Access to Oral Oncology Medication

Cancer treatment continues to advance, giving patients more treatment options and improving survival outcomes. Oral oncology medications are an important part of today's cancer care, but patients can benefit from available treatments only when they can access them.

The cost of cancer care also continues to rise in the United States. The overall cost of cancer care in the U.S. surpassed $200 billion in 2020 and is expected to continue increasing as new treatments become available.[1] Spending on oncology medicines increased from $81 billion in 2022 to $91 billion in 2023.[2]

Administrative requirements and high out-of-pocket costs, however, can create barriers to oral oncology medications. As cancer care evolves, insurance coverage should allow patients to access the treatment their clinician deems appropriate.

High Patient Costs Can Put Treatment Out of Reach

As spending on cancer treatment has increased, insurers have expanded the use of utilization management tools, including prior authorization and step therapy. These requirements can create additional hurdles for patients who need oral oncology medications.

Prior authorization can require insurer approval before a prescribed medication is covered, while step therapy can require patients to try and fail another treatment before gaining access to the medication their clinician originally prescribed. These extra requirements can delay access to treatment. Coverage policies should support timely access to oral oncology medications and allow clinicians to make treatment decisions based on the needs of their patients.

High Patient Costs Can Put Treatment Out of Reach

Oral oncology medications can carry significant out-of-pocket costs for patients. These treatments are often placed on higher formulary tiers with greater cost-sharing requirements. Patients may have a coinsurance requirement, making them responsible for 25% to 50% of a medication's cost and can affect whether patients fill their prescriptions or abandon them.[3] The burden can be greater for certain patients depending on their insurance. Medicare beneficiaries have been found to abandon oral oncology prescriptions nearly twice as often as patients with commercial insurance.[4]

Protecting Patient Access

Financial and administrative barriers can delay the start of treatment, make it harder for patients to stay on therapy and increase the risk that patients will abandon their medication.

Policymakers and other health care stakeholders should support coverage policies that reduce administrative and financial barriers to oral oncology medications. Patients should be able to start and remain on the cancer treatment their clinician prescribes without insurance requirements or unaffordable patient costs standing in the way.

Sources

1. IQVIA Institute for Human Data Science. Access Challenges in Oncology Report, 2024.
2. National Cancer Institute. Financial Burden of Cancer Care, Cancer Trends Progress Report.
3. Fact Sheet: Oral Oncolytics.

AfPA Alliance for Patient Access

The Alliance for Patient Access is a national network of policy-minded health care providers advocating for patient-centered care.

AllianceforPatientAccess.org