# ACS Study Finds Short-Term Limited Duration Insurance Plans Associated With Advanced Cancer Diagnoses

## American Cancer Society experts stress the need for individual state policies banning or restricting STLD plans to save lives

ATLANTA, March 18, 2025 — Short-term limited duration (STLD) insurance plans do not provide comprehensive coverage and can leave patients who are diagnosed with a serious disease like cancer with catastrophic costs. In a new, large national study published today in the <u>Journal of the American Medical Association (JAMA) Network Open, American Cancer Society</u> (ACS) researchers found the 2018 federal policy loosening restrictions on STLD insurance plans was associated with an increase in late-stage cancer diagnoses in states without or with inadequate additional STLD plan regulatory protections.

STLD plans are predatory and give people a false sense of security by offering low premiums but extremely minimal coverage. This study's findings are especially troubling as crucial Navigator programs are being cut, making it more difficult and confusing for families to enroll in comprehensive health plans. Furthermore, if Congress makes significant cuts to the Medicaid program, more individuals will find themselves lured in by the initial low cost of STLDs, only to find their coverage inadequate and the out-of-pocket cost unsustainable if they're diagnosed with a chronic disease like cancer.

"This research underscores the importance of state and federal policies banning or significantly restricting short-term limited duration insurance plans," said <a href="Nova Yang">Nova Yang</a>, <a href="MSPH">MSPH</a>, associate scientist, health services research at the American Cancer Society and lead author of the study. "Most of these STLD plans do not cover essential health services, such as cancer screenings, which may delay cancer diagnoses, resulting in later stage disease, where treatment is more intensive, and the prognosis is worse."

According to the authors, STLD plans can disrupt individual insurance markets, leading to higher costs and a slow-down in care for comprehensive plan enrollees. In October 2018, federal regulations extended the allowable duration of STLD plans from three months to up to 36 months. States have taken varying approaches to expand, restrict, or eliminate the sale or terms of STLD plans, both prior to 2018 and following the enactment of federal regulations.

"The ACS study released today contributes to the evidence that the proliferation of STLD plans is dangerous for cancer patients, survivors, and those at risk of developing the disease. STLD plans do not include critical Affordable Care Act patient protections, including pre-existing condition protections, coverage of essential health services, or caps on coverage, which have been proven to be important to better cancer outcomes. Evidence shows that access to comprehensive health insurance coverage saves lives, but the rise in STLD plans puts lives at risk. Since these plans often have incredibly low premiums, people are often deceived that the plans provide full coverage of services until someone falls ill and they are then faced with a financial crisis," said Lisa A. Lacasse, president of ACS's advocacy affiliate, the American Cancer Society Cancer Action Network (ACS CAN).

For the study, researchers identified 1,289,366 adults aged 18-64 years old newly diagnosed with cancer from January 2016 through February 2020 in 47 states and the District of Columbia from the National Cancer Database. Patients were categorized into four groups according to their states' STLD plan policies:

- 1-States prohibiting STLD plans prior to 2016
- 2-States banning STLD plans or strict regulations leading insurers to stop offering STLD plans after 2018
- 3-States restricting STLD plans
- 4-States with no STLD regulation

They conducted difference-in-differences analyses to evaluate changes in late-stage diagnoses (stages III/IV)

pre- (01/2016-06/2018) and post- (01/2019-02/2020) STLD plan expansion between groups two, three, and four versus group one for all cancers combined and two common cancers with effective screening tests: female breast and colorectal cancers. Investigators adjusted for age group, sex, rurality, area-level poverty, diagnosis year, and state random effects to account for other state-level variations.

Study results showed percentages of late-stage diagnoses decreased since 2018 in all state groups. Compared to patients in group one states (prohibited STLD plans prior to 2016), group four (no STLD regulations) had a net increase of 0.76 percentage points (ppt) in late-stage diagnosis, and group three (some STLD regulations) had a net increase of 0.84 ppt in late-stage diagnoses. Similar patterns were observed for female breast and colorectal cancers.

Other ACS researchers contributing to the study include <u>Dr. Jingxuan Zhao</u>, <u>Dr. Robin Yabroff</u>, and senior author <u>Dr. Xuesong Han</u>.

#### Additional ACS Resources:

- Insurance and Cancer
- Cancer Statistics Center

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### **About the American Cancer Society**

The American Cancer Society is a leading cancer-fighting organization with a vision to end cancer as we know it, for everyone. For more than 110 years, we have been improving the lives of people with cancer and their families as the only organization combating cancer through advocacy, research, and patient support. We are committed to ensuring everyone has an opportunity to prevent, detect, treat, and survive cancer. To learn more, visit <u>cancer.org</u> or call our 24/7 helpline at 1-800-227-2345. Connect with us on <u>Facebook</u>, X, and <u>Instagram</u>.

#### **About ACS CAN**

The American Cancer Society Cancer Action Network (ACS CAN) advocates for evidence-based public policies to reduce the cancer burden for everyone. We engage our volunteers across the country to make their voices heard by policymakers at every level of government. We believe everyone should have a fair and just opportunity to prevent, detect, treat, and survive cancer. Since 2001, as the American Cancer Society's nonprofit, nonpartisan advocacy affiliate, ACS CAN has successfully advocated for billions of dollars in cancer research funding, expanded access to quality affordable health care, and advanced proven tobacco control measures. We stand with our volunteers, working to make cancer a top priority for policymakers in cities, states and our nation's capital. Join the fight by visiting <a href="https://www.fightcancer.org">www.fightcancer.org</a>.

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