Supplemental online content for:

**Current Practices for Screening and Management of Financial Distress at NCCN Member Institutions**

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eAppendix 1: NCCN Best Practices Management of Financial Distress Survey
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NCCN Best Practices Management of Financial Distress Survey

FOR REFERENCE ONLY. PLEASE COMPLETE VIA SURVEYMONKEY.

The NCCN Best Practice Committee is conducting a survey regarding the barriers around screening and management of financial distress at your cancer center. Your participation is greatly appreciated.

1. Contact Information:
   Name: 
   Title: 
   Member Institution: 
   Email: 

2. How many unique patients are seen at your cancer center annually?
   - <5,000
   - 5,000–9,999
   - >10,000

3. What is the number of inpatient beds dedicated to cancer care at your center?

4. What is the approximate case mix seen at your center in terms of insurance sources in the last year? (Totals must add to 100%)
   
<table>
<thead>
<tr>
<th>Insurance Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private</td>
<td></td>
</tr>
<tr>
<td>Medicare with or without secondary</td>
<td></td>
</tr>
<tr>
<td>Medicaid</td>
<td></td>
</tr>
<tr>
<td>Uninsured</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
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</tbody>
</table>

Other (please specify): 

(continued on next page)
5. Does your center screen patients with cancer for financial distress?
   - Yes, routinely
   - Yes, occasionally
   - No

6. How is financial distress screened for at your center? (Please check all that apply)
   - As part of overall distress using NCCN Distress Thermometer or other distress tool
   - Independently using a financial questionnaire
   - Social worker assessment
   - Other
   Other (please describe):

7. When are patients screened for financial distress at your center?
   - Prior to being seen at the center
   - At the time of initial clinic visit
   - At the time of starting treatment
   - Multiple times during the cancer diagnosis and treatment continuum
   - At the time of change in sociodemographic status such as insurance changes
   - Other
   If other, please describe:

8. Which patients are screened for financial distress? (Please check all that apply)
   - All patients (universal screening)
   - Certain types of patients (e.g., elderly, those with multiple comorbidities, those with certain types of insurance)
   - Certain types of cancer
   - Certain types of treatment

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NCCN Best Practices Management of Financial Distress Survey (cont.)

9. How would you rate the overall effectiveness of your institutional practice for screening financial distress?
   - [ ] Extremely poor
   - [ ] Poor
   - [ ] Neutral
   - [ ] Good
   - [ ] Excellent

10. What type of financial assistance services does your center offer? (Please check all that apply)
   - [ ] Help accessing pharmaceutical drug replacement/copayment assistance programs
   - [ ] Assistance with transportation costs, meal vouchers, and gas cards
   - [ ] Charity care for help with medical costs
   - [ ] Discussion with a representative about cost-of-care estimates through a formal preauthorization and cost-estimation program
   - [ ] Develop payment plans with patients
   - [ ] Help with insurance and billing questions
   - [ ] Assist with claims and denials
   - [ ] Refer patients to third-party organizations for help with financial education/counseling/case management services
   - [ ] Counseling/support for nonmedical financial challenges exacerbated by cancer diagnosis and treatment
   - [ ] Other
   Other (please specify):

(continued on next page)
11. At your center, please estimate the number of personnel that would usually help with assessment and/or management of financial distress for patients undergoing cancer treatment.

<table>
<thead>
<tr>
<th>Role</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social workers</td>
<td></td>
</tr>
<tr>
<td>Case managers</td>
<td></td>
</tr>
<tr>
<td>Financial navigators</td>
<td></td>
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<tr>
<td>Patient accounting services/billing department representatives</td>
<td></td>
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<tr>
<td>Pharmacy representatives</td>
<td></td>
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<tr>
<td>RN coordinators/oncology nurses</td>
<td></td>
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<tr>
<td>ACS navigator</td>
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</tr>
<tr>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

12. How would you rate the overall effectiveness of your institutional practice for management of financial distress?

- [ ] Extremely poor
- [ ] Poor
- [ ] Neutral
- [ ] Good
- [ ] Excellent

13. Does your center evaluate outcomes/impact of financial advocacy services provided to the patients?

- [ ] Yes
- [ ] No
### NCCN Best Practices Management of Financial Distress Survey (cont.)

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. How is the impact of these services evaluated?</td>
<td>Number of patients assisted by staff performing these services</td>
</tr>
<tr>
<td></td>
<td>Bad debt and charity write-offs</td>
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<td></td>
<td>Dollar value of copay cards/charity care to help with gas bills, food coupons provided annually</td>
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<td></td>
<td>Patient satisfaction surveys</td>
</tr>
<tr>
<td></td>
<td>Other (please specify):</td>
</tr>
<tr>
<td>15. How many active clinical trials does your center have at present?</td>
<td>&lt;200</td>
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<tr>
<td></td>
<td>200–499</td>
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<tr>
<td></td>
<td>≥500</td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
</tr>
<tr>
<td>16. Have you had patients refuse clinical trial participation due to financial concerns?</td>
<td>Yes; &lt;50% of the time</td>
</tr>
<tr>
<td></td>
<td>Yes; &gt;50% of the time</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Do not know</td>
</tr>
<tr>
<td>Comments:</td>
<td></td>
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<tr>
<td>17. Does your center provide financial analyses to help potential trial participants understand the costs covered by the trial versus patient/insurance responsibility?</td>
<td>Yes</td>
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<td></td>
<td>No</td>
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NCCN Best Practices Management of Financial Distress Survey (cont.)

18. Does your center ever provide support specifically for clinical trial participants, such as financial counseling, parking vouchers, etc.?
   - Yes, for all trials
   - Yes, for certain trials
   - No
   Comments:

19. Irrespective of whether assessment and management of financial distress is offered at your institution, what in your opinion are some of the potential barriers in integration of financial advocacy services at your institution? (Please check all that apply)
   - Limited institutional budget
   - Poor or no reimbursement for such services
   - Clinical time constraints
   - Inadequate staffing and real time resources
   - Lack of effective risk mitigation strategies
   - Patients not interested
   - Other
   - Other (please specify):

20. Should a stronger integration of financial advocacy services into oncology practice be required at cancer centers?
   - Strongly agree
   - Agree
   - Neutral
   - Disagree
   - Strongly disagree

(continued on next page)
21. Should the success of financial advocacy services be a quality metric?
   - Strongly agree
   - Agree
   - Neutral
   - Disagree
   - Strongly disagree

22. Will your institution be increasing the number of personnel in the area of financial advocacy services over the next 5 years?
   - Definitely no
   - No
   - Unsure
   - Yes
   - Definitely yes

Comments:

23. Please feel free to provide any other comments you may have about institutional screening and management of financial distress.