Financial Toxicity's New Face:

How Medicaid Unwinding, Insurance Changes, and Rising Cost of Living Are Reshaping Cancer Care

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The Evolving Face of Financial Toxicity

From Treatment Costs to Broader Systemic Barriers

THEN

Primarily Treatment-Related Costs

- High medication costs
- Out-of-pocket treatment costs
- Deductibles and copays
- Travel to appointments

Financial toxicity was often viewed as a result of direct medical expenses.

NOW

Multidimensional and Policy-Driven

- Medicaid unwinding and eligbillity changes
- ACA affordability shifts (higher premiums, deductibles)
- SNAP benefit reductions
- Rising cost of living (housing, food, transportation)
- Insurance transitions and coverage gaps

Financial toxicity now reflects compounding socioeconomic and policy-driven barriers that restrict access to cancer care.

Why This Matters Now

Policy Changes Are Creating Real Impact

Marketplace Enrollment Decline

22.1 million in 2025 → ↓13% → 19.2 million in 2026

Post-pandemic rollbacks of enhanced ACA premium tax credits led to a 13% decline in Marketplace enrollment.

Greater Out-of-Pocket Costs

- Higher premiums
- Steeper deductibles
- Increased cost sharing
- More complex insurance transitions

Additional Economic Pressures

- Medicaid unwinding
- SNAP reductions
- Rising housing costs
- Transportation costs
- Persistent inflation

Impact on Patients with Cancer

Financial pressure and insurance changes → Delayed care and missed appointments → Medication nonadherence → Treatment interruptions → Worse outcomes and greater health disparities

Financial distress threatens treatment continuity and equitable access to care.

A Collaborative Solution: From Screening to Support

A Bidirectional Workflow to Address Financial Barriers

Closed-Loop Communication

Patient

At risk for financial toxicity

Oncology Nurse Navigator

- Financial toxicity screening
- Identify distress
- Initiate referral

Financial / Insurance Navigator

- Benefits counseling
- Insurance enrollment support
- Prior authorization management
- Foundation assistance matching

Resolution and Follow-Up

- Barriers addressed
- Improved access to care
- Ongoing monitoring

Practice Implications

- Integrate routine financial toxicity screening into clinical workflows.
- Establish clear referral pathways between oncology nurse navigators and financial/insurance teams.
- Leverage community and foundation resources.
- Develop new institutional approaches and creative solutions.
- Monitor outcomes to ensure equitable access to cancer care.

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