

# The Cost of Cancer Care — from the Patient's Perspective

BY VIRGINIA T. VAITONES, MSW, OSW-C



**A**s I write this column, summer residents and tourists have found their way to Maine. Because I live in a prime area for vacationers, my community

cancer center sees many patients who want to receive treatment while enjoying a Maine summer, and we are happy to accommodate them. For the most part, these patients come to our cancer center with excellent insurance benefits and the financial means to pay for their treatment. As the oncology social worker/financial counselor, I may be called on to assist with other psychosocial issues, such as depression, but I generally do not need to help these vacationers find innovative ways to pay for their cancer treatment.

Unfortunately—regardless of insurance coverage and financial resources—cancer takes a financial toll on all patients and families. Patients are constantly asking their physician *“How much is this going to cost?”* or making statements like *“I can’t afford these pills. Is there something else I could take instead?”* These same questions are being asked of nurses, navigators, financial counselors, social workers, and even receptionists.

In some areas of the country, the decision of where patients receive treatment for cancer is determined by their insurance (or lack of insurance). So, in addition to coming up with a plan of care for patients with cancer, providers must now work with patients to come up with a plan to pay for that care. And as healthcare reform continues to roll out, it’s likely that we can expect the situation to get more complex.

A recent study presented at ASCO 2013 found that while most cancer patients would like to talk about the cost of care with their doctors, they often don’t have this discussion—for a variety of reasons.


So how can ACCC help? By offering the tools, education, and resources to assist its busy provider membership in tackling this complex issue.

For example, at its National Oncology Conference, Oct. 2-5, in Boston, ACCC is holding a special pre-conference on financial assistance. Join us and gain insight from expert presenters into what can be done to help reduce cancer patients’ financial distress, including fostering a dialogue around issues of cost.

And helping our patients is only half of the challenge. Working with payers to ensure adequate reimbursement for cancer treatment is a way to approach this problem from another angle. So learn options for setting up good care plans and payer contracts that not only help your patients, but also help your cancer program maintain a healthy bottom line. After all, the financial health of the patient and his or her cancer program are intrinsically linked. Providers need to be in business in order to deliver the life-saving treatment their patients need.

If you haven’t already, explore the many tools and resources available through ACCC’s Financial Information and Learning Network at [www.accc-cancer.org/FILN](http://www.accc-cancer.org/FILN).

In closing, I’d like to bring this column back to my presidential theme—celebrating the multidisciplinary cancer care team.

I would like to take this opportunity to acknowledge all those cancer program staff involved in helping patients with issues related to the cost of treatment—from the front desk staff who may field initial questions to the navigator, social worker, financial advocate, nurse, physician, and other team members who handle tasks as varied as pre-authorizations, insurance verifications, patient assistance forms, payment plans, and more. Patient-centered professionals who support patients and families through these difficult discussions are an important step in helping reduce the financial distress a cancer diagnosis can bring. Thank you. 

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