



# Maine Cancer Foundation Project ECHO Cancer Patient Navigation

Financial Toxicity Part 1

June 26<sup>th</sup>, 2019



# Welcome to Project ECHO Cancer Patient Navigation

This meeting will begin promptly at 3:00pm

Please mute upon entry

Enter your name, credentials, organization, and email address in the Chat



If you are experiencing any technical difficulties, please type in the Chat or call Maine Cancer Foundation at 207-773-2533 and reference you need Project ECHO assistance



# Ground Rules

- Always MUTE microphone when not speaking – do not put your call on hold because it will play music
- Please show yourself on your video
- Never disclose protected health information
- To speak:
  - Raise hand (physically or click the option in Zoom)
  - Message in Chat
- Speak loudly and clearly
- Please keep questions and comments related to the topic



# Maine Cancer Foundation Project ECHO Cancer Patient Navigation

Didactic Presentation:

Clara Lambert, BBA OPC-CG  
Oncology Financial Navigator  
Bhorade Cancer Center  
Advocate Good Samaritan Hospital



# Maine Cancer Foundation Project ECHO Cancer Patient Navigation

Case Study Presentation:

Magda Alden, MSW, LCSW  
Patient Navigator  
American Cancer Society



# Case Study: Background Information

- 65 year-old male diagnosed with a head and cancer, residing in Southern Maine.
- Treatment plan: concurrent chemo-radiation
  - Did not require extractions as he is edentulous
- Lives with a significant other, retired, has family supports but limited resources
- Barriers: financial, transportation (no car), lack of medical care for years
- I received referral through the social worker at the PCP office who seems to be managing most of his needs. She insisted on doing MaineCare application with him, has set up transportation etc
- He recently had feeding tube placed but is struggling to afford supplies
- Cannot afford prescriptions that have limited or no financial assistance programs associated with them (magic mouthwash, morphine). Reviewed with MedAccess with no assistance available



## Case Study: Interventions

- Arranged transportation (Local County Community Action Program, taxis, gas cards)
- Applied for gas card assistance through Head & Neck Cancer Alliance—received a gas card to BP... none local so not helpful!
- PCP social worker helped them apply for MaineCare + Food Stamps
- Trying to evaluate for Joe Andruzzi—barriers are lack of non-medical bills in his name to apply
- Reiterated General Assistance



# Case Study: Barriers

- Systematic barriers- Medicare coverage
- Patient's confusion with who to contact with issues (PCP SWer, myself, head/neck navigator, medonc RN etc)
- How the patient entered the system—direct referral without navigator involvement from PCP office. I referred to Head/ Neck Navigator—so some assessments were after the fact, other assessments may not have been done, etc.
- New programs developing their systems (new medical oncology practice)





# Case Study: Questions

- When a patient is lacking sufficient prescription coverage or perhaps are in the Medicare Donut Hole, how can we help address the barrier of affording medications, particularly when certain prescriptions do not assistance programs?
- When we can't change larger systems (like Medicare), what can we do to work around those constraints and address the issues in front of us?