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Report: What Are Medicare Costs for Patients with Oral Cavity, Pharyngeal Cancers?

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Medicare costs for older patients with oral cavity and pharyngeal cancers increased based on demographics, co-existing illnesses and treatment selection, according to a report published online by *JAMA Otolaryngology-Head & Neck Surgery*.

Many cases of oral cavity cancer and most cases of pharyngeal cancer are diagnosed at advanced stages when management of the disease is complex and treatment is aggressive and involves multiple specialists. The publicly funded Medicare program provides an opportunity for researchers to estimate the cost of care for older patients with these cancers.

Christopher S. Hollenbeak, Ph.D., of the Pennsylvania State University, Hershey, and coauthors analyzed data from Medicare and Surveillance, Epidemiology and End Results hospitals from 1995 through 2005 in patients 66 years and older with oral cavity cancer (6,724 patients) and pharyngeal (3,987 patients) cancers. The authors measured five-year cumulative costs after initial diagnosis, which were defined as Medicare Parts A and B payments.

The results show:

- Compared with white patients, on average, African-American patients with oral cavity cancer accumulated $11,450 more in costs and African-American patients with pharyngeal cancer racked up $25,093 more.

- The number of co-existing illnesses impacted average five-year cumulative costs: one or two co-existing illnesses increased average cumulative costs by $13,342 for patients with oral cavity cancer and $14,139 for patients with

pharyngeal cancer; three or more co-existing illnesses increased costs by $22,196 for patients with oral cavity cancer and $27,799 for patients with pharyngeal cancer.

- Treatment selection was a determinant of cumulative costs. Patients who had chemotherapy accumulated an average of $26,919 more in costs by five years for oral cavity cancer and $37,407 more for pharyngeal cancer.

The authors note their results cannot be generalized to younger patients because Medicare data was used. They also point out that outpatient drug costs were not included in the estimates because Medicare did not reimburse for drugs during the study period.

"With an attributable cost of $27,000 for patients with oral cavity cancer and $40,000 for pharyngeal cancers, there are substantial costs attributable to this disease. Although any comprehensive effort to reduce the economic burden of oral cavity and pharyngeal cancers must emphasize preventive and early diagnostic measures given the role of comorbidities and treatment modality as the primary determinants of cumulative costs at five years, further research will be needed to understand the cost-effectiveness of different modalities of treatment in patients with varying levels of comorbidities and stage of disease," the study concludes.

Source: EurekAlert!