Out-of-pocket expenses of Western Australians living with cancer and determinants of costs

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BACKGROUND

High and variable out-of-pocket expenses (OOPE) following a cancer diagnosis have become a rising concern. Understanding cancer-related OOPE and their impact on Australians will inform the development of initiatives to mitigate the ramifications of cancer costs.

METHODS

Adults diagnosed with breast, prostate, colorectal, or lung cancer who lived in four regional/rural and two outer metropolitan regions in WA participated in the study between 1 April 2014 and 31 April 2017. Participants reported OOPE related to their cancer treatment and were invited to comment on the impact of these expenses. Log-linked generalised linear models with gamma distribution were used to identify predictors of OOPE. Comments were analysed using qualitative inductive content analysis.

AIMS

- 1. To determine the OOPE experienced by Western Australians treated for cancers.
- 2. To explore patients' perceptions of the impact of cancer-related costs

RECOMMENDATIONS

- Rural patients should be provided with information about diagnostic and treatment services available locally
- 2. Patients should be well informed and given choice between public and private treatment providers
- Patients need cost transparency for tests, procedures and treatments
- 4. Government, health insurance, and service providers need to work together to develop and/ or reform financial initiatives to support patients while undergoing treatment

RESULTS

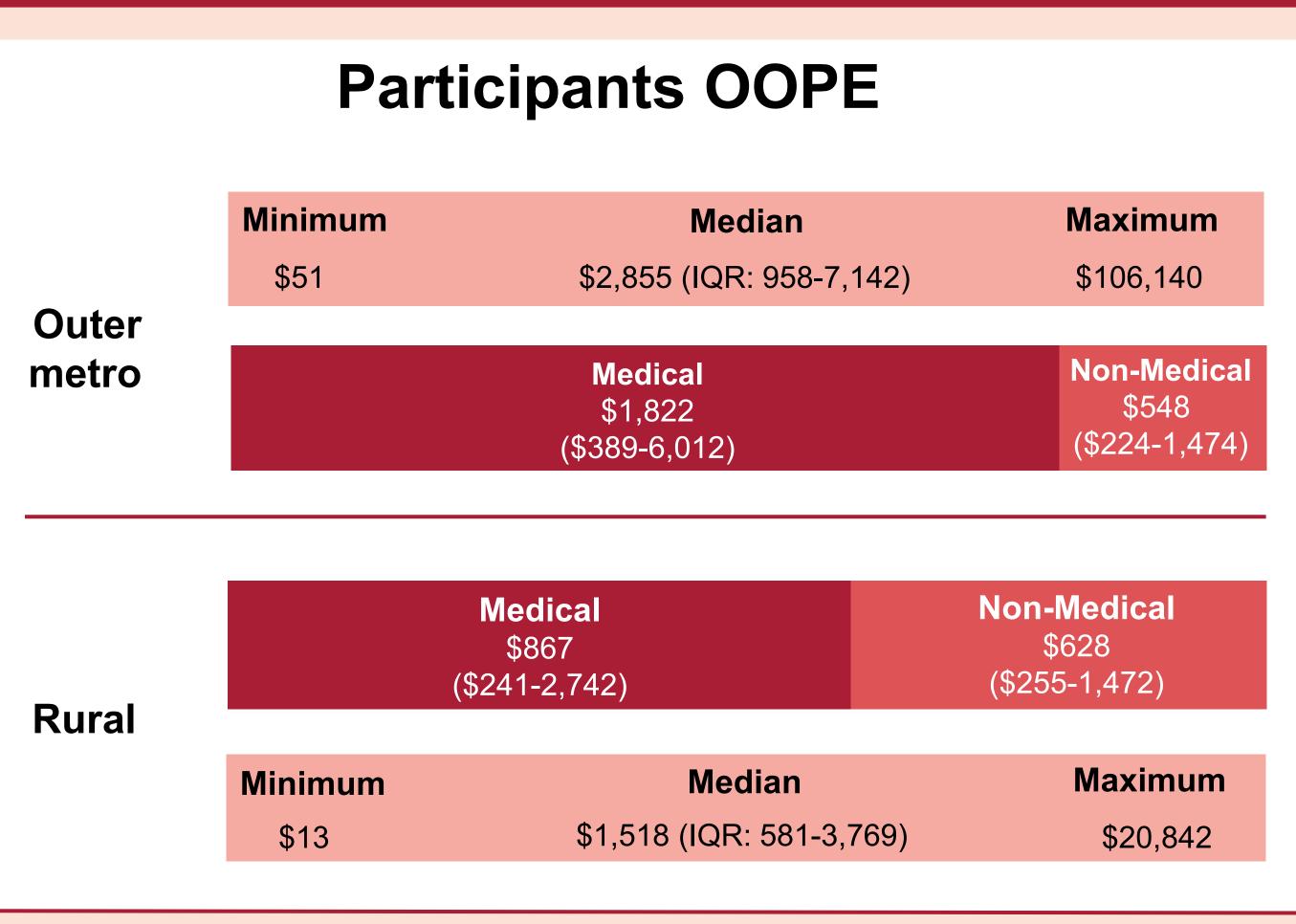


Figure 1. Median medical and non-medical out of pocket costs (AUD) >\$0 reported by outer metropolitan (N=116) and rural (N=305) participants.

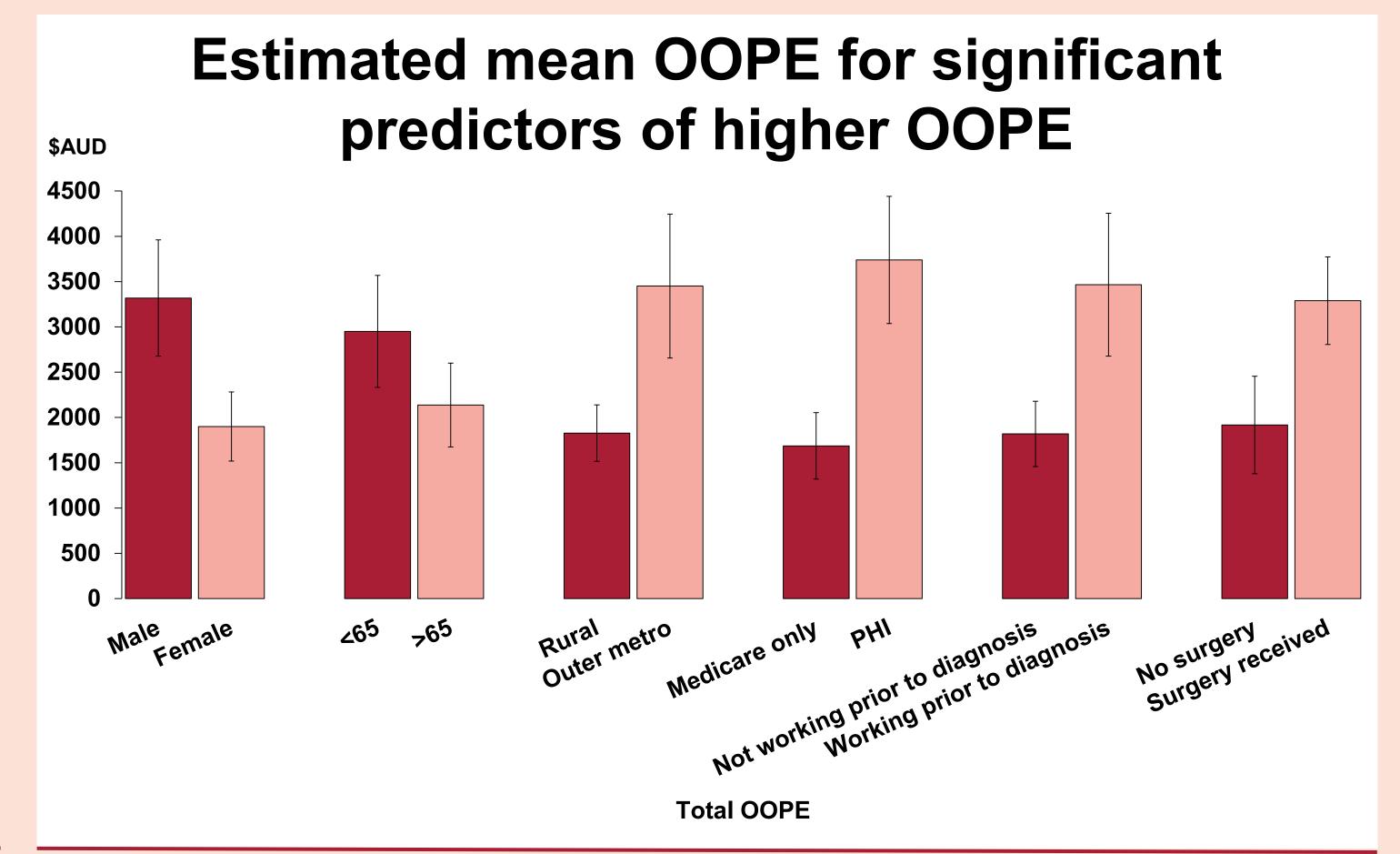


Figure 2. Estimated marginal means with 95% confidence intervals for significant predictors of higher total out-of-pocket expenses (OOPE).

THEMATIC ANALYSIS OF PARTICIPANT COMMENTS

Impact of cancer on employment, ability to work, career, early retirement, job loss

Loss of income for participants, and their partners who took time off work to provide care

The hidden cost of receiving care away from home for regional participants

Small business owners, farmers and self-employed hit harder

Lack of financial assistance at the time of cancer treatment

Lack of clarity about where or when treatment might be available

Understanding the healthcare system can reduce costs

> Good knowledge of available support and services saves costs

> > Looking around for different health care providers saves costs

Lack of clarity if a treatment is covered by Medicare, private health fund, or has out-of-pocket cost

Minimal or manageable costs when receiving care in the public system or in regional hospitals.

> Gap payments for appointments, pathology tests, imaging, surgery, and radiation therapy.

Schedule or having minimal cover Health care system factors

Cost for accessing treatment: travel, fuel, parking and accommodation

Cost of items not on the Medicare Benefits

Availability of services close to home

DETERMINANTS OF OUT-OF-POCKET COSTS

Financial

factors

Understanding

of health care

system

Social and community support

Benefits of Patient Assisted Travel Scheme

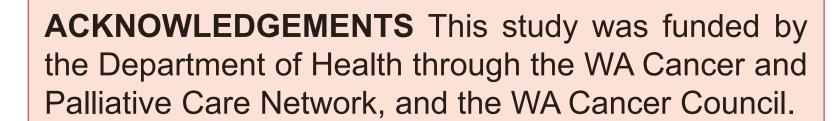
Support from Cancer Council and Solaris Cancer Care

Accommodation provided by Cancer Council lodges

Minimal costs when on a disability pension, or supported by the Department of Veteran Affairs

Local support services or a local hospital help with food cards, fuel vouchers and free house cleaning services

Figure 3. Thematic analysis of participants comments on impact of out-of-pocket expenses on their experiences identified four key themes contributing to the cost experiences reported by 300 participants: 1) health care system factors (access to care in the public or private sector, availability of services close to home, gap payments, cost of travel) 2) financial factors (impact of cancer on employment, ability to work, and career; and strategies for improving financial difficulties) 3) social and community support provided by the government and not-for-profit organisations and 4) understanding of the health care system.



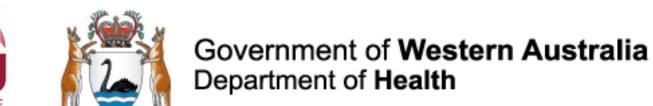














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