# JAMES "TIGER" MORTON CATASTROPHIC ILLNESS COMMISSION

2024 Annual Report



Julie Palas, Executive Director January 2025

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Since 2000, the James "Tiger" Morton Catastrophic Illness Commission (Commission) has provided lifesaving interventions to more than 2,028 West Virginians. The Commission is a last resort for those in dire need of medical assistance where the risk of death is imminent, and no other resources are available. Six Commissioners are appointed by the Governor, including a doctor, lawyer, social worker, nurse, and two members-at-large.

The Commission makes direct payments to providers through the West Virginia Department of Human Services' (DoHS) Medicaid program, administered by the Bureau for Medical Services (BMS), for individuals who are not eligible for Medicaid benefits yet cannot afford to pay costs associated with catastrophic illness. Many West Virginians live just above the federal poverty level; they cannot afford insurance and are not eligible for state assistance. Given the greater prevalence of severe illness and disease among the West Virginia population compared to many other states, the mission of the Catastrophic Illness Commission is vital. (See Appendix.)

The Commission's executive director consults with the Commissioners, BMS, and hospital charity care programs to determine if applicants are eligible. Before receiving assistance from the Commission, an eligible applicant must apply for and be denied coverage by Medicaid and attempt to obtain health insurance coverage through the Affordable Care Act (healthcare.gov) or private insurance options.

Assistance provided by the Commission includes lifesaving medical treatments and related travel costs. Assistance is capped at \$200,000 for medical services and \$5,000 for transportation costs. Examples of covered expenses include:

- Proven and accepted medical procedures, such as surgery, transplants, and chemotherapy;
- Medication that prevents rejection after a transplant or recurrence of a life-threatening illness; and
- Gasoline, lodging, airfare, and car rental expenses related to medical appointments or treatments.

Through direct financial assistance and referrals to other programs, the Commission assisted 199 individuals in calendar year 2024 (January 1 through November 30). Eighteen additional applications are projected through the end of December. Partnering programs include West Virginia 211, American Cancer Society, Angel Flight, FindHelp.org, Patient Access Foundation, Patient Advocate Network, United Way, West Virginia Breast Health Initiative, local and state health providers, hospital financial counselors, regional community action agencies, hotels with discounts for medical clients, and local cancer and chronic disease assistance programs. Numerous other referral options were also utilized. By working with these partners and available resources, the Commission maximizes the aid provided to clients.

A key objective of the Commission is to leverage scarce resources for maximum benefit. An example of leveraging can be seen in the Commission's historical data: for every dollar billed to the Commission for providing lifesaving care of a West Virginia resident, the Commission pays only 20 to 25 cents by paying at Medicaid rates. Not only does the Commission save lives, but it saves money.

Examples of continuing assistance provided in 2024:

- 62-year-old male with myeloma cancer; provided travel assistance
- 61-year-old male needing a lung transplant; received medical treatment and travel assistance
- 48-year-old female with breast cancer and lung disease; received out-of-state travel assistance
- 62-year-old female with breast cancer; received transportation for treatment
- 85-year-old female with leukemia; received medical treatments
- 62-year-old male needing a liver transplant; provided out-of-state travel assistance
- 67-year-old female with uterine cancer; received travel assistance

General revenue funds of \$60,164 were allocated to the Commission by the West Virginia Legislature in SFY 2022. With the expected increase of individuals receiving assistance from the Commission, the allocated amounts for SFY 2023 and 2024 were \$120,852 and \$373,424 respectively. The Commission's overall spending authority for SFY 2025 was raised to \$536,984 in anticipation of an increased need for coverage. Funds are used for salaries, operating expenses, client medical assistance, and related travel expenses.

The number of applications for assistance decreased by half in 2020 due to a reduction in referrals. However, the dollar amount of medical claims received by the Commission did not decrease until 2021; it increased again in 2024. Travel expenses increased each year from 2022 to 2024 (see chart below). Applications also increased from 2022 to 2024 (see chart on last page) due to a robust public relations campaign and lifting the Public Health Emergency related to COVID-19 allowing Medicaid to disenroll members who no longer qualify.

James "Tiger" Morton Catastrophic Illness Commission Financial Snapshot: SFY 2019 - 2024											
Medical Claims Received	2019 \$1,361,486 (approx.)	increase of 100% from SFY 2018 (was \$677,365)									
from Providers	2020 \$1,386,770 (approx.)	increase of 1.85% from 2019									
	2021 \$ 154,377 (approx.)	decrease of 89% from 2020									
	2022 \$ 55,674 (approx.)	decrease of 64% from 2021									
	2023 \$ 55,364 (approx.)	decrease of .006% from 2022									
	2024 \$ 102,163 (approx.)	increase of 86% from 2023									
Medical Claims Paid by	2019 \$ 282,964 (approx.)	increase of 60% from SFY 2018 (was \$176,638)									
Medicaid on behalf of the	2020 \$ 235,726 (approx.)	decrease of 16.7% from 2019									
Commission*	2021 \$ 60,200 (approx.)	decrease of 74.5% from 2020									
	2022 S 10,593 (approx.)	decrease of 82.5% from 2021									
	2023 \$ 25,279 (approx.)	increase of 238.6% from 2022									
	2024 \$ 19,768 (approx.)	decrease of 22% from 2023									
Travel Costs Paid by the	2019 \$ 13,191 (approx.)	decrease of 40.5% from SFY 2018 (was \$32,253)									
Commission	2020 \$ 15,898 (approx.)	increase of 21% from 2019									
	2021 \$ 4,579 (approx.)	decrease of 71.5% from 2020									
	2022 \$ 11,751 (approx.)	increase of 257% from 2021									
	2023 \$ 14,494 (approx.)	increase of 23.4% from 2022									
	2024 \$ 22,866 (approx.)	increase of 58% from 2023									

<sup>\*</sup>Payment amounts do not include outstanding claims returned for corrections.

Since October 1, 2015, the Commission has reduced operational costs as the executive director assumed the additional duties of a second DoHS Commission. Salaries and office expenses were shared equally until October 23, 2022. Due to recommendations made in the 2022 Legislative Audit on the Commission, the Commission executive director position was restored to a full-time position, and all salaries and office expenses will now be covered by the Commission budget. The full Legislative Audit Report is available online at www.wvlegislature.gov/legisdocs/reports/agency/PA/PA\_2022\_743.pdf.

The Commission is considered a 170(c)(1) governmental entity for a charitable public purpose. As such, donations to the Commission may be tax-deductible, but donors are advised to consult with their tax advisor to be certain. To date, requests to multiple foundations and charitable organizations have been made without any success. The Commission has also reached out to political subdivisions within the State. One county responded to a request for aid with two \$3,000 grants, and similar requests have been made to additional political subdivisions. Despite these efforts, the Commission believes that the majority of funds necessary to continue providing services will have to come from budgetary resources, such as legislative appropriations. The Commission continues to provide educational presentations and materials at conferences, outreach events, and online media outlets to increase awareness about the Commission's services for West Virginians with lifethreatening illnesses.

The chart below identifies by county West Virginians who received both in-kind assistance and financial assistance from the Commission. One hundred and nine individuals received in-kind assistance, and 39 were covered/waitlisted for assistance in 2019; 37 received in-kind assistance and 34 were waitlisted for assistance in 2020; 25 received in-kind assistance and 10 were waitlisted/covered for assistance in 2021; 36 received in-kind assistance and 16 were covered in 2022; 108 received in-kind assistance and 21 were covered in 2023; and 170 received in-kind assistance and 29 were covered in 2024. These numbers do not include individuals the Commission continues to assist from previous years or applications taken after November 30, 2024.

### Catastrophic Illness Commission Clients: Calendar Years 2019, 2020, 2021 2022, 2023, 2024

County	19	20	21	22	23	24	County	19	20	21	22	23	23	County	19	20	21	22	23	24
Barbour	3	1			2	1	Kanawha	14	10	4	5	11	18	Preston	1			1		
Berkeley	4	1		4	6	7	Lewis	1				2	2	Putnam	5		1		6	3
Boone	1	1	2	1	1	4	Lincoln	1	2			3	5	Raleigh	15	3	8	5	8	15
Braxton		1			1	1	Logan	3	2			2	5	Randolph	3	3				3
Brooke	2		1	1		1	Marion	3		1		3	2	Ritchie					6	1
Cabell	3	2		3		9	Marshall	2			2	1		Roane				1		2
Calhoun					1	1	Mason	2	3				4	Summers	2	1	1		2	
Clay	1	1		1			McDowell				1	3	2	Taylor	1			1		
Doddridge						2	Mercer	1	4	3		4	6	Tucker						
Fayette	6	6	2	5	8	11	Mineral	1				3	1	Tyler		1			1	2
Gilmer							Mingo	2	2	1		3	1	Upshur	1			1	2	
Grant	1	1	1				Monongalia	4	4	1		4	5	Wayne						
Greenbrier	5	2		3	4	3	Monroe	6				1	1	Webster	4	1			1	3
Hampshire	2				1	3	Morgan		1				1	Wetzel	2				2	
Hancock	2	1				2	Nicholas	4	1	2	2	4	1	Wirt						2
Hardy	4	1		1	3	1	Ohio	1	1			1	8	Wood	7	1		2	5	9
Harrison	12	3		1	6	8	Pendleton	1			1		1	Wyoming	3	2		1	1	7
Jackson	2		2	1	6	3	Pleasants			1			2	Unknown	7	7	4	4	10	26
Jefferson	2	1				2	Pocahontas	1			2	1		TOTAL	148	71	35	50	129	199

The Commission remains committed in its efforts to continue assisting West Virginians with catastrophic illnesses who are without other resources to enable them to receive the life-saving treatment they need.

## James "Tiger" Morton Catastrophic Illness Commission Members

**Sandra Cotton**, Registered Nurse, Monongalia County **Whitney Courtney**, Physician, Harrison County **John Davidson**, **Jr.**, Member-at-Large, Kanawha County

Patricia Davis, Member-at-Large, Hampshire County Genie Hupp, Social Worker, Kanawha County Jacques Williams, Chair, Attorney, Monongalia Count

<sup>&</sup>lt;sup>1</sup> From November 2019 to October 2021, the Commission utilized a waitlist for new applicants due to the anticipated obligations of current clients. The waitlist was lifted in October 2021 and the Commission resumed accepting eligible clients for financial assistance with medical services and related travel.

#### Appendix

# West Virginia Data on Individuals with Chronic Diseases and Life-threatening Illnesses including Cardiovascular Disease and Cancer

In 2023, West Virginia had some of the highest prevalence rates of cancer, angina/coronary heart disease, heart attack/myocardial infarction, and stroke. These data are from the Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS). Of note, these are not diagnoses made in 2023, but adults reporting they had **ever** had this diagnosis.

Among West Virginia adults 18 years of age and older, the prevalence of ever been diagnosed with:

- Cancer (non-skin cancer): 10.3% reported they had ever been diagnosed, one of the top five rates among all states and DC; compared to the national median rate of 8.4%
- Angina/coronary heart disease: 6.7% reported they had ever been diagnosed, the highest rate among all states and DC; compared to the national median rate of 4.0%
- Heart attack/myocardial infarction: 7.7% reported they had ever been diagnosed, highest rate among all states and DC; compared to the national median rate of 4.2%
- Stroke: 5.2% reported they had ever been diagnosed, second highest rate among all states and DC;
   compared to the national median rate of 3.3%.

According to the CDC Interactive Atlas of Heart Disease and Stroke (www.cdc.gov/dhdsp/maps/atlas/index.htm):

- WV had a higher rate of avoidable heart disease and stroke deaths per 100,000 for those **under 75 years of age** than the national rate; WV rate is 88.7 per 100,000 and US rate is 61.5 per 100,000. (This data included the years 2019-2021 (most recent available), among all genders, all races/ethnicities, and included all ages under 75.)
- WV had a higher rate of avoidable heart disease and stroke deaths per 100,000 for those **35 years of age** and older than the national rate; WV rate is 391.5 per 100,000 and US rate is 310.3 per 100,000. (This data included the years 2019-2021 (most recent available), among all genders, all races/ethnicities, and includes all ages 35+.)
- WV had a higher rate of coronary heart disease deaths; WV rate is 248.2 per 100,000 and US rate is 177.5 per 100,000. (This data included the years 2019-2021, all genders, all races/ethnicities, and included ages 35+.)
- WV had a higher rate of heart failure deaths; WV rate is 233.4 per 100,000 and US rate is 193.8 per 100,000). (This data included the years 2019-2021, all genders, all races/ethnicities, and included ages 35+.)

The National Institutes of Health (NIH) National Cancer Institute provides state profiles which have more information on state cancer **incidence\*** and **mortality** rates

(statecancerprofiles.cancer.gov/quick-profiles/index.php?statename=westvirginia):

- Age-adjusted incidence rates by cancer site, all stages (2017-2021):
   All cancer sites: WV rate 489.8 per 100,000 population per year; US rate 444.4 per 100,000 population per year.
- Age-adjusted mortality rates by cancer site (2018-2022):
   All cancer sites: WV rate 178.2 per 100,000 population; US rate 146.0 per 100,000 population.

During the respective time periods, West Virginians had a higher incidence rate of cancer (all types), and also had a higher mortality rate of cancer (all types), compared to the US rates.

\*Please note that cancer incidence data that includes 2020 includes the beginning of the COVID-19 pandemic where cancer diagnoses rates fell nationally, according to the National Cancer Institute (<a href="https://www.cancer.gov/news-events/press-releases/2024/covid-pandemic-impact-on-new-cancer-diagnoses">https://www.cancer.gov/news-events/press-releases/2024/covid-pandemic-impact-on-new-cancer-diagnoses</a>). Researchers are monitoring ongoing data around new cancer diagnoses for insights on ongoing cancer diagnoses and outcomes.