



Six in Ten Americans Are Concerned They Could Not Afford Cancer Treatment

Three quarters say cancer treatment would have a catastrophic impact on their finances

Washington, DC, September 25, 2018 – A new Ipsos survey of 2,012 U.S. adults, conducted August 20-22 for McKesson, highlights how much Americans' worries about cancer are finance-related. When considering the possibility of being diagnosed with cancer:

- 75% are concerned it would have a catastrophic impact on their finances
- 62% are concerned they would not be able to afford treatment
- 49% are concerned they would not be able to receive quality treatment
- More cite its cost (42%) than another other reason for possibly forgoing treatment

When asked about the biggest barriers to receiving quality cancer care, 46% cite the cost of treatment being too high and 32% insurance coverage of treatment being insufficient. Indeed, only 13% think their health insurance would pay for all the treatment and 35% for most of it, whereas 42% expect it would pay for only of some it, 3% for none of it, and 7% say they don't have health insurance.

While nearly half of those surveyed mention dying (30%) or suffering/enduring pain (17%) as their #1 worry if they were diagnosed with cancer, nearly as many single out a financial-related concern: being a burden to family members (23%), the cost of treatment (17%), or being unable to work (4%).

In the event they'd needed to take time off from work, employed Americans are more likely to have access to family support (42%) than to employer-sponsored disability insurance (38%), sufficient savings (28%), personal life/disability insurance (26%) or long-term disability insurance/government assistance (22%). However, one in five (20%) say they have none of these financial resources.

When it comes to choosing a cancer provider or treatment, the cost of treatment and insurance coverage is rated as extremely or very important by 77%, closely followed by access to latest technologies/novel therapies/clinical trials (75%) and personal interaction and support from staff and providers (74%). Other factors note as widely rated as extremely or very important are, in order: being a well-known facility (60%), proximity to home (53%), word of mouth/recommendation from family or friends (40%), prior experience (35%) and proximity to workplace (27% among those employed).

Address: 2020 K Street NW, Suite 410
Washington, DC 20006
Tel: +1 202 463-7300

Contact: **Nicolas Boyon**
Senior Vice President, U.S., Ipsos Public Affairs
Email: nicolas.boyon@ipsos.com
Tel: +1 646 309 4879



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Other findings:

- 48% of Americans are worried about being diagnosed with cancer (14% very, 33% somewhat) while 48% are not (24% not very, 14% not at all) and 4% don't know
- 72% are confident they would be able to receive quality cancer care if diagnosed with cancer (27% very, 45% somewhat) while 21% are not (14% not very, 7% not at all) and 7% don't know
- 76% say there has been progress in curing cancer in the past decade – a great deal for 17%, a fair amount for 29% and some for 30%
- 61% say it is very or somewhat likely that there will be a cure for cancer within 50 years while 27% say it is very or somewhat unlikely and 12% don't know
- 60% of Americans would consider using a DNA/genetic test to assess their risk for cancer (24% definitely, 36% probably) vs. 27% who would not (21% probably not, 6% definitely not) and 13% not sure
- The reasons most cited by those who would not consider DNA/genetic testing are not wanting to know the diagnosis or not knowing enough about DNA/genetic testing
- 44% would trust artificial intelligence technology to diagnose them or recommend a course of cancer treatment (9% definitely, 35% probably) vs. 35% who would not (26% probably not, 9% definitely not) and 21% not sure

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About the Study

These are findings from an Ipsos poll conducted August 20-22, 2018, on behalf of McKesson Corporation. For the survey, a sample of 2,012 adults 18+ from the continental U.S., Alaska and Hawaii were interviewed online in English.

The sample for this study was randomly drawn from Ipsos' online panel (see link below for more info on "Access Panels and Recruitment"), partner online panel sources, and "river" sampling (see link below for more info on the Ipsos "Ampario Overview" sample method) and does not rely on a population frame in the traditional sense. Ipsos uses fixed sample targets, unique to each study, in drawing a sample. After a sample has been obtained from the Ipsos panel, Ipsos calibrates respondent characteristics to be representative of the U.S. Population using standard procedures such as raking-ratio adjustments. The source of these population targets is U.S. Census 2013 American Community Survey data. The sample drawn for this study reflects fixed sample targets on demographics. Post-hoc weights were made to the population characteristics on gender, age, race/ethnicity, region, and education.

Statistical margins of error are not applicable to online polls. All sample surveys and polls may be subject to other sources of error, including, but not limited to coverage error and measurement error. Where figures do not sum to 100, this is due to the effects of rounding. The precision of Ipsos online polls is measured using a credibility interval. In this case, the poll has a credibility interval of plus or minus 2.5 percentage points for all respondents. Ipsos calculates a design effect (DEFF) for each study based on the variation of the weights, following the formula of Kish (1965). This study had a credibility interval adjusted for design effect of the following (n=2,009, DEFF=1.5, adjusted Confidence Interval=+/-4 percentage points).

For more information about conducting research intended for public release or Ipsos' online polling methodology, please visit our [Public Opinion Polling and Communication](#) page where you can download our brochure, see our public release protocol, or contact us.

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www.ipsos.com

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