

REDUCING FINANCIAL TOXICITY: TIPS FOR PATIENT NAVIGATORS

What is Financial Toxicity?

Financial toxicity describes problems patients and families face related to the cost of health care. Patients with a cancer diagnosis can experience financial toxicity due to high costs of cancer treatments. Financial toxicity can disrupt treatment and impact a patient and family's quality of life.



Patient Navigator Role in Reducing Financial Toxicity

Patient navigators and social workers can help patients and families reduce financial toxicity. This sheet provides suggestions to:

Explain insurance coverage and provide support to

1. Define key terms (e.g., deductible)
2. Help the patient think like an advocate
3. Research patient's coverage benefits

Optimize health insurance benefits

Refer to financial navigators, when available

Remain updated on patient assistance programs and resources

Always follow up with patients, track patient assistance application status until a decision has been reached

Ensure that the cancer care team is aware of ongoing payer policy requirements and service coverage

Discuss other affordable treatment options with the cancer care team

Mitigate financial toxicity

Communicate with patients and caregivers about

1. Costs of care
2. Eligible financial assistance
3. Other eligible resources

Manage, track and report on all financial navigation services

Severity of Financial Toxicity

The severity of financial toxicity can vary greatly. For example, financial toxicity could mean changes to one's lifestyle, such as delaying large purchases or reducing spending for leisure activities due to high medical costs. It may also mean losing a job temporarily or permanently, using savings or refinancing homes to be able to pay for the cost of care. Financial toxicity may lead patients to sell their home, declare bankruptcy, stop treatment and/ or even contemplate self-harm.



How to Screen for Financial Toxicity

There is no universal standard for financial toxicity screening. However, the Comprehensive Score for financial Toxicity (COST) measure, a 7-item self-report measure, can help assess financial toxicity ([de Souza et al., 2017](#)).



Scan the code or [Click Here](#) to see the measure

Questions for the Navigator to Ask and Research

Cost

1. What are the anticipated costs of care?
2. Are there more affordable treatment options?
3. What is the financial plan to cover the costs of care?
4. Does the patient need to miss work for treatment?
5. What is the plan to cover family expenses for lost work?

Household

1. What is the patient's household income?
2. How many people are in the household?

Eligibility for Underinsured

1. If the patient does not have insurance, is the patient eligible for
 - Partner's insurance
 - Medicaid enrollment
 - Medicare open enrollment
 - Medigap enrollment
 - Affordable Care Act enrollment
2. Is the patient eligible for
 - Disability coverage
 - Extra help applications
 - Consolidated Omnibus Budget Reconciliation Act (COBRA)

Insurance

1. What is the patient's health insurance plan name and number, type, member number, premium and deductible?
2. Does the patient have a secondary health insurance policy? If so, what does it cover?

Assistance

1. Which external patient assistance programs is the patient eligible for?
2. What internal assistance programs are available?
 - Charity programs available within the cancer center
 - Pharmacy assistance programs
 - Local non-medical financial and in-kind assistance
 - Payment plans



Cancer Insurance Checklist

To help patients compare insurance plans, use the [Cancer Insurance Checklist](#). The checklist asks patients to list covered services, such as doctors' visits, hospital care, care centers, prescription drugs and other services. It also inquires about the patient's premiums, deductible, out of pocket expenses, co pays and coinsurance.



Scan the code
or [Click Here](#)
to see the checklist

Other

1. What coverage benefits are available through the patient's health care plan? (Refer to the [Cancer Insurance Checklist](#))
2. What prior authorizations are needed for the patient's treatment plan? What services do not need pre-authorization? Document these on the [Cancer Insurance Checklist](#).
3. Which community resources are available to support the patient and family's living expenses? (e.g., consider [FindHelp.org](#) and local resources lists)
4. Has the patient received a claim denial? If possible, guide the patient through the appeal process.

Key Insurance Terms

Deductible Health care expenses the patient must cover before the insurance applies

Copayment Fixed out of pocket payment that is part of a claim or medical expense

Coinsurance Amount that the patient is responsible for to cover the medical costs before the insurance pays

Premium Monthly/ quarterly/ annual amount paid for health insurance or plan

Out of pocket limit The largest amount patient pays before the insurance or plan starts covering 100% of the allowed amount during a policy period

Evaluation: What to Track and Report

Tracking

Total number of applications submitted

Total number of new patients

Total number of charity care applications submitted

Total number of claims paid

Total number of patients approved for free drug programs

Measuring

Number of applications submitted

Number of new patients who met with a financial navigator

Number of applications submitted

The number of claims billed to the copay or foundation program after the insurance paid

Number of patients enrolled into free drug or drug replacement programs

Reporting Value

Volume of assistance programs

Volume of new patients seen

Assistance provided when no other patient assistance was available

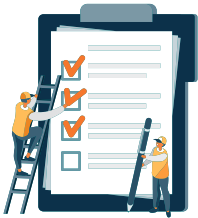
Dollar amount applied to the patient's balance

Dollar amount of the drug credit received that did not need to be written off against the infusion center

Potential Questions That Patients May Ask the Care Team

Other

- Can I get help to pay for this treatment?
- Does my health insurance company need to pre-approve or pre-certify any part of the treatment before I start?



Work

- Can I work during treatment?
- Is there any flexibility in my treatment schedule to make it easier to work?
- Are there any treatments that might make it easier for me to continue working, including oral chemotherapies or treatments in clinical trials?
- Will my treatment require me to take time off from work? If so, how much time?
- Can I take my medications (or go for treatments) early or late in the day, so the side effects won't interfere with the bulk of my workday?
- How will the side effects affect my ability to perform my job?
- Are you familiar with any stress-relief techniques that I can use at my workplace?

Cost

- I'm worried about how much treatment is going to cost me. Can we talk about it?
- Will my health insurance pay for this treatment? How much will I have to pay myself?
- I know this will be expensive. Where can I get an idea of the total cost of treatment?
- If I can't afford this treatment, are there options that cost less but work as well?

Want to Learn More?

A module on [Understanding and Addressing Financial Toxicity](#) is now available on the [GW Cancer Center Online Academy](#).

Get notified about this release by signing up for our monthly [newsletter](#) or follow us on social media.



Frequently Asked Questions

Is there a formula to determine payment plans for patients' out-of-pocket costs? How can we help patients understand what a reasonable payment plans may be?

There is no specific formula. It is important for both the provider and patient to work together to determine a reasonable payment plan. The provider should be open to adjusting their plans to meet the patient's needs. Navigators can help patients assess their available disposable income and look into available assistance programs to help with living expenses.

If your institution does not have financial navigators, who would be ideal people to take on these responsibilities to advocate for the patient?

First, find out if there is assistance available from other departments (e.g., such as centralized social work support). Put together a working group to make a business case using data from information tracking. If your institution will not invest in financial navigation, patient navigators, lay navigators, nurses, nurse navigators, social workers, oncologists, case managers, pharmacy technicians and pharmacists should do what they can to assist to the extent of their capacity constraints. Suggested minimum requirements for a financial navigator role are a bachelor's degree or equivalent in business, life sciences, finance or equivalent and knowledge about health insurance rules and regulations.

What about the high cost of COBRA?

COBRA is very expensive, as a person goes from paying a portion of around 25% of the premium to paying the entire premium plus an administration fee. It is possible to find premium assistance from a foundation if the patient is in treatment. Also check to see if their state Medicaid program has a Health Insurance Premium Payment (HIPP) program - where if someone in the household qualifies for Medicaid, Medicaid will pay the health insurance premiums. Look for other available resources.

Where do I start when researching local resources?

Start with the local United Way for resources list or do a quick web search. From there, keep an eye on the local news to track new resources, check them and add them to your list. Get patient feedback on the resources to make sure your referrals are meeting patient needs.

References

Glossary of Health Coverage and Medical Terms. (n.d.). Centers for Medicare & Medicaid Services. <https://www.cms.gov/ccio/resources/files/downloads/dwnlds/uniform-glossary-final.pdf>

De Souza, J. A., Yap, B. J., Wroblewski, K., Blinder, V., Araújo, F. S., Hlubocky, F. J., Nicholas, L. H., O'Connor, J. M., Brockstein, B., Ratain, M. J., Daugherty, C. K., & Cella, D. (2017). Measuring financial toxicity as a clinically relevant patient-reported outcome: The validation of the COmprehensive Score for financial Toxicity (COST). *Cancer*, 123(3), 476-484. <https://doi.org/10.1002/cncr.30369>.

Khera, N., Holland, J. C., & Griffin, J. M. (2017). Setting the stage for universal financial distress screening in routine cancer care. *Cancer*, 123(21), 4092-4096. <https://doi.org/10.1002/cncr.30940>.

Living and Working With Cancer Workbook. (2021). *Cancer and Careers*. https://www.cancerandcareers.org/guid/publication/pdf/4d6bc32623380f5753000037/publication_pdf.1631548859.Workbook_-_2021.09.10.pdf

Salsman JM, Bingen K, Barr RD, Freyer DR. (2019). Understanding, measuring, and addressing the financial impact of cancer on adolescents and young adults. *Pediatric Blood & Cancer*, 66(7):e27660.

Understanding Financial and Legal Matters. (2021). American Cancer Society. (2021). <https://www.cancer.org/treatment/finding-and-paying-for-treatment/understanding-financial-and-legal-matters.html>.

Resources

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- Directory of local resources

[American Cancer Society Local Resources](#)

- Database of local cancer care programs and services

[Assistance Fund](#)

- Financial assistance for out-of-pocket costs and other health-related expenses

[Association of Community Cancer Centers Financial Advocacy Network](#)

- Tools and resources for proactively providing financial assistance in cancer care, such as [Financial Advocacy Boot Camp](#), [Playbook](#), [Toolkit](#), [Patient Assistance and Reimbursement Guide](#), [Financial Advocacy Services Guidelines](#) and [Prior Authorization Clinic](#).

Resources

Cancer Can't	<ul style="list-style-type: none">• Financial, social and emotional support for patients in the Inland Northwest
Cancer Care	<ul style="list-style-type: none">• Case management, counseling, support groups and financial assistance
The Cancer Financial Assistance Coalition	<ul style="list-style-type: none">• Database of zip code specific financial assistance programs
Charitable Pharmacy Group/Donate Drugs	<ul style="list-style-type: none">• Prescription drug and unused drug donation program
Colorectal CareLine	<ul style="list-style-type: none">• Financial assistance and navigation for colorectal cancer patients
Copay Relief	<ul style="list-style-type: none">• Financial support for qualifying insured patients
Donna CareLine	<ul style="list-style-type: none">• Financial and healthcare access assistance for breast cancer patients
Family Reach	<ul style="list-style-type: none">• Financial assistance for housing, transportation, utilities and other costs
Financial Aid Funds	<ul style="list-style-type: none">• Small grants for patients meeting financial and medical criteria
Find Help	<ul style="list-style-type: none">• Financial, medical and other types of free or reduced-cost assistance
Good Rx	<ul style="list-style-type: none">• Free tool to compare medication prices at different pharmacies
HealthWell Foundation	<ul style="list-style-type: none">• Financial assistance when insurance is insufficient, including copays, premiums, deductibles, out-of-pocket expenses, pediatric treatment and travel costs
Leukemia & Lymphoma Society	<ul style="list-style-type: none">• Financial support for blood cancer patients and families
Needy Meds	<ul style="list-style-type: none">• Service to connect patients to medication and health care assistance programs
Patient Access Network (PAN) Foundation	<ul style="list-style-type: none">• Support to pay out-of-pocket costs for underinsured patients with life-threatening, chronic and rare diseases
Patient Access Network (PAN) Fund Finder	<ul style="list-style-type: none">• Resources list by disease or condition
Pink Fund	<ul style="list-style-type: none">• Ninety-day living expenses support for breast cancer patients undergoing treatment
Prescription Drug Assistance Network	<ul style="list-style-type: none">• Prescribed medication assistance for patients in Washington state
Susan G. Komen	<ul style="list-style-type: none">• Awards for covering expenses related to breast cancer treatment for low-income patients
Triage Cancer	<ul style="list-style-type: none">• Legal and financial counseling