

New Study Shows Substantial State Variations in Health Insurance Coverage at Cancer Diagnosis

Having health insurance is a strong determinant of cancer care access and survival.

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A new study led by [American Cancer Society](#) (ACS) researchers shows substantial state variations in health insurance coverage, which is a strong determinant of cancer care access and survival, among newly diagnosed cancer patients in the United States. These findings come despite a significant increase over the past decade in insurance coverage under the Affordable Care Act, which increases coverage options for working-age adults. The research is published today in the journal [Health Affairs Scholar](#).

“Having health insurance coverage is crucial to ensure timely access to quality cancer treatment and survivorship care,” said [Dr. Xuesong Han](#), scientific director, health services research at the American Cancer Society and senior author of the study. “The findings reinforce the importance of the expansion of Medicaid income eligibility under the Affordable Care Act, playing a big role in access to care and helping to save lives.”

Using data from the Cancer Incidence in North America (CiNA) 2010-2019, researchers identified 6,432,117 incident cancer cases with known insurance status diagnosed at 18-64 years of age from 49 population-based state registries. Considerable variation in Medicaid coverage and uninsured rate exists across states, especially by Medicaid expansion status.

The results showed among expansion states, Medicaid coverage increased from 14.1% in 2010 to 19.9% in 2019; while the Medicaid coverage rate remained lower at 12.5% in non-expansion states. The uninsured rate decreased from 4.9% to 2.1% in expansion states; while in non-expansion states, the uninsured rate decreased slightly from 9.5% to 8.1%. In 2019, 111,393 cancer cases (16.9%) had Medicaid coverage at diagnosis and 48,357 (4.4%) were uninsured.

“This study is further proof that expanding Medicaid increases access to comprehensive health insurance and we know that alone can increase the chances that cancer is diagnosed early which in turn augments the likelihood that someone survives the disease. In short, expanding this health insurance program is saving lives,” said [Lisa Lacasse](#), president of ACS CAN. “ACS CAN has been a long-time advocate for Medicaid expansion to reduce the cancer burden and continues to work

tirelessly in the 10 states that have not yet increased their Medicaid program eligibility.”

“These study estimates also suggest that many patients with cancer may face challenges with care access and continuity, especially following the unwinding of COVID-19 pandemic protections for Medicaid coverage,” added Dr. Xin Hu, an ACS fellow/ assistant professor in the department of public health sciences at the University of Virginia School of Medicine, and lead author of the study. “State cancer prevention and control efforts are needed to mitigate cancer care disparities among vulnerable populations.”

Other ACS authors include Nova Yang, Dr. Qinjin Fan and Dr. Robin Yabroff.

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