

Getting Health Care



Health Insurance

When you seek any kind of health care, practically the first question you hear will be “What is your insurance?” The Affordable Care Act of 2010 provided for major changes in health insurance coverage, some immediate, others to be phased in on a complicated schedule. Parts of this law are still subject to change and others are under challenge in the courts. Eventually, everyone may be required to purchase health care coverage. Currently, health care coverage is not a legal requirement, but if you can find affordable health insurance, it is highly desirable.

Health care providers—doctors, clinics, hospitals, and so on—have dozens of different agreements with different health insurance companies.

- If the providers are not on a given insurance company’s approved list, the company won’t pay them.
- Different insurers reimburse at different rates for the same service.

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- Insurers don't all cover the same services. And the services they do cover may have different rules and limits in different companies.
- Some insurers require you to get permission for some services in advance. If you don't have the necessary permission, the company won't pay the provider.

All this inconsistency is the insurers' and providers' headache, not yours, but it can make it harder for you to find the doctor or service you need.

You will be expected to show your health insurance card anywhere you go for medical care. The card not only contains information about your insurance company, but also can be a key to your medical records. Letting someone else use your health insurance card is illegal and also can endanger the borrower, who has a different medical history.

What will the medical treatment or service cost? Often, nobody seems to know. If you ask, you may get a blank stare or a simple refusal to state a price—or even an estimate—in advance of a procedure. This response is partly because payments vary, depending on whether or not you are insured and on what kind of a deal the insurer has made

with the medical provider. The doctor you are asking may not know what a treatment or procedure will cost because she has never actually seen a bill or payment for the procedure. And, of course, there is an element of uncertainty in some procedures.

Private Health Coverage

Private insurance coverage is the most common coverage and includes several options:

- Employer-sponsored health insurance has been standard at large companies for years. The federal government does not tax employer-paid health benefits, so this kind of health insurance is a very popular benefit.
 - If you work for a large enough company, your employer makes a deal with a health company and pays a part of the cost. This is not considered "income" for tax purposes.
 - The employer deducts the rest of the cost from your paycheck.
 - You must usually pay an additional fee, called a co-payment, for services you

receive.

- Increasingly, employee health plans also include a deductible, an amount you must pay before the insurance kicks in.
- Group health insurance for individuals may be available through membership in a group like a union, professional association, or society. The AARP, for instance, offers health insurance for members aged 50-65.
- Personal health insurance is also a possibility.
 - If you have a regular income (for instance, if you have a job, but your employer doesn't offer health insurance), you might consider buying health insurance on your own.
 - The government's [Health Care Finder](#), an interactive site may help you find the best insurance you can get or find free or low-cost care if you can't get insurance.
 - You will have many choices regarding what is covered, deductibles, co-pays, and so on.

- In addition to the government site, other Web sites provide details of many health insurance plans:
 - HealthInsuranceFinders.com
 - HealthInsurance.com
 - eHealthInsurance.com
- Health insurance companies may require you to
 - pass a physical examination
 - wait for a specified term to qualify for benefits
 - forgo coverage for “pre-existing” conditions, illnesses that developed before you joined the plan.
- Health savings accounts (HSAs) may go with some health insurance plans that have high deductibles.
 - These plans require you to deposit money in a “health savings account.” You pay significant amounts of money from this account before the insurance company begins to pick up the bill.
 - Money you put into these accounts is not taxed by the government; and if you use it for health care, the money is not taxed when you withdraw it.
 - These accounts may be a good idea if you are in good

health and don't expect to have a lot of medical expenses. Otherwise, their usefulness is debatable.

- [Full information about HSAs from the IRS.](#)

Medicaid and CHIP/S-CHIP

Medicaid is a government health insurance program for people whose incomes are near or below the poverty level.

- Although federally funded, Medicaid is a state-administered program, so rules for eligibility and kinds of coverage vary from state to state.
- Go to the [Centers for Medicare & Medicaid Services](#) and select your state for information about your state's program; or google your state, plus "local Medicaid office."
- Medicaid eligibility rules are complex, and so it probably is best if you talk to a trained person rather than try to figure them out by yourself.
- If you have Medicaid coverage, it may be difficult to find the service you need. In many states, Medicaid reimbursement rates are very low, and so doctors may refuse to see Medicaid patients.

Children's Health Insurance Program,

also called CHIP or S-CHIP, provides health and dental coverage for children whose families who cannot afford private insurance but who earn too much to qualify for Medicaid.

- Like Medicaid, the CHIP/S-CHIP program is administered by the individual states.
- Rules and coverage details differ from state to state.
- To find out whether your children are eligible, call 1-877-543-7669; or go to the rather confusing "[Insure Kids Now](#)," where you can click on your state and find an email contact address.

Medicare

Medicare is a government-sponsored plan for people who are over 65 or have certain disabling conditions.

- Medicare pays most of the costs for many kinds of medical treatment.
- Medicare subscribers also may sign up for additional insurance, called "Medigap," which covers much of the remaining costs as well as some costs not covered by Medicare.
- As a Medicare subscriber, you also are eligible to buy prescription drug coverage that may reduce the costs of medications.
- If you are significantly past your

65th birthday, getting signed up for Medicare is a hassle; but if you are eligible, it's worth doing.

- To find out about Medicare,
 - Go to your local Social Security office; or if you are working with a case manager or social worker, ask her.
 - [Medicare.gov](https://www.medicare.gov).

Medication Costs

Medication costs can be a headache:

- Some insurance plans cover part or all of the costs of prescription medications.
- Insurance plans do not cover drugs you can buy without a prescription, such as aspirin.
- Medications may be quite expensive, so ask the doctor if there is a cheaper alternative, called a *generic*.
- If the cost of the medication is more than you can afford, ask everyone—your doctor, the drugstore, and the company that makes the medication—for help.
- You can also look for help through Web sites such as
 - [Needymeds.com](https://www.needymeds.com),
 - [Partnership for Prescription Assistance](https://www.partnershipforprescriptionassistance.org), or
 - [Freemedicine.com](https://www.freemedicine.com)

Understanding a Health Insurance

Policy

Whatever insurance you have, it's important to know what the insurer will pay for and what you will have to pay for. For instance, some plans cover dental costs and others don't.

- Different insurance policies may have different limits on the amount of money paid for a given service, depending on what the service is.
- Most plans expect you to pay a set amount, called a *deductible*, before they begin to pay, and a smaller amount, called a *co-pay*, every time you see a doctor or get a lab test or a medication. You need to know how much these amounts are so you can budget for them and have payment ready when asked.
- Your plan may require you to use certain approved doctors, hospitals, and clinics. If you accidentally go to a doctor not on the approved list, or use a service that isn't covered, you may have to pay the entire cost yourself.

Insurance policies have lots of small print and jargon words. Policies sometimes are so complicated that even if you understand the jargon, it is hard to figure out what they are trying to say. You are not alone with this problem; it has tripped up many. Here are some hints to

help you deal with strange terms and convoluted English:

- Look at the “Definitions” section first. You will find the main terms and their official meanings listed in this section. Most of the terms mean pretty much what they sound like, and those that don’t will stand out.
- Insert real names in place of the jargon terms. For “the insurer,” substitute the name of the company issuing the policy. For “the policyholder,” use your own name. Instead of “primary care provider,” or PCP, use the name of the doctor you sign up with, and so forth.
- Read confusing sentences out loud. Doing this will help you read more slowly and give your brain more time to decode ridiculously long sentences.
- Insurance companies put many limits and restrictions on their policies. Look for the “must dos” and the “not covereds”; for example,
 - Do you need to get a written referral from your primary care provider before you see a specialist?
 - Does the company pay for counseling or therapy?
 - Are the limits for some kinds

of care different from the
limits for other kinds or care?

- Feel free to laugh. Sometimes when you read these things, especially when you put them into simple English, they just become funny.



If You Don't Have Health

Insurance

If you don't have insurance, watch out.

You may be stuck with a bill far higher than what any insurance company pays for the same services. That is because health care providers can charge you any amount they want. If you don't have insurance coverage, try to negotiate an affordable fee *before* you receive care. And if possible, try to get treatment at free or low-cost clinics, which are available in most cities and in many county seats.

Free and Low-Cost Clinics

- These clinics serve people on Medicaid, or those who are ineligible for Medicaid but whose incomes are low and who are not insured.
- Clinic staff can often tell you if you are eligible for Medicaid or Medicare and help you sign up.
- Even "free" clinics may charge a small fee based on your income.

- Some clinics will provide a taxi voucher or bus pass to reduce travel costs for low-income patients, depending on their medical conditions.
- Some free clinics are government run; some are connected with university medical schools; some are independent.
- Like any other medical service, the quality of these clinics varies, depending on their funding and the doctors and other people who staff them. If you are not satisfied with the services you receive at a free clinic, shop for another one.
- To find free clinics near you, call or look up your County Health Service agency on the Internet.

Alternatively,

FreeMedicalCamps.com is a Web site that lists free clinics.

- A common problem with free clinics is a long wait for services. You might need to decide whether you can wait that long for help. It's usually worth the wait if you want ongoing services, such as a pediatrician for children or a general practitioner for yourself, or if you have a chronic condition like diabetes that requires consistent monitoring.

If your problem is urgent, there is another alternative.

Hospital Emergency Rooms

If you cannot wait for the appointment offered at a free clinic—if you are in pain, bleeding, or having trouble breathing, for instance, go to a hospital emergency room.

- Hospital emergency rooms generally are required to treat all comers, regardless of ability to pay.
- This requirement often means crowded waiting rooms. People with less urgent problems, like sore throats, must wait while people with more urgent problems, like bleeding wounds, are treated first.
- But you will be seen and you will get care. Don't give up. Your sore throat needs treatment because it could be the onset or symptom of a serious illness.



Getting Good Health Care

Whether or not you have health insurance, and no matter what kind of insurance you have if you are covered, it's important to know how to get the best possible health care. You may be able to treat most minor injuries and illnesses yourself; but for medical emergencies, routine health care, and immunizations, you will need to see medical professionals with the appropriate training and experience.

Minor Injuries and Illnesses

You can treat many minor injuries and illnesses at home. To do so, it helps to have basic first aid supplies on hand:

- ibuprofen, acetaminophen, or aspirin, for pain relief and to reduce fever (note the cautions on the label because not all are suitable at all times);
- ice or a prepared cold pack, to reduce swelling and pain (a bag of frozen peas will work);
- antibacterial wipes;
- thermometer;
- band-aids, sterile gauze pads, gauze bandage, and adhesive tape;
- antibiotic ointment;
- hydrocortisone cream, to reduce pain from stings and rashes.

For information about first aid for specific types of injuries, and guidance about seeing a doctor, you can look at the Mayo Clinic's [First Aid](#) site.

Colds, coughs, sore throats, headaches, and upset stomachs usually don't need professional attention unless they persist longer than usual, are unusually severe, or involve a fever higher than 102 degrees.

- Most of these illnesses are best treated by simple remedies such as
 - plenty of fluids to relieve congestion;

- ibuprofen, acetaminophen, or aspirin to bring down a fever or reduce pain
- cough drops for a sore throat.
- For all medications, read and follow the instructions on the label, and take care not to exceed recommended dosages.
- Respect warnings about conditions or medications that indicate using the medication is not advisable.

For information about specific symptoms, you can go to sites such as [WebMD](#), or simply google “When to see a doctor.”

Emergencies

If you need immediate help—if someone is unconscious, bleeding heavily, in severe pain, has difficulty breathing, or may have broken bones—don’t delay. You can either take the person to the nearest hospital emergency room or pick up a phone, dial 911, describe the problem, and ask for an ambulance. Ambulance transportation can be expensive. If the person can manage it, your car or a taxi will be cheaper and just as fast. Some hospitals will provide taxi vouchers to reduce costs for people in need.

Problems such as dizziness, disorientation (not knowing who or where one is), and drug or alcohol intoxication may or may

not be emergencies, depending on the degree and duration of the symptoms.

Use your judgment, but if you are unsure, get help—don't wait.

Routine Health Care

Whether or not you have a health complaint, it's a good idea to schedule a visit with a primary-care physician as a new patient when you enroll in a health plan.

- Routine health checks can save you a world of trouble by ensuring that you get and keep... [vaccinations](#) up to date and by providing preventive measures. A flu shot, for instance, may save you from missing a week of work. An inexpensive medication to lower your cholesterol may stave off heart disease.
- Your doctor should check for these kinds of issues and order any necessary tests and inoculations.
- Records of a routine visit will serve as a baseline to help track changes during later visits.

Because of the insurance issues described earlier, it can be hard to find a primary care physician. For instance, doctors may limit the number of patients from a given health plan. Or because the plan doesn't reimburse them for the service, they may offer few openings for routine physicals for patients from your

plan after they accept you as a patient.

Although assigned to a full-fledged doctor, you may find yourself actually seeing an intern, resident, physician assistant, or nurse practitioner. Not to worry: Interns are recently graduated doctors. Residents are doctors advancing through specialty training. Physician assistants and nurse practitioners have undergone specialized training and have passed a rigorous examination. And all are supervised by a fully qualified doctor.

Immunizations

Immunizations are preventive treatments that protect you from a wide range of diseases, not only measles and mumps, but even some sexually transmitted diseases. Some vaccinations, such as tetanus, need to be repeated at regular intervals to maintain effectiveness. Vaccination is the safest and most effective way to protect yourself and your children from common, serious illnesses.

- If you were not vaccinated as a child, or if you are unsure what vaccinations you received, it's a good idea to raise the topic at your first visit. Doctors may assume that you have more protection than you really do.
- If you are caring for children who were not vaccinated, you may not

be able to enroll them in school until their immunizations are up to date.

- For detailed information about vaccinations, a good place to start is the federal [Center for Disease Control](#).

Dental Care

We often neglect our teeth, perhaps because we tend to think of them as unimportant. Lose one, so what? There are lots more. But it's not just a question of losing a tooth. Toothaches may signal major infection or other serious illness. Pain of any kind is a signal to pay attention, and pain in the teeth is no exception.

Many health plans do not cover dental services, but there are discount dental plans that will reduce the cost of care. Web sites such as [dentalclinicmanager.com](#) provide information about these plans.

If you can't afford a dental plan, look for a free or low-cost dental clinic. If there is a local chapter of the American Dental Association, its representatives can tell you where to go.

- Universities with dental schools usually sponsor clinics.
- Some social service agencies in major metropolitan areas also offer

dental clinics.

- Always call beforehand. Unless it's an emergency, there may be a long wait to get an appointment.

Some people naturally have strong, healthy teeth, and if you are lucky enough to be one of them, the dentist can take a back seat until you have the time, money, and energy to think about it. But do not ignore pain in your teeth.

Counseling and Therapy

You can get counseling from a variety of professionals. Counselors or therapists can help you learn to manage the stress of adapting to your new life. They also can help if a psychological or emotional problem is affecting your functioning. To be reimbursed by your insurer for these services, the professional must determine that you have a treatable condition. The list below describes different titles of mental health professionals, but all have similar qualifications and credentials. The following section ([Finding and Evaluating a Health Care Provider](#)) applies to all those job titles listed here.

- *Clinical social workers* provide most non-medical counseling and therapy. A licensed clinical social worker is qualified to diagnose and treat all mental illnesses, but is not licensed to prescribe medication.
- *Counselors and family therapists*

are also licensed mental health professionals. Depending on the state in which they work, there may be some limitations on the types of problems they can treat.

- *Psychiatric or mental health nurses* generally work in hospitals or health agencies, and their work focuses primarily on emergency care, diagnosis, and medication. However, they also may engage in private practice, providing therapy.
- *Psychologists* are mental health professionals trained and qualified to administer diagnostic tests, such as IQ tests, in addition to providing counseling or therapy. In some states, psychologists may be licensed to write prescriptions.
- *Psychiatrists* are medical doctors with advanced training and certification in mental illness. In most states, only doctors—and therefore, among mental health professionals, only psychiatrists—are licensed to write prescriptions. Most psychiatrists no longer offer therapy. They generally provide a diagnostic interview and will give you a prescription for medication if they think it is indicated.



Finding and Evaluating Health Care Providers

Finding a good health care provider may

be easy if your health care plan offers a list of approved providers, or if you have friends or co-workers who can give you recommendations. But if you are on your own, or if your friends and co-workers don't know a professional in the area you need, finding a good provider can be tough. Your insurance company's list of approved providers may include dozens of names, but little information other than their credentials. You may want to check out medlineplus.gov, a government Web site that features a directory of health professionals by location.

Even if you have a list or a personal recommendation from someone you trust, it's up to you, once you have seen a provider, to decide whether or not you want to go back. Following are some suggestions to help you make that decision.

Health Providers' Credentials

A license or certificate issued by the state indicates that a provider has completed the training required for competence in the field. Health professionals who participate in insurance plans are monitored for credentials by the insurer. Hospitals and clinics are responsible for ensuring that their workers have appropriate credentials.

- All health care providers, from doctors to X-ray technicians, should have a current license.
- Their license should be prominently displayed in their place of work.
- If you are seeing a specialist, such as a pediatrician (a children's doctor) or a surgeon, he should have a certificate in the specialty for which he is treating you.

If you are seeing a health care provider in private practice, you should expect to see these documents—usually framed and hanging on the office wall, along with various diplomas. If you do not, ask about them. If the doctor does not produce the actual document, you can either check with your state licensing authority or find another doctor (usually the easier course of action).

Lack of credentials is a very big red flag, but a license does not tell you all you need to know.

- There is no national licensing authority for health professionals. Consequently, there have been cases in which a doctor whose license was revoked in one state simply moved to another and started over.
- A doctor may be “board-certified” in a specialty that doesn't apply to

your case. She may not have kept up with recent developments. Or she simply may not be competent, despite her credentials.

- Hospitals and doctors who work with each other may have reasons to “work with” a colleague who is falling short, rather than publicizing the colleague’s shortcomings. This may be good for the doctor in question, but it’s not so great for that doctor’s patients.



Quality of Care

Quality of care varies widely, even among credentialed professionals. A high fee or a Harvard diploma doesn’t mean you will get the best care. A crowded, shabby, free clinic doesn’t mean you will get inferior care.

The best source of information is a friend or family member who has had good results from that doctor, who likes the doctor and the people who work in the doctor’s office. Often, however, we don’t have that valuable kind of personal information and must decide for ourselves.

Here are some ideas to help you with your decision. Because you may be seeing a professional other than a doctor, the generic term *provider* covers all the key professionals.

- *First impressions.* When you call to make an appointment,
 - Is the person you speak with polite and patient?
 - Does he answer your questions?
 - Does he tell you what records, referrals, or other documents to bring?
 - In general, does he seem knowledgeable and friendly?
- When you arrive for your appointment,
 - Is the waiting room clean?
 - Is the receptionist polite and helpful about the forms you need to fill out?
 - Does the office staff keep your and others' private information private?
 - If there is a delay of more than 15 minutes, does someone tell you that the provider is running late?
- *The meeting:*
 - Is the meeting or examination room clean?
 - Is there adequate and appropriate privacy?
 - For a physical examination, does the provider wear gloves?
 - Is the equipment clean, and

does it appear to be in good condition?

- Do support personnel seem knowledgeable and competent?
- How well does the provider listen to you? Does she
 - Interrupt or cut you off?
 - Question what you report?
 - Ignore or belittle your questions?
- Do you feel respected?
- Does the provider get a thorough history about any problems? If the problems are physical, does the provider conduct a thorough and careful examination?
- Does the provider clearly explain the reasons for any recommendations, referrals to other professionals, or medicines prescribed in terms that you can understand? Do the tests and recommendations seem appropriate?
- Does the provider answer your questions about recommendations, referrals, and medications?
- Are the recommendations and referrals realistic and practical?

Does the provider give you
necessary contact information to
follow up on referrals?

These criteria are not outlandishly
demanding or perfectionist. Still, you may
not find them all met everywhere you go,
and that may or may not matter. It's up
to you to decide, upon reflection,
whether or not you received good care.

- You may have really liked the
provider, but after thinking about
it, you may realize you didn't get a
thorough examination.
- A doctor may have seemed
brusque and hurried, but after
thinking about it, you may decide
you actually received excellent
care.
- If you are looking at an ongoing
relationship, as in counseling, it's
important to like your provider. If
this is a one-time event, such as a
surgical procedure, or your health
care coverage tightly limits your
access to care, the balance
changes.



Alternative or Complementary Medicine

"Alternative" or "complementary"
treatment refers to a variety of
medications and treatments that are not
science based. Most have not been
shown objectively to work. Some of

these alternative treatments, such as Chinese herbals, derive from long-standing practices of other cultures. Others, like faith healing, are derivatives of religious beliefs. Some others are simply inventions of people who, perhaps deliberately misleading themselves and others, make unsubstantiated claims for their "treatments."

Many people claim to be helped by these alternative treatments, and indeed they may have improved or even been cured. But the improvement is not necessarily because of the treatment. People may benefit from a common characteristic called "the placebo effect," which makes them not only feel better, but actually get better if they think or expect that they will. In controlled scientific tests of a treatment, an important measure is whether the number of people who improve during the treatment is significantly greater than that of the people who actually are not receiving the treatment but think they are.

There is little objective information about whether or why alternative treatments work. The National Institutes of Health (NIH), the government health research center, has been conducting evaluations of some of these treatments. Go to nih.gov and enter the search term "alternative medicine" to check out objective findings about specific

treatments.

If you are using or are interested in alternative treatment, it is important to keep a few cautions in mind:

- Herbal medications can be as powerful and dangerous as conventional prescriptions. Learn about the risks before you use them.
- Alternative treatments may not mix well with conventional treatments. Be sure to tell your doctor about any alternative treatment when you are discussing a problem or a possible medication.
- Alternative “medicines” are not regulated for content or quality. They may contain pollutants, such as lead, or other unlisted ingredients.
- View alternative medicine practitioners’ claims and credentials with appropriate skepticism. There is no formal procedure to assess their knowledge and skills.



Additional Resources

Decisions about health care may be complex and difficult, but they are your decisions, not anyone else’s. Good information is critical for good decisions. Luckily, a lot of

information is available about almost any health problem you may have, as well as many ideas about how to get help to treat it.

- Because even the most reputable source of information may be temporarily out of date or may have accidentally omitted useful information, it's a good idea to check two or more sources when you're researching a health question.
- As with all Internet sources, you need to be careful about the accuracy of the information you find, and to look for the fullest, most recent, and most reliable information.
- Sites that "guarantee" a cure or offer a simple solution to any (or all) health problems are unreliable. If there really is a cure-all, it won't be hidden in an obscure Web site.

In addition to the Web sites listed in specific sections above, this section lists a few other reputable Web sites where you can go for more information.

Health Information Online

National Institutes of Health

(NIH), has authoritative information about medical and mental health conditions and treatments, and many links to

other sites' information about specific conditions.

[MedlinePlus](#), combines resources of the National Library of Medicine with those of the NIH. In addition to information about medical issues, MedlinePlus provides a directory of health care providers that you can sort by location, a medical encyclopedia and dictionary, and interactive tutorials on major health topics.

[WebMD.com](#), a commercial Web site, has much useful information about health in general, and about many specific diseases. It also has news, feature articles, blogs, message boards, and advertisements, as well as plain old information.

Information About Specific Diseases

Many Web sites focus on specific areas of the body, or on widespread and/or chronic diseases. Such sites include the following:

[American Cancer Society](#)

[American Diabetes Association](#)

[American Heart Association](#)

[American Lung Association](#)

[National Clearinghouse for](#)

[Alcohol and Drug Information](#)

[National Institute on Alcohol](#)

[Abuse and Alcoholism,](#)

[National Institute on Drug](#)

[Abuse](#)

[**National Institute of Mental Health**](#)
[**The National Association on Mental Illness**](#)

Support

[**Patient Advocate Foundation,**](#)
1-800-532-5274, provides free help to people with chronic, debilitating, and life-threatening ailments, addressing such issues as access to care, maintaining employment, and preserving financial stability. The site offers chat conferences with a professional case manager for personalized attention.

You can also seek support through various hot lines and online groups devoted to particular topics. To find support groups for a specific condition, google "support group" plus the name of the condition.

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