

COST CONVERSATION GUIDE

Introduction

Financial distress describes the harmful personal financial burden faced by patients receiving medical care. ^{1,2} This cost distress can span a range of adverse effects, including changes in household spending, subjective distress, and catastrophic financial burden. ³ Health care quality of life, treatment compliance, and mortality have also been linked to cost distress experienced by patients. ^{2,4} The scope of personal financial burden experienced by patients has been captured by several recent studies, with the Centers for Disease Control and Prevention reporting one in three Americans experiencing financial burden as a result of medical care. ⁵

Cost Conversation Guide

While evidence suggests that both patients and physicians perceive cost discussions to be prudent in optimal patient-centered care, ⁶⁻⁸ studies have indicated that these discussions are not occurring in most patient visits.³

Health care providers are interested in discussing costs with patients, but often do not feel comfortable initiating this discussion. Below are some conversation strategies that health care professionals can use in approaching these discussions to optimize patient-centered care. Please note that these discussions do not necessarily have to be with the doctor; your practice might prefer to have another team member involved.

Before the Encounter:

Know if your patient has cost concerns	While some doctors might want to open the conversation door to any patient, others may prefer to know first if their patient has concerns. You can use ACP's Cost Distress Identification Tool for that.
Know your available resources	 Become aware of available financial assistance options within your care center (including case management and social work assistance). Learn about available pharmaceutical programs available for commonly prescribed medications within your practice. Become familiar with resources available to help your patients. ACP's Cost of Care Resources for Clinicians and Patients lists over 70. An especially

Start of Encounter:

Set-up/framing	• "Our goal is for you to get the best care with fewer problems and lower costs. This may involve us asking new types of questions."
	"I'd like to discuss any worries or concerns you have about the cost of your health care."
	"I have heard from many of my patients that the amount they have to pay for medications or tests is becoming hard to manage."
Ally with patient/reassure	"Our goal is for you to get the best available care."
	"In some cases, financial stress negatively impacts our patients."
	• "I'd like us to work together on these issues."
	"We will continue to treat your medical conditions the best way possible. You are going to get good care."



Assessment and Plan:

Understand concerns/screen for financial cost distress	 "Are you worried about how to pay for the cost of your care?" "Are you worried about your current financial situation due to your health?" "Do you feel financially stressed due to your health?" "Have you missed appointments or medications because you could not pay for them?" "How can we help you with these problems?"
Identify areas of cost distress	 "Other patients I've worked with have dealt with the financial stress of health care in a variety of ways, including cutting back on medicines, cancelling appointments with doctors, and cutting back on home expenses (like leisure activities, food, and clothing). Have you made any of these changes due to financial stresses from your health?"
Discuss options and share evidence	 "Let's discuss some different options that might help with the financial stresses of your health care, and the pros and cons of each." "Pharmaceutical companies often have assistance programs to help patients like you. Would you be interested in learning more about that?" "There are other medications that are equally effective and might be less expensive." "We have a list of resources that could help. Would you like a copy of that?" (ACP Resource Guide) "I think we should discuss this issue at each visit to make sure we are on the same page." "I am going to bring in another member of my team who can help us brainstorm for possible solutions." "Which option seems like the best fit for you?" "What additional information do you need to make your decision?" "Would it be helpful to talk to someone else on my team about your options?"
Follow-up	 "Let's schedule a time to follow up on this problem, either in person or by telephone."
Confirm patient understanding using "teach-back"	"Would you describe our care plan so we can be sure we understand each other?"



The strategy above provides some guidance for initiating a cost conversation with your patients. Studies have shown that most of these conversations are actually quite

short. However, the payoffs in terms of both cost savings and the building of trust can be quite large.

Here are some additional conversation tips.

Do	Don't
Ask all your patients about potential cost distress	Try to guess who has cost concerns based on visual or other cues
Reassure your patient that the discussion will not negatively impact their medical treatment	Fail to implement a follow-up plan with your patient regarding the discussion
Normalize the issue of cost distress for patients	Identify a management option without including the patient in the decision
Ally with your patient and your health care team to address cost distress	 Tackle the problem of cost distress on your own (without the assistance of local clinic and/or pharmaceutical resources and other members of your health care team)

Conclusion

Addressing cost distress is an important facet of patient-centered care, and providers should discuss financial concerns with their patients. Using the strategies above will help you and your team have productive and non-threatening cost discussions that your patients will very much appreciate.

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