Out-of-pocket Medical Costs for Parents with Children with Down Syndrome in the United States

Citation

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Accessibility
METHODS

Baseline characteristics of parent-child pairings were generally similar with respect to most baseline characteristics (Table 1).

DISCUSSION

In addition, non-economic factors such as emotional considerations, quality of care provided, and patients' health care plan may affect parents' out-of-pocket health care expenses. Parents may also consider factors such as the ability to pay, the need for surgery, and the impact of the condition on their personal health when making decisions regarding out-of-pocket medical costs. After matching patients making decisions regarding out-of-pocket medical costs, the study found that the incremental total medical and pharmacy costs were similar between the two groups.

CONCLUSION

In conclusion, the study provides valuable insights into the financial burden associated with raising a child with DS and can help inform future policy decisions and interventions aimed at reducing the financial strain on families with DS.

Figure 2. Study results

Figure 3. Mean total out-of-pocket annual cost to parents of children with DS and matched controls, by age category

Table 1. Baseline characteristics in patient age cohorts, after matching

Table 2. Mean annual cost the patient-parent pair among individuals with DS and matched controls, by age category

RESULTS

Baseline cost data were collected and analyzed from the OptumHealth database, a large, national health insurance provider. The study included patients with DS and their matched controls, and data were collected on various costs associated with raising a child with DS, including medical and pharmacy costs.

BACKGROUND

The study found that parent-child pairs with DS had significantly higher total annual out-of-pocket costs compared to their matched controls across all age categories. The incremental total medical and pharmacy costs were highest for patients with DS compared to their matched controls in each age group and cost category.

STUDY OBJECTIVE

The study objective was to estimate the out-of-pocket health care costs associated with raising a child with DS between birth and 18 years of age from the perspective of commercially insured parents.

OUT-OF-POCKET COSTS

The study focused only on out-of-pocket health care costs to parents, and did not include any costs associated with raising a child that parents must consider; the needs for surgery can be greatest during this time period when about 40-50% of children with DS are identified as having DS.

LIMITATIONS

The main limitation of the study is that it only included children in the United States, and the results may not be generalizable to other populations with DS.