County-Level Medical Debt Linked to Advanced-Stage Cancers and Worse Survival Among Newly Diagnosed U.S. Adults

American Cancer Society researchers highlight the need to increase access to affordable care to help improve cancer outcomes

ATLANTA, August 18, 2026 — Individuals diagnosed with cancer in the United States often bear significant health care costs and productivity losses, with over half incurring cancer-related medical debt. In response, cancer patients and survivors often delay or forgo necessary care, cut back on food, clothing, and basic household expenses, see their credit scores decrease, and in extreme cases, file bankruptcy.

In a new large study by the American Cancer Society (ACS), researchers found that people with cancer who live in counties with a higher share of residents having medical debt in collections were more likely to be diagnosed with cancer at a later stage and have worse survival. The report is to be published today in *JNCCN—Journal of the National Comprehensive Cancer Network.*

“Our findings are critically important as residents of areas with high shares of medical debt could face multiple barriers to cancer screening and other preventive services, timely assessment of early signs of cancer, and effective cancer treatments after diagnosis, ultimately affecting cancer diagnosis and outcomes,” said Dr. Xuesong Han, scientific director, health services research at the American Cancer Society and lead author of the study. “There is a real need for policies and programs, either directly preventing and reducing medical debt, or structurally promoting economic development and financial resilience in vulnerable communities, to help increase access to affordable care and help people suffering from all types of disease.”

In the study, researchers analyzed data of adults 18 years of age and older who were newly diagnosed with cancer in 2011-2019 from the National Cancer Database. The county-level share of adults with medical debt in collections was combined with patient-level data. Scientists estimated associations of county-level medical debt with cancer diagnosis stage and overall survival, respectively, for all patients and by cancer type, clinical, and socioeconomic subgroups.

The results show a total of 7,558,658 individuals were identified with cancer, with a median county-level medical debt of 18%, ranging from 0% to 56%. The greatest proportion with a diagnosis of stage-IV and the lowest five-year survival rate were both seen in the counties having the highest medical debt. After adjusting for other patient and county-level characteristics, patients living in counties with the highest medical debt were more likely to be diagnosed at stage IV and have poorer survival compared with those living in the lowest counties with medical debt. The pattern was observed among major cancer types and was consistent across subpopulations of different socio-demographic and clinical backgrounds.

“Future research is needed to evaluate ongoing policies, including those related to medical debt, large federal cuts to Medicaid and the social safety net, and expiration of Marketplace insurance subsidies, and their relationship with cancer care and outcomes,” Han added. “Studies including individual-level information on medical debt, health insurance coverage, and financial well-being and evaluating their impact throughout the cancer care continuum will be especially valuable for informing targeted and sustainable interventions to ensure everyone has equitable access to effective cancer prevention, screening, and early detection, treatment, and survivorship care.”

“This study highlights the impossible choices too many people in the U.S. face between meeting basic needs and paying for health care,” said Lisa Lacasse, president of the American Cancer Society Cancer Action Network (ACS CAN), ACS’s advocacy affiliate. “Those pressures can delay or prevent cancer screenings and treatment, leading to worse outcomes, while medical debt often remains even after care is postponed. ACS CAN has long advocated for policies that both prevent medical debt and ease the burden on individuals and families already facing it.”

Other ACS researchers contributing to this study include Nova Yang, MSPH, Dr. Xin Hu, Dr. Qinjin Fan, Dr.

Jingxuan Zhao, Dr. Zhiyuan (Jason) Zheng, Kewei Sylvia Shi, MPH, and senior author Dr. Robin Yabroff.

Additional ACS Resources:

- Managing the Cost of Cancer Care
- Medical Debt Associated With Worse Health Status, More Premature Deaths, and Higher Mortality Rates at the County Level in the U.S.
- One-Third of Cancer-Related Crowdfunding Campaigns Share Medical Financial Hardship and Health-Related Social Needs
- Lasting Financial Hardship Associated with Cancer Diagnosis for Working-Age Adults

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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 cancer.org or call our 24/7 helpline at 1-800-227-2345. Connect with us on Facebook, X, and Instagram.

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