Why write a white paper on Financial Navigation?

- MCC 2016
- **Survivorship: Financial Toxicity**
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- Overwhelming interest by health care systems
  - Saves patients money
  - Saves organizations money
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Developing the White Paper

- MDHHS Cancer Section engaged a subcommittee of the MCC Survivorship Workgroup to identify key topics and share knowledge and research
- Public Sector Consultants was hired to facilitate three meetings of the subcommittee and prepare the white paper

**Process**

- **Meeting 1:** Developed paper outline
- PSC reviewed resources provided by subcommittee members and conducted secondary research
- **Meeting 2:** Reviewed first draft
- PSC conducted a survey of financial navigation programs in and outside of Michigan to prepare case studies
- **Meeting 3:** Reviewed final paper
- Paper sent to MCC Board of Directors for approval
Key Findings
What is the difference?

- Financial toxicity
- Financial assistance
- Financial navigation
Financial Toxicity

- Describes the adverse impact of out-of-pocket health care costs on the well-being of people undergoing cancer treatment.
- Increased risk for financial toxicity based on certain risk factors...
  - Income
  - Pre-illness debts
  - Illness and treatment-associated costs
  - Ability to work during and after treatment
  - Availability of health and disability insurance
  - Income of others in the household
Impact of Financial toxicity

- Financial toxicity can reduce treatment adherence and decrease quality of life.
  - More likely to discontinue use of their cancer drug
  - Less likely to take the medication as prescribed
  - Spend less on food; sell possessions or property to cover treatment costs.
  - Report poor mental health, poor satisfaction with social activities and relationships.
Financial Assistance Programs

- All health care organizations have financial assistance programs.

- Limitations
  - Limited population served (e.g. uninsured)
  - Limited scope of services (e.g. may be offered for one specific part of care, not the entire treatment regimen).
  - Some programs can actually make matters worse (e.g. enrolling patients in Medicaid – if the patient qualifies for spend-down Medicaid (monthly deductible) they are ineligible for other assistance programs and the *out-of-pocket cost may be higher*).

- Patients have to learn about available assistance programs.
  - Patient may not know they need help until they start getting bills – when it is more difficult to qualify for assistance programs.
Financial Navigation Programs

- Comprehensive, proactive assessment of all patients
- Individualized interventions based on each patient’s needs
  - Comprehensive plans that fit patients’ financial and treatment needs
  - Help with applying for financial assistance programs
- Navigators are part of a multi-disciplinary treatment team; not housed in the billing office
- Potential for significant financial savings for patients and health systems:
  - Average patient savings: $2,500 to $17,500 per patient
  - Health systems savings: $1.5M in 1 year to $16M over 9 years

1 Patient and health system savings are based on the experience of five health systems in and outside of Michigan, which are described in more detail in the MCC white paper on financial navigation.
Goals of the White Paper

- Describe comprehensive financial navigation and its benefits
  - Increased patient satisfaction and decreased out-of-pocket costs
  - Significant financial savings for health systems
- Help patients understand that there is help and what to ask for
- Help Healthcare systems to identify some potential ways that they can expand their current programs
Questions?