

Medicaid rules may affect Americans' cancer survival

January 12 2022



(HealthDay)—The chance of someone who is covered by Medicaid



surviving cancer may depend in part on where they live, a new analysis finds.

In <u>states</u> that had lower <u>Medicaid</u> income eligibility limits, cancer survival rates were worse for cancers both in early and late stages compared to states with higher Medicaid <u>income</u> eligibility limits, American Cancer Society researchers discovered.

"Our findings that lower historic state Medicaid income eligibility limits were associated with worse long-term survival within stage suggest that increasing Medicaid income eligibility could be an important policy lever for improving survival after <u>cancer diagnosis</u>," said study author Jingxuan Zhao, a senior associate scientist at the cancer society.

For the study, the researchers looked at 1.4 million U.S. adults who were newly diagnosed with 19 common cancers between 2010 and 2013 in the National Cancer Database, and followed them for up to eight years.

In the study, states' Medicaid income eligibility limits were categorized as $\leq 50\%$, 51% to 137%, and $\geq 138\%$ of the <u>federal poverty level</u> (FPL). Among patients with newly diagnosed cancer (aged 18 to 64 years), patients living in states with lower Medicaid income eligibility limits had worse survival for most cancers compared with those living in states with high Medicaid income eligibility limits ($\geq 138\%$ FPL), according to the report.

The findings indicate that Medicaid policies are critical to survival after <u>cancer</u> diagnosis.

The reasons for the association between state Medicaid income eligibility limits and stage-specific survival could be that having health insurance may improve access to timely care and complete treatment, the authors noted in a cancer society news release.



For cancers that have effective treatments, access to that treatment is strongly associated with survival. Access to advanced therapies, such as <u>immunotherapy</u> and <u>targeted therapy</u>, may also contribute to survival, according to the <u>cancer</u> society.

Another reason for the disparity may be that having <u>health insurance</u> is also associated with monitoring the patient after survival and specialized <u>health care</u> during that time, also known as survivorship care.

The findings were published online Jan. 7 in the journal *JCO: Oncology Practice*.

More information: The U.S. Centers for Disease Control and Prevention has more information on and resources for <u>cancer</u>.

Jingxuan Zhao et al, Association of State Medicaid Income Eligibility Limits and Long-Term Survival After Cancer Diagnosis in the United States, *JCO Oncology Practice* (2022). DOI: 10.1200/OP.21.00631

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Citation: Medicaid rules may affect Americans' cancer survival (2022, January 12) retrieved 3 February 2023 from <u>https://medicalxpress.com/news/2022-01-medicaid-affect-americans-cancer-survival.html</u>

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