

Needs Navigation: A Practical and Proven Solution to Address Patients' Unmet Needs

THE PROBLEM: Financial Distress is a Reality for Many Patients and Their Families

According to recent [Centers for Disease Control and Prevention data](#), chronic illnesses like cancer, heart disease and diabetes are the leading cause of death and disability and are also the leading drivers of the nation's **\$3.8 trillion** in annual health care costs. These conditions disrupt quality of life and financial stability for millions of people every year.

Uninsured, underinsured and low-income patients are particularly predisposed to financial distress and resulting harms on health outcomes, including health disparities. Many must choose between buying groceries or filling their prescriptions, seeing their doctor or paying for rent, mortgage or utilities. Most people also scale back their spending on everyday essentials.

The hard reality is that nearly all people living in the U.S. today are just one serious diagnosis away from experiencing financial devastation. This is true even when individuals have insurance coverage. Total costs of care include medical and nonmedical expenditures that can quickly overwhelm even the best planned household budget. For limited resourced and underserved populations, these unexpected expenses further compound health inequities and the economic challenges that individuals and families are already experiencing.

63% of patients surveyed by Patient Advocate Foundation (PAF) rank financial distress as a fate worse than death.

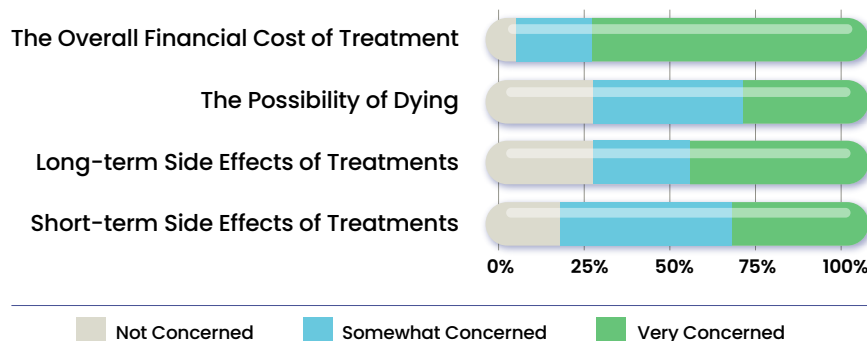


► Financial distress often manifests as a major side effect of illness. Patients and caregivers experience lost wages because of unpaid absences from work. Unpaid caregivers also take on child and adult care additional financial responsibilities.

► Financial distress is particularly prevalent among populations with low socio-economic characteristics, communities of color and those living in rural regions or medical shortage areas.

► The distressing effects exacerbate existing underlying health and economic disparities for these populations and result in care inefficiencies that limit access to quality healthcare for the broader population.

TOP HEALTH CONCERNS IN LIMITED RESOURCED AND UNDERSERVED POPULATIONS



Responses to PAF's 2019 survey of more than 2,800 patients report **financial distress as a top concern**, with many stating that their family's **financial viability is a critically important goal of care**.

THE SOLUTION: Needs Navigation is a Lifeline for Patients and their Families



Findings from a comprehensive National Patient Advocate Foundation (NPAF) environmental scan in 2020 revealed six key features of high quality needs navigation support.

Promoting Health Equity and Better Outcomes by Addressing Social Needs

Providing needs navigation services directly to patients and caregivers is a hallmark of PAF's two and a half decades of organizational experience, expertise and history.

Making skilled needs navigation services equitably available in all care settings is a central aspect of improving health and financial stability for many patients and families, especially those living in underserved communities and medical shortage areas. Expanding needs navigation is also essential to curtail disparities overall.

While some health systems, clinics and centers provide limited social work support and/or financial counseling, personalized financial and social needs screening and services referrals are scattered at best, still inaccessible in some settings, and not currently standardized to support adequacy, consistency or core competencies in quality care delivery and accountability.

Our Ultimate Aim

As PAF's advocacy affiliate dedicated to amplifying the voices of patients and caregivers and meeting their pressing needs, NPAF is taking action to integrate financial and social needs navigation as a scalable health system solution for improving health outcomes and turning the tide on persisting health disparities. To accomplish this, we will pursue collaborative partnerships in research, policy and advocacy to:



1. **Advance** the work of social determinants of health screening
2. **Standardize** needs navigation as a viable intervention
3. **Measure** the impact to patients, communities and programs
4. **Scale** these evidence-based approaches to increase quality and expand availability

NPAF welcomes other organizations to join us to advance this health equity agenda.

Visit www.npaf.org and contact Rebecca.kirch@npaf.org to learn more about options and opportunities for adding your organization as a collaborative partner. Together we can achieve transformational change to benefit all patients and families.