



## Kaiser Daily Health Policy Report

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### Coverage & Access

#### ***AP/Detroit News Examines Cost of End-Of-Life Care***

The [\*AP/Detroit News\*](#) on Sunday examined how patients with terminal diseases increasingly must decide whether "the chance for several more months of life" is "precious enough to spend a small fortune." More than one-third of U.S. residents say they would opt for "everything possible" to be done to save their lives if they had a terminal disease, compared with about one-fifth in 1990, according to a [Pew Research Center for the People and the Press](#) poll. Within the last 10 years, many treatments have proven successful in extending the lives of those with terminal diseases, although "this kind of care costs several times more than the older treatments it supplements or replaces," the *AP/News* reports. Medicare insures about 80% of dying U.S. residents and does not evaluate the cost of treatment when deciding what to cover, but employers and insurers are "discreetly controlling costs through premiums, deductibles, copayments, caps and even outright exclusions," according to the *AP/News*. The not-for-profit [Patient Advocate Foundation](#) reports that in 2005, about 50% of its requests from consumers for assistance concerned copays, up from 5% in 2002. Former health Secretary Joseph Califano said, "If you've got a thick wallet or a full purse, you can get any care you want. If you don't, there's rationing for you." With the high cost of treatments for terminally ill patients, questions have been raised as to whether the investment is worthwhile. A mechanical heart pump costs more than \$200,000, while cancer drugs can cost up to \$50,000 a year. Such treatments do not offer cures but rather extend lives by a matter of months. Michael Acker, a [University of Pennsylvania](#) heart surgeon, said doctors should not encourage "high-tech, expensive technology just to postpone the inevitable" (Donn, *AP/Detroit News*, 8/13).