

At a Glance

Members of the Association of Cancer Care Centers' (ACCC's) Financial Advocacy Network call on oncology pharmaceutical manufacturers to:

- Implement easy-to-use online applications, preferably with a provider portal, to submit applications and check status;
- Expand existing or create new programs to increase the number of patients who can benefit while keeping in line with federal statutes;
- Implement processes for faster decisions, instant approval programs, and virtual credit cards;
- Improve communications with patients and their financial advocates, such as using secure messaging.

Background

At least half of people with cancer experience financial hardship,¹ facing both direct (eg, premiums, copays, deductibles) and indirect (eg, transportation, childcare, loss of employment) costs. In fact, people facing a cancer diagnosis are often as concerned about their family's financial health as their own physical health, and they can experience significant distress worrying about how they are going to financially survive their cancer treatment.²

High costs of healthcare disproportionately impact Black and Hispanic families, people who are uninsured, and those with lower incomes. However, having health insurance coverage is not protection against financial hardship – 44% of insured adults are concerned about affording their deductible.³

Many pharmaceutical manufacturers create patient assistance (also known as free or replacement drug) programs and copay assistance programs to help improve access to and affordability of their treatments. Requirements and eligibility

vary by manufacturer, but in general are designed to support people who lack adequate insurance coverage. People who are insured by federally funded healthcare programs such as Medicare and Medicaid are usually ineligible due to the federal Anti-Kickback Statute.

Cancer programs and practices are increasingly providing financial advocacy services to help patients navigate their costs of care and apply interventions that increase equitable access to cancer care. In the current healthcare landscape, manufacturer assistance programs are a crucial tool in the cancer program or practice's toolbox of financial advocacy interventions. Cancer program staff spend a considerable amount of time staying up-to-date on policies and requirements, evaluating patients for program eligibility, enrolling patients in programs, tracking application status, liaising between the patient and assistance program, and submitting claims.



Drug company assistance programs will always be an integral part of financial advocacy. Whether it's a copay card for a commercially-insured patient or providing drug to an uninsured/under insured patient, they help ease the financial burden of cancer care.

- Jordan Karwedy, Financial Counselor, Green Bay Oncology and Chair of ACCC's Financial Advocacy Network



About the 2023 Financial Advocacy Network Survey

ACCC's Financial Advocacy Network is a committed leader in advancing professional and program development for the delivery of oncology financial advocacy services. A key part of the Financial Advocacy Network's mission is to amplify the voice of patients with cancer and the financial advocates who help them navigate costs of care. Together with its partners Triage Cancer, CancerCare, the National Patient Advocate Foundation, and the Academy of Oncology Nurse and Patient

Navigators, ACCC conducted a survey in May and June 2023 to identify which elements of manufacturer patient assistance programs hinder or help patients access these programs. ACCC shared this feedback with manufacturers as they evolve their assistance programs. Survey respondents included 95 members of the Financial Advocacy Network, representing 70 unique cancer care organizations across 31 states.

Barriers to Accessing Manufacturer Assistance Programs

Identifying and applying for manufacturer-based assistance programs is a key intervention that cancer programs employ to improve access and affordability for patients. However, some attributes of these programs can pose barriers to patients being able to access this assistance – either directly or indirectly.

Direct challenges identified by respondents of the survey include limited eligibility criteria (including income requirements and citizenship status), long turnaround times for application decisions that can impact timely delivery of care, and lack of transparency regarding requirements, policies, and processes. Indirect barriers create substantially more workload for financial advocates, which may limit the number of patients they are able to help navigate through financial assistance programs. These include cumbersome applications with high documentation burden, lack of automatic notification of application status, and difficulty communicating with assistance programs (including long telephone hold times).

Additionally, 24% of respondents reported being in a situation where they did not recommend a manufacturer assistance program to a patient because the barriers were too high. Reasons for this included lack of an online portal or high documentation burden, vague or challenging requirements, slow turnaround times that would result in delays to patient care, or patients opting out of a lengthy and complicated process.



Documentation Burden

If an insured patient wants assistance from a company that requires extensive documentation, I will let the provider know how much documentation will be required and see if they would like to change their treatment plan or if they are able to devote that much extra time to paperwork to try to get it approved.

- Financial Advocate



Timeliness

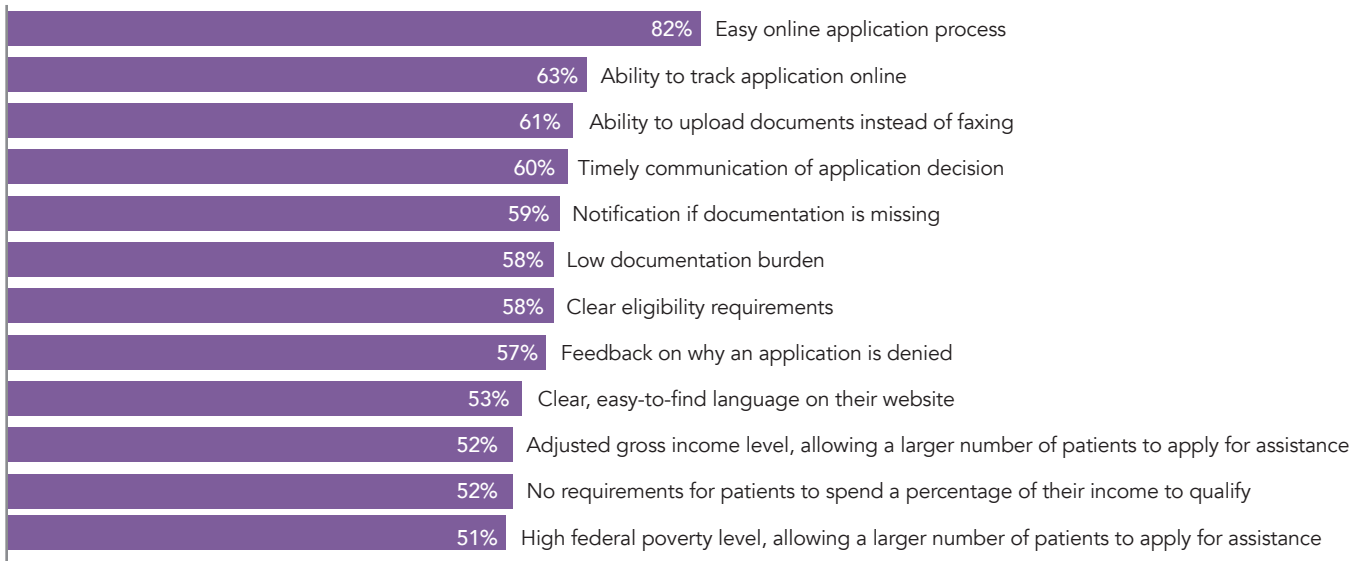
I have a patient who is stage IV and lost his insurance – he's on a fixed income with Social Security Disability [Insurance]. I was able to get him into a free drug program for one of his medications – his other medication he is paying for out-of-pocket while I'm in the midst of helping him get coverage. He's supposed to receive both treatments on the same day because he lives an hour away and faces transportation barriers. This has already been delayed once, and now we're down to the wire hoping the drug arrives for his treatment tomorrow. He wants his treatment, and he's worried about what will happen if he doesn't get it on time. There's a lot of distress.

- Financial Advocate

Attributes of Effective Manufacturer Assistance Programs

Survey respondents indicated an easy online application process as the most impactful attribute of manufacturer-based assistance programs for improving access to care (Figure 1).

Figure 1. Most Impactful Attributes of Manufacturer Assistance Programs



Respondents were also asked to identify manufacturer assistance programs that provide an exceptional experience for patients and the financial advocates who help navigate these programs. Common themes emerged among top-rated manufacturer-based assistance programs, including:

- User-friendly portals and an easy online application process
- Transparent and easy qualifying guidelines
- Quick turnaround time for decisions
- Clear communication
- Easy and helpful hotline, phone team, and/or direct contact
- Low documentation burden
- Ability to track status of applications online.



Timeliness

When [product name redacted] first came onto the market, it was really tough to work with. We had a hard time purchasing the drug and getting folks enrolled in assistance. So, when the manufacturer's next product came out, they proactively talked to provider organizations about how they could do things better and it was a much smoother experience. Ideally all manufacturers will ask those questions up front, listen, and take action to do things better.

- Pharmacy Manager



Exceptional Experience

The manufacturer assistance programs that are most successful and provide the best support for cancer patients and healthcare systems alike include these characteristics: Easy enrollment process, great communication, generous eligibility criteria, and quick turn-around times for patients to ultimately receive product.

- Social Worker

Calls to Action

ACCC's Financial Advocacy Network calls on stakeholders to take the following actions to incorporate feedback on manufacturer assistance programs and collaborate to improve the financial burden on people with cancer and their families.

For manufacturers

- ✓ Regularly perform reviews of assistance programs for the attributes listed above to identify opportunities to improve. In particular;
 - Use easy online applications, preferably with a provider portal to submit applications and check status;
 - Expand existing or create new programs to increase the number of patients who can benefit;
 - Make faster decisions, create instant approval programs, and implement virtual credit cards;
 - Improve communications, including secure messaging.
- ✓ Involve patients and financial advocates in the design of new programs and when adjusting existing programs.

"We also have a laundry list of questions we'll ask if they aren't answered when a drug first comes out, such as 'Will you help a patient if they've been rendered uninsured by an insurance denial?'; 'Do you accept patients who are undocumented?'; and 'Do you have a lookback period?'" - Pharmacy Director

For cancer programs and practices

- ✓ Meet with manufacturer field reimbursement managers to advocate for patients' needs by giving feedback.
- ✓ Leverage Financial Advocacy Network resources to build capacity to implement the **Financial Advocacy Services Guidelines**⁴ and offer financial navigation interventions.
- ✓ Advocate for state and federal policies that protect and expand financial assistance programs or otherwise help control drug costs.

For patient advocacy organizations

- ✓ Encourage patients and caregivers to ask for a financial advocate to help navigate costs of care and identify eligible assistance programs.
- ✓ Advocate for state and federal policies that protect and expand financial assistance programs or otherwise help control costs of care.
- ✓ Work with patients and caregivers to provide feedback on manufacturer assistance program experience.

For payers and pharmacy benefit managers

- ✓ Limit utilization management strategies such as copay accumulators and copay maximizers that prevent patients from accessing financial assistance programs.
 - ✓ Partner with stakeholders regarding policy for reducing financial toxicity from out-of-pocket costs.
- ### For policy makers
- ✓ Consider formal guidelines to encourage manufacturers to implement the aforementioned recommendations, such as online portals and timely communication.
 - ✓ Explore policy opportunities to address patient out-of-pocket costs so that assistance programs are not as crucial.
 - ✓ Address systemic barriers to affordable care.

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In partnership with:



The ACCC Financial Advocacy Network is supported by:



Learn more about ACCC's Financial Advocacy Network at acc-cancer.org/FAN.

The Association of Cancer Care Centers (ACCC) provides education and advocacy for the cancer care community. For more information, visit acc-cancer.org.

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