

Here is the insurance information for [REDACTED] this past year.

Insurance Carrier: Carefirst Bluecross Blueshield

Policy Number: [REDACTED]

We had approval from our carrier with an urgent preauthorization request for the Rituximab infusion therapy (J9310) dated Jan 10, 2018.

The original therapy was completed over 2 days, 1/11/18 and 1/25/18. The two combined for a cost of \$23,750 out of pocket submitted to insurance for reimbursement. They allowed \$7,922.64 of these costs. Total payment was \$4,348.58 received on 3/28/18. They only paid a portion as the doctor was out of network but the only one local that treats the disorder.

We appealed this with the insurance company in April. We were denied again in August. We appealed again in August. We were not denied again until after we had another transfusion.

The 2nd transfusion was on 10/11/18 and 10/25/18. The preauthorization request was still valid per our call with the carrier. We requested a review of other doctors/hospitals that could treat her in network where we could receive more payment from the carrier. They did not have any through their search.

The combined cost for this therapy was \$32,000 out of pocket submitted to insurance for reimbursement. They allowed \$7,246.78 of these costs and paid \$7,131.64 on 12/06/18.

We appealed again on this.

We have been in contact with an insurance case manager for years during this entire treatment process. They have been good at making sure that we submit the correct insurance codes and helping with ideas to help.

We have also reached out to our employer. They allowed us contact with our broker Kelly & Associates. They are trying to help in determining an appropriate amount to be paid.

They have received approval for future Rixuximab drug treatments. They will ship the drug directly to the doctor if we need the treatment again. This would be a significant coverage if we need to do that treatment again.

Blood tests were conducted after each therapy. One was on 2/13/18 at a cost of \$1,459. We paid \$914.49. The 2nd was on 8/30/18 at a cost of \$2,520.46. We paid \$906.68. We were required to cover these costs since the insurance company considered these 'Experimental/Investigational'.

Our insurance covered 22.8% of these out of pocket expenses (\$13,638.51/\$59,729).

We also had appointments with a behavioral psychologist, a psychiatrist and the neurologist throughout the year. We do not have all those appointments and payments readily available. They are each a minimum of \$300 per visit, out of pocket and reimbursed at a percentage.

[REDACTED]

[REDACTED]