



# Cancer Patients' Access to Care Post-ACA

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# Disclosure Information

*Jennifer Singleterry*

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I have no financial relationships to disclose.

I will not discuss off label use and/or investigational use in my presentation.



# Agenda

- What the data show
- Current problems
- Future opportunities



# Access to Insurance Coverage

- 20 million have gained insurance coverage since the passage of the ACA
  - Marketplaces – 12.7 million selected a plan in 2016
  - Medicaid expansion – 14.5 million more since 2013
  - More options for young adults (up to age 26) – 6.1 million more since 2010
  - No denials because of pre-existing conditions – up to 50% of Americans had pre-existing conditions in 2011

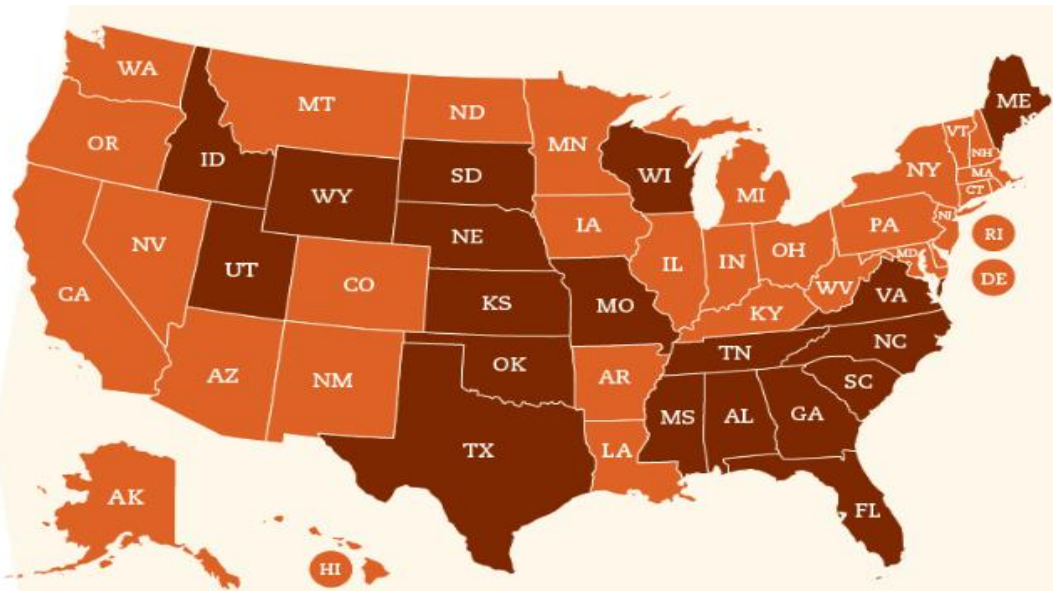
Sources: U.S. Department of Health and Human Services, Assistant Secretary for Planning and Evaluation.

<https://aspe.hhs.gov/pdf-report/health-insurance-coverage-and-affordable-care-act-2010-2016>

<https://aspe.hhs.gov/sites/default/files/pdf/187866/Finalenrollment2016.pdf>

<https://aspe.hhs.gov/basic-report/risk-pre-existing-conditions-could-affect-1-2-americans>

# Medicaid Expansion



**STATES  
EXPANDING  
MEDICAID  
TO DATE**

**32\***

Number of states, including the District of Columbia, that are expanding Medicaid

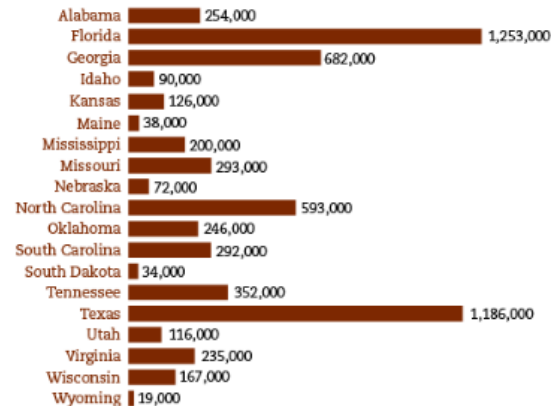
**STATES  
NOT  
CURRENTLY  
EXPANDING  
MEDICAID**

**19**

Number of states that have not yet expanded Medicaid

## NOT YET EXPANDED

Number of residents who won't gain access to Medicaid and are likely to remain uninsured, in states that have not yet expanded Medicaid

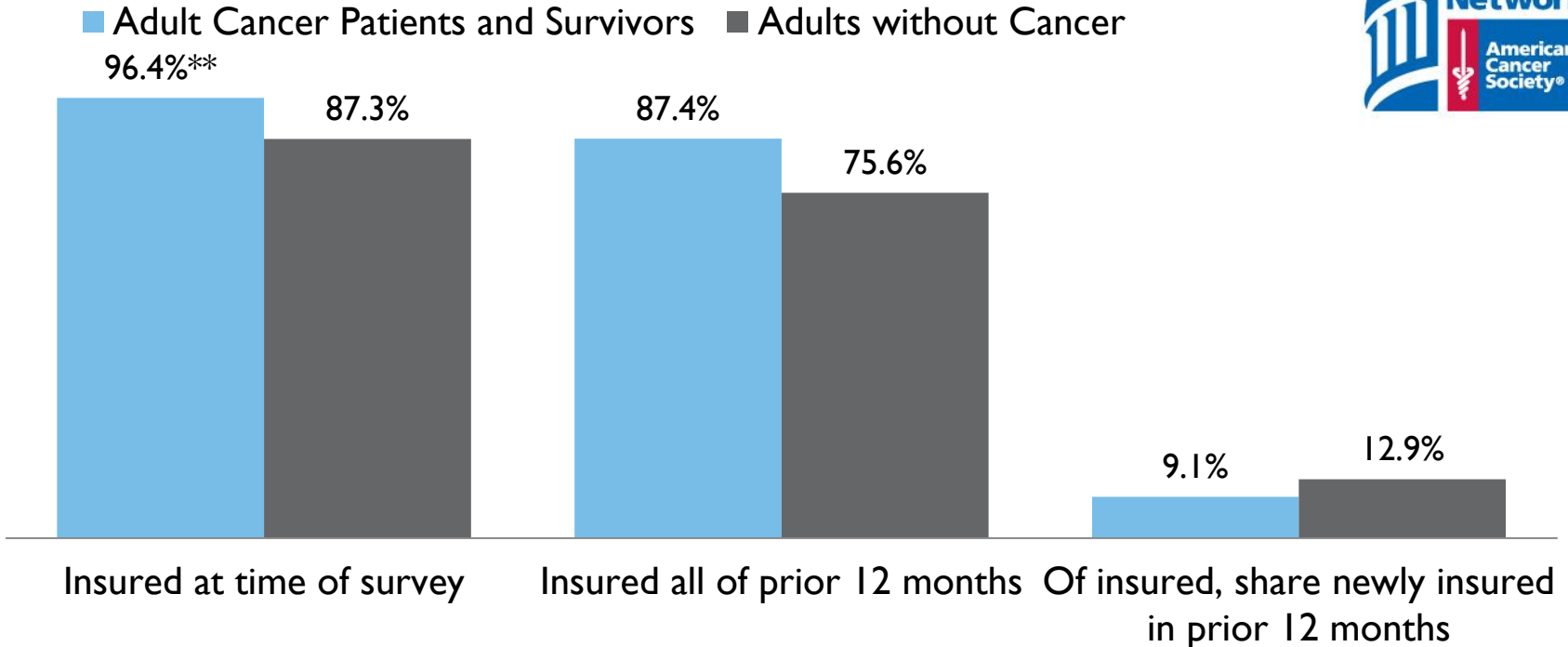


Source: Families USA. As of March 2016.  
<http://familiesusa.org/product/50-state-look-medicaid-expansion>

# Access to Care

Adult cancer patients and survivors are more likely to access care than adults without cancer – but are also more likely to face challenges.

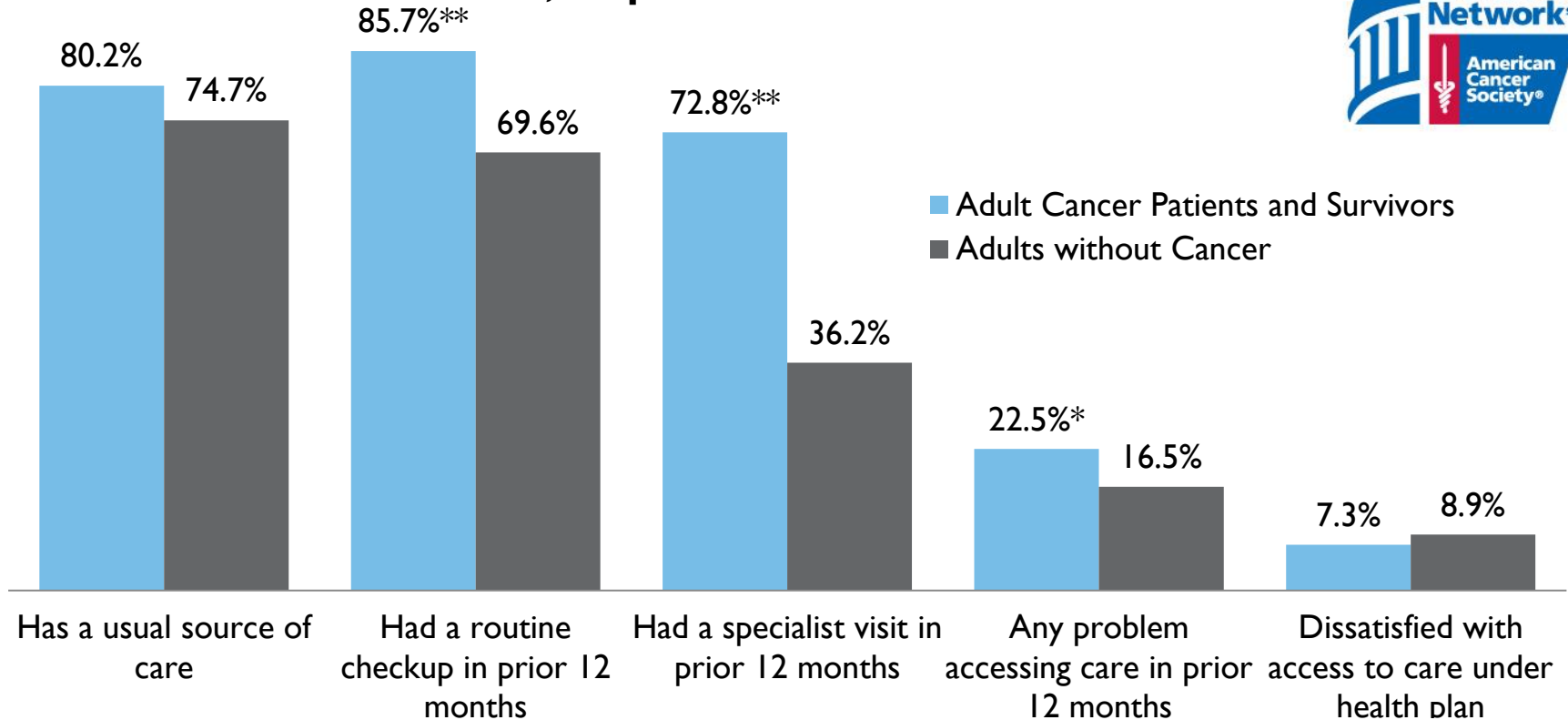
# Health Insurance Coverage of Adult Cancer Patients and Survivors and Adults without Cancer, September 2014



Source: Health Reform Monitoring Survey, 2014 Quarter 3 (September), including oversample of adults with a cancer diagnosis (excluding skin).

\*/\*\* Regression-adjusted difference between adults cancer patients and survivors and adults without cancer is significantly different from zero at the 0.05/0.01 level, using two-tailed tests.

# Access to Care for Insured Adult Cancer Patients and Survivors and Adults without Cancer, September 2014



Source: Health Reform Monitoring Survey, 2014 Quarter 3 (September), including oversample of adults with a cancer diagnosis (excluding skin).

Notes: Insured is defined as adults with insurance coverage for all of the prior 12 months.

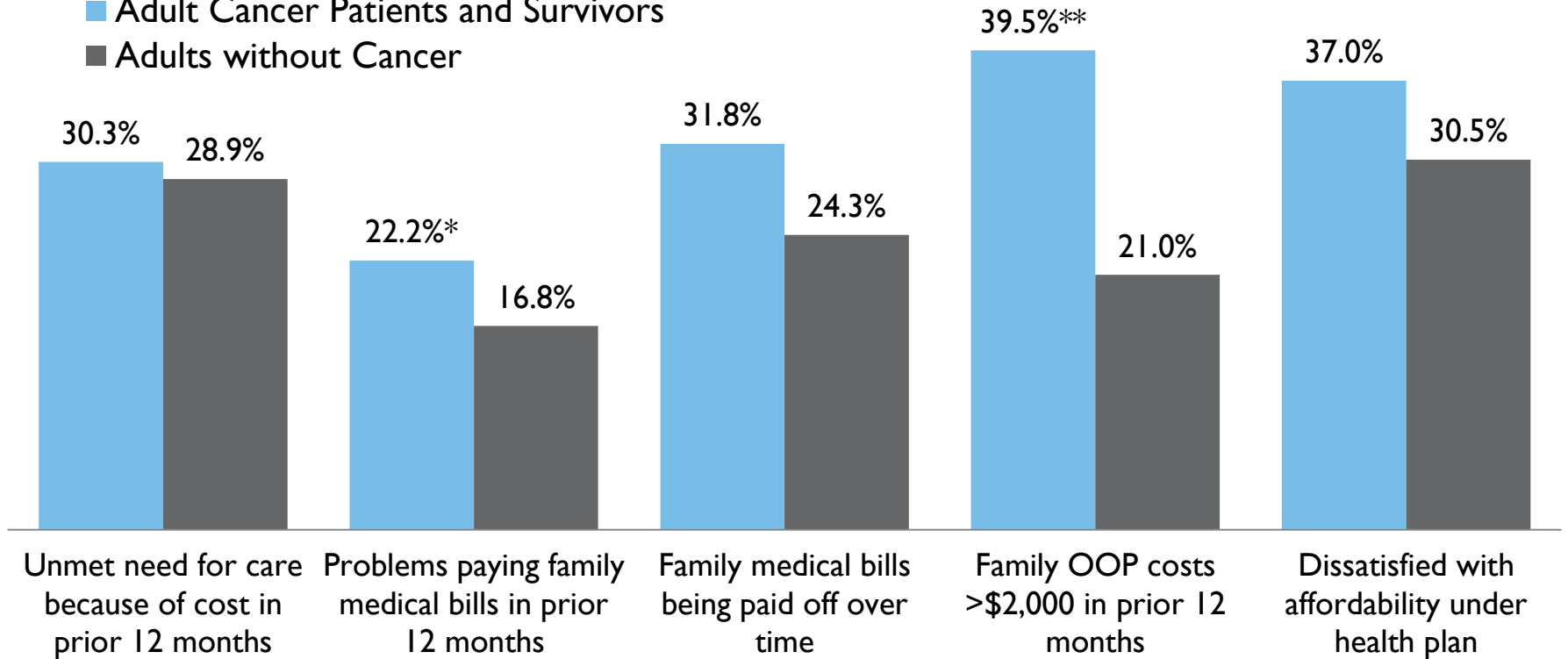
\*/\*\* Regression-adjusted difference between adults cancer patients and survivors and adults without cancer is significantly different from zero at the 0.05/0.01 level, using two-tailed tests.



# Health Care Affordability of Insured Adult Cancer Patients and Survivors and Adults without Cancer, September 2014



- Adult Cancer Patients and Survivors
- Adults without Cancer



Source: Health Reform Monitoring Survey, 2014 Quarter 3 (September), including oversample of adults with a cancer diagnosis (excluding skin).

\*/\*\* Regression-adjusted difference between adults cancer patients and survivors and adults without cancer is significantly different from zero at the 0.05/0.01 level, using two-tailed tests.

# Access to Care – Network Adequacy

- ACS CAN study examined networks in 2014 marketplace plans in select geographic areas
- Lack of transparency in number & expertise of oncologists in network
- Analysis of in-network oncologists did not find large disparity in marketplace vs. out of marketplace
- Significant lack of out-of-network coverage:
  - 43% of the plans analyzed provided no out-of-network coverage
  - Varies greatly among states: in 8 states, fewer than 20% of plans offered out-of-network coverage

Source: ACS CAN. Cancer Care and the Adequacy of Provider Networks Under the ACA Marketplace Plans. June 2014.

<http://www.acscan.org/content/wp-content/uploads/2014/07/ACS-CAN-Cancer-Providers-and-QHP-Networks-Fact-Sheet.pdf>

# Access to Care – Prescription Drugs

- ACS CAN analysis of 2015 marketplace plan formularies in CA, FL, IL, NC, TX and WA
- Transparency challenges – particular problem in finding out what drugs are covered under the medical benefit
- Drug coverage – 15 of the 18 chemo drugs analyzed were covered by more than 85% of formularies (newest drugs least likely to be covered)



# Access to Care – Prescription Drugs (cntd)



- High Costs
  - 17 of 18 drugs analyzed were placed on the highest formulary tier by more than 80% of formularies
  - Sometimes generics are placed on the highest tiers
  - Some formularies appeared to be designed to extract the most cost-sharing from cancer patients
  - Across the 6 states analyzed, 73-100% of silver plans use co-insurance on the highest cost tier instead of copays

# Problems Accessing Insurance and Care

The American Cancer Society's Health Insurance Assistance Specialist Call Center spoke to nearly 3400 constituents impacted by cancer in 2015:

- 56% were uninsured due to:
  - Low income in a non-Expansion state
  - Too rich for Medicaid, too poor for Marketplace
  - Lack of health literacy to seek existing programs
- 25% were insured with a burden due primarily to:
  - High Premium Costs
  - High out of pocket expenses i.e. deductibles, coinsurance, etc.
  - Network Inadequacies with both Medicaid and Private Health Insurance
- 18% were insured and facing an insurance transition due to:
  - Job loss due to health
  - Prior insurer ceased coverage of needed providers/facilities

# Future Opportunities - Federal

- Maintain ACA in law
- Delivery system reform
- Increase access to palliative care
- Maintain strong standards for marketplace plans, Part D plans
  - Network adequacy
  - Discriminatory benefit designs
  - Keeping costs affordable for patients
- Incentivizing Medicaid expansion

# Future Opportunities - State

- Medicaid expansion
- Establish network adequacy standards
- Require transparency in plan formularies and provider networks

# Contact Info



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