New ACS Study Finds Medicaid Expansion Improves Cancer Survival Among People in Rural and High-Poverty Communities

CHICAGO — A new study by researchers at the American Cancer Society (ACS) shows Medicaid expansion statistically significantly improved 5-year cause-specific cancer survival and overall survival among people residing in rural and high-poverty communities. The findings are to be presented today at this year's American Society of Clinical Oncology (ASCO) annual meeting in Chicago, May 30-June 3, 2025.

In the report, led by Elizabeth Schafer, MPH, associate scientist, surveillance and health equity science at the American Cancer Society, researchers analyzed all tumors diagnosed during 2007-2008 (pre-Medicaid expansion) and 2014-2015 (post-Medicaid expansion). The data included adults 18-59 years of age, residing in 26 states that expanded Medicaid in 2014 and 12 states that did not expand by the end of 2020. The information was obtained from the Cancer Incidence in North America Survival dataset. Difference-in-differences analysis of 5-year cause-specific cancer survival and overall survival was stratified by race and ethnicity, rurality, and county-level poverty rate.

Study results included a total of 1,423,983 cancer cases diagnosed between 2007 and 2008 and 2014 and 2015 in Medicaid expansion and non-expansion states. For all cancers combined, the non-significant adjusted net increase in 5-year cause-specific cancer survival associated with Medicaid expansion was 0.08 percentage point. By sociodemographic factors, the improvements in cause-specific survival were greater in expansion states among individuals residing in rural and in high-poverty communities, among non-Hispanic White individuals, American Indian/Alaska Native, and non-Hispanic Black individuals, though not statistically significant for the latter two populations. Similarly, the net gains in 5-year overall survival in expansion states were statistically significant among non-Hispanic Black and non-Hispanic White individuals, and among individuals residing in rural and high-poverty areas.

Researchers stress improvements in long-term survival, especially among high-poverty and rural communities, underscore the importance of maintaining Medicaid expansion and further expanding in the 10 remaining states to broadly cover low-income adults and help reduce disparities in cancer survival outcomes.

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