



EDUCATIONAL SERIES FOR HEALTHCARE PROFESSIONALS

2017

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2. Dial-in to the audio portion of the webinar
Please note that participants who "listen-in" on another participant's line will NOT be eligible for credit.
3. Within **2 WEEKS** of this session:
 - ✓ Complete the evaluation*
 - ✓ Complete the post-test & earn a passing grade*

***An email with links to the evaluation and post-test will be sent Friday, November 17th by 5:00 PM ET.**

****Certificates will be emailed within 4-6 weeks****

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**EDUCATIONAL
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PROFESSIONALS

SPEAKERS

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Cancer and Careers*

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Triage Cancer*

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CONTENT PARTNER

TRIAGE
CANCER

HEALTH INSURANCE & HEALTH CARE REFORM

Key Topics:

- Getting and Keeping Health Insurance with a Pre-Existing Condition
- Consumer Protections in the ACA
- New Health Insurance Options
- Tips to Choose a Health Insurance Policy
- Potential Changes to Our Health Care System

RESEARCH: "COST" OF HEALTH CARE

- As of 7/17, 11.7% of US uninsured
 - About half of uninsured are eligible for \$ help in Marketplace
- More than 1 in 4 cancer patients surveyed reported they had to pay more for medical care than they could afford (6/6/16)
- 30% of US residents reported receiving surprise medical bills
- 2014 NerdWallet study found mistakes in 49% of Medicare claims
- Cost of care survey respondents reported levels of post-traumatic stress similar to what African-American survivors of Hurricane Katrina experienced and greater than those who witnessed and were present in lower Manhattan on 9/11
(Cancer Support Community & Genentech: Cost of Care National Pilot Survey)

DON'T UNDERSTAND HEALTH INSURANCE? YOU ARE NOT ALONE

- Only 23% understood terms used in their health policy
- Only 50% knew their monthly premium
- Only a few understood acronyms: HMO (36%), PPO (20%) & HSA (11%) (*eHealth, 2008*)
- When asked to define insurance terms and calculate their bill, only 50% got it right (*The Regence Group, 2008*)



"Yes, we have 'All You Need To Know About The Health Care Legislation' but it is part of a twelve volume set."

HEALTH INSURANCE TERMS

Cost to Have Health Insurance

- Premium – each month



Costs When You Use Your Health Insurance

- Deductible – each year
- Co-Payment – each time you get care
- Co-Insurance or Cost-Share – each time you get care
- Out-of-Pocket Maximum =

deductible + co-payments + co-insurance

HEALTH INSURANCE EXAMPLE

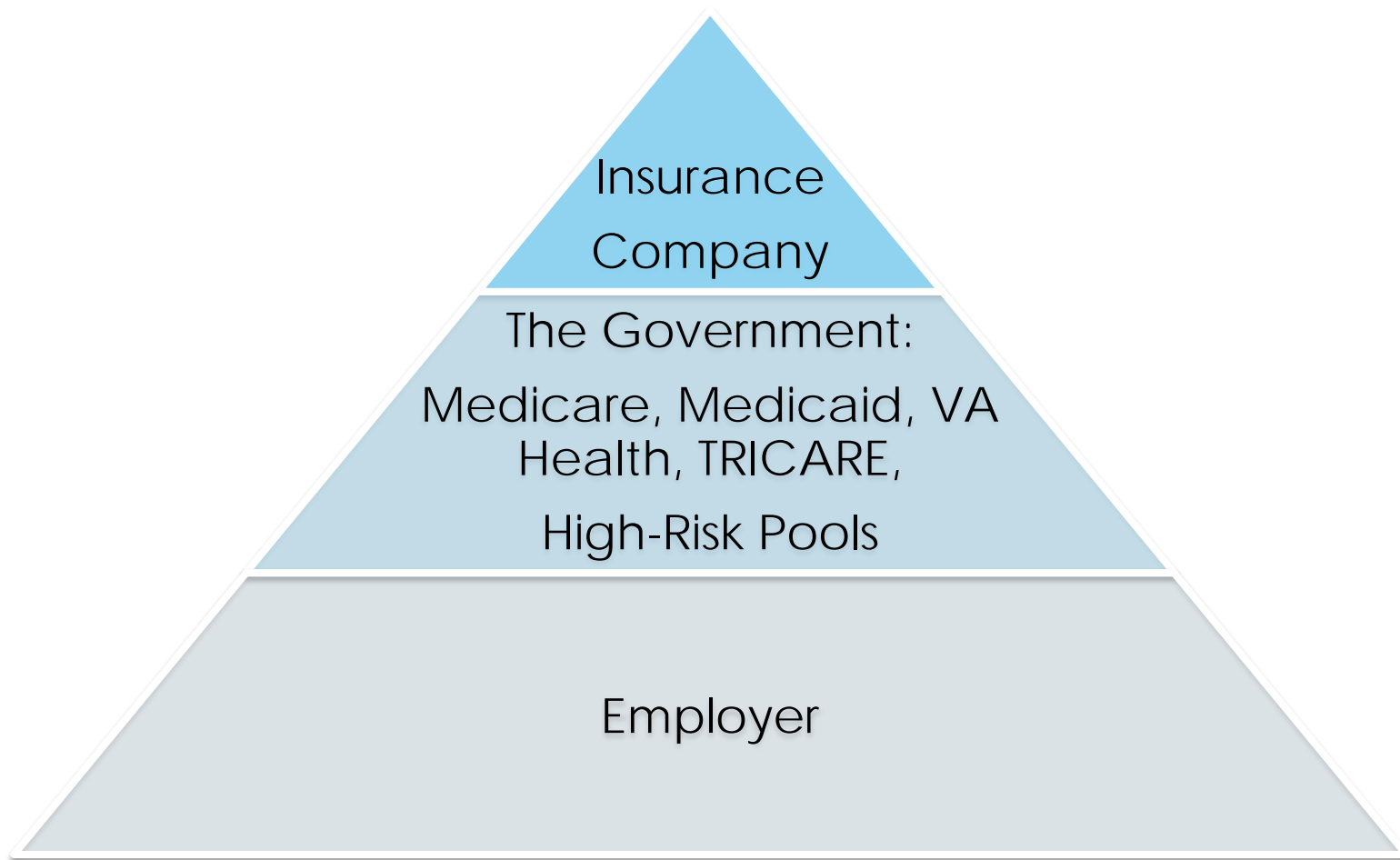
Your Plan: Co-pay \$250 for ER visit
 Deductible = \$2,000
 Co-insurance = 80/20 plan
 OOP Max = \$4,000

If you have a \$102,000 hospital bill, what do you pay?

1. Your co-pay of \$250 for ER visit
 $\$102,000 - \$250 = \$101,750$ left
2. Your remaining deductible of \$1,750
 $\$101,750 - \$1,750 = \$100,000$ left
3. Your co-insurance amount of 20%
 $20\% \text{ of } \$100,000 = \$20,000$

But OOP max is only \$4,000. So, you only pay the \$2,000 deductible + \$2,000 of the \$20,000 co-insurance amount, for a total of \$4,000

WHERE WE GET HEALTH INSURANCE



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EMPLOYER-SPONSORED HEALTH INSURANCE

COBRA

- Employers with 20+ employees
- Cost up to 102% of applicable employee rate
= Employer amount + Employee amount + 2% fee

COBRA Qualifying Event	Max COBRA Coverage
Employment ends or hours reduced	18 months
Loss of dependent child status	36 months
Employee enrolls in Medicare	36 months
Divorce or legal separation from employee	36 months
Death of employee	36 months

STATE COBRA LAWS

States with COBRA statutes:

- AR, CA, CO, CT, FL, GA, IL, IA, KS, KY, LA, MA, ME, MD, MN, MS, MO, NV, NH, NJ, NM, NC, ND, OH, OK, OR, RI, SC, SD, TN, TX, UT, VT, WV, WI, WY
- Details vary by state
- Most cover employees with 2–19 employees
- Coverage lasts between 3–36 months

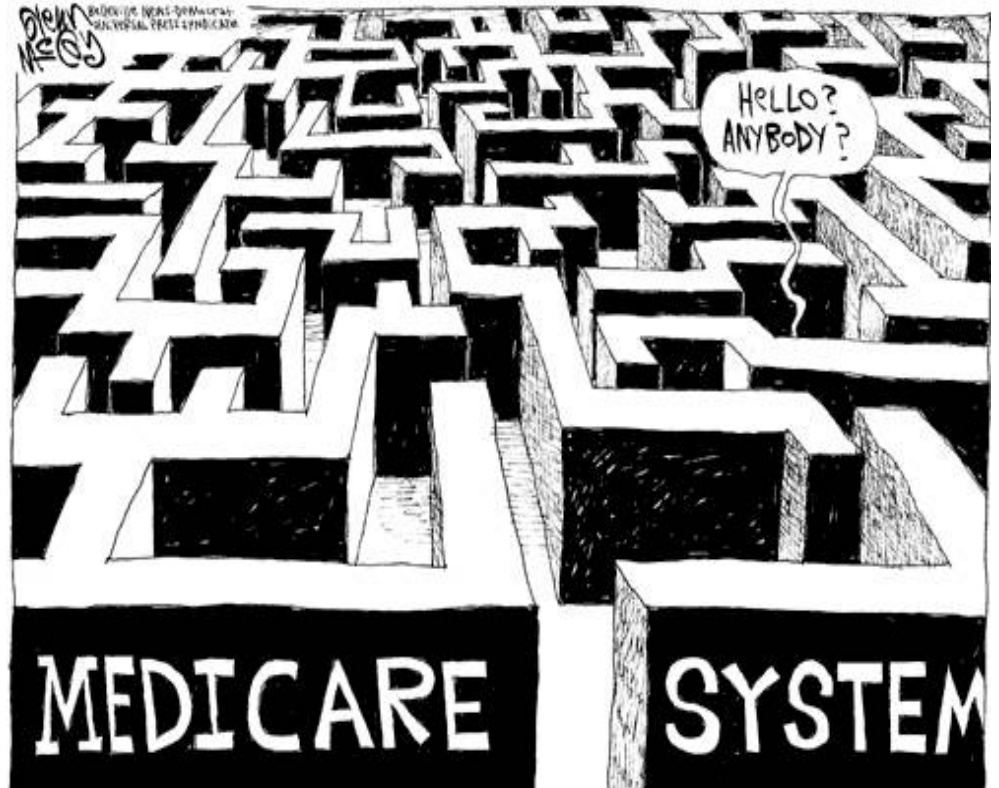
<http://Triagecancer.org/StateLaws>

WHEN COBRA ENDS EARLY

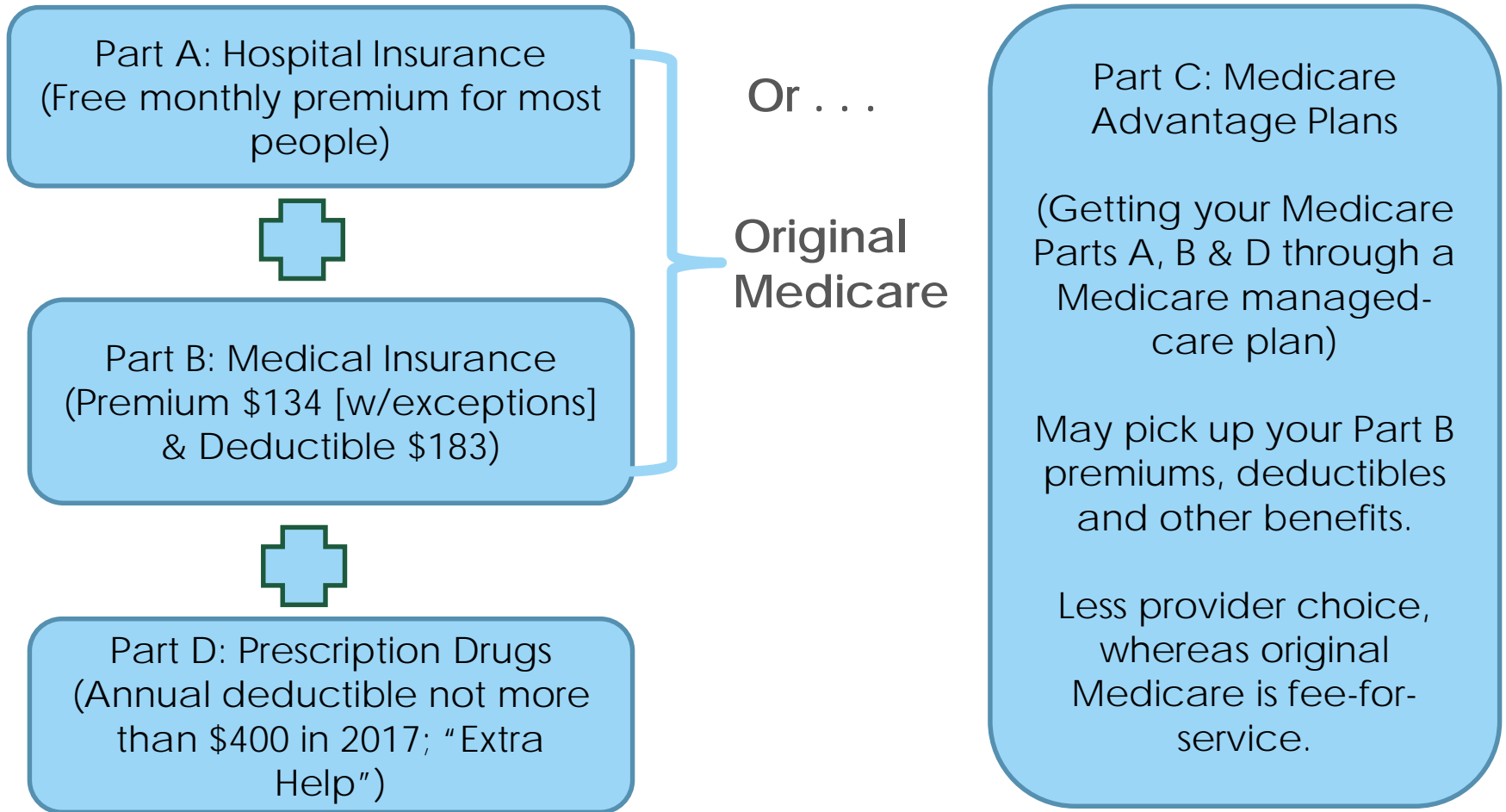
- Employee doesn't pay premiums
- Employee becomes eligible for Medicare
- Employee commits fraud
- Employer stops offering a health plan to all employees
- Employer goes out of business

MEDICARE

- Eligibility
 - 65+ years old
 - On SSDI 2+ years
 - ESRD or ALS
- www.Medicare.gov
- 2017 Medicare and You:
<https://www.medicare.gov/pubs/pdf/10050-Medicare-and-You.pdf>
- Open Enrollment:
10/15 – 12/7



MEDICARE PATHS



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MEDICARE IN 2017

Part B Premium = \$134, UNLESS

- You enroll for the 1st time in 2016 or you don't get SS benefits
- You're directly billed for your Part B premiums.
- You have Medicare and Medicaid, and Medicaid pays your premiums. (Your state will pay standard premium amount of \$121.80.)
- Your modified adjusted gross income as reported on your IRS tax return from 2 years ago is above a certain amount.

If your filing status and yearly income in 2015 was			
File individual tax return	File joint tax return	File married & separate tax return	You pay (in 2017)
\$85,000 or less	\$170,000 or less	\$85,000 or less	your plan premium
above \$85,000 up to \$107,000	above \$170,000 up to \$214,000	not applicable	\$13.30 + your plan premium
above \$107,000 up to \$160,000	above \$214,000 up to \$320,000	not applicable	\$34.20 + your plan premium
above \$160,000 up to \$214,000	above \$320,000 up to \$428,000	above \$85,000 up to \$129,000	\$55.20 + your plan premium
above \$214,000	above \$428,000	above \$129,000	\$76.20 + your plan premium

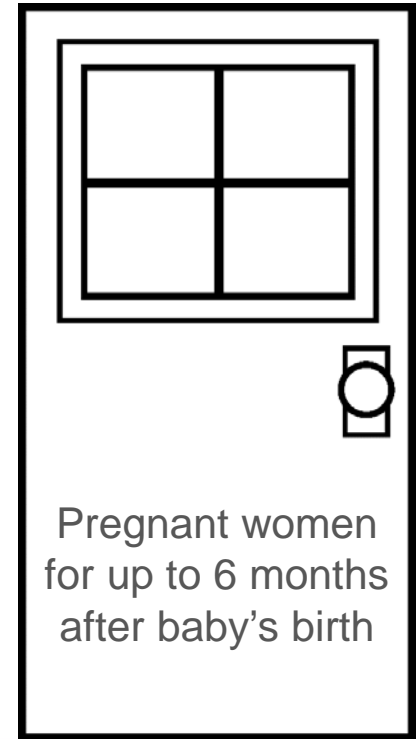
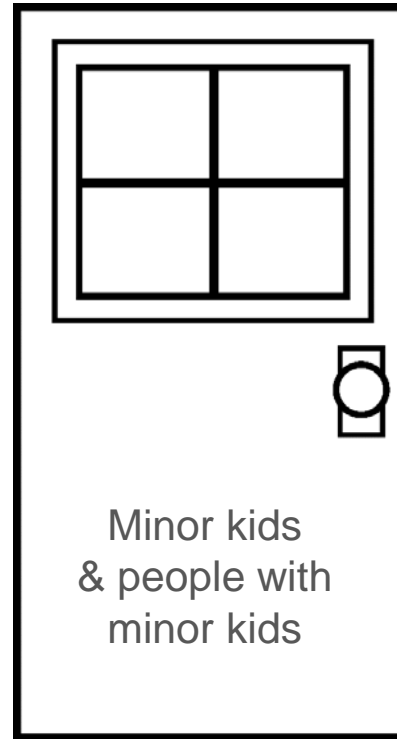
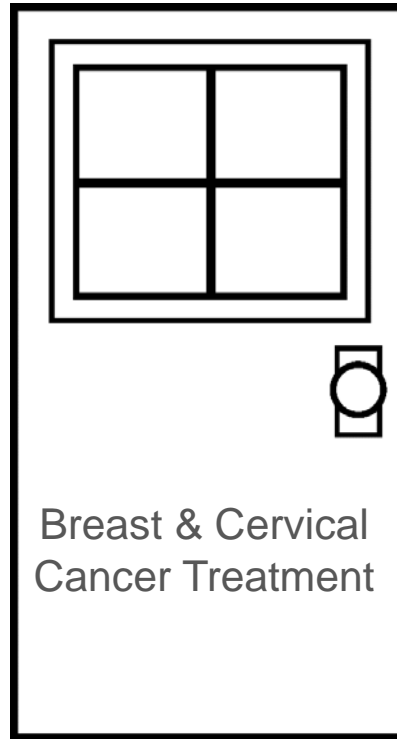
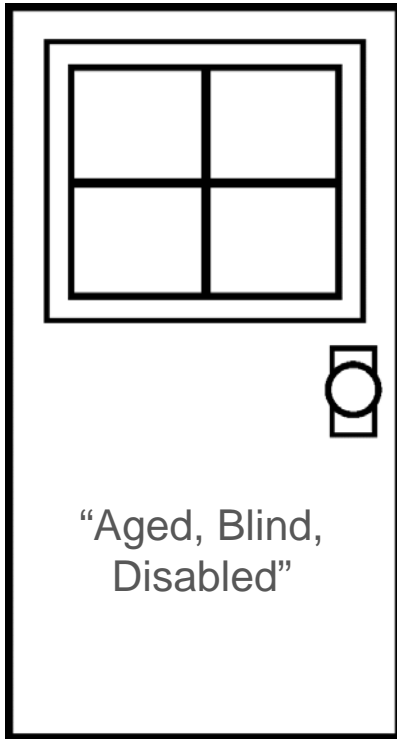
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MEDICAID – PRIOR TO 2014

Eligibility: low income + low assets +



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WHY WAS THERE A NEED FOR HEALTHCARE REFORM?

- Confusion



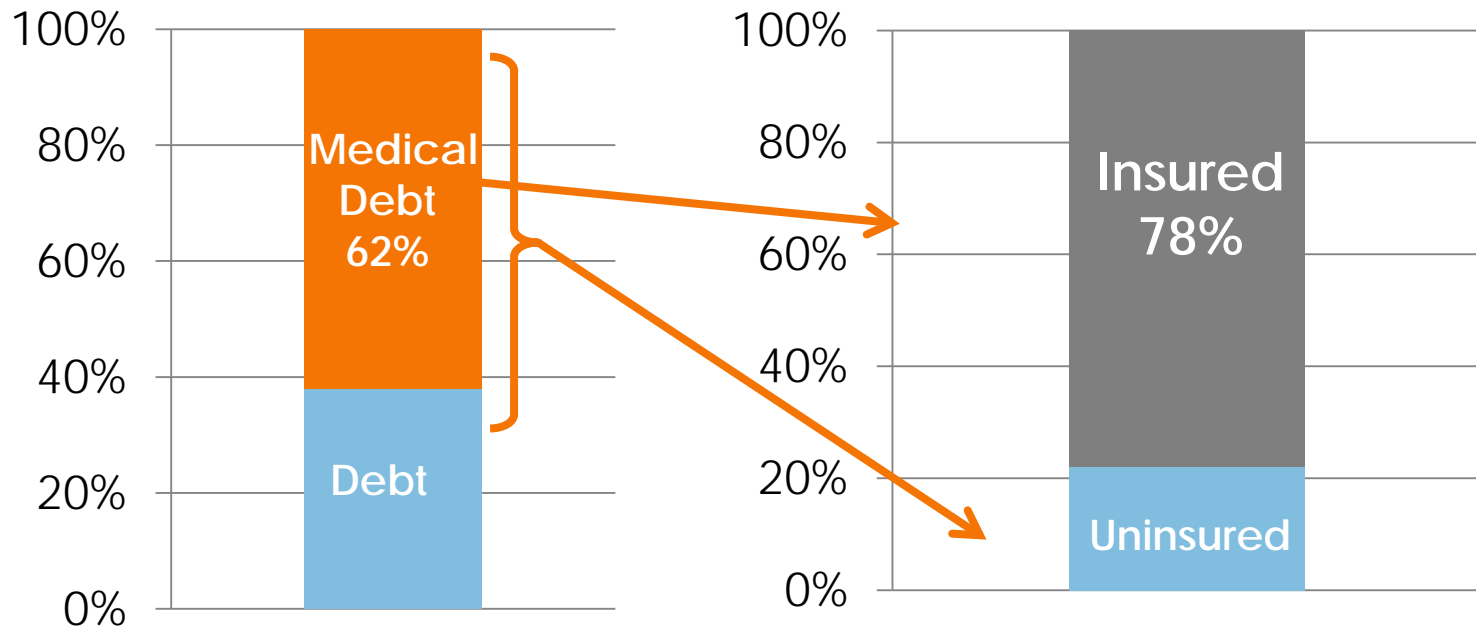
- Pre-existing conditions
- High cost / low coverage

PRESIDENT'S CANCER PANEL 2001



“No person in America with cancer should go untreated, experience insurance-related diagnosis or treatment delays that jeopardize survival, or be bankrupted by a cancer diagnosis.”

BANKRUPTCIES IN THE U.S.



Source: Woolhandler, et. al., American Journal of Medicine 8/09

In 2016: Cancer patients who go bankrupt are nearly 80% more likely to die.

PATIENT PROTECTION & AFFORDABLE CARE ACT (ACA)



Signed into law on March 23, 2010

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CONSUMER BENEFITS

1. No rescissions (cancellations)
2. No lifetime or annual limits
3. Young adults can stay on parent's plan until 26
4. Clinical trials coverage*
 - Routine care costs as of 1/1/14
 - Existing law in many states
 - See <http://tragecancer.org/clinical-trials>



* Does not apply to grandfathered plans

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CONSUMER BENEFITS

5. Free preventative care (except grandfathered plans)
 - No co-pays, co-insurance, or deductibles
 - Ex: immunizations, blood pressure, diabetes, cholesterol, cancer screenings
 - USPSTF Rated A/B (+ Mammography for women over 40)
 - www.healthcare.gov/preventive-care-benefits
 - Colonoscopies **AND** removal of polyps
 - BRCA genetic screening **AND** testing
6. Also: minimum essential health benefits, Summary of Benefits of Coverage, medical loss ratio

HEALTH INSURANCE APPEALS

- Denials of coverage
 - Internal appeals
 - External appeals
 - State Health Insurance Agency
 - www.triagecancer.org/resources/stateresources
 - Ex: clinical trials, experimental, investigational, off label, prescription drugs, imaging tests, etc.
 - 39 - 59% of appeals won, so don't take "no" for an answer

NEW MEDICARE BENEFITS

1. Free Wellness Visit
2. Free Preventative Care
3. Lowers the cost of prescription drugs



2017: Part D deductible = \$400;
Donut hole between \$3,700 and \$7,425 (in total drug costs)

www.medicare.gov/pubs/pdf/10050.pdf

Year	What you pay for brand name drugs in the coverage gap	What you pay for generic drugs in the coverage gap
2017	40%	51%
2018	35%	44%
2019	30%	37%
2020	25%	25%

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CONSUMER PROTECTIONS

1. Premium Rating:

- Individual Plan/Family Plan
- Geographic location (by zip code)
- Age (64-year-old can't be charged more than 3 times what a 21-year-old can)
- Tobacco (some states have eliminated this: e.g., CA, DC, CT)

2. No Pre-Existing Condition Denials/Exclusions

Insurance companies **cannot** look at:

- Pre-existing condition (physical or mental) or health history
- Gender or age

HEALTH INSURANCE REQUIREMENT

Most U.S. citizens & lawfully present must have health insurance

What coverage counts?

Employer or Individual Plans

COBRA/HIPAA Plans

Medicare, Medicaid, Veterans Health

High Risk Pools, & others

How much is the penalty?

Year	Adult Penalty	Child Penalty	Family Max	or % of Income, whichever is more
2014	\$95	\$47.50	\$285	1%
2015	\$325	\$162.50	\$975	2%
2016 & 2017	\$695	\$347.50	\$2,085	2.5%

Fine collected through IRS annual taxes

REQUIREMENT TO HAVE HEALTH INSURANCE

- Can have 1 gap up to 3 months during the year
 - Lines up with 90-day waiting period for employer health insurance
- Penalty is per month: only pay 1/12 of yearly penalty for each month you're uninsured

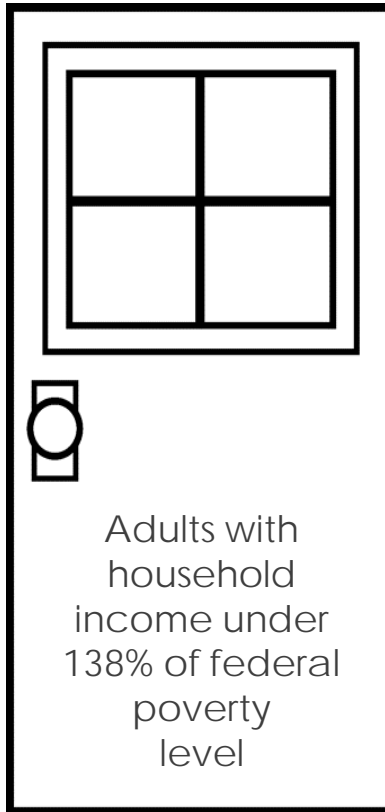
Who Doesn't Need to Purchase Health Insurance?

- If cheapest plan costs more than 8% of household income
- Taxpayers with incomes below \$10,300 (single under 65 — 2016)
- Members of Indian tribes and healthcare-sharing ministries
- Members of recognized religious sects with religious objections
- Individuals who are not lawfully present or incarcerated
- More: www.healthcare.gov/health-coverage-exemptions/exemptions-from-the-fee

NEW HEALTH INSURANCE OPTION #1

New category
(door) of eligibility:

- No asset/
resource test



Household Size	138%*
1	\$16,642
2	22,411
3	28,179
4	33,948
5	39,716
6	45,484

*Except Alaska & Hawaii

STATE MEDICAID EXPANSION IN 2017

Expanded 32	Not Expanded 19
AK ⁵ , AR ⁴ , AZ, CA, CO, CT, DC, DE, HI, IA ⁴ , IL, IN, KY, LA ⁷ , MA, MD, MI ¹ , MN, MT ⁶ , ND, NH ³ , NJ, NM, NV, NY, OH, OR, PA ² , RI, VT, WA, WV	AL, FL, GA, ID, KS, ME, MO, MS, NC, NE, OK, SC, SD, TN, TX, UT, VA, WI, WY

Updated: 7/7/2016 (information changes frequently, please check for updates)

¹ MI expansion began 4/1/14, ² PA expansion began 1/1/15, ³ NH expansion begins 1/1/16

⁴ IA and AR implemented expansion through premium assistance & wrap around Medicaid

⁵ AK expansion began 9/1/15

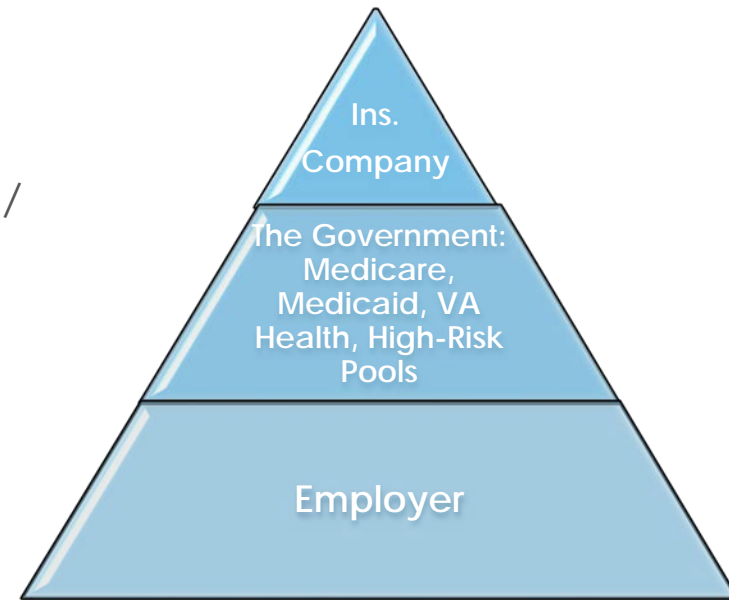
⁶ MT enrollment began 11/2/15 for coverage that begins 1/1/16

⁷ LA Governor signed Executive Order for expansion to begin 7/1/16

NEW HEALTH INSURANCE OPTION — #2

State Health Insurance Marketplaces

- “Exchanges” = insurance shopping mall
- Benefits:
 - Cap on OOP max: \$7,150 individual / \$14,300 family
 - Financial help
 - Premium tax credits
 - Cost-sharing subsidies
 - Essential Health Benefits = Quality Control



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MARKETPLACE PLAN OPTIONS

Standardized cost-share:


Now
66%



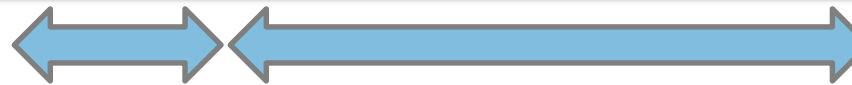
Catastrophic coverage (under 30 or \$ hardship)

STATES EXPANDING MEDICAID

Cost-Sharing Subsidies (Silver Plans Only)



Household Size	100% (2017)	138% (2017)	250% (2016)	400% (2016)
1	\$12,060	\$16,642	\$29,700	\$47,520
2	16,240	22,411	40,050	64,080
3	20,420	28,179	50,400	80,640
4	24,600	33,948	60,750	97,200
5	28,780	39,716	71,100	113,760
6	32,960	45,484	81,450	130,320



Medicaid

Premium Tax Credits

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STATES NOT EXPANDING MEDICAID

Cost-Sharing Subsidies
(Silver Plans Only)

Household Size	100% (2017)	138% (2017)	250% (2016)	400% (2016)
1	\$12,060	\$16,642	\$29,700	\$47,520
2	16,240	22,411	40,050	64,080
3	20,420	28,179	50,400	80,640
4	24,600	33,948	60,750	97,200
5	28,780	39,716	71,100	113,760
6	32,960	45,484	81,450	130,320

~~Medicaid~~ Premium Tax Credits

FINANCIAL ASSISTANCE...THE DETAILS

- Final amount of financial assistance is based on your actual income by the end of the year
 - If income is more, you may have to repay
 - If income is less, you may get a larger credit at tax time

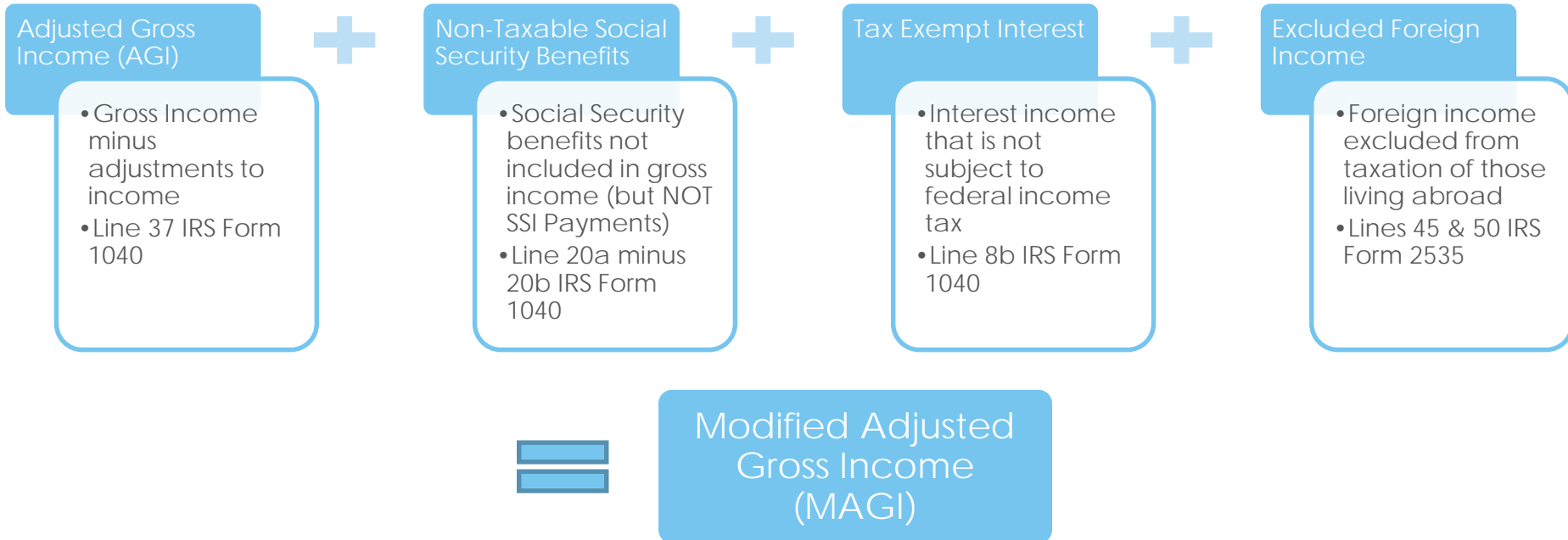
**Report changes as soon as possible*

WHO TO INCLUDE IN YOUR HOUSEHOLD?

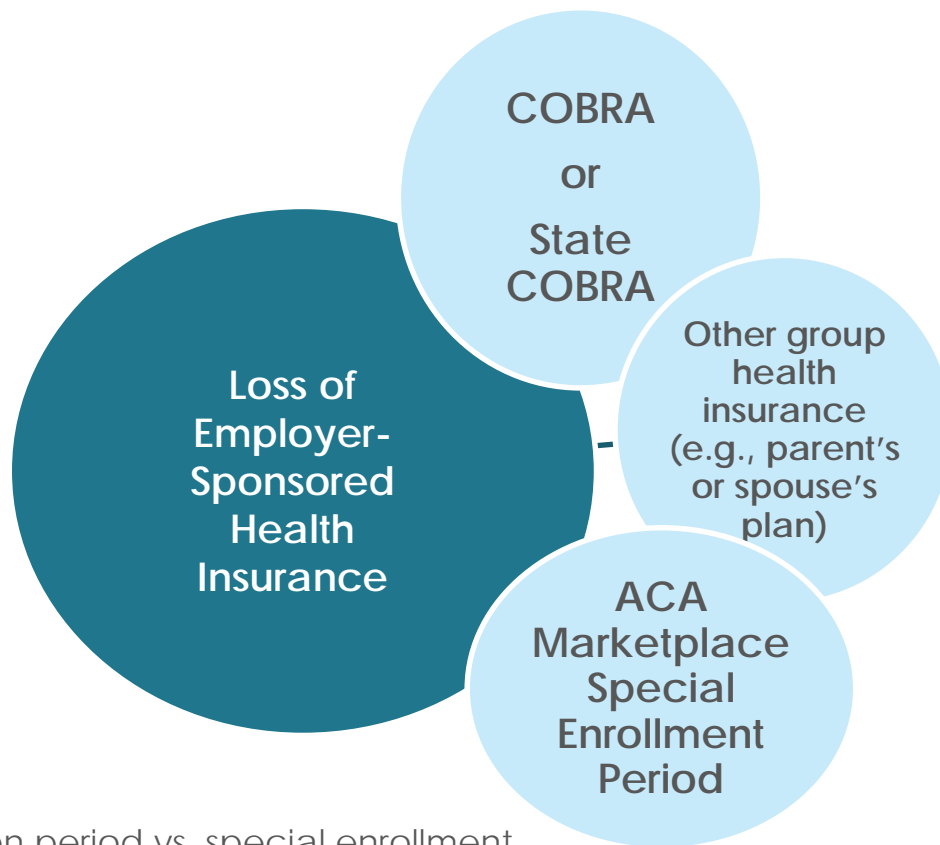
Relationship	Include in household?	Details
Dependent child, including adopted and foster child	Yes	Include any child you claim as a tax dependent, regardless of age.
Child, shared custody	Sometimes	Include child whose custody you share only during years you claim them as tax dependents.
Non-dependent child under 26	Sometimes	Include them only if you want to cover them on your Marketplace plan.
Children under 21 you take care of	Yes	Include any child under 21 you take care of and who lives with you, even if not your tax dependent.
Dependent parents, siblings, or other relatives	Yes	Include only if you'll claim them as tax dependents.
Legally separated or divorced spouse	No	Don't include a legally separated or divorced spouse, even if you live together.
Spouse	Yes	Include your spouse if legally married, unless a victim of domestic violence

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WHAT INCOME TO INCLUDE



LIFE-CHANGING EVENT



* Election period vs. special enrollment period

* May elect COBRA while waiting for Marketplace

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HOW TO ENROLL



Enrollment:

- Website: [HealthCare.gov](https://www.healthcare.gov) or [state marketplace](#)
- Toll-free phone hotline: 800-318-2596
- Paper application: mail or fax
- In-person: places to get help enrolling
 - Marketplace Assister Organizations
 - www.healthcare.gov/contact-us/

WHEN TO ENROLL?

- Medicaid applications accepted year round
- 2017 Open Enrollment Period: closed
- 2018 Open Enrollment Period: **new!**
November 1, 2017 to December 15, 2017
 - California – November 1 to January 31
 - Colorado – November 1 to January 12
 - D.C. – November 1 to January 31
 - Massachusetts – November 1 to January 31
 - Minnesota – November 1 to January 14
 - Washington – November 1 to January 1



SPECIAL ENROLLMENT PERIOD

When you have a life-changing event . . .

- Loss of minimum essential coverage, for example:
 - Change in full-time employment status
 - Loss of employer-sponsored insurance
 - Change in dependent status as a result of turning 26
 - COBRA ending
- Birth or adoption of a child
- Marriage, domestic partnership, divorce, legal separation
- Moving regions or states
- Gain eligible immigration status
- Release from incarceration
- Military returning from active duty

. . . you have 60 days to enroll in Marketplace plan

WHERE TO START

The screenshot shows the HealthCare.gov website interface. At the top, there is a navigation bar with 'HealthCare.gov' on the left, and 'Individuals & Families', 'Small Businesses', 'Español', and 'Log in' on the right. Below this is a secondary navigation bar with 'Get Coverage', 'Keep or Update Your Plan', 'See Topics -', and 'Get Answers'. A search bar with the text 'Search' and a 'SEARCH' button is also present. The main content area features a large image of a man holding a young child. Overlaid on this image is the text 'Need health insurance?' in large white font, followed by a smaller line of text: 'You can enroll in or change plans if you have certain life changes, or qualify for Medicaid or CHIP'. Below this text are two green buttons: 'SEE IF I CAN ENROLL' and 'SEE IF I CAN CHANGE'. A link 'Want a quick overview first?' is positioned below the buttons. At the bottom of the main content area, there is a dark blue banner with a document icon, the text 'NEED TO SUBMIT DOCUMENTS?', and a 'SEE HOW' button. Below this banner is a footer with four icons and corresponding text: a document icon for '1095 & TAX INFO', a calculator icon for 'GET 2016 EXEMPTIONS', a plus sign icon for 'USE YOUR COVERAGE', and a person icon for 'CONTACT US'.

www.HealthCare.gov/see-plans

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OVERVIEW

People covered: Primary (Age 40) with estimated tax credit of \$39.85 per month

27 plans available

SORT BY: Premium

PLAN TYPE: [Dropdown]

FILTERS

- Monthly premium
 - less than \$200 (3)
 - less than \$300 (21)
 - less than \$400 (27)
- Plan category
 - Bronze plans (7)
 - Silver plans (11)
 - Gold plans (7)
 - Platinum plans (2)
- Plan type
 - PPO (14)
 - HMO (13)
- Medical management programs
 - Asthma (19)
 - Heart Disease (27)
 - Diabetes (27)
 - High Blood Pressure and High Cholesterol (19)
 - Pregnancy (8)
 - Weight Loss Programs (19)
- Insurance companies
 - Blue Cross and Blue Shield of Kansas, Inc. (14)

BlueCross BlueShield Kansas Solutions, Inc. · BlueCare Solutions Simple Bronze

Bronze HMO | Plan ID: 27811KS0030008

Estimated monthly premium \$173 Premium before tax credit: \$213	Deductible \$6,000 Estimated Individual Total	Out-of-pocket maximum \$6,000 Estimated Individual Total
Estimated total yearly costs CALCULATE	Your doctors, medical facilities, and prescription drugs EDIT BETA	Copayments / Coinsurance Emergency room care: No Charge After Deductible Generic drugs: No Charge After Deductible Primary doctor: No Charge After Deductible Specialist doctor: No Charge After Deductible

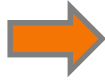
LEARN MORE ABOUT THIS PLAN **COMPARE**

BlueCross BlueShield Kansas Solutions, Inc. · BlueCare Solutions Bronze

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Sanford Health Plan · Sanford TRUE \$6,000

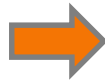
Bronze | HMO | Plan ID: 89364ND0090007



Estimated monthly premium \$132.66 Was: \$256.39	Deductible \$6,000 Individual Total	Out-of-pocket maximum \$7,150 Individual Total	Copayments / Coinsurance Emergency room care: 40% Coinsurance after deductible Generic drugs: \$40 Primary doctor: \$45 Copay before deductible/40% Coinsurance after deductible Specialist doctor: 40% Coinsurance after deductible
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Blue Cross Blue Shield Of North Dakota · BlueDirect 80 Silver

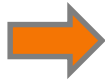
Silver | PPO | Plan ID: 37160ND2410014



Estimated monthly premium \$239.15 Was: \$362.88	Deductible \$2,600 Individual Total	Out-of-pocket maximum \$6,550 Individual Total	Copayments / Coinsurance Emergency room care: 20% Coinsurance after deductible Generic drugs: 20% Coinsurance after deductible Primary doctor: 20% Coinsurance after deductible Specialist doctor: 20% Coinsurance after deductible
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Medica · Medica Applause Gold Copay Plus

Gold | POS | Plan ID: 73751ND0080019



Estimated monthly premium \$391.20 Was: \$514.93	Deductible \$1,000 Individual Total	Out-of-pocket maximum \$4,000 Individual Total	Copayments / Coinsurance Emergency room care: \$150 Generic drugs: \$5 Primary doctor: \$30 Specialist doctor: \$30
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The Math Matters!

Total potential costs for year = 12 months of premiums + OOP max

#1:
 $\$132.66 \times 12 = \$1,591.92$
 + OOP = \$7,150
 Total = \$8741.92

#2:
 $\$239.15 \times 12 = \2869.80
 + OOP = \$6,550
 Total = \$9419.80

#3:
 $\$391.20 \times 12 = \$4,694.4$
 + OOP = \$4000
 Total = \$8694.40

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DIFFERENCES BETWEEN PLANS?

- Cost
 - Premium, Out of Pocket, Co-Pay, Cost-Share
- Networks of doctors and hospitals
 - Check to make sure your doctors are covered by the plan you choose
- Co-payments
- Prescription drug coverage
 - Which drugs are covered?
 - Is there a separate drug deductible?

CHECKING PROVIDERS & DRUGS

Enter your doctors, medical facilities & prescription drugs to see if they're covered by each plan

You save money by using doctors and facilities (like hospitals and pharmacies) in a plan's network -- and drugs it covers.

Search for and select your doctors, facilities, and prescription drugs below.

When you compare plans, you'll see if your selected doctors and facilities are in a plan's network, and if your drugs are covered. You'll see all plans, even if your selections aren't covered. *(Information on group practices will be available in the future.)*

Information is provided by the Insurance companies. Some information may be out of date, and plans change which doctors and drugs are covered during the year. Check with your doctor and the insurance company before enrolling to make sure your doctors and drugs are covered.

Enter ONE doctor, facility, or prescription drug at a time

SEARCH

Blue Cross Blue Shield Of North Dakota · BlueDirect 80 Silver

Silver | PPO | Plan ID: 37160ND2410014

Estimated monthly premium
\$239.15
Was: \$362.88

Deductible
\$2,600
Individual Total

Out-of-pocket maximum
\$6,550
Individual Total

Copayments / Coinsurance
Emergency room care: 20%
Coinsurance after deductible
Generic drugs: 20%
Coinsurance after deductible
Primary doctor: 20%
Coinsurance after deductible
Specialist doctor: 20%
Coinsurance after deductible

Estimated total yearly costs
\$9,436

EDIT

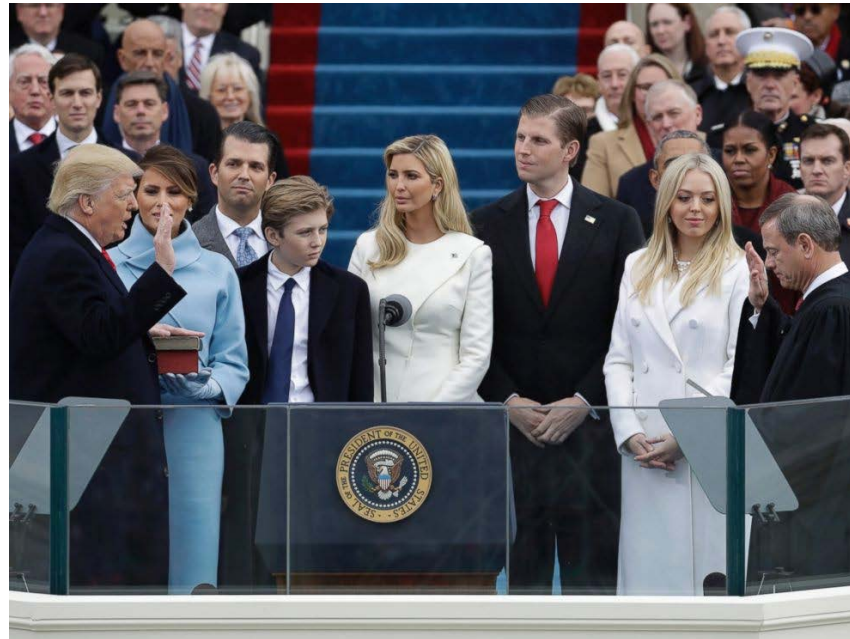
DOCTORS, FACILITIES & DRUGS COVERED

EDIT



**EDUCATIONAL
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ELECTIONS HAVE CONSEQUENCES



“Nobody knew health care could be so complicated.”

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WHAT'S ON THE TABLE? EVERYTHING.

- NCI & NIH - funding reductions
- FDA - roll back
- CHIP - reauthorization
- Medicare - privatization, vouchers, increase age
- Medicaid - block grants
- ACA
 - Medicaid Expansion
 - Marketplace + financial assistance
 - Consumer Protections
 - Individual & Employer Mandate
 - 21st Century Cures Act & Prevention Fund

TOP TAKEAWAYS

1. Can't be denied health insurance and can't be charged more because of your health condition
2. Weigh your options carefully — when looking at plan options, the math matters!
3. Appeal denials of coverage
4. Learn more about how the ACA & other laws that impact the cancer community
 - Triage Cancer Blog: <http://TriageCancer.org/blog>
 - Quick Guides & Other Resources: <http://TriageCancer.org/healthinsurance>
 - Webinars: <http://TriageCancer.org/webinars>

RESOURCES

Cancer and Careers

- Accredited Balancing Work & Cancer Webinars
(Survivors and Healthcare Professionals)
www.cancerandcareers.org/en/webinars
- Accredited Educational Series for Healthcare Professionals
www.cancerandcareers.org/en/edseries
- Midwest Conference on Work & Cancer
March 23, 2018, Chicago
www.cancerandcareers.org/en/midwest
- National Conference on Work & Cancer
June 22, 2018, New York City
<http://www.cancerandcareers.org/en/community/events/conference>
- Newsfeed
www.cancerandcareers.org/newsfeed
- Resume Review
www.cancerandcareers.org/resume_reviews/new

Cancer and Careers & Triage Cancer

- In-Service Trainings for Healthcare Professionals
– Navigating Cancer: Work & Insurance

Triage Cancer

- Educational Blog TriageCancer.org/Blog
- Events TriageCancer.org/Events
- Cancer Survivorship Webinar Series
TriageCancer.org/Webinars
- National & State Resources
TriageCancer.org/Resources
- Regional Conferences
TriageCancer.org/Conferences
- Quick Guides Triagecancer.org/QuickGuides
- Links to Partner Publications

MORE FROM CAC

2018 Conferences:

MIDWEST CONFERENCE ON WORK & CANCER*

Friday, March 23, 2018, Chicago, IL

NATIONAL CONFERENCE ON WORK & CANCER*

Friday, June 22, 2018, New York City, NY

Upcoming Webinar:

BODY CONFIDENCE, SELF-CONFIDENCE IN THE WORKPLACE

December 13th, 2017 at 1:00 pm ET/10:00 am PT

<http://www.cancerandcareers.org/en/community/events/webinar-confidence>

Free Publications

www.cancerandcareers.org/publication_orders/new

*Travel scholarships available.



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If you plan on requesting continuing education credits, you **MUST** complete all of the following steps:

1. You must have registered online for today's session
2. Dial-in to the audio portion of the webinar
Please note that participants who "listen-in" on another participant's line will NOT be eligible for credit.
3. Within **2 WEEKS** of this session:
 - ✓ Complete the evaluation*
 - ✓ Complete the post-test & earn a passing grade*

***An email with links to the evaluation and post-test will be sent Friday, November 17 by 5:00 PM ET.**

****Certificates will be emailed within 4-6 weeks****