



spotlight on healthcare

Checking Up On Your Health Insurance

(NAPSA)—About 60 percent of Americans have health insurance through an employer, according to the latest numbers from the U.S. Census Bureau.

While that insurance often provides for a number of basic health needs, experts say it's important to know just how much coverage you have, because not knowing could cost you.

For instance, in many cases, only a fraction of the cost associated with prosthetic devices (which are becoming more common as the population ages and diabetes rates increase) is covered.

It was an insurance gap that surprised Brian Hansen, a contractor to the EPA living in New Jersey, who needed a prosthetic device after sustaining an injury and infection that resulted in his leg being amputated. His insurance company provided a maximum allowance of only \$1,000 with a \$200 deductible for the device, which costs upwards of \$30,000.

According to the American Orthotic & Prosthetic Association (AOPA), more than 3,000 patient care facilities provide orthotic and prosthetic services and there are more than 185,000 new amputations performed each year in the U.S. More than 80,000 of those are in some way related to diabetes.

"People who have had an amputation need prosthetics, as well as rehabilitation that can cost as much as \$200 per session," explains Anita Liberman-Lampear, Member of AOPA's Board of Directors and from the University of Michigan Orthotics and Prosthetics Center. "But right now, most private insurance just isn't covering it. As a result,



It's important to know what your health insurance does and doesn't cover.

people are having to find other methods of covering the costs."

In the case of Hansen, those methods included switching to higher-cost private coverage (until he could no longer afford to pay the monthly premiums) and relying on financial help from Social Security—a move he's not alone in making.

In one year alone, Medicare approved payment for nearly 2.5 million prosthetic codes that accounted for more than \$628 million in Medicare expenditures. It's believed that many people requiring the Medicare payments were not covered by their private insurance providers.

"I've worked all my life and always assumed that my health insurance would provide the coverage I needed," says Hansen. "I never thought I'd have to rely on Medicare."

AOPA has joined with others calling for private insurance to provide adequate coverage for patients requiring ongoing orthotic and prosthetic care. To learn more, visit its Web site at www.aoponet.org.