

# Sick on Vacation

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# Credentials and Conflicts



AXA Partners, USA

Senior Associate Medical Director – North America



University of Illinois, Chicago

Assistant Professor of Emergency Medicine

# Travel Overview 2017

Americans made 80 million International trips

- 31 million trips to Mexico
- 13.4 million trips to Canada
- 14.7 million trips to Europe
- 5 million trips to Asia

27 millions inbound trips (through September) –  
36 million total

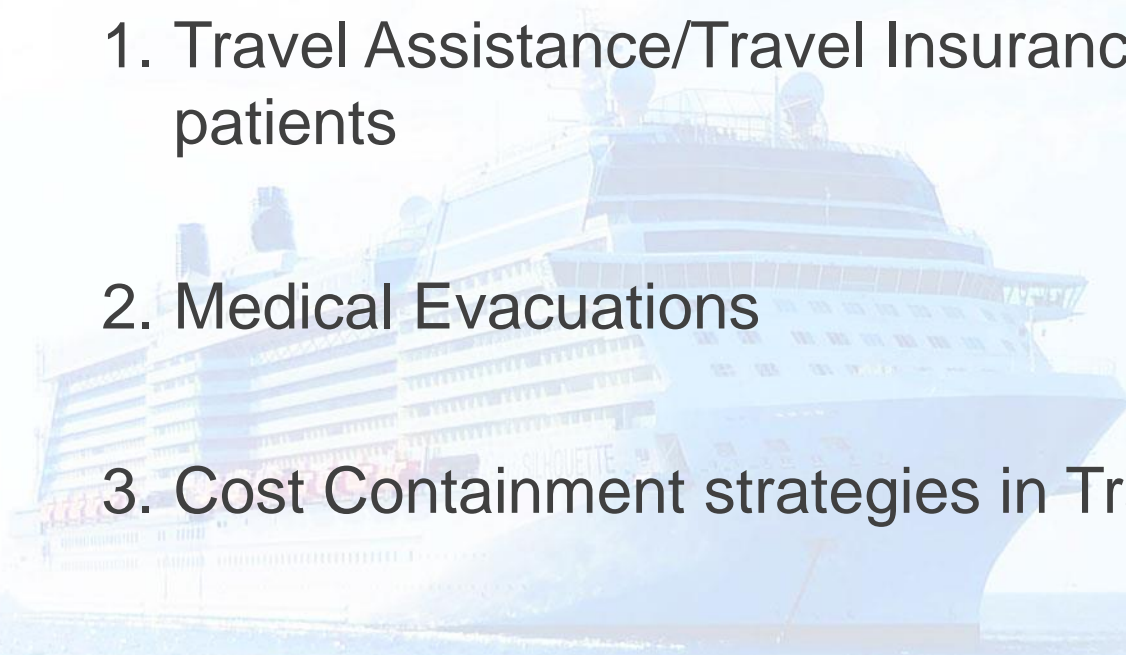
- Western Europe and Asia = 70% of inbound travelers

Source: U.S. Department of Commerce, International Trade Administration, National Travel and Tourism Office (NTTO), <http://tinnet.ita.doc.gov/research/monthly/index.asp> – accessed April 9, 2018



# Objectives

1. Travel Assistance/Travel Insurance and how it can help patients
2. Medical Evacuations
3. Cost Containment strategies in Travel





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# Travel Assistance/Insurance

**Travel Insurance** – specific policy to provide protection to travelers

**Travel Assistance Company** – Administrator of travel insurance

Travel Insurance is ***not***  
Major Medical Insurance



# Travel Assistance/Insurance

How do my patients get Travel Insurance

- Credit Cards – Travel Cards (High end, American Express)
- Websites

The logo for insuremytrip, featuring the text "insuremytrip" in white lowercase letters on a green rectangular background.

insuremytrip



- Work Benefits/Health Insurance



# Travel Assistance/Insurance

## Coverage

May Include	May Exclude
Evacuation/Repatriation	Inpatient Rehab, SNF, Home health
Prescription replacement	Planned care/pre-existing conditions
Translation services	Non-emergent/urgent care
Embassy/consulate relations	
Travel planning assistance for patient and traveling companions	
Coverage limits (\$\$)	





# Travel Insurance Companies



**Nationwide**



**GeoBlue**



HANCOCK INSURANCE AGENCY, INC.

*John Hancock*



**Travel Guard®**



# Travel Assistance/Insurance

## Priorities

### 1. Appropriate Medical Care

- Capable providers/facilities

- High Quality Care

- Trustworthy business practices

- Safe repatriation plans

### 2. Cost Savings

- Preferred provider networks

- Avoiding/delaying non-emergent/urgent procedures

- Preventing/Limiting re-admissions



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# Medical Evacuation

## Goal

To urgently/emergency move a patient safely from a location of inadequate medical care to an appropriate medical facility.



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Ancillary Medical Providers (Non  
Andrology  
Angiology/Phlebology

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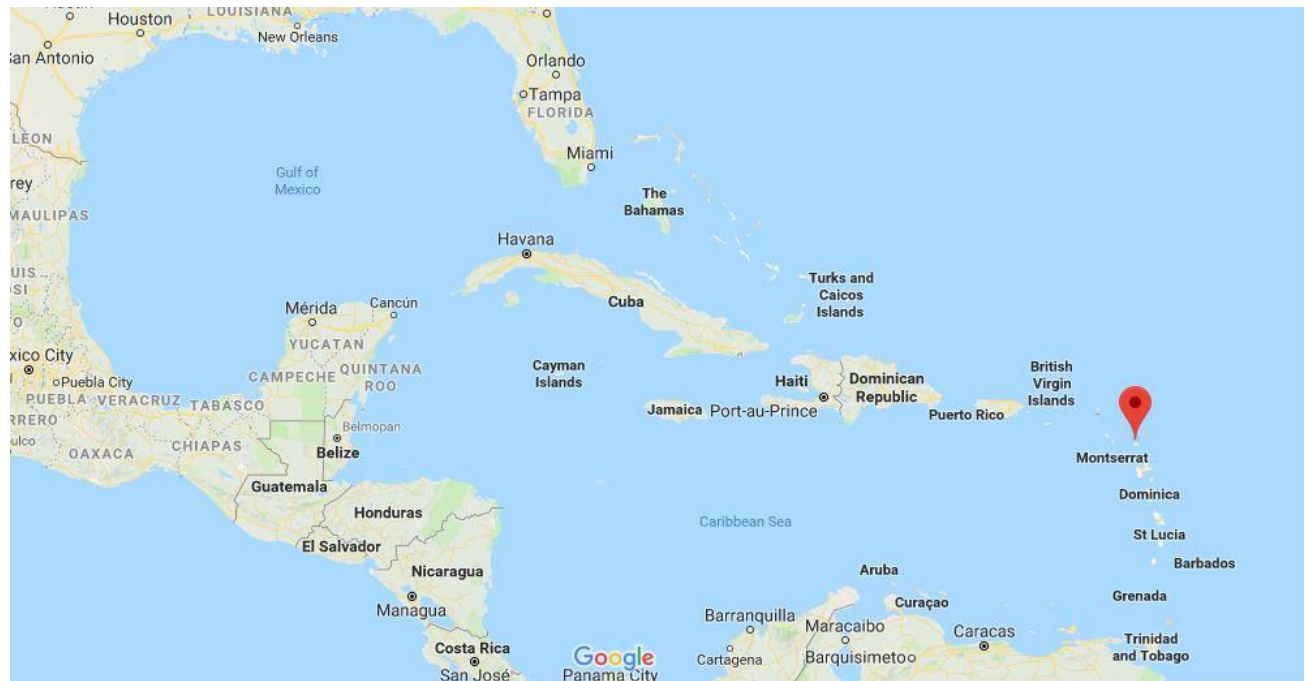


# Medical Evacuation

## Antigua

69 yo female on a Caribbean cruise falls and suffers left hip pain. She is seen by the ship doctor and the XR shows a hip fracture. She is disembarked in the Antigua to a medical facility.

Facility does not have an orthopedic surgeon or stable bank blood supply.





# Medical Evacuation

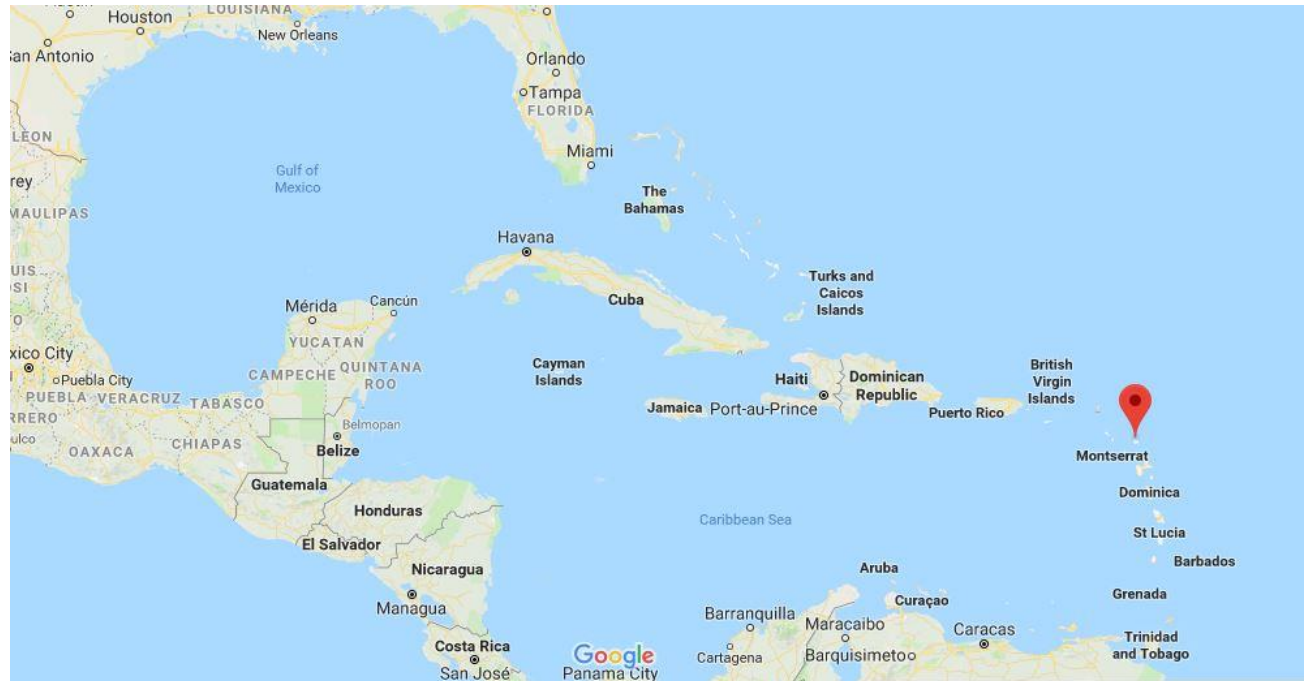
## Antigua

Closest facilities with appropriate capabilities for her would be:

Dominican Republic

Florida

Martinique



# Medical Evacuation

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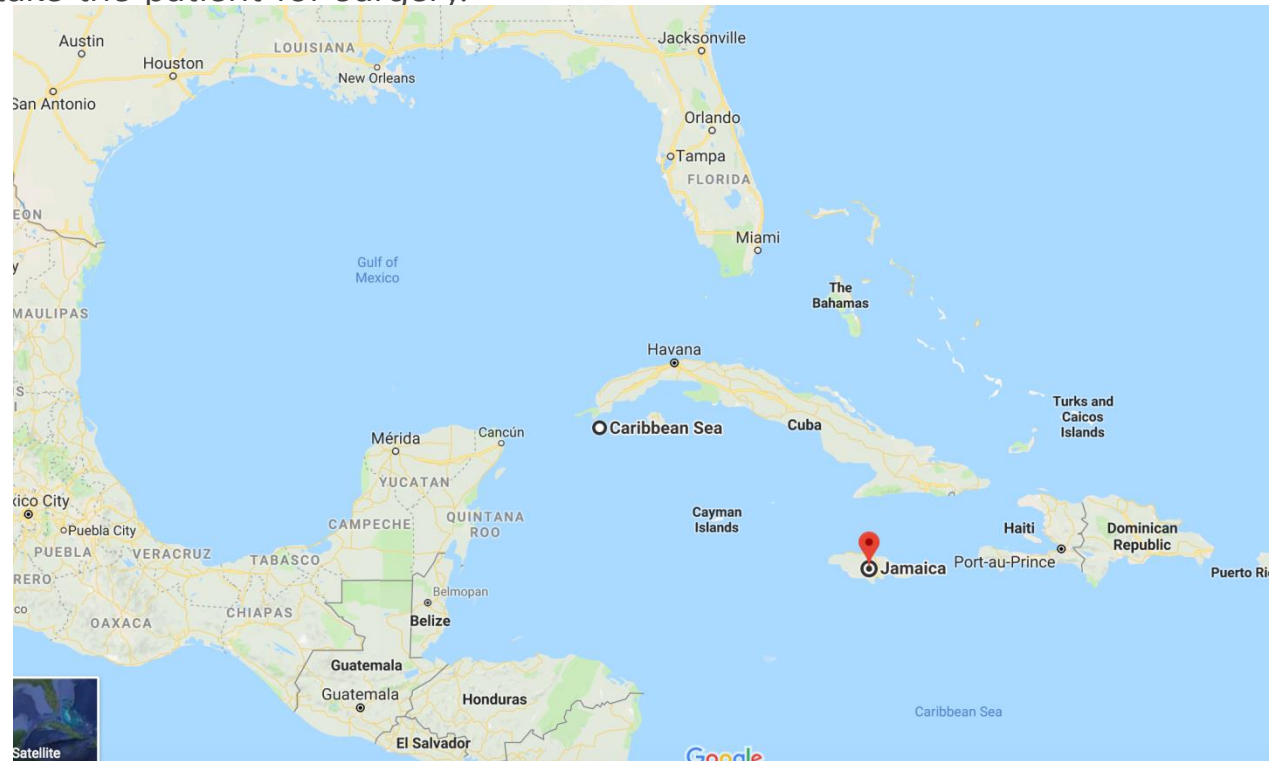
Pictures courtesy of David Fox,  
Fox Flight Inc.

# Medical Evacuation

## Jamaica

55 yo male is vacationing in Kingston when he develops sudden vision loss.

After initial workup, the patient is diagnosed with a retinal detachment. The facility reports their ophthalmologist will fly to the island in 4 days to take the patient for surgery.



# Medical Evacuation

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After initial workup, the patient is diagnosed with a retinal detachment. The facility reports their ophthalmologist will fly to the island in 4 days to take the patient for surgery.

Our experience with this facility suggests they have poor surgical outcomes and issues with equipment.

Post-op travel concerns

Closest appropriate facilities:

Florida

Home





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# Travel Assistance/Insurance

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# Cost Containment

Cancun, Mexico - preferred provider/avoid unnecessary procedure

65 yo male presented to hospital in Cancun after a syncopal episode. Hospital is not a preferred provider.

Physician is stating the patient has been hospitalized for 3 days already and needs a pacemaker for 3<sup>rd</sup> degree heart block. Currently is resting in bed



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awaiting insurance approval. (\$70k)

HR 65 – no external/transvenous pacer.

EKG – 1<sup>st</sup> degree heart block + LAFB/RBBB = “3<sup>rd</sup> degree heart block”

Transfer to local Provider – patient was cleared to travel without assistance  
Never needed a pacemaker



# Cost Containment

## Boston, MA – delay procedure

19 yr old female au Pair suffered an ankle fracture in a car accident. Splinted and discharged home to follow up for surgery in 2 weeks. Unable to continue her work due to injury.

ORIF - \$25K

Travel home - \$6K (including upgrade to seat)



# Cost Containment

## Orlando, FL - Curtailment

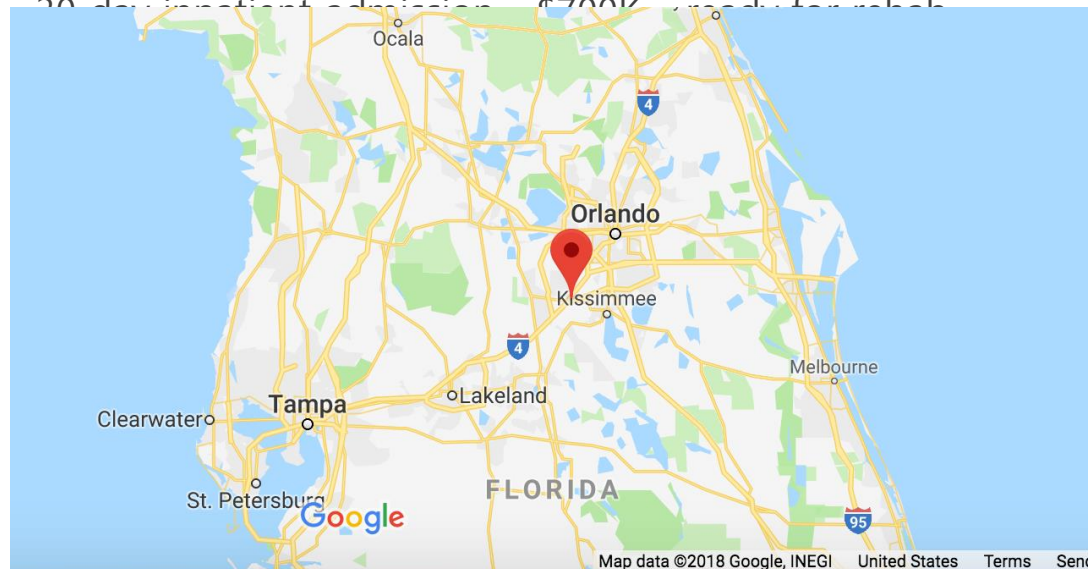
68 yo male presented with sudden onset chest pain and shortness of breath.

2 weeks into a 3 month trip

Diagnosed with NSTEMI – taken for CABG after cath show 3 vessel disease.

Post-op course complicated by new heart failure, pneumonia and prolonged recovery.

20 day inpatient admission \$700K ready for release





# Cost Containment

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68 yo male presented with sudden onset chest pain and shortness of breath.

2 weeks into a 3 month trip

Diagnosed with NSTEMI – taken for CABG after cath show 3 vessel disease.

Post-op course complicated by new heart failure, pneumonia and prolonged recovery.

30 day inpatient admission - \$700K – ready for rehab

HIGH RISK FOR READMISSION

Readmissions - \$6K/day

Repatriation with Doctor/Nurse back to her health system



# Questions?

Photos from Lufthansa.com



# Thank you.

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<https://www.axatravelinsurance.com/>

