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JIM: Today’s program is a must listen-to to anyone earning a paycheck, especially those that might have recently graduated from college. Joining us today is Camille Snyder who, at age 29, is the youngest NAIFA Jackson president in the organization’s 56-year history. However, at age 23, she was diagnosed with life-threatening cancer. Today, she’s going to share her story as to how she both physically and financially survived an almost two year journey and how, now, her experiences have shaped her and what she does to help others to avoid the mistakes that she made at such an early age. Welcome, Camille.

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CAMILLE SNYDER: Thanks Jim. Glad to be here today.

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JIM: I am so glad to have you and, today, we’re going to talk about your own personal story and I think it’s something that a lot of people can learn from and my understanding is it actually inspired you to make a career choice so why don’t we start out with tell us a little bit about your professional career.

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CAMILLE SNYDER: Sure. When I graduated from college, I went to work for a young technology firm in Washington, DC and I was in sales and I sold software to Fortune 500 companies and nonprofits and mom-and-pop shops, just about anybody who I could get an appointment with. At the age of 22, I had a great income and a great career ahead of me and, really, I was on top of the world and life was going great and then an unexpected life event happened. It sort of, I have to say, it really changed the trajectory of my career and everything else.

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JIM: So, tell us a little bit. What happened?

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CAMILLE SNYDER: Well, when I was 23, I was asked to go to India and help manage the international sales team that this young technology firm had that was selling in the UK and Australia and I was really excited about it. After being in India for about six weeks, I was actually diagnosed with Stage 4 oral tongue cancer and it was completely out of the blue. I didn’t have any risk factors. I didn’t smoke. Cancer doesn’t even run in our family so it was a total fluke that I was diagnosed with cancer and I was diagnosed actually in India so I flew back to the United States thinking once I get back stateside, I’ll have a physician look at these results, we’re just going to get this whole thing worked out. I’m sure there’s a mix-up somewhere. It was a pretty long flight from India back to the United States and, when I got back to the United States, the physicians confirmed what the physicians in India had diagnosed. It was Stage 4 oral tongue cancer and, actually, the physicians in India probably saved my life because, in India, they have a higher incidence of oral cancer so they knew exactly what it was when they looked at it.

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JIM: What was going through your mind at that point? You had the whole world by the tail, so to speak, and life is looking really good and, now, you’re dealt this prognosis. What was going through your mind at the time?

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CAMILLE SNYDER: Well, I have to say, I was one of those people who, up until that point, had been invincible. There had not been much in my life that I was not able to overcome. There had not been much in my life up until that point that had caused real adversity in my life so, when I was diagnosed, I thought this can’t be right. It absolutely can’t be right. I guess they call that denial sort of in the first stage but, then, I was fortunate enough to have a choice of where I was treated and I was treated at MD Anderson out in Houston, Texas, which is a phenomenal hospital. We have so many great hospitals across the United States and, fortunately, MD Anderson is one of them. The physicians there had to break the news that my prognosis was not very good and, best-case scenario, I would probably not be able to communicate on the same level I had because of speech impediment or having a good portion of my tongue removed because I had tongue cancer so that has consequences and what it means to sit down and eat dinner with friends or with family or how you are able to work and how you’re able to communicate with people so, best-case scenario, I would probably have difficulty eating independently, being understood by those around me, and that was the best-case scenario. I thought you have got to be kidding. Again, I had been on top of the world so I was one of those people who pretty much thought I was invincible up until that time and, then, after you have a conversation like that and you’re actually in the clinic and in the hospital room and the physicians come in with a team of two or three to make sure they answer several questions, the weight of the diagnosis and, really, of the prognosis, too, became very real.

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JIM: You’re talking about you were working with a technology company. I look at most people that are just coming out of college. We saw all of the statistics for young folks with health insurance and it sounds like you at least had health insurance, right?

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CAMILLE SNYDER: I did. I had a great health insurance policy that I paid. I remember every month seeing it come out of my paycheck and thinking, man, I wonder if that’s worth it because it was pretty expensive but I had health insurance through my firm and I also had a group disability insurance through my firm.

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JIM: Now, was that something you elected to buy, the disability insurance, or was that something that was just provided as a benefit?

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CAMILLE SNYDER: It was provided as a benefit and I cannot remember because it was so long ago but I believe I opted into it but the employer paid the premium.

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JIM: So, being 23, I know from having my own kids in that age group right now, talking to them about insurance, you might as well talk to them about physics and they’re not physics people. Their eyes glaze over and they think well what would I need insurance for, that’s for when people get older, and disability income, I think back. I’ve been in this business for a long time. I started in the health business, didn’t really understand disability income for the first several years I was in the business and I didn’t have my own disability income and I know when I first looked at it, I thought I’m in sales, I’m in counseling for clients, I’m advising clients. The only way I wouldn’t be able to sell, I mean they could wheel me in a wheelchair and I could still talk about it. As long as I have my mind and ability to speak, I should be okay. Now, here you are in sales. It’s amazing that you did get the disability income. I’m sure if they didn’t offer it as a benefit, you wouldn’t have had it, but talk about how that worked for you and what that provided you because, if you’re going through cancer treatment, obviously, you’re not going to work every day, especially if you’re in sales and they’re doing surgery on your ability to speak.

7:10

CAMILLE SNYDER: Yeah, you are absolutely correct. I was fortunate that I actually had two financial advisors that I worked with, even at age 22 and 23. They sat me down and we would have meetings and they talked about the importance of systematic savings and having my own individual policy on top of what I had through work and they told me my income was going up. I needed to lock in my insurability as a young, healthy person and they asked me to fill out an application for a permanent life insurance policy and an individual disability policy outside of what I had through work. In our first meeting, I actually told them that I didn’t want to move forward with the application at that point in time because my car had overheated and I needed to get a new car, it was probably time for me to upgrade my vehicle, and they said, okay, not a problem, and a few weeks later, they wanted to get back together so we sat back down and we talked about the importance of systematic savings and protecting my ability to earn an income and all of these great wonderful things. The second time we sat down, I told them that I had roommates, I was living in Washington, DC, it’s a pretty expensive to live in. I had had roommates for a few years in college and then as a young professional and I wanted my own apartment so I said not now, I’ll do it later. Then, a few weeks after that, my two advisors said, okay, you need to get serious about this and so we sat down and I filled out a life insurance application for $250,000 of permanent whole life insurance and the policy had waiver of premium and paid-up editions and eight guaranteed purchase options and all of the bells and whistles possible. I told them I could fill out the life insurance application but I would not have time to fill out the disability insurance application at that point in time so they said no problem. My life insurance application went through underwriting. I received the best possible rating and we put the policy inforce immediately. After my permanent life insurance policy went inforce, about two months later, my advisors ask for another meeting to sit back down and to talk about an individual disability insurance policy so we sat back down and I began filling out the application for individual disability insurance and I had told them I had just gotten information at work and I was actually going to be spending time in India as a part of that. On that disability application, it asked if you will be spending time in a foreign country so I marked that I would and the dates that I was expected to return. The policy goes through underwriting and the company postponed coverage until I returned from the foreign county so, when I went to India, the only disability policy I had inforce was that group long-term disability coverage. It was a real lesson to me about how quickly your insurability can change and about the importance of taking action today and taking action now because there was probably 60 days of difference, maybe 70 days of difference, between when I took that life insurance application and when I took that disability insurance application. I had been promoted and found out that I was going to be in India between those two times and it made a difference.

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JIM: That’s an incredible story. We’re going to take a short break. When we come back, let’s talk a little bit more about the impact of this cancer that you came back to the United States for and how all of these coverages worked to help keep you financially sound so please stay tuned.

11:08

BREAK

11:26

JIM: Welcome back as we continue to visit with Camille Snyder. She is a cancer survivor but what’s unique about her story is getting cancer at a very young age where she was a young professional right out of college and she made choices few young people make and that is to make sure she had proper coverages. What we’ve been learning from Camille, it doesn’t matter what age you are, you really need to consider this in your overall plan and it’s something you should be working with your insurance professionals to make sure you’re adequately covered. Camille, before the break, you were talking about you were postponed on individual disability income insurance and you had some group disability income insurance so what happened when you came back to get your treatment?

12:06

CAMILLE SNYDER: Unfortunately, I did not have any individual disability coverage inforce and the first thing that happened is that I learned there is a huge difference between group long-term disability and individual long-term disability. For example, a group long-term disability plan, it often will cover about 60% of your base income and, if your employer pays the premium, it’s taxable. Another thing is that group long-term disability plans are often offset by any type of government program, such as social security, and employees don’t actually own the coverage so it can be modified or canceled and the cost isn’t guaranteed versus an individual policy, which, if you have an individual disability policy that’s non-cancelable and guaranteed renewable, that means that the benefits cannot be modified and coverage cannot be canceled as long as you pay the premiums and the cost of coverage is guaranteed. The benefits are tax-free when paid for with after-tax dollars. My first lesson is that there is a huge difference between the two and I was so appreciative that my employer had a group long-term disability plan in place and that I had opted in because it did help but it was not anything adequate enough to actually cover my lifestyle because I had been in sales so my base income was only a small part of my overall compensation and it was taxable so I went from having a great income to having only a part of that income and then it was taxable on top of that. The second thing I learned is that that new car and that apartment didn’t produce any income. In fact, they take income to be maintained and pay for auto insurance and all of those things so that was a big lesson about cash flow. What I did is I had to rely on my family to help fill that gap and to keep the lights on in my apartment. I think that’s one of the things that we often miss when we speak with others about disability insurance and about why it’s important. I have a family that was very, not only able, but also willing to help me with expenses because I didn’t have enough income coming in in the form of group disability coverage or benefits and, my family, they were able and willing and they did it with joy in their heart but I think that is, really, the exception versus the rule and, even though they were able and willing to do that, it was an emotional part and the mental part of having to rely on others is something that I think we don’t really talk enough about because it’s a very frustrating position to be in because, as human beings, we are all programmed to go out and create value and produce more than we consume and, so, it’s really difficult to have to count on and lean on other people for something that you have an opportunity with different types of insurance products to help fill that gap.

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JIM: We’re dependent on our parents. We go off to school. We’re ready to make our own way and it had to really hit you pretty hard because you were just gaining your independence and then getting thrown back into being dependent that had to be a challenge.

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CAMILLE SNYDER: Yeah, absolutely. I think I had six months of savings built up and went through those six months of savings in probably three months because I had an apartment in DC and then an apartment in Houston, Texas where I was being treated. I had to have transportation at both of those so I was really surprised by how much just living expenses go up not to mention the cost of medication, the cost of things that flow over from health insurance. **With health insurance, we make sure that our hospitals and our physicians are taken care of but disability insurance is making sure that you and your family are taken care of.**

16:17

JIM: We heard that your ability to speak and be able to sell, the prognosis wasn’t that good but, obviously, we’re talking to you today, you sound great. Tell us the rest of the story. What happened afterwards and how are you doing now?

16:29

CAMILLE SNYDER: Well, I spent about nine months going through active treatment and that included chemotherapy and surgery and radiation, and then I spent about a year rehabbing from all of those things and that’s where I spent my time doing physical therapy and speech therapy. I had had a feeding tube so I had to learn how to eat independently and not choke by having a sip of water and that was really hard work, and also say it was during the rehabilitation time that I think I really floundered and that I struggled. During active treatment, I felt like I had marching orders. My physicians would say we need to do this or you need to do this and I said, okay, I can do that, just give me my marching orders, but during rehab, I was frustrated with the amount of progress I was making. It really took me a while until I could turn a corner on that and, again, I think that the mental aspect of being too sick or injured to work is something that we don’t talk about enough and prepare people for because it’s something that we just don’t really think about. After I got rehabbed enough and my physicians cleared me to go back to work, I decided that software was not something that was going to get me out of bed in the morning. I really wanted to do something that would make an impact on others because, while I was sick, I had so much support from people and so much love that came my way, I wanted to be able to give something back. I became a disability insurance specialist with a company in Washington, DC helping educate advisors and educate clients on the importance of individual disability insurance and the importance of having taken advantage of group disability coverage that might be available through the workplace, teaching people how policies work, and just making folks aware of what’s available in the marketplace.

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JIM: You’ve got to get a tremendous amount of job satisfaction by doing that and that education that you’re doing could really save a family financially.

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CAMILLE SNYDER: Oh, absolutely. One of the things I would really encourage your listeners to do is, during open enrollment, seek advice from your insurance professional and sit down with them and let them review with you the benefits that you have through work and explain the difference between short-term and long-term disability, whether you want to pay it with pretax dollars or post-tax dollars, and all of those things, but seeking advice from folks who are professionals who look at benefits day in and day out and familiar with them is always a great thing to do.

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JIM: Camille, this has been great. Hopefully, you’ve inspired our listeners to maybe dust those policies off, make sure they’re covered where they think they’re covered, and, for those of you that have young kids just getting started in the workforce or grandkids, make sure you encourage them to take a look at this stuff because I’m guilty of the same thing. When I was young, I thought who needs insurance. Well, the younger you are, the more risk you have at stake, especially when it comes to your income. If something happens where you can’t earn a living that can be devastating, especially at a young age where you haven’t had a chance to save much, so thanks again, Camille. I really appreciate you joining us today.

20:36

CAMILLE SNYDER: Thanks Jim.