

Chronic care financial burden goes beyond actual costs

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A fear of finance-related challenges for people suffering with chronic diseases may be just as detrimental to their health management as actual out-of-pocket costs, a new study shows.

The University of Michigan School of Public Health study of African American women with asthma found in particular that the stress caused

by management of insurance eligibility and correction of billing errors contributed to perceptions of financial burden.

Participants reported fears about exceeding coverage, gaps in coverage, the variability in covered asthma therapies, and a number of administrative challenges associated with insurance management. This occurred with both private and public insurance.

The U-M team was led by Minal R. Patel, assistant professor, Department of Health Behavior & Health Education. The women interviewed also reported stress from lost wages from being ill—including loss of jobs—and from having to make tough decisions about calling in sick. They told researchers that transportation costs to receive health services or to deal with the administration of their care were financial burdens as well.

The paper, "Beyond co-pays and out-of-pocket costs: perceptions of health-related financial burden in managing asthma among African American women," appears in the current issue of the Journal of Asthma.

The researchers cited previous studies that show one in two people live with a chronic condition that often requires medical management. One in four families report financial burden associated with health care, and nearly one third of them have some form of [health insurance](#).

Financial barriers sometimes keep those with chronic conditions from accessing care, due to actual costs or—as this new research shows—as a coping mechanism when confronted with perceived burden, the researchers noted.

"The way we measure financial burden in health research does not always account for those costs, and we often assume it's simply their

medication co-pays that determine their financial burden," Patel said.

"Since perceptions largely influence behavior and outcomes in care, a better understanding of what these financial-related perceptions entail in the context of chronic disease management might provide more insight on how to better assess the size and distribution of the population at risk for poor health outcomes that may manifest from these burdens, as perceived by individuals who experience them," Patel said.

Awareness of the variety of sources of perceptions of financial burden beyond out-of-pocket costs might better equip health care professionals to provide patient-centered care and inform interventions, she said.

Provided by University of Michigan

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