

Addressing Medical Debt: What Clinicians Can Do

Costs May Be Shaping Your Patients' Care, Whether or Not They Say So

About 4 in 10 U.S. adults carry health care or dental debt, and 28 percent skipped or postponed care because of cost in the past year.^{1,2} Yet many patients never raise cost concerns in the exam room, and some fear that doing so will affect the quality of their care.^{3,4} Clinicians can help – by talking to their patients about costs, connecting them with resources, and bringing recurring barriers to the attention of hospital leaders.

What You Can Do in a Visit

- **Ask.** Inquire if patients have questions about the costs of their care.
- **Consider options.** When possible, discuss expected costs and explore high-value options for tests, imaging, and treatment.
- **Lower medication costs.** Use real-time prescription benefit tools (when available in the EHR), discount and price comparison services, or direct-to-consumer pharmacies.
- **Connect.** Refer patients to financial counselors, social workers, financial assistance, or community resources.

Beyond the Exam Room

- **Share patterns.** Tell hospital leaders and billing, financial assistance, and patient experience teams what you hear about challenges with bills, applications, and access to care.
- **Build a shared voice.** Ask colleagues how they handle cost conversations; exchanging approaches can build your skills, ease moral distress, and help strengthen the case to leadership.
- **Request clear referral pathways.** Ask your hospital for a current list of local and national organizations to connect patients to trusted resources for navigation support.

Ready to Go Further?



Addressing Medical Debt: A Playbook for Hospitals and Clinicians (available here: academyhealth.org/MedDebtPlaybook) offers practical recommendations, tools, and real-world examples to help clinicians and hospitals assist patients with navigating the financial aspects of care.

One Clinician's Approach to Helping Patients Navigate Costs

Dr. Caroline Sloan, a primary care physician at the Duke Outpatient Clinic, runs through a mental menu of options with patients—from lower-cost medications to estimated costs for labs and imaging to parking and transportation. Her experience shows that patients without catastrophic expenses still struggle to afford care, and clinicians can make a difference in helping their patients navigate costs, while also strengthening trust and the patient-clinician relationship.

Where Should You Start?

- ☐ Do you know where to find your hospital's financial assistance policy?
- ☐ Do you, or your physician group, participate in that policy?
- ☐ Do you feel comfortable engaging with patients about the costs of their care?
- ☐ Do you know where to refer a patient who is worried about costs?
- ☐ Are you familiar with resources to help patients afford their medications?

Any "no" or "not sure" marks a place where the playbook can help provide guidance.

References

- 1 Lopes L, Kearney A, Montero A, Hamel L, Brodie M. Health care debt in the U.S.: the broad consequences of medical and dental bills. San Francisco (CA): KFF; 2022.
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- 4 Doherty M, Jacoby J, Gany F. "I wish I knew about these programs before!" A brief report exploring barriers to financial assistance reported by gynecological oncology patients. *J Psychosoc Oncol*. 2023;41(5):493- 501. doi: 10.1080/07347332.2022.2149374. Epub 2022 Dec 14. PMID: 36514954; PMCID: PMC10322634.