



2023 ANNUAL REPORT

Community Health Advocates

1.888.614.5400

HELPING CONSUMERS ACCESS CARE



Community Health Advocates (CHA) is a statewide network of organizations that help individuals, families, and small businesses use their health insurance and obtain the health care they need.

The CHA network consists of 27 partner organizations, including three specialists (Empire Justice Center, The Legal Aid Society, and Medicare Rights Center) that provide training and technical assistance. CHA is administered by the Community Service Society of New York, which also operates CHA's toll-free live-answer Helpline, available Monday through Friday, 9 a.m. to 4 p.m., to help consumers use their health insurance, dispute insurance denials, address billing issues, and otherwise access health care services.

CHA and its partners have the cultural and linguistic competence needed to address the health care issues facing New York's diverse communities. We offer services in multiple languages and provide hands-on assistance in urban, suburban, and rural communities.

CHA offers free assistance to all health care consumers, whether they have health insurance or not, by investigating and diagnosing the problem, researching potential solutions, advising clients on their rights and options and pursuing resolution on consumers' behalf.



Community Health Advocates is generously funded by the New York State Legislature and the New York State Department of Health. In FY23, running from April 1, 2022 through March 31, 2023, the program received an appropriation of \$5.234 million that allowed 27 CBOs and the Helpline to handle over 36,000 cases and saved consumers over \$35 million in health care and insurance costs across the state.



CHA is a program of the Community Service Society of New York
633 Third Avenue, 10th Floor, New York, NY 10017

A Message From Our Leadership

As New York continues to recover from the pandemic, the role of Community Health Advocates (CHA) in a tumultuous health care ecosystem remains vital. CHA ensures New Yorkers' access to insurance and affordable health care, and that their rights are protected and upheld. This year, CHA provided essential services to consumers in every county and in every personal circumstance and type of coverage. New Yorkers access CHA services through various means – either locally through one of 27 community-based organization partners, or statewide through the CHA toll-free Helpline.

This past year, CHA deepened its advocacy to underserved Medicaid enrollees, who began receiving insurance notices with CHA's contact information for the first time. Since the beginning of the pandemic, the number of Medicaid beneficiaries increased by nearly 2 million—up to 9 million New Yorkers. Many Medicaid consumers come to CHA with complex health care needs and coverage issues, which require intensive support and advocacy services. As a result, 69 percent of denial cases CHA handled this year were for Medicaid enrollees—a 459 percent increase over the prior year.

Health care consumers are often stuck between providers and insurance companies—whether that insurance is public or private. CHA consumers are confused about plan rules and costs. Fortunately, CHA Advocates understand that the health care system can impact consumers emotionally, physically and financially. **CHA fights to safeguard consumers' rights, dignity and health—empowering them with knowledge, support and hope.**

Since 2010, CHA has been designated as New York State's official health consumer assistance program. We work closely with the Legislature, the Department of Health and the Department of Financial Services to ensure that state policymakers are aware of systemic issues that impact consumers. **CHA is a health care sentinel that understands the health care landscape and the governing policies, regulations, and laws. We work closely with every player in the health care system to ensure that everyday New Yorkers everywhere get the solutions they need so they can focus on living their lives instead of overcoming obstacles to care.** For every consumer we serve, there are untold numbers who do not know help is available. We are committed to serving even more of our fellow New Yorkers with excellence and compassion in the year ahead.

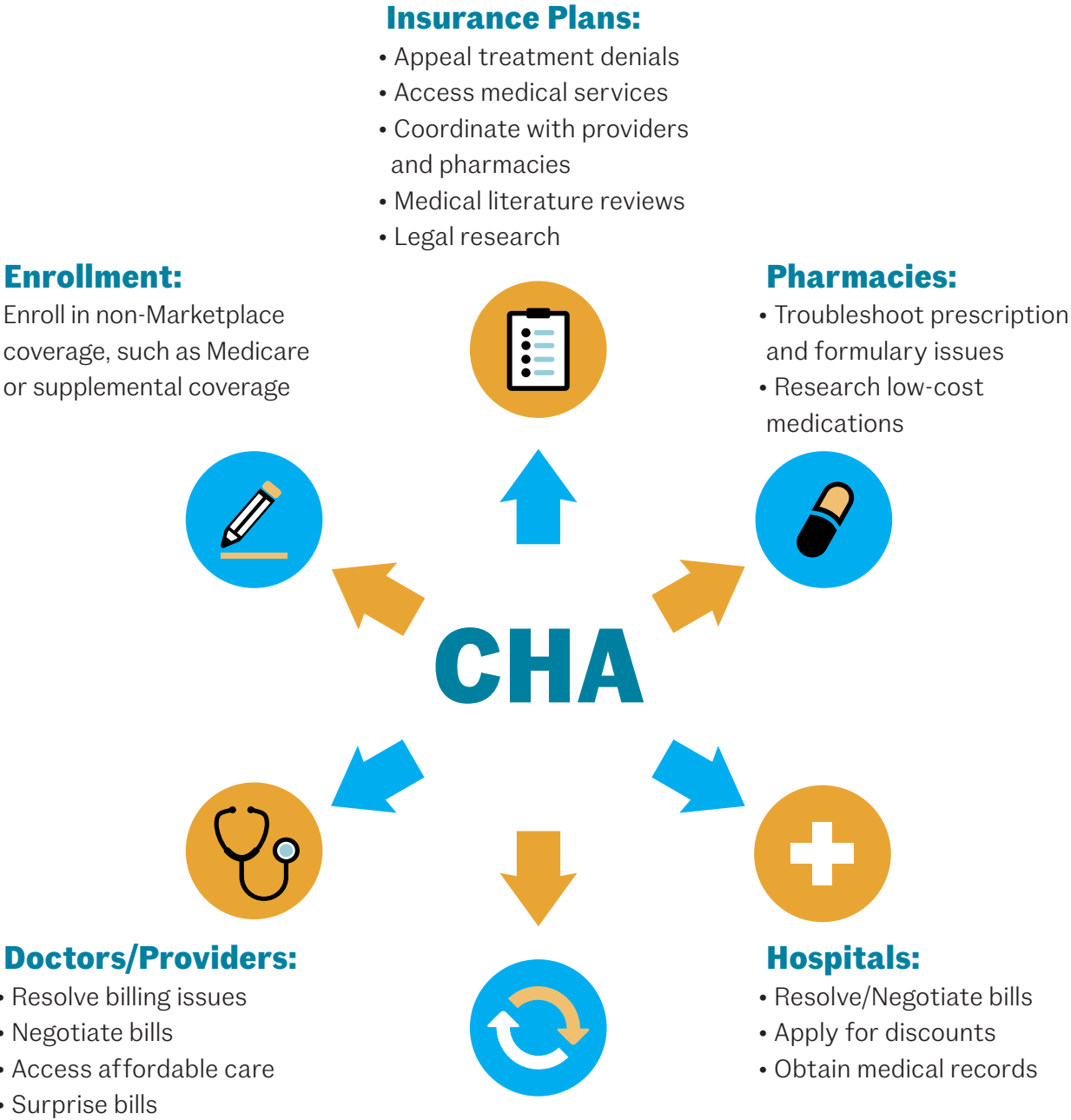


Elisabeth Ryden Benjamin
VICE PRESIDENT OF
HEALTH INITIATIVES



David R. Jones
PRESIDENT AND
CHIEF EXECUTIVE OFFICER

CHA Helps Patients Successfully Use Every Level of the Health Care System



CHA Helps Consumers With Four Types of Problems

Understanding and Using Coverage



44%

Helping clients understand how to use their health plan by explaining their plan's rules for accessing care and their rights and responsibilities as enrollees

Getting Coverage



21%

Helping clients access or keep non-marketplace or supplemental coverage

Accessing Care



18%

Helping clients obtain adequate health services by requesting prior authorizations, disputing coverage denials, troubleshooting prescription issues, and much more

Cost of Care/Medical Debt/Billing



14%

Helping clients resolve medical billing and debt issues and applying for hospital and prescription financial assistance programs

CHA Helps Patients Successfully Use Every Level of the Health Care System

In FY2023, CHA was able to secure a 573% Return on Government Investment for New Yorkers health care costs.

FY2023	
Program Cost	\$5.234 million
Cases	36,183
CHA Savings	\$35 million
Cost per Case	\$144
Return on Investment (ROI)	573% (29.8 million)

In 2010, CHA was designated as New York State's health insurance consumer assistance program. Since then, CHA has handled 485,234 cases for consumers and small businesses, helping them obtain health care services, understand their health insurance, resolve medical bills and make health insurance work for them.

	Since 2010	FY2023
Number of cases handled across the state	485,234	36,183
Number of calls received through CHA's central live-answer toll-free Helpline	69,605	6,827
Dollars saved for CHA consumers in health care and insurance costs	\$174 million	\$35 million
Number of small businesses helped	38,872	212

CHA's Sentinel Function Helped New York Identify Growing Medical Debt Problems

CHA acts as a health care sentinel—informing policymakers about the obstacles consumers are encountering as they try to access health care, pay for care, and appeal insurance denials. Advocates spot trending problems in the health care system by analyzing cases initiated by our local partners and the CHA Helpline. In FY 2023, CHA tracked over 70 specific sentinel issues, identifying 13 new sentinel issues. The emerging medical debt crisis is an example of this sentinel function.

In 2019, the CHA team noticed a 64 percent spike in clients reporting issues with medical debt in the database over the prior year. CHA Advocates determined that clients were increasingly burdened with medical debt, identifying that increasingly aggressive collection tactics were being deployed by medical providers, such as lawsuits, facility fees and a failure of hospitals to offer hospital financial assistance.

These observations were shared with the CSS Health Policy team that researched medical debt lawsuits filed by hospitals around the state and published the *Discharged into Debt* reports.

Since CHA first identified medical debt as a growing problem, New York has passed a series of laws that provide additional consumer protections against medical debt: reducing the statute of limitations from six years to three (2020); closing a loophole in the surprise medical bill law (2020); reducing the interest rate on medical debt from 9 percent to 2 percent (2021); regulating facility fees (2022); prohibiting hospitals from placing liens on

patient homes or garnishing their wages (2022); requiring all hospitals to use a uniform financial assistance application (2023); and preventing reporting of medical debt on credit reports (2023).

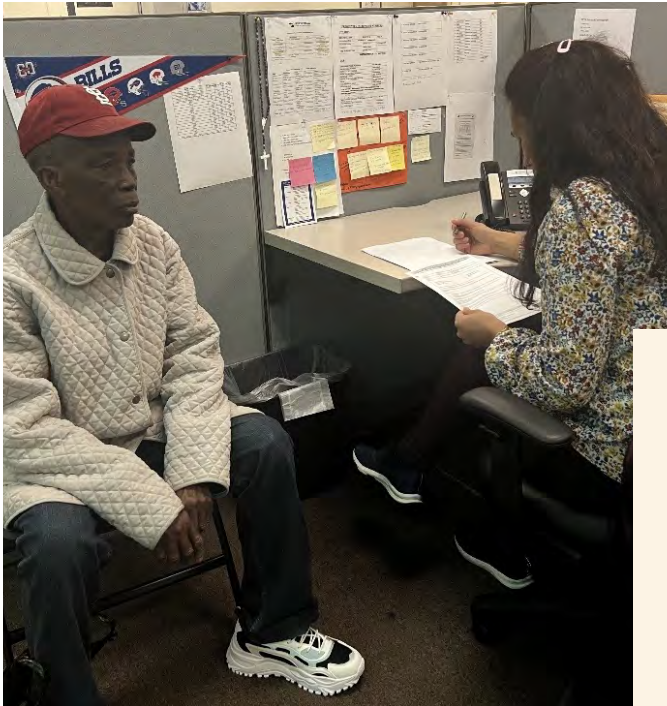
CHA Advocates across the state conduct public education sessions to let consumers know about these new protections. The CHA team continues to monitor medical debt caseloads, as well as identifying new trends in consumer access to health care.



Governor Hochul signs the Fair Medical Debt Reporting Act into law—another major win for consumers.

CHA builds capacity in local communities

Spotlight on CHA Partners



Jericho Road Community Health Center

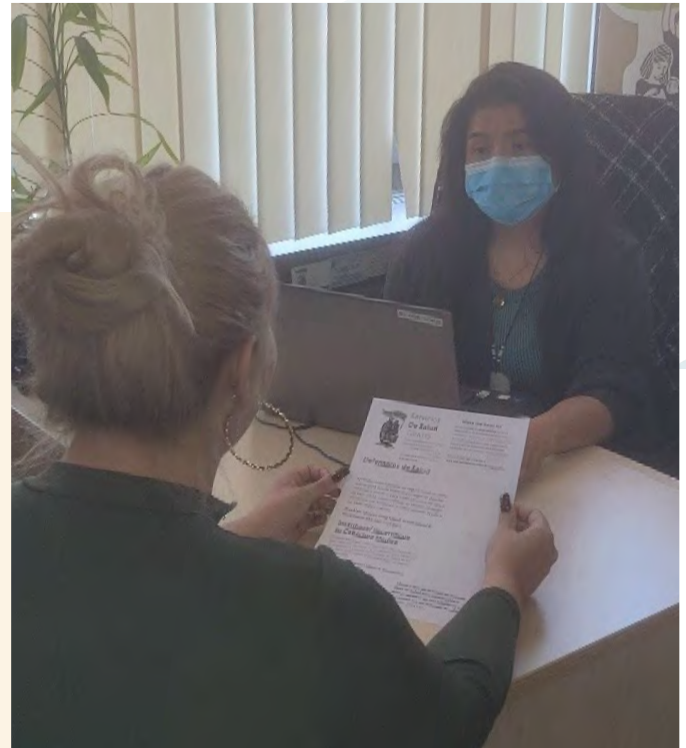
“Jericho Road Community Health Center provides non-traditional case management for refugees and immigrants, in addition to clinical services, who now call Buffalo home. Thanks to the generous support of CHA, we are able to continue to assist clients with navigating complex medical insurance and Medicaid systems, including negotiating bills, filling out medical forms, scheduling appointments, and so much more. We are so grateful to be able to partner with CHA and provide these essential services to help our newest neighbors adjust to living in the United States.”

Anna Ireland
CHIEF PROGRAM OFFICER
JERICHO ROAD COMMUNITY HEALTH CENTER

Make the Road New York

“Make the Road NY is dedicated to serving immigrant and working-class communities throughout five community centers located in Brooklyn, Queens, Staten Island, Long Island, and Westchester. Our organization plays a crucial role in assisting hundreds of individuals each year in navigating the complex health care system in New York and facilitating their access to necessary care. Many of our clients require support in comprehending notices that are not in their primary language, applying for hospital financial assistance to alleviate the burden of expensive medical bills, and connecting with free or low-cost services due to lack of access to health insurance coverage. We prioritize providing education on language access and empowering our clients to advocate for their health care needs. Through our CHA program, we actively address the health inequities experienced by marginalized communities, ensuring they have access to the essential health services they deserve.”

Arline Cruz Escobar
DIRECTOR OF HEALTH PROGRAMS
MAKE THE ROAD NEW YORK



Community Health Advocates

Cases by County 2010-2023

Total Number of Cases: 485,234



"My biggest worry was that these late bills would go against our credit, and that we would go without insurance. Without CHA, some people would just get frustrated and pay the bill."

– Mindy J.
Yates County

"I was in severe pain from a tooth ache, and no one would take me as a new patient and my old dentist went out of business during the pandemic. My Advocate got me in to a dentist in just a few days."

– Megan Y.
Steuben County

"My Advocate was excellent. He always followed through with his work and on time too! If not for your service, I would still be said to owe money that I didn't owe. Thank you!"

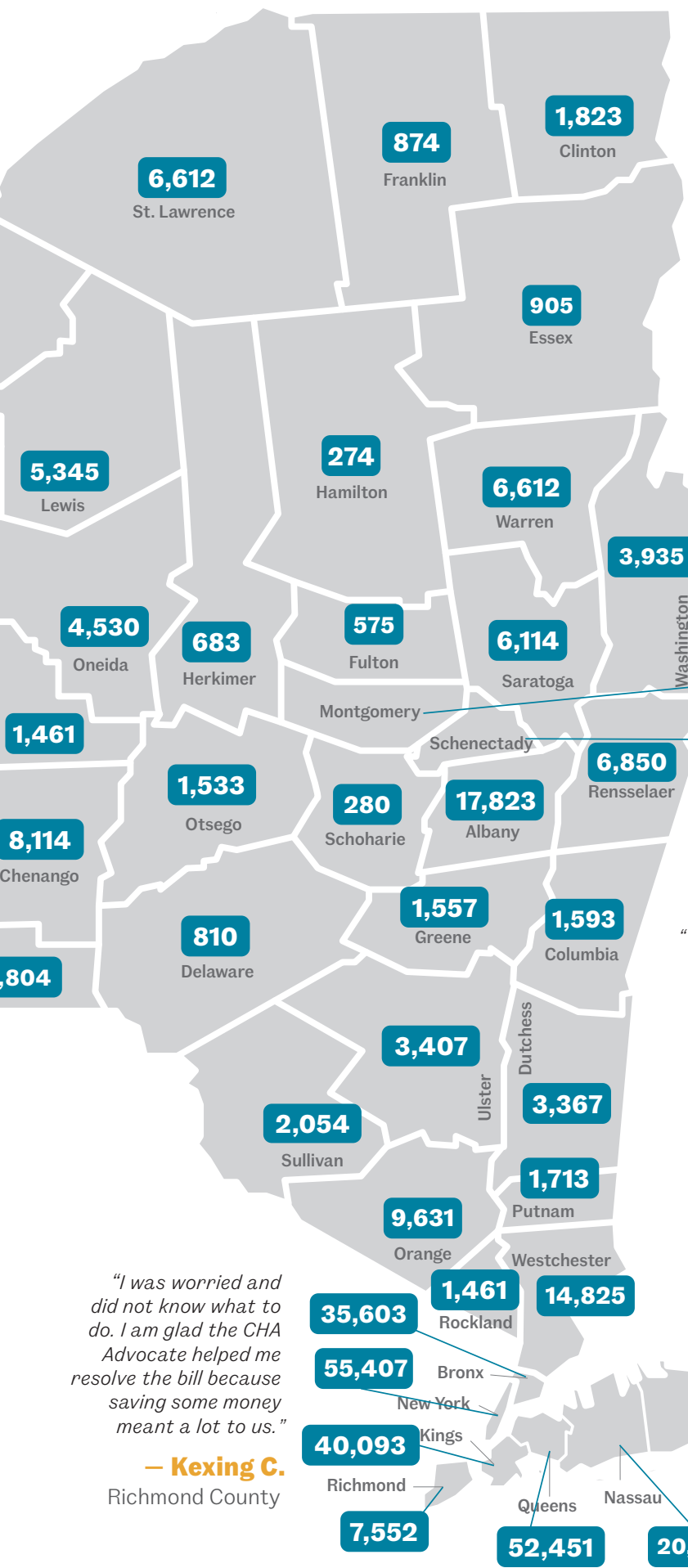
– Bryleigh A.
Chemung County

"I was frustrated by all the Medicare choices. My CHA Advocate made it easy to decide which insurance plan to pick."

– James M.
Ontario County

"What a Godsend! I didn't know there were programs that could help cover the cost of my medical bills and help pay for Medicare. I am truly grateful."

– JoAnn B.
Tompkins County



"I was worried and did not know what to do. I am glad the CHA Advocate helped me resolve the bill because saving some money meant a lot to us."

— Kexing C.
Richmond County

"From the moment we were in touch with the CHA staff we were overwhelmed with gratitude and put at ease by how professionally and willingly they assisted us."

— Chaya S.
Rockland County

"It is becoming scary lately dealing with all of these changes due to retirement and turning 65; we are both very appreciative of our CHA Advocate and her assistance."

— Marian O.
Saratoga County

"Knowing that I do not have to worry about how I am going to afford the cost of my testing and treatment has taken a great weight off my shoulders, allowing me to focus on my treatment and the healing process."

— Carole D.
Warren County

"Many people have tried to help me; they were never able to do anything. With the help of my CHA Advocate, my children's health insurance problem was corrected. Thank you."

— Maria O.
Ulster County

"My CHA Advocate is a rock star! My stress level reduced significantly just because she was there."

— Lori R.
Jefferson County

"We could not have done it without someone to walk us through the process and be there for us. Thank you for helping."

— Josephine Y.
Westchester County

"I wish words could express what this organization did for me and what it meant to me, but unless you are in that position, alone, helpless and trapped with no one listening to you and you are blocked from getting the treatment you need, you may never understand...I feel so lucky to have had them help me through this hard time. CHA is truly an incredible organization."

— Jacky B.
Queens County

"I see doctors frequently and take expensive medications. I felt very nervous about the possibility of losing my Medicaid even by mistake. Thanks to CHA for helping me. I now have peace of mind."

— Monet H.
Kings County

1-888-614-5400

Live Help When It's Needed Most

The CHA Helpline is a vital resource for all New Yorkers, helping consumers use their health insurance, dispute insurance denials, and address billing issues. It also helps uninsured consumers gain access to affordable care. In the 2022-2023 contract year, **the CHA Helpline answered 6,827 calls and handled 21 percent of CHA's cases overall**—an increase of 7 percent. Additionally, The CHA Helpline has seen a 102 percent increase in Medicaid cases over the previous fiscal year.

CHA Helpline callers often:

- Feel overwhelmed and are worried, frustrated, angry and confused about their situations
- Have already been “passed around” to different agencies and insurance company departments
- Call for one reason, and intake reveals additional areas where CHA can help

The CHA Helpline is answered by highly trained volunteers and staff. Many consumers try to resolve issues on their own, but report having an Advocate on the line gives them a greater chance to be treated fairly by their health plans.

A Day in the Life of the Helpline



A consumer had cataract surgery on one eye and her insurance plan denied coverage for surgery on the second eye. A CHA Helpline Counselor conferenced the consumer with her plan where they received a series of reasons why the second surgery would not be covered. Requests to escalate the call resulted in the plan representative hanging up on the consumer. However, the next day, the plan contacted the consumer to assure her the second eye surgery would be covered in full.



When a senior living in a nursing facility did not receive her monthly supply of adult diapers, she called the CHA Helpline. A Helpline Counselor connected the consumer with the nursing home management, her long-term care insurance plan, and the product supplier to arrange for resumption of services. The consumer was very grateful, as she felt completely vulnerable and “less than human” without the ability to stay clean.



A concerned mother called the CHA Helpline for assistance when her plan denied coverage—and subsequent appeals—of a medication to treat her son's autoimmune disorder. The specialty pharmacy pointed to the provider and the provider pointed to the specialty pharmacy. Ultimately, the provider re-submitted paperwork, which was approved, saving the family over \$5,000 a month for the next year.



A consumer paid \$1,800 in installments for part of her dental services and wondered if she was overcharged. A CHA Helpline Counselor explained to the consumer how to communicate with her dental plan. She discovered not only were the charges considered excessive by the plan, but the services would have been covered and she should not have paid anything. In fact, the dentist never submitted any claims for the work. CHA helped arrange for reimbursement of the \$1,800 and for the consumer to see another dentist to finish her care plan.

Ginny Murphy

When Ginny started volunteering on the CHA Helpline in 2013, she could not have imagined she would be helping New Yorkers for the next 10 years (and still going strong)! She learned about CHA from a COBRA form she received when she changed jobs. She called to inquire and attended a volunteer training session the very next week. Since then, she has learned the nooks and crannies of health care—from the birth of the Affordable Care Act to the latest changes in Medicaid eligibility.

Ginny learned that the coverage side of health care was just as incomprehensible as the medical side can be when she supported family members through lengthy illnesses some time ago. As a retired contract lawyer and compliance officer, she was no stranger to complexity. So, while health care is “more complicated than it needs to be,” she finds helping people when they are least equipped to deal with these obstacles intellectually and emotionally rewarding.

Ginny appreciates the comprehensive and frequent training at CHA, the support and skilled guidance of supervisors; the ability to connect consumers with other resources (e.g., for housing or other government benefits); and the CHA team of staff and volunteers—many of whom have become personal friends. Ginny is so dedicated to



service that she also volunteers at one of CHA's Specialist agencies, Medicare Rights Center.

Ginny has found the bitter and the sweet in volunteering on the Helpline: “Default denials make my blood boil. So few people know that help is available for them to appeal—or that they even should appeal. They often do not know their rights and are intimidated by the process. On the other hand, it is very rewarding to help young people who are trying to care for their elderly relatives. They are trying so hard to do right by them, out of pure love. When I can help them, that feels wonderful.”



Understanding and Using Coverage

CHA Advocates help consumers understand how to use their coverage—whether public or private. CHA helps consumers resolve problems and maximize their benefits. Common issues that consumers need help with include understanding a notice they received from their plan, getting an insurance card or finding an in-network provider. CHA Advocates explain confusing terms like formulary, the difference between premiums, deductibles and co-pays, and explanation of benefits.

In the last contract year, CHA Advocates helped consumers understand how to use their health insurance in 44 percent of all CHA cases. Of these:

- 80 percent of consumers needed general information to understand how their health insurance worked
- 18 percent needed help understanding a notice they received, including Medicaid renewal notices, marketing materials for Medicare Advantage Plans, Explanation of Benefits and denial and appeal decision notices

Jarian M. **New York County**

Jarian was in her early twenties and on her own for the first time. Having grown up in foster care, she was proud to land a job at a local business and get her own apartment, but she needed help navigating the health care system, which felt daunting. Her former foster care worker referred her to CHA.

A CHA Advocate helped Jarian in many ways – making phone calls to providers and to agencies, looking up physicians, helping schedule appointments, updating records. The Advocate carefully guided Jarian through every step of the process so that she would know what to do for her health care needs in the future and would become more independent. For example, he helped her find a primary care physician (PCP) and a pharmacy that accepted her insurance, and he helped her update her address where it needed to be updated. By the time they were done working together, Jarian had an appointment for a first-time visit with her new PCP. Learning the health care ropes will help her avoid common pitfalls of the newly insured.



“ CHA helped me do what I needed to do. Without my Advocate, nothing was easy or pleasant. Afterwards, it took less time and there was less stress and anxiety. I am grateful”

–Jarian

Howard L. Kings County

Howard came from Jamaica to New York on a student visa. After graduating from college, he was hired by the United Nations (U.N.) and worked there for 37 years, becoming a U.S. citizen and making a life in New York City. The U.N. provided health insurance and, when Howard retired at age 60, he kept this coverage.

When Howard turned 65, he visited his local Social Security Administration (SSA) office and was told that as an international worker, he did not qualify for Medicare. He did not apply and continued using his U.N. health insurance. Eventually, he qualified for Medicare Part A through his wife.

Nearly 15 years later, just shy of his 80th birthday, his insurance plan let him know that he should have been enrolled in Medicare Part B long ago. Howard's providers, too, told him he needed Part B to be seen. Unfortunately, he incurred a Part B late enrollment penalty of \$222 per month—\$2,664 a year—for the rest of his life, which he could not afford.

Howard's family contacted a CHA Advocate at the Community Service Society. The Advocate appealed to SSA for Equitable Relief, a mechanism through which late enrollment penalties can be waived when a consumer is misinformed by a government entity. SSA agreed



“

Thank you to CHA for helping get the Medicare Part B late enrollment penalty removed from my Medicare file. I will recommend CHA to my friends and family.”

—Howard

that Howard should not have been told he did not qualify for Medicare and lifted the lifetime penalty.

Howard is very happy. Instead of worrying about money, he focuses on staying healthy, enjoying retirement and spending time with his grandchildren.

Joan M. Nassau County

Joan contacted CHA at a friend's suggestion because she had four medical bills totaling \$13,837 that she was unable to pay.

Joan's former employer had promised to keep her health insurance active for a specified time after she left her job. Unfortunately, the employer did not keep their word and the insurance was cancelled retroactively, shaving two months from her expected coverage. Meanwhile, Joan was getting necessary medical care under the belief she still had coverage. She also applied for Medicaid in anticipation of the promised end date for her old insurance but did not expect it to become active right away.

The bills trickled in. Joan tried to deal with them but got nowhere. After eight months of frustration, Joan finally called CHA.

Joan's CHA Advocate informed Joan that her Medicaid had actually started on the first day of the month in which she applied—therefore (drum roll) she was insured when she saw those medical providers, just not with the insurance she had expected. Joan and her CHA Advocate contacted each of the four providers, updating her insurance information so the bills could be processed correctly. After six months, and significant back and forth, Medicaid paid all the outstanding balances—a great relief as Joan did not have \$13,000 in her couch cushions. Joan is so happy to have these bills behind her—and is better educated about her insurance—and can now focus on staying healthy.



“

I am thankful that there is an organization like Community Health Advocates that I was able to call when I got blindsided by all those medical bills. My Advocate was patient, diligent, and persistent, contacting all the providers I owed to get the bills settled. He kept me updated throughout the entire process, reassuring me that I had CHA in my corner. Thank you, CHA.”

—Joan

Jorge D. Queens County

Like many elderly New Yorkers, Jorge did not understand how Medicare worked. He was enrolled in a Medicare Advantage Plan but did not know what benefits were included, how much he needed to pay out of pocket, or what his rights and responsibilities were. He was confused.

Jorge hoped that somebody at Emerald Isle Immigration Center would help sort things out for him, especially since his multiple health needs were resulting in all kinds of co-pays. He explained to a CHA Advocate that, due to his degenerative arthritis, he needed physical therapy and frequent medical attention.

The Advocate sat down with Jorge and explained how Medicare works, especially Jorge's specific plan. The Advocate broke down the basics so that Jorge would understand and feel more in control in the future. The Advocate also checked to see that Jorge's doctors were in the plan's network.

By the time they were done, Jorge understood his co-pay obligations. He decided to stay with his current plan, having concluded that it had more advantages than drawbacks.



“

I feel very relieved and grateful now that I understand how my medical plan works. I am very grateful for the assistance I received from my CHA Advocate.”

—Jorge



Getting Coverage

The right insurance coverage can make all the difference when a consumer needs care, but even the most sophisticated consumer can have trouble sorting options. CHA helps consumers who are not eligible for coverage through the New York State of Health Marketplace (NYSOH), and refers those who are eligible to Navigators. For consumers with coverage outside NYSOH, CHA can help them evaluate and select plans, switch plans, or keep their coverage if barriers arise. CHA can also help consumers seek additional (or secondary) coverage or subsidy programs to reduce their out-of-pocket costs.

CHA helped clients with questions about eligibility for non-NYSOH coverage options in 21 percent of cases.

- 44 percent of consumers were insured and needed additional coverage to help with cost-sharing
- 36 percent were insured and needed to renew existing coverage
- 20 percent of consumers were uninsured and needed primary health insurance.

CHA filed 2,935 Medicare Savings Program applications in FY23, a 40 percent increase.

Joseph C. Kings County

Joseph's local Medicaid office closed his account, so he tried to submit a new application in person. Joseph is 65 years old, retired and currently enrolled in a Medicare Dual Advantage plan; this administrative confusion was concerning because he would lose all of his extra benefits if his application was not approved. Because he is over 65, he had to fix the issue through the local office, instead of going through the New York State of Health Marketplace.

The Medicaid office was crowded, and it took hours for his number to be called. When his turn came, Joseph felt he was treated poorly, his questions remained unanswered, and he was no closer to resolving his issue. He left disappointed and frustrated. He made a few phone calls, and someone directed him to CHA.

The CHA Advocate at the Community Service Society of New York emailed Joseph a copy of the Medicaid application with a list of necessary supporting documents and went over the application line by line until it was completed. Joseph signed and dated the application, put together all his paperwork, and successfully submitted the package to his local Medicaid office.

With the administrative burden behind him, Joseph—very happy with the assistance he received from CHA—can enjoy more pleasant endeavors, including his love of walking dogs.



“

To say that my Advocate went above and beyond the call of duty is an understatement! He not only (literally) walked me through the Medicaid application line by line, but he also had many great ideas on how to present myself when visiting the Medicaid office, as well as many other suggestions that kept me calm and focused. Anyone who gets a helpful hand from my Advocate is truly blessed.”

—Joseph

Dorothy B.

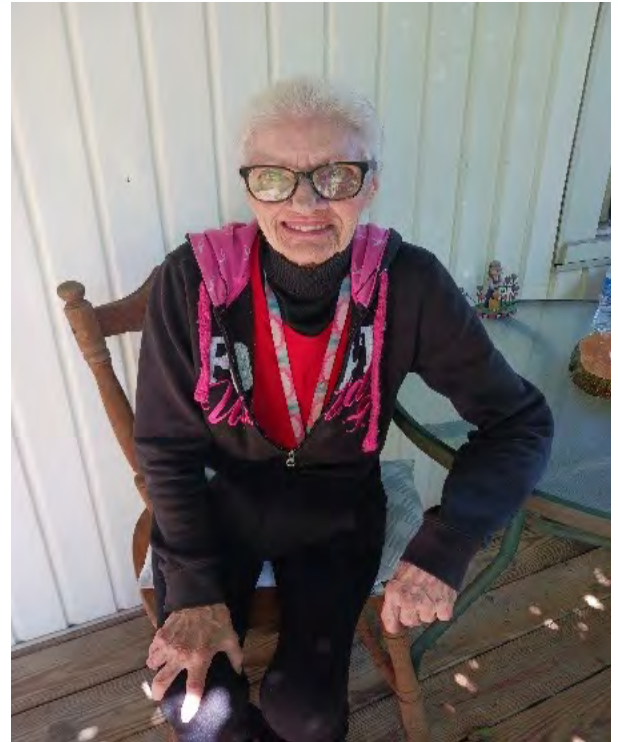
Chenango County

Dorothy, 83, was only enrolled in Medicare Part A, which covers hospital bills. The health care system where she is a patient has provided her with financial assistance for the doctor's bills that would have been covered by Medicare Part B. She could not afford the premiums for Part B or Part D, and her income was too high for her to qualify for help paying those premiums.

Without Medicare Part D, Dorothy relied on a patchwork system to access medications involving two different pharmacies (only one, eight miles from home, took GoodRx coupons) that her CHA Advocate helped her figure out. She also obtained another medication for free through the Chenango Health Network's (CHN) Rx assistance program.

The CHA Advocate at CHN worked with Dorothy for 10 years. When the income guidelines for the Medicare Savings Program increased, she contacted Dorothy to help her enroll in Medicare Parts B and D without penalty. Because Dorothy had never had an insurance card, her Advocate explained how to use it.

With Part D, Dorothy no longer relies on that patchwork system. She can walk to her local pharmacy to pick up a 90-day supply of all four of her medications – and pays just \$7.30, saving more than \$90 a month. As an added benefit, Dorothy has regained some independence since she no longer relies on others to drive her eight miles to another town for that medication.



My CHA Advocate has always been so helpful whenever I have a question about anything. I was surprised I could get real insurance that would not cost anything. I tell her all the time that I just love her.”

–Dorothy

Srinivasan K.

Queens County

Srinivasan immigrated to the United States from India many years ago and became an American citizen. He sponsored an immigration visa for his son, who came to the U.S. to study and settle down, too.

Srinivasan felt good about his life in Queens. But when his employer realized that Srinivasan had become eligible for Medicare because of his age, they told him his employer-sponsored health insurance would end. Perplexed and needing advice, Srinivasan turned to the South Asian Council for Social Services and spoke with a CHA Advocate.

CHA researched Srinivasan's records and learned that he had already applied for Medicare Part A and had been enrolled in it for years – he had simply forgotten. But he was not enrolled in Part B, and he needed to be. Otherwise, he would be responsible for all doctor and provider bills.

The CHA Advocate contacted the employer to get the necessary documentation for enrollment, and he explained the application process to Srinivasan. With the Advocate's guidance, Srinivasan applied for Part B coverage and was approved a short time later. CHA also helped him decide on a new plan. He enrolled in a Medicare Advantage plan, selecting a primary care physician from India. His employer insurance transferred seamlessly into the new plan, and there was no lapse in coverage.



“

I have not seen anyone so thorough in providing services, especially health insurance. You have made sure that I have continuous access to all medical services. And I know CHA is there to guide me whenever I need help with any of my health care.”

–Srinivasan

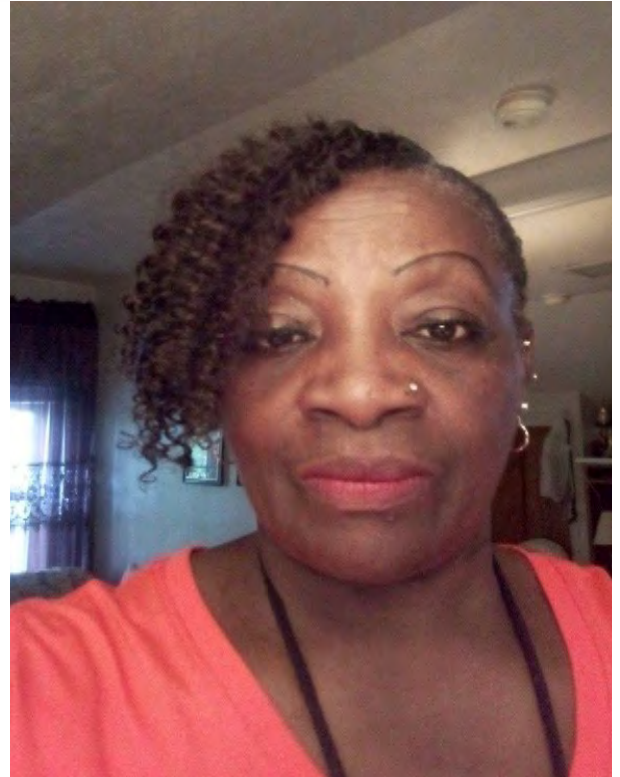
Dorothy L.

Queens County

Dorothy could not afford her insulin, so she simply went without—and her sugar levels climbed too high. Baffled, her provider contacted a CHA Advocate at Finger Lakes Community Health to find out why neither Medicare nor Medicaid would pay for her insulin.

A review of Dorothy’s coverage revealed she was, indeed, enrolled in Medicare Parts A and B – but not Part D, which covers prescriptions. Dorothy did not sign up for Part D when she turned 65 due to cost concerns—a common issue for many seniors. Her Advocate explained that without Part D, Medicaid will not cover prescriptions either. And the \$35 cap on insulin resulting from the Inflation Reduction Act would still have been too steep for Dorothy.

Dorothy’s Advocate told her that she could qualify for the Extra Help prescription savings program and a Special Enrollment Period that would eliminate any late enrollment penalties. The Advocate researched Dorothy’s medications and various plan options. With luck on her side, Dorothy enrolled in her plan of choice on the last day of the month and her coverage became active the very next day. The CHA Advocate helped Dorothy notify her doctors of this change, ensuring office visits and prescriptions would be processed correctly and she could obtain her insulin, at no cost, without further delay.



“

You have helped me move forward without the hassle and stress of not having money for my medications.”

– Dorothy

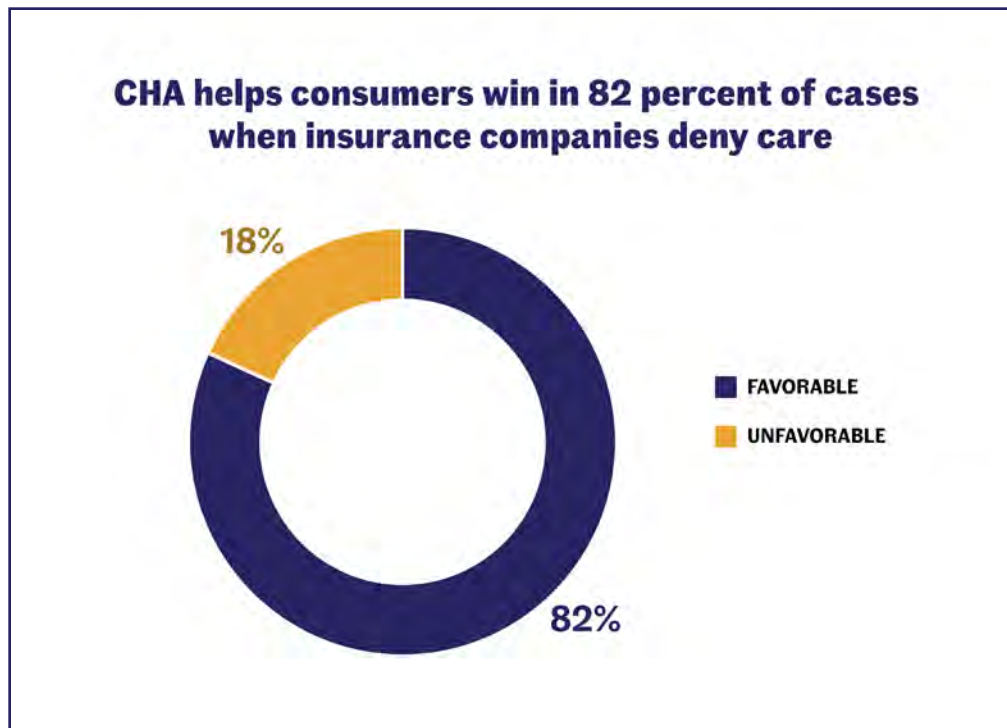


Accessing Care

Sometimes having coverage is not enough. Consumers face myriad barriers to actually getting the care they need, from confusing formularies to inaccurate provider directories to insurance denials. CHA Advocates help clients work through these barriers and also help uninsured and underinsured patients find care they can afford. Eighteen percent of all CHA cases handled were for consumers who needed help accessing care.

Specifically, CHA consumers needed help accessing care:

- From a doctor in 37 percent of cases
- Preventative care in 17 percent of cases
- Oral health care in 16 percent of cases
- Diagnostic tests, including lab or imaging services in 7 percent of cases



Tatum A. **Onondaga County**

Losing one's job and health insurance is bad enough when healthy, but for Tatum, who is only 26 years old and has Type 1 diabetes, it was terrifying. Tatum relies on insulin and a glucose monitor to survive, and without insurance, her costs run over \$1,300 a month. She promptly applied for Marketplace insurance and enrolled in a plan, but it would take a month for the benefits to kick in. She couldn't do without her medications for a day—let alone a month—but she could not afford to pay on her own.

A CHA Advocate at ACR Health told Tatum about pharmacy savings cards and drug manufacturer savings programs, both of which can save people thousands of dollars. Tatum's lack of insurance that month meant that she had fewer options, but the Advocate was savvy and found a savings program that would cover most costs while she was uninsured. The Advocate also found a creative way to bring her costs down in the future: a manufacturer's savings program that discounts the costs for the glucose monitor and supplies.

Tatum is now insured and pays affordable co-pays for her insulin. She uses the manufacturer discounts to pay for supplies not covered by the insurance. Because of CHA, she not only has financial peace of mind but also the skills necessary to advocate for herself in the future.



“

As a Type 1 diabetic, insulin is not just a life-saving drug, but a medically necessary prescription. Without insurance it costs over \$1300, which I cannot afford. Thanks to this program, I am comfortable and taken care of when it comes to my health care needs.”

—Tatum

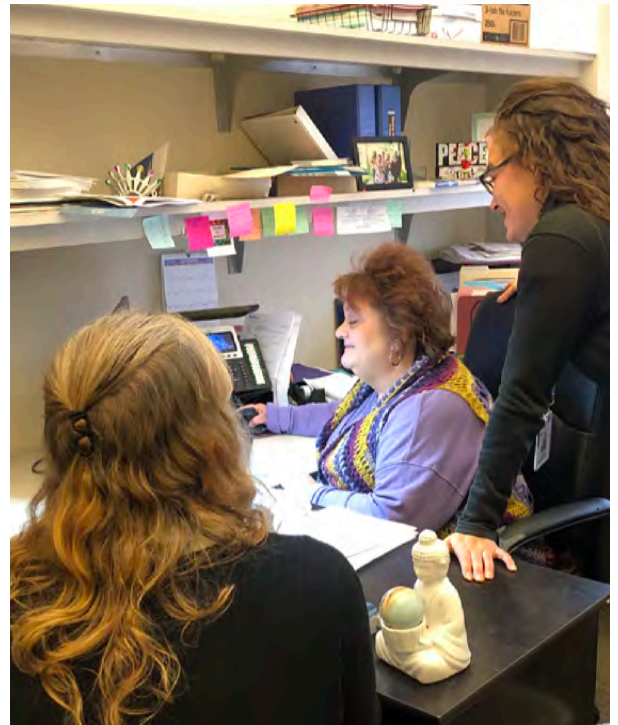
Ebony G. **Albany County**

When Ebony received an insurance notice that the root canal she already received would not be covered (despite prior authorization) she was upset. The dental crown denial just added insult to injury. How could she walk around with a missing tooth?

She met with a CHA Advocate at Healthy Capital District Improvement after months of frustrating and fruitless efforts to resolve the issue. The Advocate had Ebony sign her insurance company's Release of Information Authorization and started making calls. After a few weeks of unreturned calls and missed messages, the Advocate connected with the plan's Customer Service department and was instructed to have the client file a grievance for the denied root canal.

Ebony and the Advocate called the health plan to file the grievance but, speaking to a different representative, learned the root canal was billed incorrectly; the error was fixed so the dentist could be paid. Regarding the denial of the crown, they were told x-rays needed to be submitted with the claim. As is often the case, what is on file does not always reflect reality—Ebony confirmed the dentist had submitted the x-rays three times already. The plan claimed they were never received.

The Advocate arranged for the dentist to resubmit Ebony's x-rays and to be on the phone with a



CHA Advocates at HCDI are dedicated to helping consumers.

“

Thank you so much! I can't believe you actually got it approved. I didn't think it would ever happen. I will be calling you for everything now because you know how to get stuff done!”

—Ebony

plan representative at the time to ensure the x-rays were received. Ebony's dentist confirmed this successful transmission and confirmed her crown had been approved. When the Advocate informed Ebony that her issue was resolved, she was overjoyed.

Joseph R. Westchester County

Born with a rare condition that affects how his body and brain process glucose, Joseph and his family have spent over 30 years learning to manage his health. A new diagnosis of Type 2 diabetes added complexity to an already harrowing situation: If Joseph's glucose levels go too low, he might suffer convulsions; if they go too high, the negative impacts of diabetes take root.

A continuous glucose monitor (CGM) was prescribed to keep Joseph in the "safe zone" to manage both conditions successfully. Unfortunately, his health plan denied coverage. They found CHA's Helpline number on the Medicaid denial notice.

While this story ends well, the path to "yes" was not straightforward. His family paid nearly \$5,000 out of pocket for a year while a CHA Advocate worked with them to resolve the issue. Like the family, CHA also failed to reverse the plan's decision in both internal and external appeals. However, when New York changed the process for managing its prescription program, Joseph (and CHA) gained new hope for resolving the issue. With extensive guidance from CHA, Joseph's provider was able to submit a successful claim and the CGM was approved.

Joseph's family will save thousands of dollars each year. More importantly, Joseph's health will be managed with the best tools available to keep him safe.



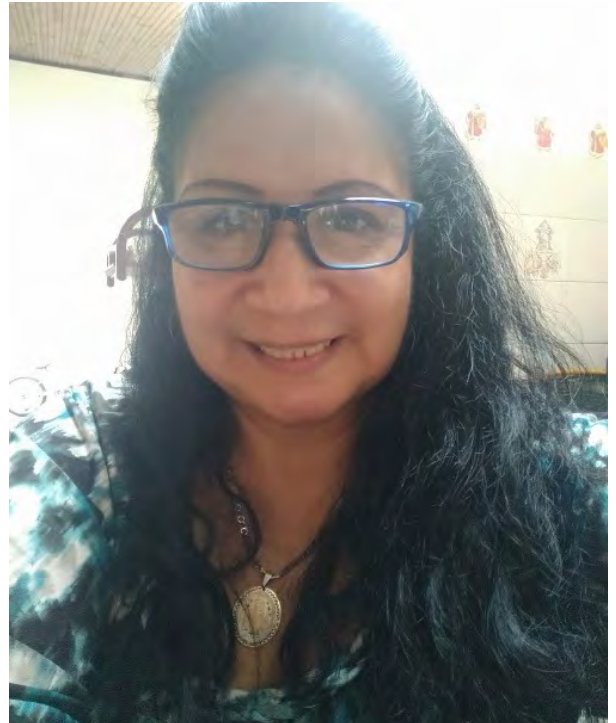
CHA has been such a lifeline. Our Advocate did extensive research on this rare disease, and her grasp on the disease—and on the difficulties our son faces every day—was truly inspiring to us. We are grateful to our Advocate and to CHA for the important work of helping vulnerable families.”

—Joseph's Mother

Anllely R. Suffolk County

Anllely is a divorced 56-year-old woman from Colombia. She qualifies only for Emergency Medicaid, which does not pay for regular doctor visits. However, she needed to see a urologist for bladder issues.

Anllely turned to Make the Road New York for help. Her CHA Advocate called a local clinic in her area and made an appointment with a primary care physician (PCP) for just a few days later. The Advocate told Anllely that seeing the PCP would not cost much and that the PCP would be able to refer her to a urologist in the same clinic system, who would also charge reasonable fees to the uninsured. Anllely was relieved and happy to know that she would soon get the medical attention she needed.



“

I always have health issues and I've been suffering from problems with my bladder for a long time.

I haven't seen a primary care doctor for a long time. I feel relief that there is a community clinic where I can see different doctors, but I would prefer to have full coverage health insurance.”

—Anllely

Michael J. Madison County

Michael, a 16-year-old boy, needed oral Xeljanz to treat his severe alopecia areata (AA). While not FDA-approved for this use, oral Xeljanz is often used off-label for this purpose and had been working well for Michael for three years. When Michael's health plan denied it as experimental/investigational, Michael's mother contacted CHA for help.

Michael told his mother that he felt like a ghost because people often tried to avoid looking at him. Michael had a difficult time at school because of his AA and often was late or missed school entirely. Michael's peers were mean to him about his appearance, so his parents would try each morning to help Michael style his hair in a way that best hid the large patches of baldness. Alopecia was scary to Michael and his brothers. And, without his curly hair, Michael felt he had no resemblance to his family, adding to his distress.

CHA set about proving that Michael met the standard for coverage of an experimental/investigational treatment, including: (1) obtaining the required letter of support and complete medical records from his doctor; (2) conducting medical research; and (3) drafting an appeal describing all the standard treatments that had failed to treat his AA and the adverse physical and mental effects on Michael and his family before oral Xeljanz helped him.



We asked our Advocate to help us fight the insurance company for a medication that changed our son's life. We were so grateful when we found out that CHA did win our case! They were amazing about building an informative case for why he needed this medicine."

—Michael's Mother

Michael's denial was overturned on appeal. Michael's hair has grown back and he feels like himself again, without his parents having to pay \$60,000 a year.

Faith K. Oneida County

Faith, who is 52 years old, has struggled with obesity for most of her adult life. She has high blood pressure, high cholesterol, and an extensive family history on both sides of obesity, diabetes, heart failure and strokes. Before trying prescription medication weight loss therapy, Faith weighed 329 pounds and had a BMI of 50.3. She tried numerous diets—all unsuccessful.

Faith was prescribed a daily injectable prescription weight loss medication and began shedding pounds. Later, she switched to Wegovy, a similar medication requiring only weekly injections. She continued losing weight and her health improved.

Then, her commercial plan stopped paying, citing a twelve-month lifetime limit for the class of medications. Faith appealed twice and lost. She paid for a generic treatment out of pocket at a cost of up to \$300 a month. Under New York Insurance Law, she had one remaining chance to reverse the plan's decision: an external appeal. Faith called the CHA Helpline and her case was transferred to a team of experts.

Her CSS CHA Advocates gathered information to make a strong case for Faith, including medical records, a letter of medical necessity from her provider, and extensive peer-reviewed medical literature. The human side of Faith's situation was explored as well: her weight was causing chronic and severe pain, interference with activities



CHA legal interns helped Faith win access to her medication.

“My experience with CHA was easy, simple and very professional. I am very excited that I won my appeal. This is a game changer for my health and it also saves me a lot of money. I am so grateful and blessed that I found this program.”

—Faith

of daily living, discrimination, bullying and depression.

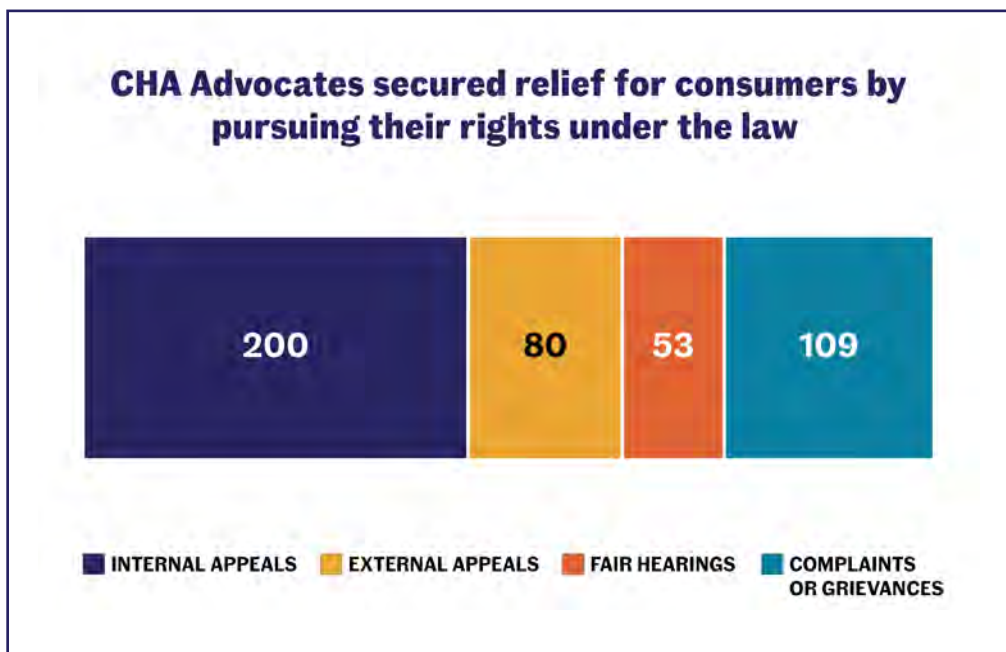
CHA Advocates wrote and filed an external appeal and affidavit on Faith's behalf. The independent doctor agreed with CHA and overturned the denial: the plan would pay for this medication.



Cost of Care/Medical Debt/Billing

Even consumers with insurance can find themselves with mounting bills. Private coverage often comes with deductibles and co-pays. Insured consumers can receive surprise out-of-network or balance bills. And consumers who do not have insurance may rack up unpayable bills for emergency care. CHA Advocates help consumers sort through stacks of bills to figure out what they owe. When an insurer has made a mistake, CHA helps the consumer appeal the mistaken decision. And CHA helps consumers negotiate with providers to bring down bills they cannot pay.

- CHA Advocates were able to secure favorable outcomes in 93 percent of cases where consumers needed help affording the cost of care.
- CHA Advocates saved consumers \$8.9 million when helping them address the cost of care.



Kylo S. **Monroe County**

Kalyssa, Kylo's mom, was working with an organization to improve her credit rating when she discovered an unpaid ambulance bill of \$3,307 in her 2022 credit report. Two years earlier, an ambulance had taken baby Kylo to a local hospital for emergency medical treatment. Kylo's Medicaid Managed Care plan had paid for the medical and hospital bills, so Kalyssa thought everything was settled. Now, she learned that the ambulance company's billing department had submitted the wrong enrollee number with the claim, resulting in the plan denying coverage.

Kalyssa tried to correct the insurance number, but the ambulance billing department continued using the incorrect number, and the insurance plan continued denying payment. With limited income, Kalyssa could not afford to pay the bill, so she turned to several organizations for help. Nothing worked and the case was turned over to a collection agency.

Kalyssa connected with a CHA Advocate from Legal Assistance of Western New York through a referral from a sister agency. She was desperate at this point, but her CHA Advocate was familiar with Medicaid rules prohibiting billing beneficiaries or sending them to a collection agency. The Advocate contacted the head of the ambulance company, citing these rules. The ambulance company promptly wrote off the bill and withdrew it from collections. Because Kalyssa's credit



This was a great relief. It took me two years to find someone who could eliminate the \$3,307 bill, remove it from collections and fix the damage to my credit rating.”

-Kalyssa

score had been harmed by this ordeal, the CHA Advocate arranged for the ambulance company to provide a letter explaining that Kalyssa was in no way responsible for the bill or the collections error.

Kalyssa expressed gratitude to CHA for finding and correcting the damage caused by the billing errors.

Ceneida G.

Bronx County

Ceneida is a 72-year-old woman from the Dominican Republic whose comprehensive Medicare benefits normally cover her medical bills. But last year something went wrong.

Ceneida underwent surgery at an ambulatory surgery center, expecting insurance to pay for her care. A full year later, she received a bill for \$16,000. Ceneida was shocked. She turned to Urban Health Plan and was directed to a CHA Advocate who helped untangle the mess. For some reason the surgery center did not have Ceneida's insurance information. Just after the surgery, Ceneida moved from Westchester to the Bronx and the bills had gotten lost in the mail. By the time the surgery center tracked her down, the bill was in collection.

The collector offered to settle this debt for \$547, but Ceneida could not afford to pay even that. Her CHA Advocate called the collector and explained Ceneida's situation and provided proof of coverage at the time of the surgery. The representative confirmed that Ceneida could disregard the bill and she did not have to pay anything. Ceneida was hugely relieved and grateful.



“

I was very worried when I received the bill because I could not afford that payment. After CHA spoke with the debt collector and told me that I could disregard the bill, I was so happy and relieved. I am very thankful for this service because I was not sure what to do.”

—**Ceneida**

Fadea D.

Erie County

While visiting her sister in upstate New York several years ago, Fadea decided to stay in the U.S. and seek asylum from her native Iraq. Back home, her brother's family was being threatened because he was working with the U.S. Army, and Fadea felt unsafe going back.

At first, she couldn't get health insurance, aside from Emergency Medicaid. This was concerning because Fadea had serious medical issues. She turned to the Jericho Road Community Health Center (JRCHC) when she learned that she needed surgery. She told them she didn't know how to pay her current and future medical bills.

The CHA Advocate at JRCHC spoke Arabic – a huge relief to Fadea, who did not speak English. The Advocate helped Fadea schedule her medical appointments and provided interpreting services on the day of surgery. Also, the Advocate helped her apply for financial aid to cover the \$2,300 medical debt she had already accumulated. Thanks in large part to CHA's advocacy, the providers gave Fadea a 100 percent retroactive discount and dismissed the remaining bills. CHA helped Fadea pay for her medications with the help of a discount card that paid 70 percent of the cost. As a result, she paid only \$10 for each medication.

After nearly eight months, Fadea obtained a Social Security number, became eligible for



I'm very thankful for the support I have received through the years from CHA and its staff, from reduced bills to sending an interpreter with me on my surgery day."

– Fadea

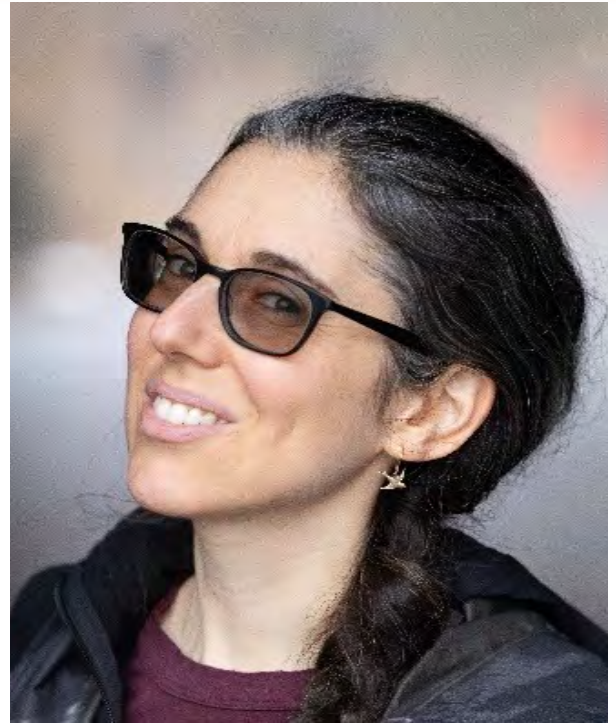
work, and enrolled in the Essential Plan, a comprehensive health insurance option for qualifying immigrants that provides much better care and coverage than Emergency Medicaid. Now, she is waiting for her asylum interview, but her medical condition is stable and she is taking English classes at night to improve her language skills.

Sierra S. Kings County

Sierra is a writer and voice-over actor. She was charged for two mammograms – her regular screening mammogram and a follow-up mammogram required due to dense breast tissue. She should not have been asked to pay for either because New York State law prohibits cost-sharing for annual screening or follow-up exams for members over 40.

Sierra’s Assemblywoman’s office told her about CHA. CHA helped Sierra put together a forceful appeal to her insurance plan, but the plan did not respond within the required timeframe.

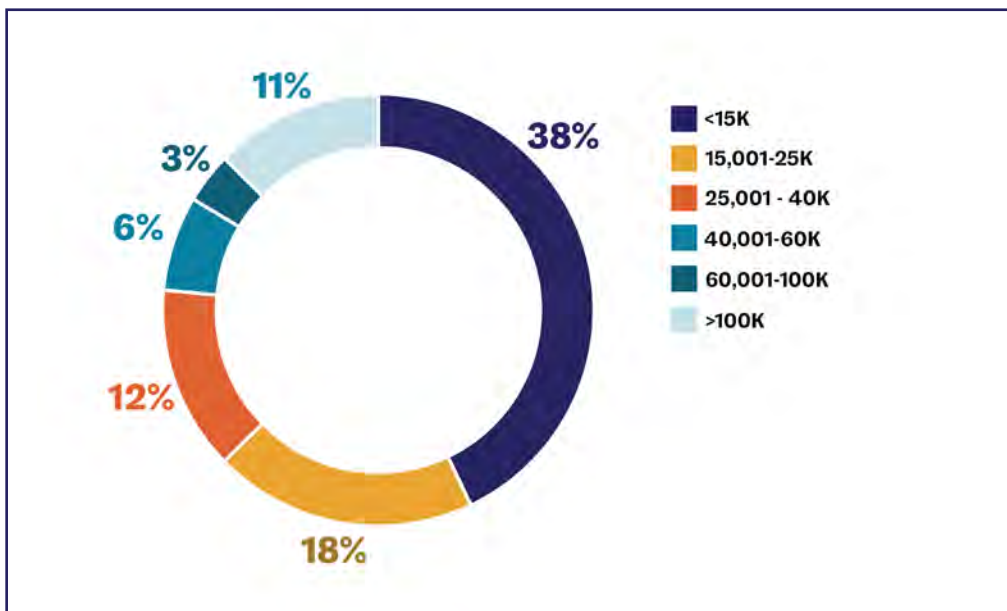
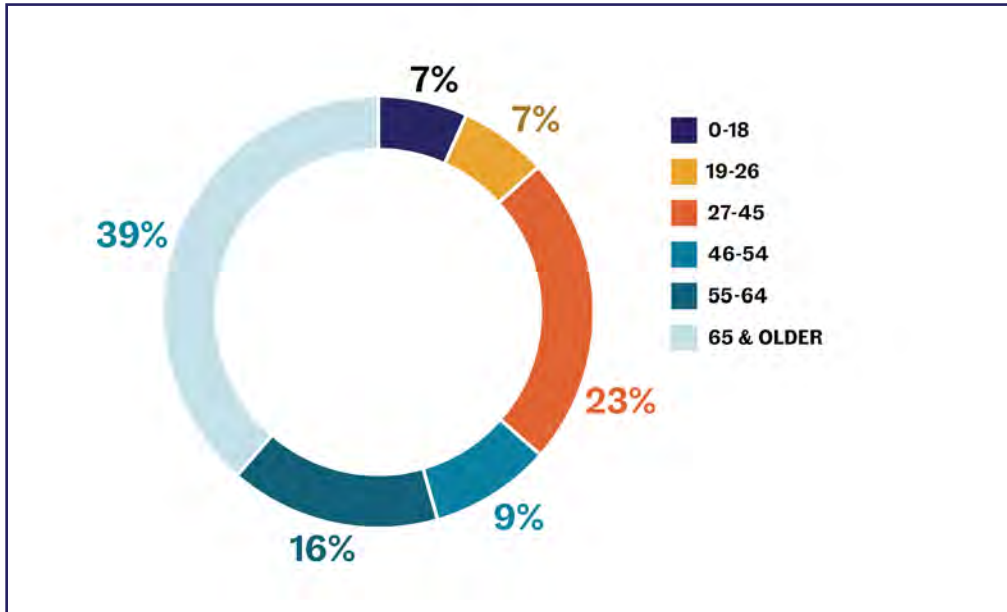
The CHA Advocate then helped Sierra file a formal complaint with New York State’s Department of Financial Services (DFS). DFS agreed with CHA and Sierra – she was entitled to receive both the annual screening and follow-up mammograms at no cost. And, the lateness of the plan’s response resulted in automatic approval of Sierra’s claim, which was paid in full by her insurance plan.

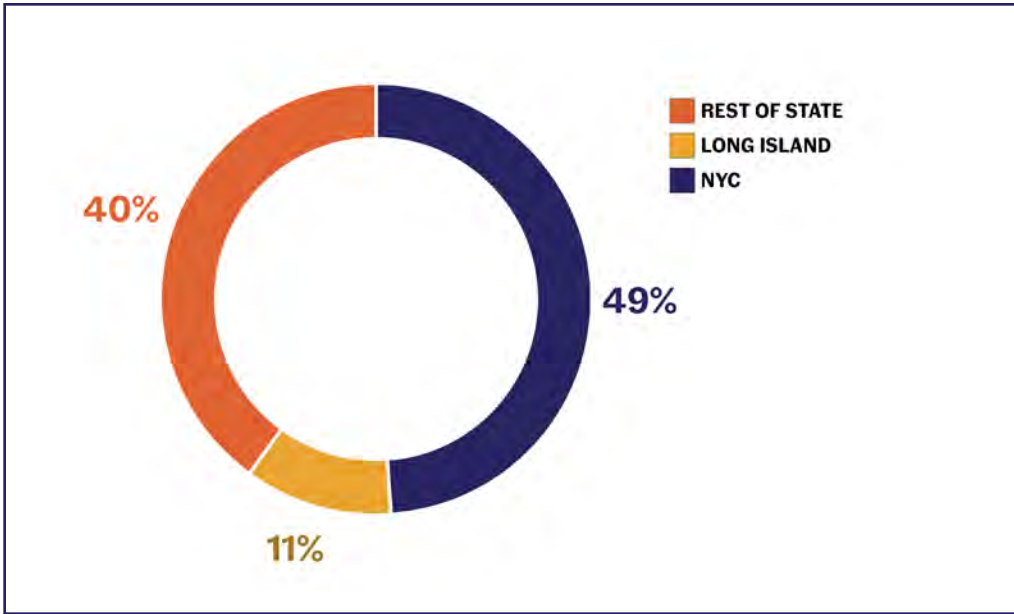
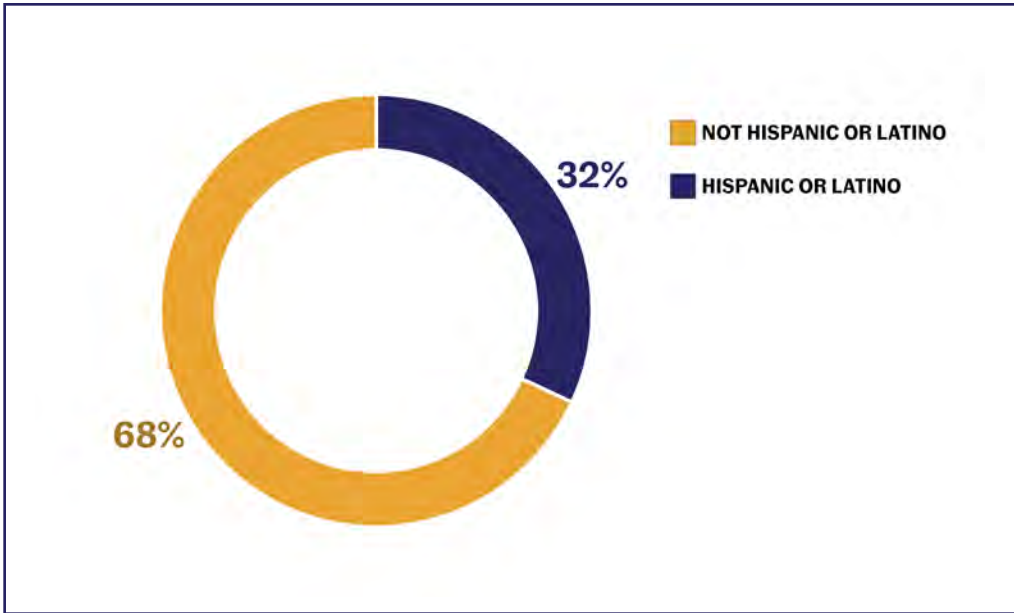
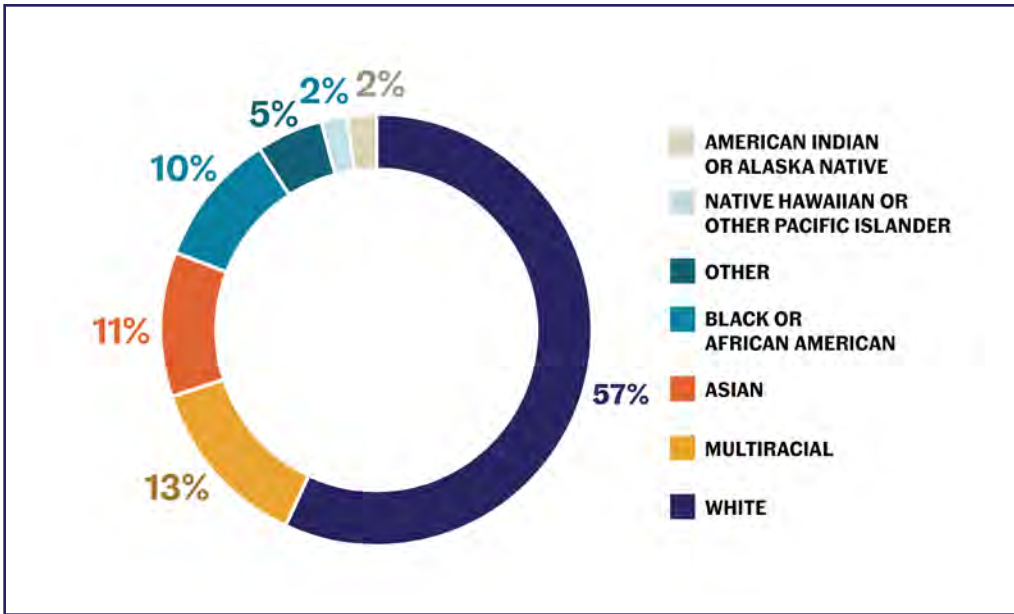


It’s tough out there, when a routine preventive appointment can turn into a three-way battleground between patient, provider and insurer. Health care has felt like a battle for a long time and it sure was amazing to have an ally in the fight this round. I wonder how many people just pay because they didn’t know that their rights are being violated.”

– Sierra

CHA helps all New Yorkers



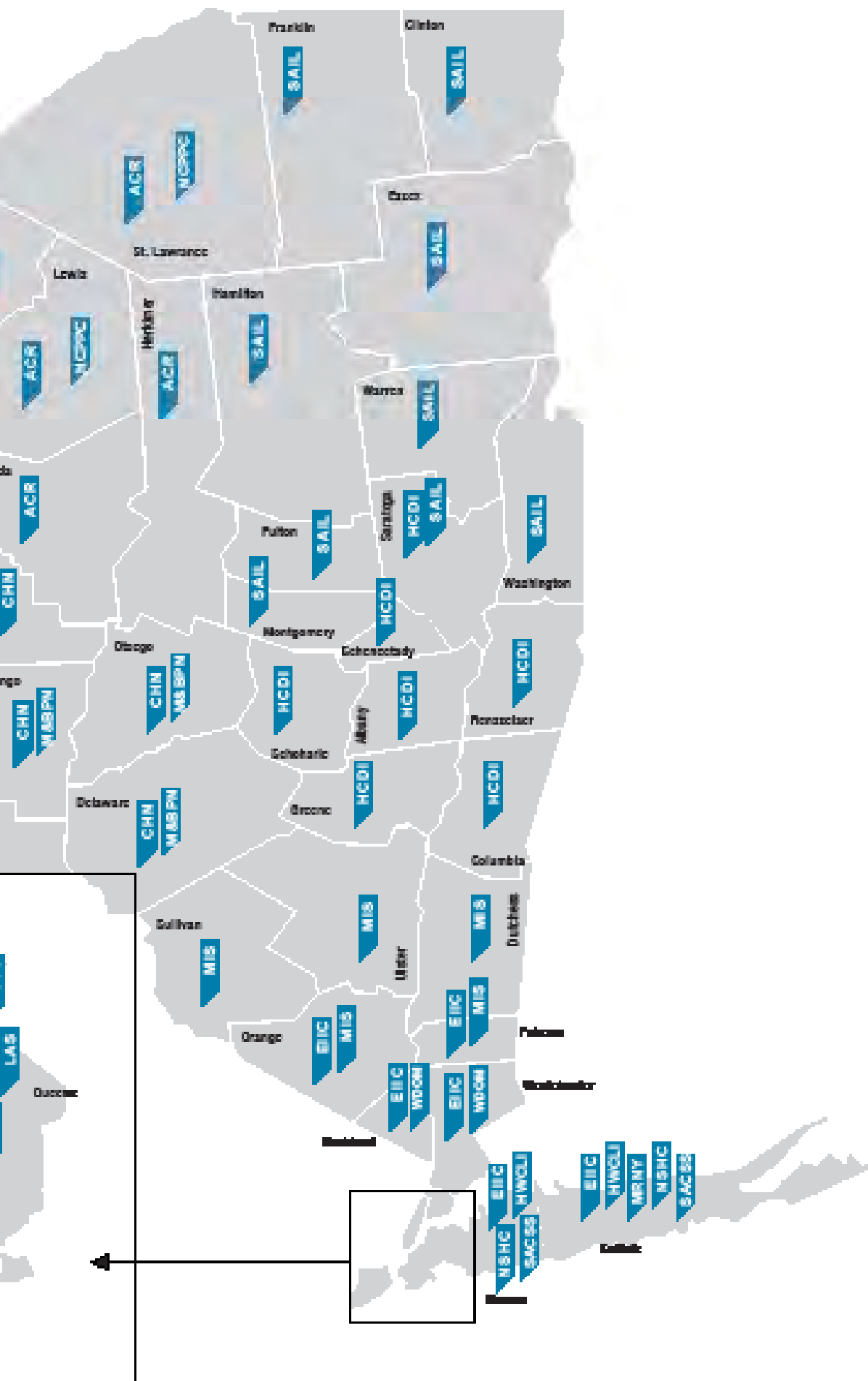


Looking to the future

The CHA team is deeply grateful for the financial support provided by Governor Hochul and the New York State Legislature to CHA. Thanks to our leaders, New York has the infrastructure, programmatic experience, and knowledge to assist the more than 19 million New Yorkers, no matter what kind of insurance they have. CHA is an all-payer program, helping beneficiaries enrolled in coverage through the NY State of Health Marketplace, jobs, unions, the Veteran's Administration, and public programs such as Medicaid, the Essential Plan, Child Health Plus or Medicare. CHA stands ready to help individuals, families, and small businesses to effectively use their health coverage and understand their health insurance and help those without coverage at all. CHA is committed to making sure that in New York State, coverage translates into access to timely, affordable and appropriate care.



AGENCY	COUNTIES	PHONE NUMBER	
AAFE	Asian Americans for Equality	Bronx, Kings, Manhattan, Queens, Staten Island	212-979-8988
ACR	ACR Health	Cayuga, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St Lawrence,	1-800-475-2430 315-475-2430
BW	BronxWorks	Bronx	718-588-3836
CCC	Cortland Chamber of Commerce	Cortland	607-756-2814
CHN	Chenango Health Network	Broome, Chenango, Cortland, Delaware, Madison, Otsego	607-337-4128
CIDNY	Center for the Independence of the Disabled New York	Bronx, Kings, Manhattan, Queens, Staten Island	646-442-4145
EIIC	Emerald Isle Immigration Center	Bronx, Kings, Nassau, Manhattan, Orange, Putnam, Queens, Richmond, Rockland, Suffolk, Westchester	718-478-5502, ext. 103
HCIDI	Healthy Capital District Initiative	Albany, Columbia, Greene, Reensselaer, Saratoga, Schenectady, Schoharie	518-462-7040 ext.11
FLCH	Finger Lakes Community Health	Allegany, Chemung, Livingston, Ontario, Schuyler, Seneca, Steuben, Wayne, Yates	1-800-346-2211
HSCTC	Human Services Coalition of Tompkins County	Tompkins	1-877-211-8667
HWCLI	Health and Welfare Council of Long Island	Nassau, Suffolk	516-505-4426
ILCHV	Independent Living Center of the Hudson Valley	Albany, Columbia, Greene, Rensselaer, Schenectady	518-274-0701
JRCHC	Jericho Road Community Health Center (Hope Refugee Drop-In Center)	Erie	716-881-0539
LAWNY	Legal Assistance of Western New York	Allegany, Cattaraugus, Chautauqua, Livingston, Monroe, Ontario, Schuyler, Seneca, Steuben, Tioga, Tompkins, Wayne, Yates	585-325-2520
M&BPN	Mothers & Babies Perinatal Network of SCNY	Broome, Chemung, Chenango, Cortland, Delaware, Otsego, Tioga	607-722-0517
MIS	Maternal Infant Services of Orange, Sullivan, and Ulster Counties	Dutchess, Orange, Putnam, Sullivan, Ulster	1-800-453-4666
MRNY	Make the Road New York	Kings, Queens Staten Island, Suffolk	718-565-8500, ext.4460 718-727-1222, ext. 3442
NSHC	Nassau-Suffolk Hospital Council	Nassau, Suffolk	631-435-3000
NCPPC	North Country Prenatal/ Perinatal Council	Jefferson, Lewis, St. Lawrence	1-800-279-8679 315-788-8533, ext. 223
NLS	Neighborhood Legal Services	Erie, Genesee, Niagara, Orleans, Wyoming	716-847-0650 716-284-8831
SACSS	South Asian Council for Social Services	Bronx, Kings, Nassau, Manhattan, Queens, Richmond, Suffolk	718-321-7929
SAIL	Southern Adirondack Independent Living Center	Clinton, Essex, Franklin, Fulton, Hamilton, Montgomery, Saratoga, Warren, Washington	518-792-3537
UHP	Urban Health Plan	Bronx	718-589-2440
UJO	United Jewish Organizations of Williamsburg	Bronx, Kings, Manhattan, Queens	1-800-346-2211
WDOM	Westchester Disabled on the Move	Rockland, Westchester	914-968-4717, ext. 110



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