Spotlight on the Economic Impact of Health Care Services

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The Patient Centered Outcomes Research Institute (PCORI) helps people make informed healthcare decisions, and improves healthcare delivery and outcomes, by producing and promoting high-integrity, evidence-based information that comes from research guided by patients, caregivers, and the broader healthcare community.[1] PCORI is also the funding agency that sponsors the RadComp trial.

PCORI was reauthorized in 2020 to continue its important work supporting comparative effectiveness research (CER). While most of the principles guiding PCORI's research agenda remained the same, the revised law included a new requirement: "to consider the full range of outcomes data – including, as appropriate, potential burdens and economic impacts related to the utilization of health care services." Such economic impacts include medical out-of-pocket costs, including health plan benefit and formulary design, nonmedical costs to the patient and family, including caregiving, effects on future costs of care, workplace productivity and absenteeism, and healthcare utilization.[1] Improved understanding of financial and economic costs to patients and their families will not only inform healthcare decision-making, but also decisions made by payers, health systems and providers.[1]

Costs increase patient and caregiver burden and are not exclusively financial. Patient costs may include time in hospital, time home from work or usual activities, cost/time for transport, childcare costs when seeking care, as well as out-of-pocket costs such as copays, deductibles and items not covered by insurance like drugs or out-of-network providers.[1] Caregiver costs may include hours spent caregiving and foregone wages.[1] Healthcare stakeholders also face important cost considerations, such as staff time, employee absenteeism, costs of medication, and changes in utilization that include medication dosage, length of stay, or shifts in care sites.[1]

We asked Cynthia Chauhan, RadComp Stakeholder Advisory Committee member and patient advisor, about her perspective on the impacts cost have on patient care:

What are some costs (resource burdens and also financial) that made an impact on your healthcare decision-making?
I have been fortunate that, thus far, costs have not had an impact on my healthcare decision-making but I do understand that is not true for many people, particularly uninsured and marginalized people.

How can the inclusion of patient costs improve PCOR?
I hope that this inclusion will advance the opportunity for members of minority and uninsured populations to participate in studies. Inclusion of cost validates PCOR's understanding of the stresses involved in daily living situations for underserved populations. It is unfortunately easy not to think about the fact that many people live at or below poverty level and have to give careful consideration to any decision that involves spending money, even decisions about

whether or not to spend money for transportation and certainly whether or not to take off from work even if doing so may improve one's health.

What concerns do you have about the inclusion of patient costs?
My only concern is that it does not go far enough to opening participation opportunities to currently underserved populations.

What are your hopes for PCORI with this new cost-inclusive requirement?
If we can broaden the opportunity for patients and community representatives to participate in PCORI funded research, the research becomes more meaningful, available and applicable to a broader population. Inclusion of cost to patients broadens the catchment area for PCORI trials which increases our understanding of the issues being addressed by the trial. A truly diverse population engaged in clinical trial development and execution Is important to meaningful outcomes.

Prior to reauthorization, PCORI did not include costs in their set of covered stakeholder outcomes, nor did they support cost-effectiveness research on coverage, reimbursement, or other policies for any public or private payer. The latter remains: PCORI will still not fund studies for which cost and economic impacts are the primary outcome. Nonetheless, expanding their patient-centered principles to cover economic costs to patients, caregivers and healthcare stakeholders is critical for the agency to more fully ensure "patients and their caregivers have access to credible, evidence-based information helps them make healthcare choices that are more relevant and useful to them" and improve healthcare systems and clinical capacity to support patient-centered outcomes.

References:
1. Patient Centered outcomes Research Institute. *Proposed Consideration of the Full Range of Outcomes Data: PCORI's Principles for Public Comment PCORI's Proposed "Principles" for the Consideration of the Full Range of Outcomes Data*. Washington, DC; 2020.

Questions?
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