



January 28, 2021 ~ Boston, MA
Insurance & Finance Intensive
Registration Form

Please answer the following questions to register for a free Triage Cancer Insurance & Finance Intensive in Boston, MA on January 28, 2021. Please return this completed form to info@TriageCancer.org.

Thank you.

First Name: _____ Last Name: _____

Email Address: _____ Phone: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Company/Organization (if applicable) _____

Title (if applicable) _____

How did you hear of this intensive? _____

Are you planning on requesting free continuing education credits?

- ☐ Yes, nursing
- ☐ Yes, social work
- ☐ N/A

Do you need an accommodation (e.g., special meal, wheelchair accessible, etc.)?

- ☐ Yes
- ☐ No

If you need an accommodation, please describe: _____

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We appreciate your time to answer the questions below so that we may better address your needs during the intensive.

1. Is the average age of the patients you serve?

☐ Under 18

☐ 18-25

☐ 26-40

☐ 41-50

☐ 51-60

☐ 61-70

☐ 71-80

☐ Over 80

2. Do your patients ask for guidance on possible health insurance options?

☐ Yes

☐ No

☐ N/A

3. How comfortable are you answering patients' questions about health insurance options?

☐ Very Comfortable

☐ Comfortable

☐ Somewhat Comfortable

☐ Not Comfortable

4. How comfortable are you answering patients' questions about changes to our health care system?

☐ Very Comfortable

☐ Comfortable

☐ Somewhat Comfortable

☐ Not Comfortable

5. Do your patients ask you for help appealing health insurance claim denials?

☐ Yes

☐ No

☐ N/A

6. Have your patients ever asked you for help navigating short and long-term disability insurance options?

☐ Yes

☐ No

☐ N/A

7. Do your patients ask you for help appealing disability insurance claim denials?

☐ Yes

☐ No

☐ N/A

8. How comfortable are you answering patients' questions about the disability appeals process?

☐ Very Comfortable

☐ Comfortable

☐ Somewhat Comfortable

☐ Not Comfortable

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9. Do your patients ask for guidance on managing their finances?

☐ Yes

☐ N/A

☐ No

10. How comfortable are you answering patients' questions about managing their finances?

☐ Very Comfortable

☐ Somewhat Comfortable

☐ Comfortable

☐ Not Comfortable

11. What is the biggest concern your patients have with respect to insurance and finances?
