New Study Uncovers Lasting Financial Hardship Associated with Cancer Diagnosis for Working-Age Adults in the U.S.

American Cancer Society researchers stress the need for interventions to help assist patients with cancer and their families

ATLANTA, **April 23**, **2024** – A new study led by researchers at the <u>American Cancer Society</u> (ACS) highlights the lasting financial impact of a cancer diagnosis for many working-age adults and their families in the United States. It shows a cancer diagnosis and the time required for its treatment can result in employment disruptions, loss of household income and loss of employment-based health insurance coverage, leading to financial hardship. When combined with high out-of-pocket costs for cancer care, nearly 60% of working-age cancer survivors report at least one type of financial hardship, such as being unable to afford medical bills, distress and worry, or delaying or forgoing needed care because of cost. The findings are published today in *CA: A Cancer Journal for Clinicians*.

"While the rising costs of cancer care and subsequent medical financial hardship for cancer survivors and families are well-documented in the United States, little attention has been paid to how employment and household income can be affected by a cancer diagnosis and treatment," said lead study author <u>Dr. Robin Yabroff</u>, scientific vice president, health services research at the American Cancer Society. "With nearly half of cancer survivors of working age and not yet age-eligible for Medicare coverage, understanding the potential effects of cancer diagnosis and treatment on employment, income, and access to employer-based health insurance coverage is essential."

Study researchers used a composite patient case to illustrate the potential adverse consequences of cancer diagnosis and treatment, including employment disruptions while receiving cancer care, loss of income for unpaid time away from work, and loss of access to employment-based health insurance coverage, if unable to maintain employment. The authors also summarize existing research and provide nationally representative estimates of multiple aspects of financial hardship from 2019-2021, the most recently available years of the National Health Interview Survey (NHIS). The NHIS collects information about health conditions, including but not limited to cancer diagnoses, health status, employment, health insurance, socioeconomic status and experience with health care from nearly 90,000 individuals in 35,000 households each year.

"There are opportunities for a variety of stakeholders to mitigate financial hardship and assist patients with cancer and their families," added Dr. Yabroff. "Federal, state and local policies can increase availability of comprehensive and affordable health insurance coverage and ensure job protections for working adults."

"Today's findings reiterate the critical role access to affordable, quality care and paid family medical leave plays in reducing the financial toll of cancer on those diagnosed – particularly while they are of working age," said Lisa Lacasse, president of the American Cancer Society Cancer Action Network (ACS CAN). "A majority of cancer patients and survivors (74%) report being forced to miss work due to their illness, most of whom report missing more than four weeks of work, according to an ACS CAN study. No one should be forced to choose between their treatment and their employment. To truly protect patients from the high costs of cancer, Congress must enact paid family and medical leave as well as provide tangible options for affordable health coverage outside of employer-sponsored plans by making permanent the enhanced Marketplace subsidies that allow millions who otherwise have no affordable coverage option to enroll in Marketplace plans."

Study authors emphasize that employers, cancer care delivery organizations and non-profit organizations can also guide efforts to help patients with cancer avoid financial hardship. Employers can offer robust coverage and benefits options, paid and unpaid leave and other workplace accommodations to help reduce employment disruptions and loss of income during cancer treatment. Within cancer care delivery, providers can screen patients for financial hardship, connect patients with relevant services, and make referrals for occupational medicine, rehabilitation care and physical therapy to facilitate return to work and usual activities during and after cancer treatment.

Other ACS authors involved in this study include: Jingxuan Zhao, Dr. Xuesong Han and Dr. Zhiyuan Zheng.

About the American Cancer Society

The American Cancer Society is a leading cancer-fighting organization with a vision to end cancer as we know it, for everyone. For more than 100 years, we have been improving the lives of people with cancer and their families as the only organization combating cancer through advocacy, research, and patient support. We are committed to ensuring everyone has an opportunity to prevent, detect, treat, and survive cancer. To learn more, visit cancer.org or call our 24/7 helpline at 1-800-227-2345. Connect with us on Facebook, Twitter, and Instagram.

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