

New Study Finds Limited Documentation of Cost Discussions With Patients Newly Diagnosed With Advanced Cancer

The American Cancer Society led research to be presented at the 2023 ASCO Quality Care Symposium

ATLANTA, October 27, 2023 — A new study by researchers at the [American Cancer Society](#) (ACS) and the National Cancer Institute (NCI), shows only about a quarter of individuals newly diagnosed with advanced cancers had documented physician discussions about costs of care, which may hinder identifying patient needs and tracking outcomes of referrals for assistance. Growing costs of cancer care can result in financial hardship for patients, and many professional organizations recommend patient-physician discussions about expected treatment costs as part of high-quality care. Documentation of these discussions is critical as even privately insured patients may find care unaffordable without additional assistance. The study looked at documented discussions between physicians and individuals newly diagnosed with advanced non-small cell lung cancer (NSCLC) and melanoma, cancers with recent high-cost treatment advances, and found that cost discussions were documented in the medical records of 24.6% of NSCLC and 25.5% of melanoma patients. “Out-of-pocket costs,” “patient assistance plan,” and “inability to pay” were the most commonly used terms. The findings will be presented at the annual [American Society of Clinical Oncology \(ASCO\) Quality Care Symposium](#) in Boston, October 27 – 28, 2023.

In the study, researchers, led by [Dr. Robin Yabroff](#), scientific vice president, health services research at the American Cancer Society, used data from patient medical records from the population-based NCI Patterns of Care study conducted in 12 SEER registries, which included individuals newly diagnosed in 2017-2018 with advanced-stage NSCLC and melanoma. The medical records were reviewed for reported cost discussions and analyzed along with information on patient-, treatment- and hospital- factors, including age, sex, race and ethnicity, comorbidities, and health insurance coverage.

Researchers found that when documented, cost discussions were most often noted in physician and nursing progress notes and assessment plans. Results also showed that people with private insurance were less likely to have documented cost discussions when compared with those with public insurance. Cost conversations were much less common among people who did not receive systemic therapy or any cancer-directed treatment than those who received systemic treatments.


Researchers emphasized that systemic documentation of cost-of-care discussions as part of high-quality care could help ensure informed decision-making for all patients and that lack of information in the medical record would limit assessment of patient risk of financial hardship and whether any patient unmet financial needs were addressed.

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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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