Effect of state Medicaid expansion status on insurance coverage and stage at diagnosis in head and neck cancer patients

PURPOSE/ OBJECTIVES

- ‡ Early evidence suggests that Medicaid expansion mandated by the Affordable Care Act (ACA) has had a positive impact on the following:
 - ‡ Access to care for nonelderly cancer patients¹⁻²
 - ‡ Stage at diagnosis for nonelderly cancer patients³⁻⁴
 - ‡ Access to care for head and neck cancer (HNC) patients⁵
- ‡ Medicaid expansion effects on stage at diagnosis have not been studied in HNC and impacts on socioeconomic disparities are unknown.
- ‡ HNC is among the most expensive to treat,⁶ so improvements in access to care may have a large economic impact as well as impact on prognosis.
- ‡ Our objective was to evaluate Medicaid expansionassociated changes in insurance and stage at diagnosis overall and by subgroups.
- # We utilized the Surveillance, Epidemiology, and End Results 18 (SEER) database to identify HNC patients 18-64 years diagnosed with a first primary malignancy in 2011-2015
- ‡ Cases diagnosed 3 months before and 3 months after the date of expansion were excluded to allow for a wash-out / phase-in period¹
- ‡ We compared changes in insurance rates (Medicaid & uninsured) and early (0-II) stage in cases from states that expanded Medicaid (EXP) by 2014 to states that did not (NEXP)
- ‡ We used difference-in-differences analyses

RESULTS

‡ Medicaid expansion is associated with increases in Medicaid and decreases in the rates of uninsured, particularly among

there is debate in the United States about healthcare financing, Medicaid, and the Affordable Care Act.