

Five Questions for your Oncologist that might save you Money

When faced with a cancer diagnosis, patients and their loved ones soon come to realize that their fight will likely involve substantial costs, rapidly raising the level of uncertainty and anxiety. Looking for ways to pay the bills can become overwhelming, especially in a complex, and too often, unmerciful healthcare system.

While insurance policies dictate patient liability, choosing an "in network" or contracted oncologist will reduce costs. But all too often, patients assume they have no options as relevant information is not communicated, and as they do not know what to ask.

Here are five questions to ask your oncologist, and that can help you save money.

1. Is there an equivalent less costly alternative to the prescribed treatment?

While I am, in no way, suggesting you question your oncologist's expertise, it is often the case that, for early stages, more than one treatment option can be considered. My previous boss once explained she based her decision on three criteria: (a) effectiveness, (b) impact on the patient's daily life and (c) cost to the patient. Not all oncologists take (b) or (c) into account.

Explain that you must keep working to keep your insurance, that you cannot afford a more expensive (and again equivalent) treatment, or that you are the sole breadwinner, and get reassured that the prescribed treatment is the most affordable.

2. Is the pharmacy cheaper?

Some growth factor treatments (Neupogen, Neulasta, Procrit, Aranesp, etc.) can be safely self-administered at home. After checking with your insurance, you may find it more economical to obtain the prescribed pre-filled syringes through a pharmacy rather than getting a shot at the office. The nurse can instruct you on how to do this safely.

Convenience and habit may lead to costly brand name prescriptions. Always ask if a generic version is available.

3. What about samples?

There may not be samples for chemo agents or growth factors, but there are for anti-nausea or other supportive oral drugs. Emend, for example, can be priced at hundreds of dollars per month. Samples should be available in the office.

Some offices may even accept unused oral or self-injectable drugs from patients whose treatment ended, and who bring excess supplies for others in need.

4. What about financial assistance?

Every major drug manufacturer offers financial assistance for brand name drugs, especially chemo-related. Ask about programs and how to apply. Offices can sign patients up, or at least direct you to a website.

You might be eligible for drug donations if you are uninsured or underinsured, or if your insurance has denied an authorization.

Please note: By law, patients with a government issued insurance (Medicare, Medicaid, Tricare) are not eligible for direct donations or assistance from manufacturers.

Charitable organizations also offer financial assistance to cover the cost of chemo or related drugs. Based on income, specific diagnoses and clinical need, these grants can range from a few hundred to thousands of dollars, and can be used to cover doctor or pharmacy bills. Above-mentioned patients are eligible.

5. Are home treatments less costly?

Some simpler treatments, including B12 injections, bone-building or iron infusions, are sometimes prescribed as part of specific chemotherapy regimens.

Contact your insurance and compare the cost at home via a home health agency versus in the office. Though a B12 injection is quite inexpensive, the costs of the visit, parking and lost time from work can add up. If a nurse can come to your home, at your convenience, and for less, why not ask your oncologist to set it up?

Do get a list of contracted providers from your insurance first, and make sure the order goes out to the right agency, in a timely manner.

In conclusion:

Some oncologists may resist some of your requests, such as setting up a home infusion or guiding you through a manufacturer assistance program application. After all, these added tasks use up valuable staff time.

Others may not welcome you questioning their decision, and may interpret this as a criticism or lack of confidence in their ability as a physician.

Do reassure your doctor that your goal is to get the best, most appropriate treatment but while making the process as cost-effective as possible. After all, the lower his bill, the faster you can pay it off.

Remember: you have rights to the information and explanations necessary to make informed, educated choices. Being an active participant in your care can only help your oncologist help you.

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