

BACKGROUND

In the United States, consumers ¹ and regulators ² are demanding healthcare providers address the financial impact on patients before medical treatment begins. Supplying financial information and assigning financial planning goals for transplant patients has always been controversial. This study was designed to give our patients a voice in the ongoing debate.

OBJECTIVES

- The primary objective was to measure the level of financial preparedness experienced by post-transplant kidney and pancreas patients after education provided by the social work team.
- Secondarily, it was of interest to determine if mandating a fundraising goal significantly delayed transplant.
- We have no financial conflicts and no funds were received for this study

METHODS

At the four-month post-transplant social work appointment, patients were given a 10-question survey to provide feedback about the process and how prepared they were for transplant (Figure 1). Our Kidney Pancreas Social Work team had also created a financial assessment tool (Figure 5) which focuses on the patient's concrete financial resources, expenditure commitments, and the future transplant expenses they would likely encounter. This tool and educational materials were shared during the initial and subsequent Social Work assessments. Each patient's financial circumstances were reviewed utilizing this tool and a standard process was applied to determine if a fundraising goal was needed.

FIGURE 1



Kidney Pancreas Post Transplant Financial Questions

1. Do you feel that we adequately prepared you for the costs related to your transplant?	YES	NO
2. Are you prepared to pay for your insurance premiums for the rest of the year? ·	YES	NO
3. Are you able to afford all of your transplant medications?	YES	NO
4. Did you have a fundraising goal prior to transplant?	YES	NO
5. Do you feel prepared for your transplant expenses for the rest of the year?	YES	NO
6. Are you working now, or do you plan to go back to work in the future?	YES	NO
7. Are you aware that for the rest of your life, it is <u>vital</u> that you have insurance coverage?	YES	NO
8. If you had a fundraising goal, what was it and what was it for?		

9. How did you reach your goal?		

10. Was there anything we could have done better to educate you about the costs related to transplant?		

RESULTS

- From July 2017 through June 2023, a total of 510 questionnaires from patients aged 20-86 were received and analyzed for this study – Figure 2.
- 1,314 kidneys and 1 kidney/pancreas were transplanted during the study period.
- Demographics from our study participants closely matched our transplanted population during the study period (not shown).
- 93% of the study patients reported they were prepared for their transplant expenses.
- 91% of the respondents reported they were prepared for their insurance premiums for the year.
- 93% were prepared for their transplant medication cost.
- Fundraising goals were assigned for medication cost, insurance premiums, relocation cost, and loss of income – Figure 3.
- Of the 510 respondents, 125 (25%) had been assigned a fundraising goal.
- Patients assigned a fundraise goal had a slightly increased waitlist time – Figure 4.

FIGURE 2

<i>Response Summary Questions 1-7</i>			
	Yes	No	NR
Question 1	93%	7%	-
Question 2	91%	8%	1%
Question 3	93%	6%	1%-
Question 4	25%	75%	-
Question 5	89%	10%	1%
Question 6	35%	64%	1%
Question 7	99%	1%	-

FIGURE 3

Fundraising Goal by Category

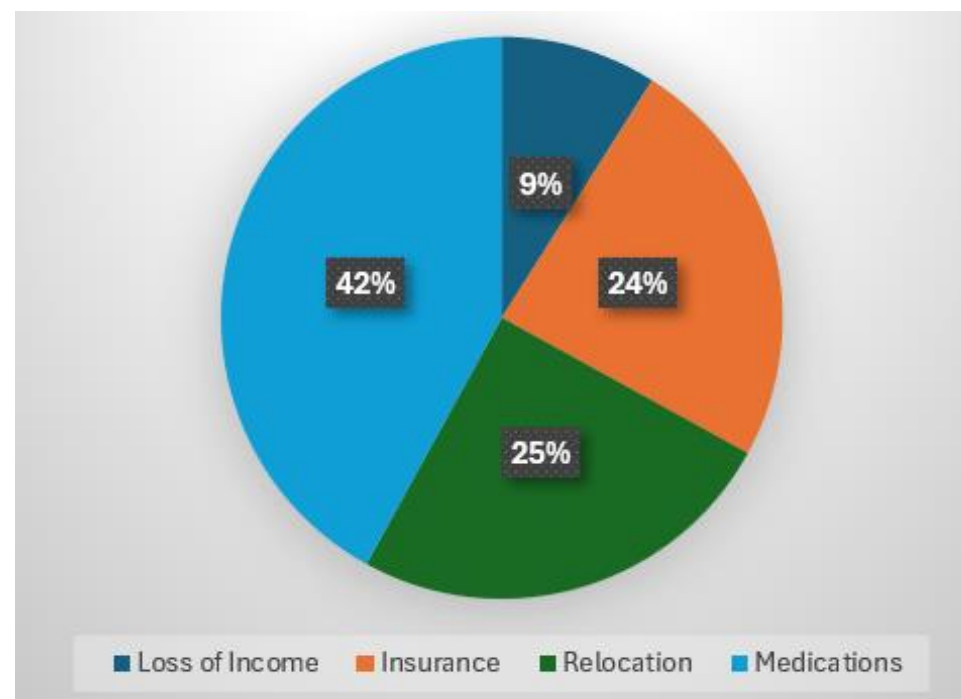


FIGURE 4

Average Waitlist Days

	Mayo Waitlist Days ^a
Study Participants w/Fundraising Goal, n=125	721.6 (SD=676.6)
All Study Participants, n=510	649.8 (SD=671.8)
All Transplants, n=1316 ^b	582.4 (SD=658.7)

a. days calculated using date patient listed at Mayo Clinic Florida and date of transplant
b. 1 had a simultaneous kidney& pancreas transplant

Note: Patients with a fundraising goal were listed inactive until they met their goal

FIGURE 5

MAYO CLINIC First Year Projected Transplant Expenses and Resources

(complete fields or place patient label here)

Patient Name (First, Middle, Last) _____
 Birth Date (mm-dd-yyyy) _____ Room Number (if applicable) _____
 Mayo Clinic Number _____

Form content retained in medical record. Route to HMS Scanning.

TO BE SCANNED

Projected First Year Expenses	Reported Resources
Immunosuppressant Copays (20% - \$1,500/year - \$125/month) <input type="checkbox"/> If commercial insurance - TBD with specialty pharmacy registration <input type="checkbox"/> If Medicare A and B or MAP <u>without</u> Extra Help - 80% covered <input type="checkbox"/> If Medicare B or MAP + Primary or Secondary or Supplement - 100% covered <input type="checkbox"/> If Medicare B or MAP + Medicaid QMB/IS/SLMB/QL/SOC+\$2,500-100% covered <input type="checkbox"/> If Medicare B or MAP + Medicaid SOC > \$2,500 - 80% covered Preventative Medication Copays <input type="checkbox"/> If commercial insurance - TBD with specialty pharmacy registration <input type="checkbox"/> If Medicare Part D or MAP - <u>with</u> extra help - \$100 per month (\$800/year) <input type="checkbox"/> If Medicare Part D or MAP - <u>without</u> extra help - \$1,200 Note: If you are on insulin prior to transplant, your insulin cost will likely continue. Insurance Premiums - Patients receiving American Kidney Fund (AKF) premium assistance <input type="checkbox"/> You must plan to cover 6 months of insurance premiums <input type="checkbox"/> Multiply your monthly premium x 6 or quarterly premium x 2 <input type="checkbox"/> If you do not know your premium, contact your dialysis social worker for amount Relocation/Lodging/Food/Travel - All patients more than 1 hour away Estimated <input type="checkbox"/> \$3,000 (\$100 per day for 30 days) <input type="checkbox"/> Georgia residents only - If you plan to utilize Georgia Transplant Foundation (GTF) for lodging assistance, estimated food/gas expense is \$500 <input type="checkbox"/> Relocation benefits (must be confirmed by Transplant Financial Coordinator (TFC)) Loss of Income - Patient \$ _____ Loss of Income - Caregiver \$ _____ Other Expenses (list, for example, Uber, Lyft, car rental) \$ _____	Discretionary Income Immunosuppression Medications Preventative Medications Insurance Total \$ _____ Savings \$ _____ Investments \$ _____ IRAs and 401(k)s - You must check your specific plan to see if you can access the funds and that you can afford any penalties and taxes \$ _____ Letters of Support \$ _____ Critical Illness Policy \$ _____ Fundraising National Foundation for Transplant (NFT) \$ _____ Help, Hope, Live \$ _____ GTF \$ _____ Go Fund Me \$ _____ Other \$ _____ Available Resources \$ _____
Total First Year Projected Expenses (You <u>must</u> have available funds of this amount)	

DISCUSSION

- The patients who did not feel financially prepared for their transplant expenses, were disproportionately male and African American. This reflects research that shows lower healthcare literacy for minorities ³ and different learning preferences of males.⁴
- In the Diagnosis: Debt series of KFF Health News articles reported more than 100 million American (41% of adults) have medical debt they cannot pay. ⁵ One of the articles in the series describes the current healthcare system as “systematically pushing patients into debt on a mass scale.” ⁶
- Our education, materials and this study are an attempt to provide our patients with the tools they need to be successful and to bring the patient’s voice into the discussion.

CONCLUSIONS

- Overall, 93% of survey respondents reported they were financially prepared for transplant. This is a strong indication that they welcomed, valued, and understood the information provided by social work.
- Wait-time for patient with fundraising goals was somewhat longer.
- Standardized financial educational materials and tools not only optimized education for our patients, but also assisted us in advocating for their unmet needs.

REFERENCES

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