
PREFACE

Clinical cancer trials are supported by a combination of research sponsors, institutions, and third-party payers. However, it is unclear what additional costs—if any—are associated with treatment in a government-sponsored cancer trial. The National Cancer Institute, the National Institutes of Health, and the White House Office of Science and Technology Policy have a strong interest in estimating these costs so that informed policy decisions can be made about how to finance clinical trial research.

This report documents the design and methods of the Cost of Cancer Treatment Study (see www.costofcancer.org), a retrospective study designed to provide precise and generalizable estimates of the additional costs, if any, associated with clinical cancer research. Principal funding comes from the National Cancer Institute, with additional funding from the Office of the Director, National Institutes of Health, and from the National Science Foundation, as part of its support for the White House's Office of Science and Technology Policy. These offices as well as individuals in the cancer research community will be interested in this report on the design and methods of the study and the results of the study itself.

The study is being conducted jointly by RAND's Science and Technology Policy Institute and RAND Health. Originally created by Congress in 1991 as the Critical Technologies Institute and renamed in 1998, the Science and Technology Policy Institute is a federally funded research and development center sponsored by the National Science Foundation and managed by RAND. The institute's mission is to help improve public policy by conducting objective, indepen-

dent research and analysis on policy issues that involve science and technology.

RAND Health, the nation's largest private health-care research organization, has helped shape private- and public-sector responses to emerging health care issues for more than three decades. RAND Health's mission is to improve health care systems and advance understanding of how the organization and financing of care affect costs, quality, and access.

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