Supplementary Material*


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* This supplementary material was provided by the authors to give readers further details on their article. The material was reviewed but not copyedited.
I. Storyboards Used in Patient Interviews

Cost conversations to guide clinical decision-making.

Cost conversations about planning and budgeting
Cost conversations about immediate financial assistance

Cost Conversations About Financial Assistance

Delina is at the desk to check in for her primary care appointment because of pain in her finger. At the check-in desk, Delina asks to collect the co-pay. Delina says she’s unable to pay this copay.

The intern assistant, Delina, chats with Delina while taking her vital signs. Delina inquires about Delina’s financial situation because of the cost of the visit. Delina asks Delina if she is covered. Delina looks at the EHR chart and notes Delina.

Dr. Booth determines that she has an infection and prescribes antibiotics. He explains that Delina’s is an important member of the team and that he’s happy that they’ll get to talk.

Delina brings her Delina prescription and after receiving summary, Delina talks with the intern and the intern introduces the two of them.

In private room nearby, Delina confirms whether Delina is eligible for a one-time financial assistance program. The intern explains to Delina that her visit and pharmacy cost are covered for today through this one-time program.

Delina goes through Delina’s insurance benefits, how much she spent so far this year, and they discuss the last next steps for Delina that will allow her to afford her care.

Dr. Booth explains that Delina’s financial situation. He explains that the intern is right and she is not comfortable depending on her son to help. Dr. Booth explains the financial assistance program, which offers a 6-month award, and shares that Delina is eligible based on her income. She then helps her get started with filling out an application.
II. Patient Interview Guide

a. Oral interview questions

Health care experience

1. How long have you been receiving care at Kaiser Permanente?
2. Who do you consider part of your health care team at Kaiser Permanente?
3. Who besides your doctor(s) do you usually interact with at Kaiser Permanente?
4. When did you learn that you had cancer?
5. What type of cancer, and what stage?
6. What treatments have you had? What others, if any, are planned in future?
7. Now think about how you manage the papers and documents you receive about cost from Kaiser Permanente. How do you manage those at home?

Critical incident

We want to know how people deal with the financial side of getting health care. Can you think of a specific time that you had to deal with your medical care costs, such as finding out what your care would cost or worrying about paying a bill?

8. Tell me about that experience, and walk me through the steps you went through.
9. Who at Kaiser Permanente was involved? Anyone outside of Kaiser Permanente?
10. Where did you go for information about cancer care costs?
11. What information did you request and receive?
12. What did you do with the information you received?
13. What was hard about this experience for you?
14. What worked well?
15. What questions, if any, arose?
16. Who did you work with to resolve your questions?
17. How did it resolve?
18. What else was going on in your life that affected your experience?
19. If you had to go through this process again, what do you wish would be different?
20. How typical was this situation compared to other similar situations you have experienced?

Storyboard review

There are several ways Kaiser Permanente might discuss costs of care with patients. A storyboard is a visual illustration that describes one process as an example. I am going to show you several “storyboards” that illustrate different ways Kaiser Permanente might go about providing cost of care information to a fictitious patient, and ask what you think about it them.

For each storyboard, I will ask you to say how useful you think the process would be from 1 (“not at all useful”) to 4 (“very useful”). I’ll also ask you to explain why you gave that rating.

FRED – Treatment decision making

This storyboard is about Fred, who receives cost of care information when he needs to make a decision during a visit.

[Fred is asked if he wants to discuss treatment costs at check-in]

How would you feel about being asked about your interest in discussing treatment costs at check-in?

How do you feel about front office staff doing this? Would you rather someone else?

Are you okay with it being documented in your health record so your care team knows?

[Fred is asked if he would like to discuss cost of care]

Here we have the front desk staff asking Fred if he would like to discuss cost. How would you want to be asked? How interested would you be in having this noted in your chart for other members of the care team to see? Why/why not?
Fred is with MA

Would you want the MA to ask you if it’s okay to share with the doctor your interest in discussing cost?

Doctor explains that there may be different OOP for the two injection methods

How do you feel about the doctor bringing up your out of pocket costs?

Are there any other ways would you want to learn this information? From whom?

Someone on team prepares cost estimate

Okay to have different person make cost estimate?

Fred and doctor review options with cost estimate

Would you want more time to read over and ponder (e.g. take it home) before deciding? If so, how would you like to then communicate back to doctor?

Questions about cost estimate materials

What do you think of the information here? What other information would you like to see? What is missing?

Overall, how useful do you think this process would be if you were in Fred’s situation?

Scale from 1 (“not at all useful”) to 4 (“very useful”).

Why do you give that rating?

DELORES – acute financial need

This storyboard is about Delores, who receives information about cost of care and financial assistance.

Ling makes note of financial hardship in Delores’s chart at check-in

How would you feel about your financial need being documented in your health record so your care team knows?

Ling says that Elyse will come speak with her later

What would you want to know about Elyse at this point?

Gretchen the MA and Dr Baub acknowledge financial need and offer reassurance

Would you want the doctor and the MA to acknowledge your financial hardship during the appointment?

Doctor does warm hand off to Elyse and explains that E is a member of the team

How important is it that you understand that Elyse and the rest of the team all work together?

Elyse meets Delores after her appointment

What if someone couldn’t meet you in the moment/right after your appt? How would you like to be followed up with or contacted - by phone, another face to face appt, etc....

How do you feel about being passed onto a new person? What would help make this a smooth or acceptable transition for you?

What kind of follow-up would you like to have with Elyse over the next weeks/months?

Questions on the materials that Elyse receives

What do you think of the information here? What other information would you like to see? What is missing?

Overall, how useful do you think this process would be if you were in Delores’s situation?

Scale from 1 (“not at all useful”) to 4 (“very useful”).

Why do you give that rating?
**JOAN – Planning and budgeting**

This storyboard is about Joan, who receives cost of care information so that she can plan and budget.

[Joan receives a cost estimate for her upcoming cancer care]

What do you think about every patient being offered a cost estimate?

In what format would you like to receive the cost estimate? Would you want other version of this electronically or print out only? Mailed?

What do you think of the information here? What other information would you like to see? What is missing?

[Joan looks up her coverage]

Where would you access or find your coverage/benefit information?

[Elyse introduces Joan to Rob]

Okay with being passed onto a new person - why or why not? What would help make this a smooth or acceptable transition for you?

How do you feel that Rob can access your cost estimate?

[Rob sends Joan a summary of their conversation]

In what forms would you want the summary - mail/print; electronic or both?

Should this go into your medical record so the care team can see it?

Overall, how useful do you think this process would be if you were in Joan’s situation?

Scale from 1 (“not at all useful”) to 4 (“very useful”).

Why do you give that rating?

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**[b. Written questions]**

To save some time during the interview, please answer these questions about yourself.

1. How many children under age 18 are in your household?

2. Do you consider yourself to be of Hispanic, Latino, or Spanish origin? [MARK ONE BOX]
   - Yes
   - No
   - Don’t know

3. What race(s) or ethnicity do you consider yourself to be? [MARK ONE OR MORE BOXES]
   - White
   - Black or African American
   - American Indian or Alaska Native
   - Asian
   - Native Hawaiian and other Pacific Islander
   - Other (Specify)____________________________________

4. What is the highest level of schooling you have completed? [MARK ONE BOX]
   - 8th grade or less
   - Some high school
   - High school graduate or GED
Technical or trade school
Some college or a 2-year college degree
4-year college graduate
Postgraduate degree (Masters, PhD, MD, DVM, JD)

5. Are you single, married or living as married, widowed or divorced? [MARK ONE BOX]
   - Single
   - Married or living as married
   - Widowed
   - Divorced

6. Overall, which one of the following sentences best describes how well you are managing financially these days? [MARK ONE BOX]
   - I find it difficult to get by financially
   - I am just getting by financially
   - I am doing ok financially
   - I am living comfortably

7. Compared to 12 months ago, would you say that you (and your family living with you) are [MARK ONE BOX]:
   - Better off financially than 12 months ago
   - About the same as 12 months ago
   - Worse off financially than 12 months ago
   - Somewhat worse off than 12 months ago

8. In the past 12 months, have you delayed seeking medical care because of worry about the cost? [MARK ONE BOX]
   - Yes
   - No
   - Don’t know

9. In the past 12 months, has anyone in your family delayed medical care because of worry about the cost? [MARK ONE BOX]
   - Yes
   - No
   - Don’t know
### III. Roles and Departments Observed During Study

<table>
<thead>
<tr>
<th>Health System Observations</th>
<th>Description of Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership services</td>
<td>Triage member calls to toll-free number; quote benefits</td>
</tr>
<tr>
<td>Pre-registration</td>
<td>Produce fee estimates; preauthorization checks</td>
</tr>
<tr>
<td>Patient financial services</td>
<td>Patient billing, payment and collections; coding reconciliation</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>Clinical department providing patients with medications and patient education (in-clinic for oncology)</td>
</tr>
<tr>
<td>Oncology leadership</td>
<td>Medical and administrative management of oncology service line</td>
</tr>
<tr>
<td>Oncology clinics</td>
<td>Clinic managers, oncology nurses, medical assistants, oncology physicians, social work, pharmacy</td>
</tr>
<tr>
<td>Patient navigator*</td>
<td>Identify and address non-medical social or economic needs, refer to internal and external resources, assist with care coordination*</td>
</tr>
<tr>
<td>Social work</td>
<td>Provide psychosocial assessments, diagnosis of mental health conditions, brief interventions, and short-term counseling around substance-use disorders and behavioral health.</td>
</tr>
<tr>
<td>Financial counselor</td>
<td>Assist member with Medical Financial Assistance program, medical care costs</td>
</tr>
</tbody>
</table>

*This role only existed at one of the two study sites (KP Northwest) at the time of data collection*
## IV. Patient Sample Characteristics

<table>
<thead>
<tr>
<th></th>
<th>Total N=20 (100%)</th>
<th>KPWA N=10 (50%)</th>
<th>KPNW N=10 (50%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>15 (75%)</td>
<td>8 (80%)</td>
<td>7 (70%)</td>
</tr>
<tr>
<td>Age: mean (min, max)</td>
<td>69 (42,84)</td>
<td>72 (49,79)</td>
<td>66 (42,84)</td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White/ Caucasian</td>
<td>19 (95%)</td>
<td>9 (90%)</td>
<td>10 (100%)</td>
</tr>
<tr>
<td>Black/ African American</td>
<td>1 (5%)</td>
<td>1 (10%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Hispanic (one unknown)</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>2 (10%)</td>
<td>1 (10%)</td>
<td>1 (10%)</td>
</tr>
<tr>
<td>Married or living as married</td>
<td>10 (50%)</td>
<td>6 (60%)</td>
<td>4 (40%)</td>
</tr>
<tr>
<td>Widowed</td>
<td>3 (15%)</td>
<td>1 (10%)</td>
<td>2 (20%)</td>
</tr>
<tr>
<td>Divorced</td>
<td>5 (25%)</td>
<td>2 (20%)</td>
<td>3 (30%)</td>
</tr>
<tr>
<td>Financial status today</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I find it difficult to get by financially</td>
<td>3(15%)</td>
<td>0</td>
<td>3(30%)</td>
</tr>
<tr>
<td>I am just getting by financially</td>
<td>8(40%)</td>
<td>4(40%)</td>
<td>4(40%)</td>
</tr>
<tr>
<td>I am doing ok financially</td>
<td>5(25%)</td>
<td>3(30%)</td>
<td>2(20%)</td>
</tr>
<tr>
<td>I am living comfortably</td>
<td>4(20%)</td>
<td>3(30%)</td>
<td>1(10%)</td>
</tr>
<tr>
<td>Financial status last 12 months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Better off financially than 12 months ago</td>
<td>2(10%)</td>
<td>2(20%)</td>
<td>0</td>
</tr>
<tr>
<td>About the same as 12 months ago</td>
<td>11(55%)</td>
<td>6(60%)</td>
<td>5(50%)</td>
</tr>
<tr>
<td>Worse off financially than 12 months ago</td>
<td>2(10%)</td>
<td>1(10%)</td>
<td>1(10%)</td>
</tr>
<tr>
<td>Somewhat worse off than 12 months ago</td>
<td>5(25%)</td>
<td>1(10%)</td>
<td>4(40%)</td>
</tr>
<tr>
<td>Delayed treatment in last 12 months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>6(30%)</td>
<td>1(10%)</td>
<td>5(50%)</td>
</tr>
<tr>
<td>No</td>
<td>13(65%)</td>
<td>9(90%)</td>
<td>4(40%)</td>
</tr>
<tr>
<td>Don’t know</td>
<td>1(5%)</td>
<td>0</td>
<td>1(10%)</td>
</tr>
<tr>
<td>Someone in your family delayed treatment in last 12 months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>6(30%)</td>
<td>2(20%)</td>
<td>4(40%)</td>
</tr>
<tr>
<td>No</td>
<td>13(65%)</td>
<td>8(80%)</td>
<td>5(50%)</td>
</tr>
<tr>
<td>Don’t know</td>
<td>1(5%)</td>
<td>0</td>
<td>1(10%)</td>
</tr>
</tbody>
</table>
### V. Patient Ratings of Sample Cost-of-Care Conversations

<table>
<thead>
<tr>
<th>Mean usefulness rating (1 (not useful) to 4 (very useful))</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Cost information for treatment decision-making (Fred)</strong></td>
</tr>
<tr>
<td><strong>2. Cost information planning, budgeting, and decision making (Joan)</strong></td>
</tr>
<tr>
<td><strong>3. Cost information for accessing financial support (Delores)</strong></td>
</tr>
</tbody>
</table>

*Not all 20 participants provided numeric ratings; all provided qualitative feedback*