

Many insured cancer patients pay no OOP costs for genetic counseling

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Commercially insured patients with cancer typically have low costs for



genetic counseling, according to a research letter published online July 29 in *JAMA Health Forum*.

Mya L. Roberson, Ph.D., from the Vanderbilt University School of Medicine, in Nashville, Tennessee, and colleagues used data from the IBM Watson Health MarketScan database to identify 16,791 privately insured <u>patients</u> with breast, prostate, endometrial, ovarian, colorectal, or <u>pancreatic cancer</u>, who had at least one encounter for genetic counseling from 2013 through 2019.

The researchers found that median net payments for genetic counseling encounters were \$118 (range, \$58 to \$211). Most patients with cancer paid \$0 for genetic counseling services, with an overall median out-of-pocket cost of \$0 (range, \$0 to \$16). Almost one-third of patients (31.1 percent) had an out-of-pocket cost more than \$0. Patients billed under Current Procedural Terminology code \$0265 versus 96040 had a lower prevalence of out-of-pocket costs (adjusted prevalence ratio, 0.52). Patients with prostate cancer had a higher prevalence of experiencing out-of-pocket costs for genetic counseling (adjusted prevalence ratio, 1.28) versus breast cancer patients.

"Although costs for patients were low, because the Centers for Medicare & Medicaid Services does not recognize certified genetic counselors as a billable provider, genetic counseling costs may be shifted to health care practices," the authors write.

One author disclosed employment at Concert Genetics.

More information: Abstract/Full Text

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