

Estimated out-of-pocket costs for cancer-directed and supportive care medications for older adults with advanced pancreatic cancer

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- **Background:** Patients with pancreatic ductal adenocarcinoma (PDAC) have considerable supportive care needs that often require medications to treat symptoms and manage complications related to cancer and its treatment. The financial burden of supportive care medications is underappreciated.
- **Methods:** We conducted a cross-sectional analysis of the Centers for Medicare & Medicaid Services Part D Plan Finder and the 2022 Medicare Part B ASP Drug Pricing Files. Based on guidelines and authors' clinical experience, we constructed the clinical course for a hypothetical, otherwise healthy 70-year-old patient with de novo advanced PDAC and identified all medications likely to be prescribed. For self-administered medications we calculated out-of-pocket costs using the lowest-cost Part D plan/pharmacy combination for Minneapolis, Minnesota. For physician-administered medications (Part B) we assumed a 20% coinsurance.
- **Results:** Total out-of-pocket cost for chemotherapy was \$2,593. Total out-of-pocket costs for supportive care medications was \$4,968. Of this, \$3,145 was through Part D and \$1,823 was through Part B (pegfilgrastim). Apart from growth factor, major contributors to out-of-pocket costs included anticoagulants (\$775), anti-emetics (\$718), pancreatic enzymes (\$649), and insulin (\$442).
- **Conclusion:** Spending on supportive care medications was twice the spending on cancer-directed medications. Unfortunately, Part D has no out-of-pocket cap. Our work provides a more comprehensive understanding of contributors to out-of-pocket costs and serves as an urgent call to redesign benefits with a focus on improving coverage for supportive care interventions and capping Part D costs.

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