

## **Optimizing Cost Discussions Between Oncologists and Patients to Reduce Financial Toxicity: A Qualitative Study of Oncologist Perspectives**

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### **Abstract**

As the cost of cancer care continues to rise and patients shoulder increasing financial burden for their care, there is a growing sentiment within the oncology community that patients be clearly informed of their out-of-pocket (OOP) costs as part of delivering high quality cancer care. The American Society of Clinical Oncology (ASCO), in particular, has dedicated significant time and attention to raising awareness of the rising cost of cancer care, as well as emphasizing the importance of cost discussions between oncologists and their patients. Despite these efforts, cost discussions are not happening frequently, and there are no established models for how this communication should be integrated into oncology practice.

This study used a qualitative methods approach to assess how doctor-patient discussions about cost can be optimized to reduce patient financial toxicity in the cancer setting. Semi-structured telephone interviews were conducted with clinical oncologists (n=24) in a variety of practice settings and disease specialties. Results showed oncologists view communicating with their patients about OOP costs as an important yet challenging aspect of care. The frequency and way in which cost conversations occur between oncologists and their patients vary significantly depending on practice setting and patient population served. The process of obtaining OOP cost information, in addition to the necessary steps required to obtain financial assistance, is a time-intensive, back-and-forth process that can increase patient anxiety and lead to delays in care. Primary barriers to OOP cost communication are lack of education, resources and a systemic process for identifying and mitigating financial toxicity. OOP cost estimator tools and payment models that incentivize OOP cost communication are facilitators for oncologists to have cost-related conversations with their patients. To effectively assist patients in understanding, minimizing and managing their OOP costs, physician and patient education, information-based solutions and a systems-based, whole care team approach are needed.

Based on these findings, an overall strategy to be taken up and used by the oncology stakeholder community is proposed, as well as a set of recommendations for ASCO to implement as part of its efforts to improve cancer care.

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