New Study Shows Medicaid Expansion Associated with Increased Palliative Care Use for Cancer Patients diagnosed with Advanced Disease

FOR MORE INFORMATION, CONTACT:
American Cancer Society, Anne.Doerr@cancer.org

New data reported by researchers at the American Cancer Society (ACS) shows Medicaid expansion was associated with increases in the use of palliative care among individuals with newly diagnosed stage IV cancer, although overall usage of palliative care was low. In addition, the increase post-Medicaid expansion varied by cancer type. The findings will be presented at the annual American Society of Clinical Oncology (ASCO) Quality Care Symposium in Chicago, September 30 - October 1.

In the study, presented by lead author Dr. Xuesong Han, scientific director, health services research at the American Cancer Society, researchers identified individuals aged 18-64 years with newly diagnosed stage IV solid cancers pre- and post- ACA Medicaid expansion from the National Cancer Database. They used difference-in-differences analyses to estimate the association between Medicaid expansion and changes in receipt of palliative care as part of first-line therapy, adjusting for age group, sex, race/ethnicity, area-level poverty, metropolitan status, comorbidity, facility type, palliative care specialist availability, diagnosis year and state of residence. Stratified analyses were conducted by cancer type.

A total of 685,781 individuals diagnosed with stage IV cancers were included in the study from Medicaid expansion and non-expansion states. The percentage of eligible patients who received palliative care as part of first-line therapy increased from 17% pre-ACA to 18.9% post-ACA in Medicaid expansion states and from 15.7% to 16.7% in non-expansion states, resulting in a net increase of 1.4 percentage points in expansion states after adjusting for sociodemographic and clinical factors. The increase in receipt of palliative care in expansion states compared to non-expansion states was greater for patients with advanced pancreatic, colorectal, female breast, lung, and oral cavity and pharynx cancers, and non-Hodgkin lymphoma.

Researchers note increasing Medicaid coverage facilitates access to guideline-based palliative care.

Other ACS study authors participating in this research include: Sylvia Kewei Shi, Dr. Leticia Nogueira, Dr. Arif Kamal, Dr. Ahmedin Jemal, and Dr. Robin Yabroff.