registered massage therapist or physiotherapist. Some private insurance providers may also help pay for things such as wigs or prostheses.

Patient Assistance Program

The Patient Assistance Program provides emergency, short-term help so people can focus on recovery instead of how to pay for the costs from their cancer care. Financial assistance is available when funding from other sources and services is not.

Expenses made within six months of the date of application will be considered. There is a form at the end of this section.

Keep your receipts for anything related to your cancer care. These receipts will be helpful for income tax purposes or if you are applying for funding through your private insurance or the Patient Assistance Program.

Who can apply to the Patient Assistance Program?

Any adult who is:

- Undergoing treatment at The Verspeeten and/or its affiliated southwestern Ontario regional partner sites
- Experiencing a financial burden as a result of their cancer diagnosis and treatment
- Applicants are expected to use other sources of funding before using the Patient Assistance Program (e.g., from the workplace, Ontario Works, Ontario Disability Support Program, Assistive Devices Program, Ontario Health Care at Home).

What kind of funding is available?

Funding is available for wigs or other head coverings, prostheses, equipment rentals, drugs that are not covered by other plans, childcare during treatment, and more. The Patient Assistance Program does not cover private pay chemotherapy, tests or procedures that are not covered by OHIP, out-of-province travel costs, living expenses, meals, or gas.

How can I apply?

An application form is included at the end of this section. Forms are also available in the Patient and Family Resource Centre. Complete an application form and bring it to the Patient and Family Resource Centre or mail it to the address listed on the application.

How do I get reimbursed for my transportation and parking expenses?

We work with the Canadian Cancer Society's (CCS) Wheels of Hope to encourage our patients to use this service whenever possible. The Patient Assistance Program will

only consider reimbursing transportation expenses when assistance is not available through CCS or other organizations.

Patients must confirm that they have applied to the CCS Wheels of Hope Program and any other programs available in their community before transportation reimbursement will be considered.

Please note: Needing someone to go with a patient for treatment is not a factor to be eligible for CCS.

CCS does provide transportation for one person to accompany the patient. If you do not qualify for the Canadian Cancer Society transportation program, we will require a brief explanation before we can consider reimbursing you for your parking expenses. Pre-approval is required.

If you are registered with the CCS Wheels of Hope program and travel on a day when Canadian Cancer Society assistance is not available, the Patient Assistance Program will provide assistance with parking.

Please provide a short note about assistance not being available and provide original parking receipts in order to be reimbursed the cost. Pre-approval is required.

Receipts for Parking Costs at LHSC

If you need a receipt for your parking costs:

- Press the button on the parking kiosk that says “press for receipt when flashing.”
- If you pay at the parking office, you can request a receipt.