

## COST DISTRESS IDENTIFICATION TOOL

While cost distress is a reality experienced by one in three patients, few undergo discussions with their providers regarding these concerns.<sup>1</sup> Many patients are uncertain about how to address this topic, and some fear that their care would be negatively impacted by discussion of cost.<sup>2</sup> Despite this, patients do want to talk to their physicians about the impact of medical costs on their lives.<sup>1</sup> Therefore, it makes sense to establish a protocol for identifying patients with significant cost distress.

Because you cannot tell by looking, it is highly recommended that you ask all—not just some—of your patients about potential financial distress related to their health care.

The following four questions were identified via a literature search and refined through focus groups with patients and health care professionals. You can use one, some, or all of these questions to identify patients experiencing cost distress related to their health care.

### Recommended process:

**1.** Select 1 to 4 of the following questions to ask all of your patients.

*Are you worried about your current financial situation because of your health care needs?*

*Have you skipped appointments, tests, or medications because you could not pay for them?*

*Are you worried about how your medical bills will be paid?*

*Would you like to discuss the cost of your health care with your provider at today's visit?*

**2.** Select how and when your patients will be asked these questions. Each option has benefits and risks. Pick the one that makes the most sense for your practice.

- a. Patients can answer written questions either prior to the visit (mailed survey) or as they are waiting for their visits (e.g., on the intake form or a separate form). One benefit of this approach is that the patient can complete the questionnaire in private. A risk is that the answers might not get handed off to the health professional.
- b. Patients can be asked the questions during some portion of the visit (e.g., check-in, during vital sign assessment, or during the actual visit). One benefit of this is that all patients are likely to get an opportunity to discuss cost if they want. A risk is that a patient may feel too embarrassed or exposed to answer honestly.

**3.** No matter how asked, if a patient responds “Yes” to any question, he or she would benefit from a cost conversation with their care provider. ACP has created several tools to help you have that conversation. Most conversations take less than 5 minutes.

**4.** Consider providing the patient with a flyer of available resources that can help with medical care costs. ACP has created two that might be helpful.

### References

1. Alexander GC, Casalino LP, Meltzer DO. Patient-physician communication about out-of-pocket costs. *JAMA*. 2003;290(7):953-8.
2. Alexander GC, Casalino LP, Tseng CW, McFadden D, Meltzer DO. Barriers to patient-physician communication about out-of-pocket costs. *JGIM*. 2004;19(8):856-60.