

Health-Related Social Needs: Impact on Cancer Care and Outcomes

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November 2, 2023

Overview

- 1 Health Equity**
- 2 Cancer Care and Outcomes in the United States**
- 3 Social Determinants of Health and Health-Related Social Needs**
- 4 Efforts to Address Health-Related Social Needs**
- 5 American Cancer Society Activities**

What is Health Equity?

“Health equity means that everyone has a fair and just opportunity to be as healthy as possible.

This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care.”

Source: Robert Wood Johnson Foundation

Equality



Equity

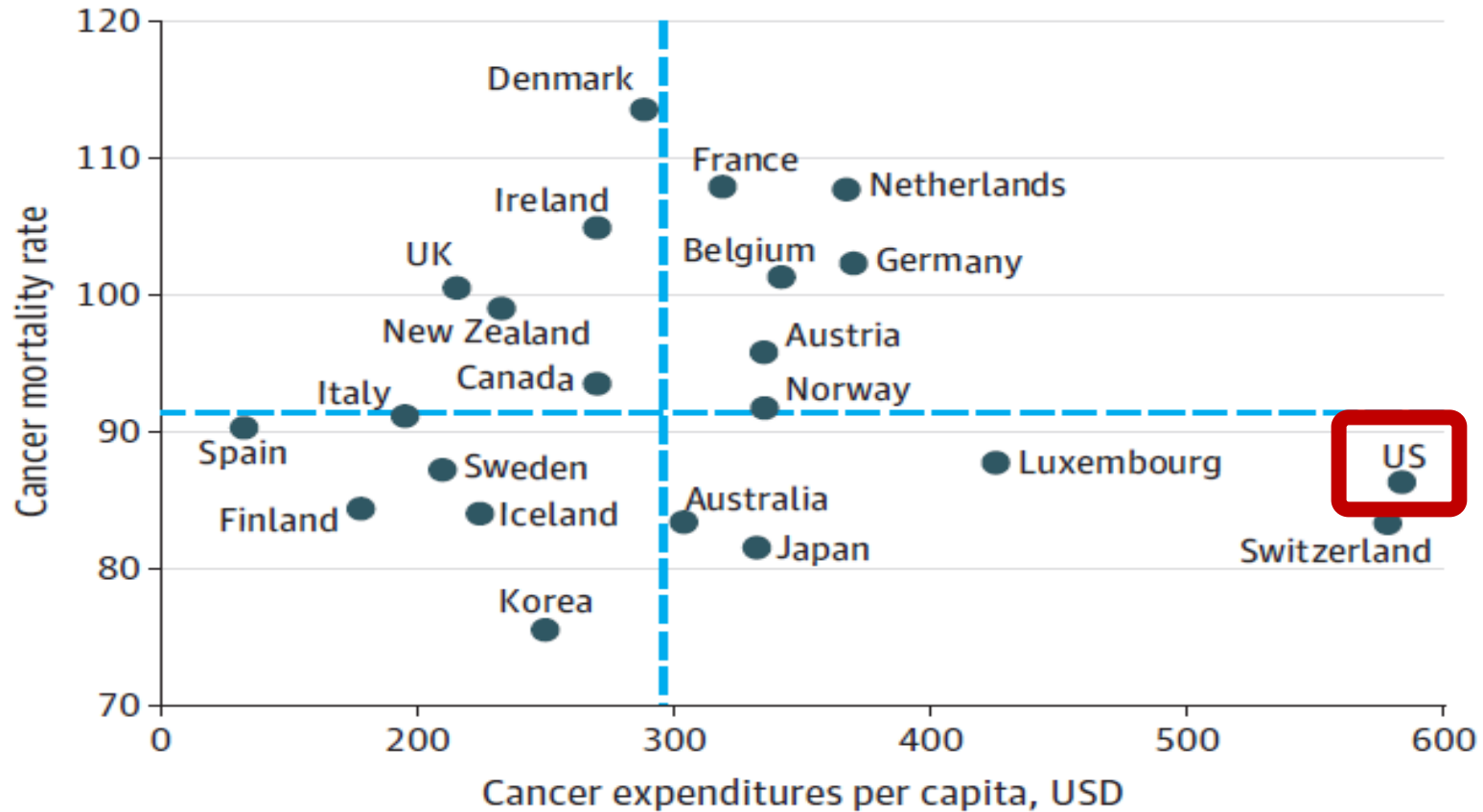


Health Equity through the Cancer Lens

Health equity means that everyone has a fair and just opportunity to prevent, detect, treat, and survive cancer.

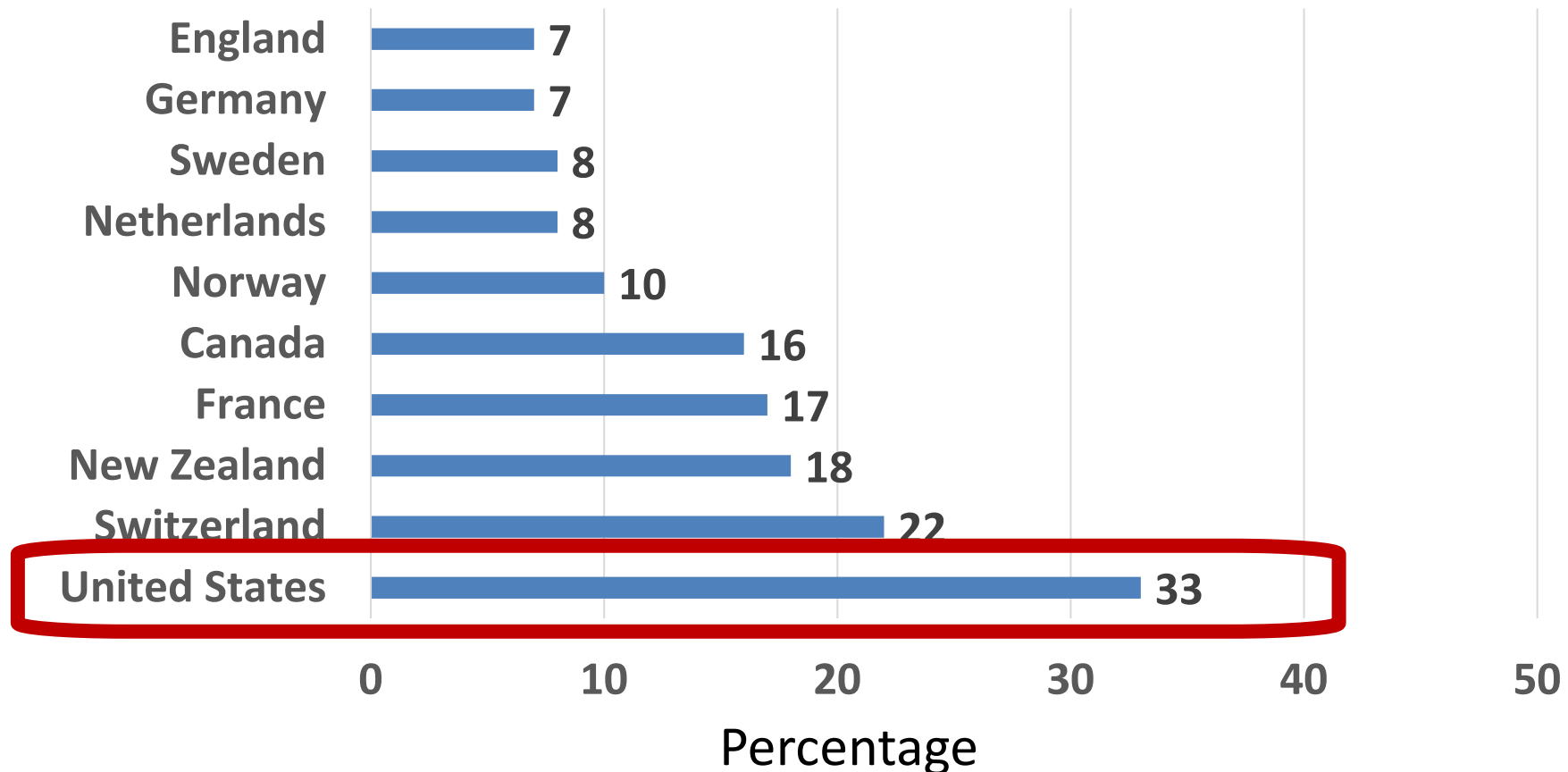
Cancer is a disease that can affect anyone, but it doesn't affect everyone equally.

Cancer-Related Spending and Mortality Rates in the United States Compared with other High-Income Countries



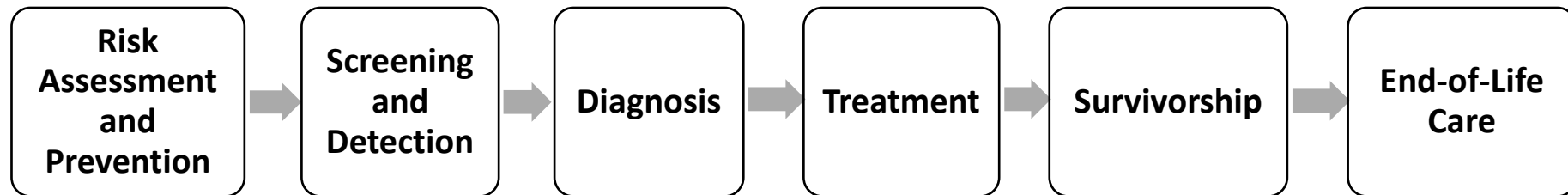
Chow RD, Bradley EH, Gross CP. Comparison of Cancer-Related Spending and Mortality Rates in the US vs 21 High-Income Countries. *JAMA Health Forum*. 2022;3(5):e221229.

Access Barrier to Care Because of Cost in Past 12 Months, Selected Countries



Source: Commonwealth Fund International Health Policy Survey

Disparities in Care Across the Cancer Control Continuum

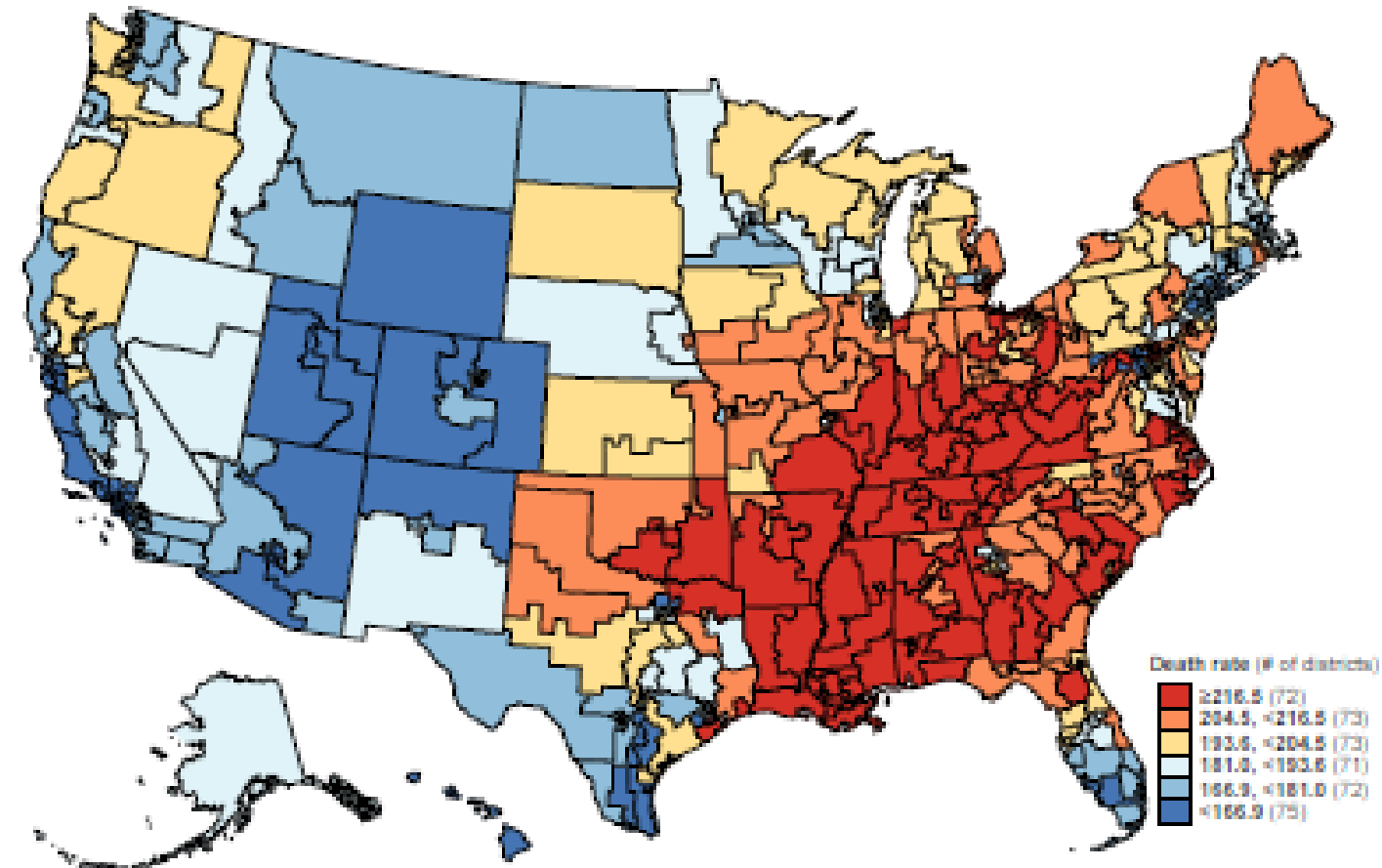


Longstanding Disparities in Cancer Care and Outcomes in the United States

- Geography
- Socioeconomic status
- Race and ethnicity
- Health insurance coverage

- Social determinants of health and health-related social needs

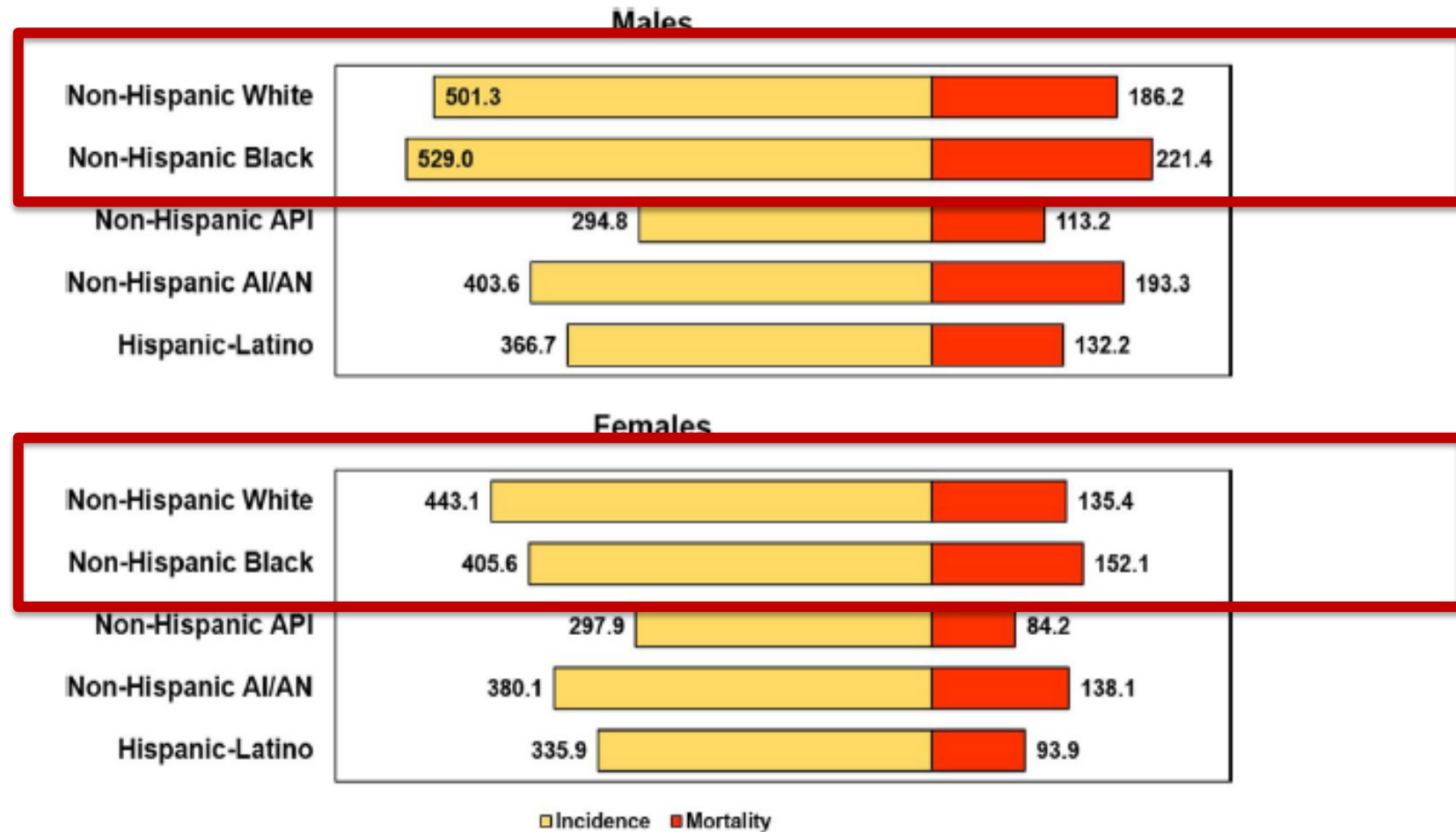
Geographic Disparities in Cancer Mortality Rates in the United States, Males 2014-2018



Categories are based on overall death rates in all race/ethnicities combined (5 quantiles)

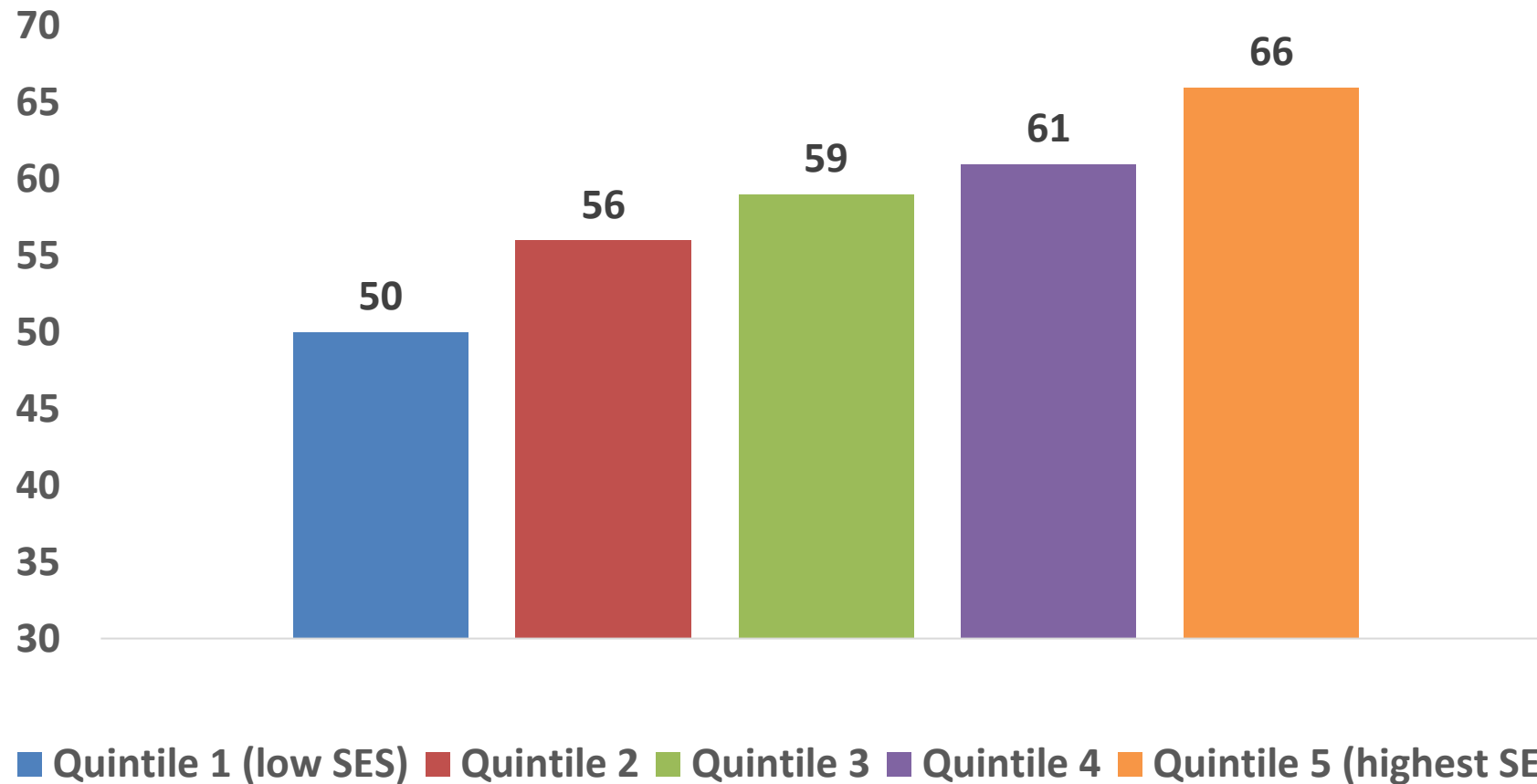
Source: Islami F, Guerra CE, Minihan A, et al. American Cancer Society's report on the status of cancer disparities in the United States, 2021. CA Cancer J Clin. 2021. Epub ahead of print. PMID: 34878180.

Racial and Ethnic Disparities in Cancer Incidence and Mortality Rates in the United States, 2015-2019



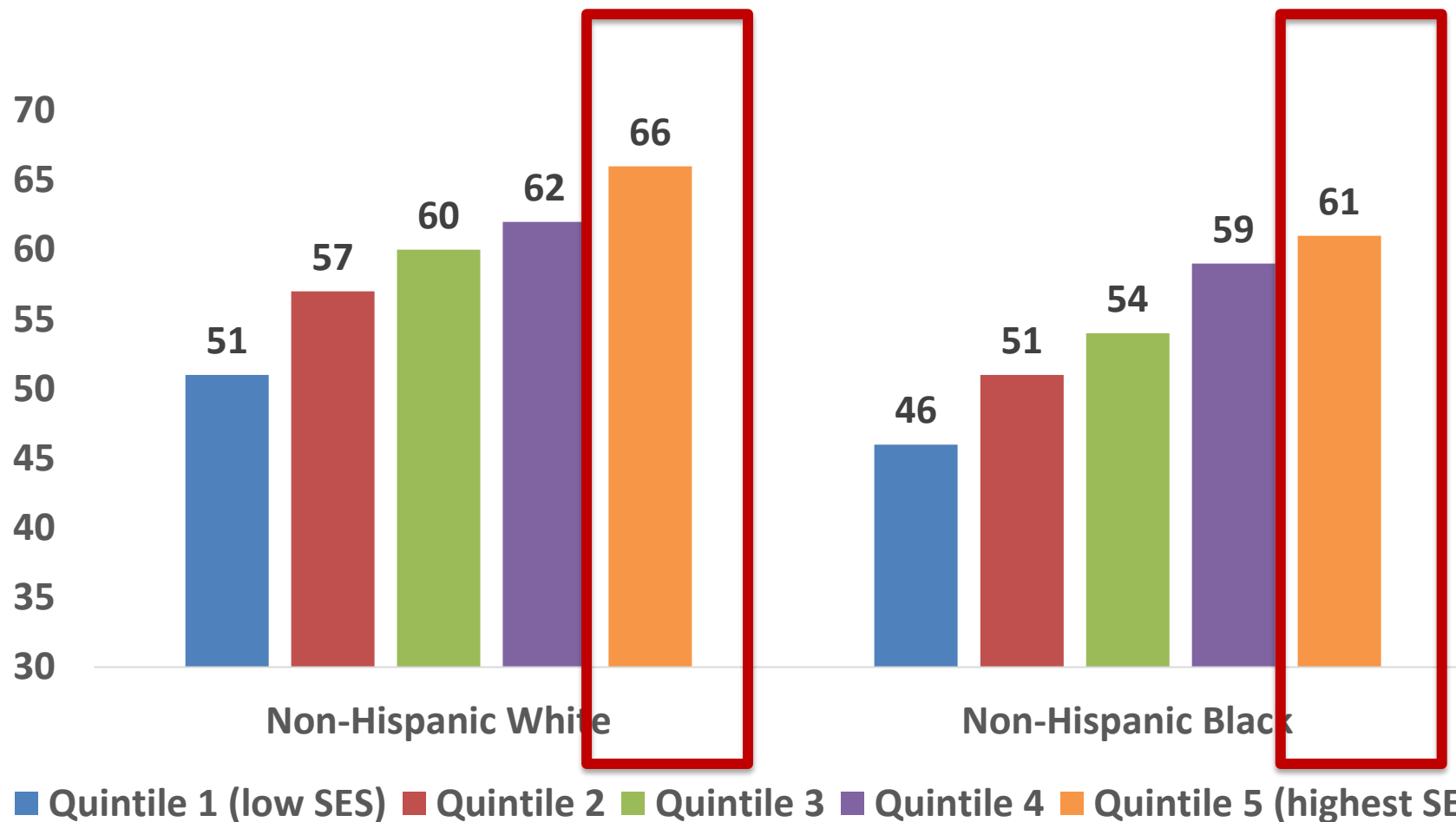
Source: Islami F, Guerra CE, Minihan A, et al. American Cancer Society's report on the status of cancer disparities in the United States, 2021. CA Cancer J Clin. 2021. Epub ahead of print. PMID: 34878180.

Socioeconomic Disparities in 5-year Survival Following Cancer Diagnosis in United States



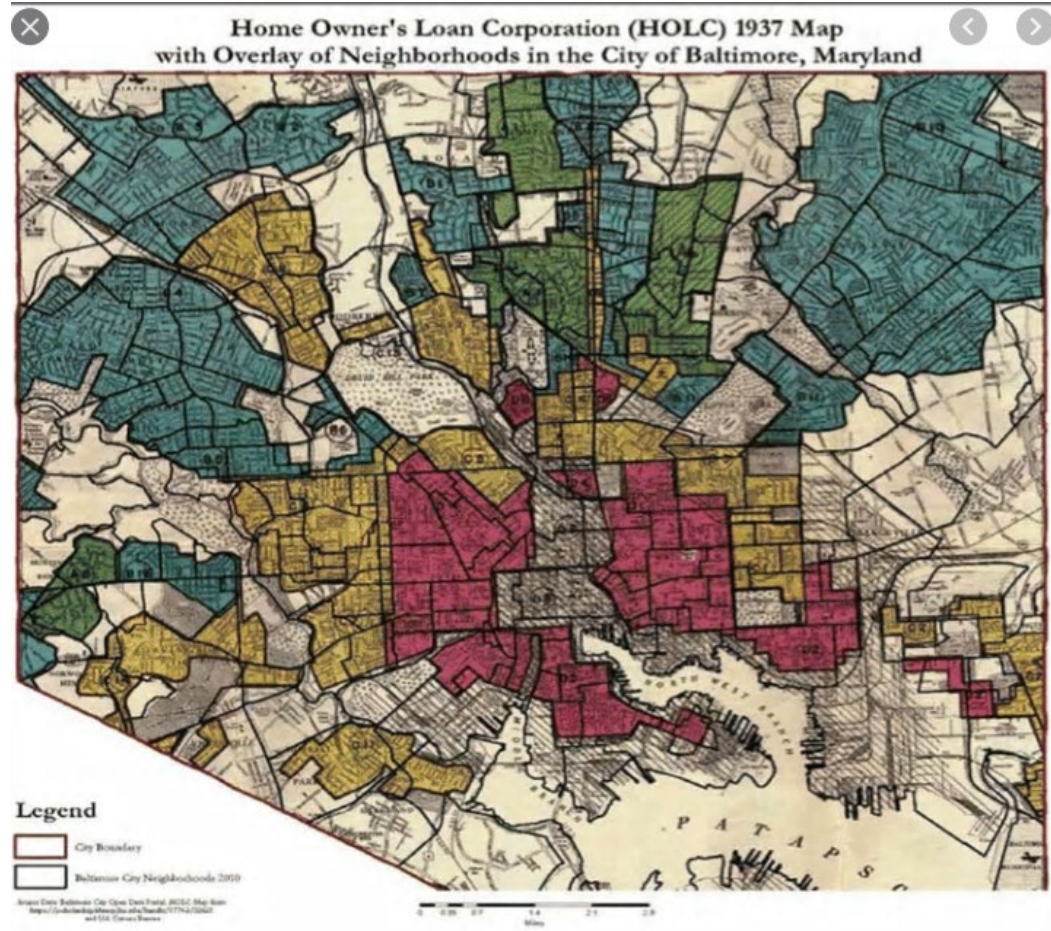
SES measured with area deprivation index, with indicators of education, occupation, wealth, income distribution, unemployment rate, poverty rate, and housing quality linked to SEER data. SOURCE: Singh GK, Jemal A. Socioeconomic and Racial/Ethnic Disparities in Cancer Mortality, Incidence, and Survival in the United States, 1950-2014: Over Six Decades of Changing Patterns and Widening Inequalities. J Environ Public Health. 2017

Socioeconomic Disparities in Survival Following Cancer Diagnosis, by Race and Ethnicity



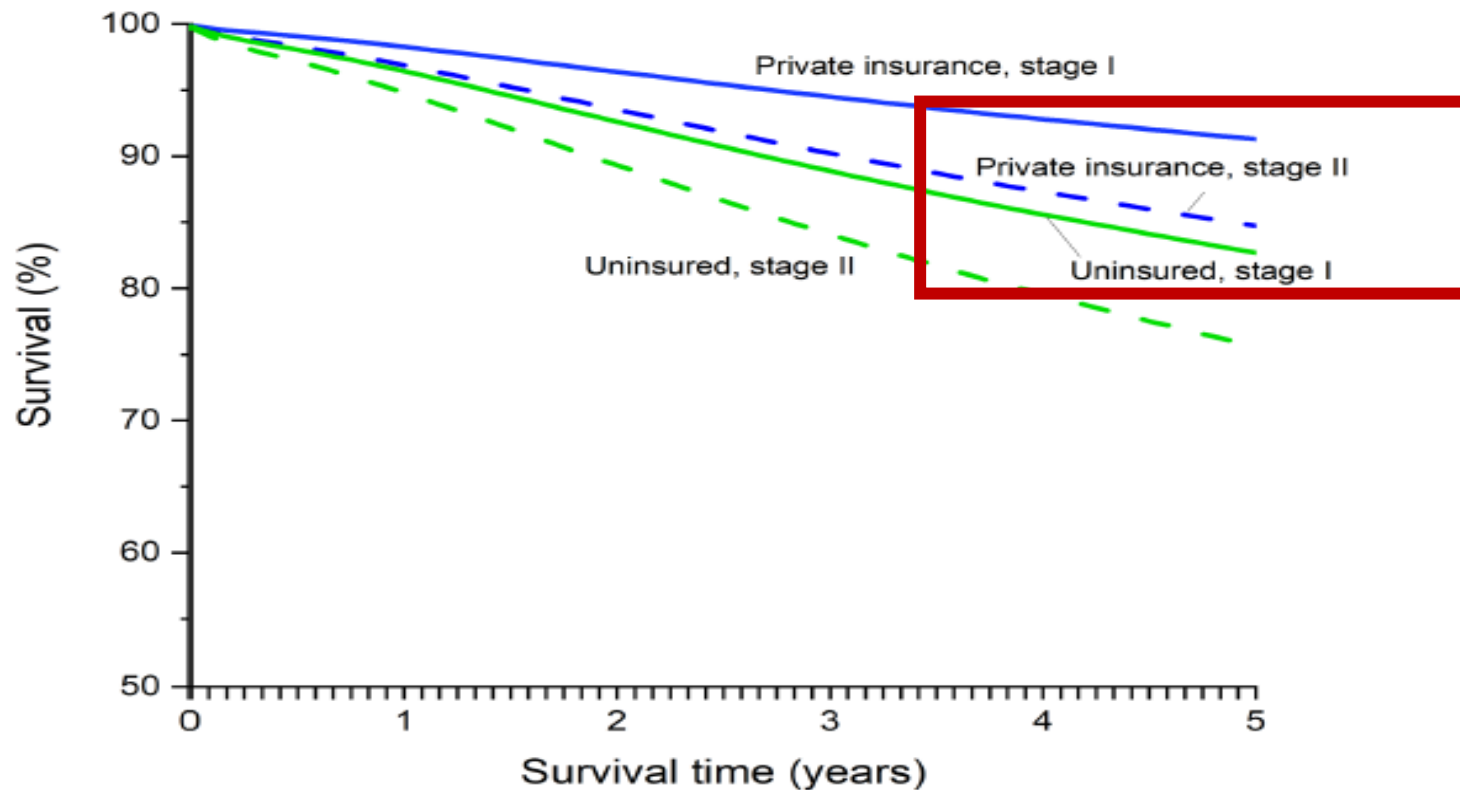
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Structural Racism: Historic Redlining



Growing evidence that residence in redlined areas associated with worse cancer survival and higher mortality rates

Disparities in Survival by Health Insurance Coverage among Colorectal Cancer Patients Aged <65 years in the United States



Source: Miller KD, Nogueira L, Devasia T, Mariotto AB, Yabroff KR, Jemal A, Kramer J, Siegel RL. Cancer treatment and survivorship statistics, 2022. CA Cancer J Clin. 2022 doi: 10.3322/caac.21731. Data from the National Cancer Database

Social Determinants of Health

Education Access
and Quality

Healthcare Access
And Quality

Economic
Security

Neighborhood and
Built Environment



Social and Community Context

Health-Related Social Needs

Limited health literacy



Lack of health insurance coverage, transportation to care

Financial insecurity, unemployment, food insecurity

Housing Instability

Lack of informal caregivers

Financial Worries and Food insecurity among Cancer Survivors Aged 40-64 years

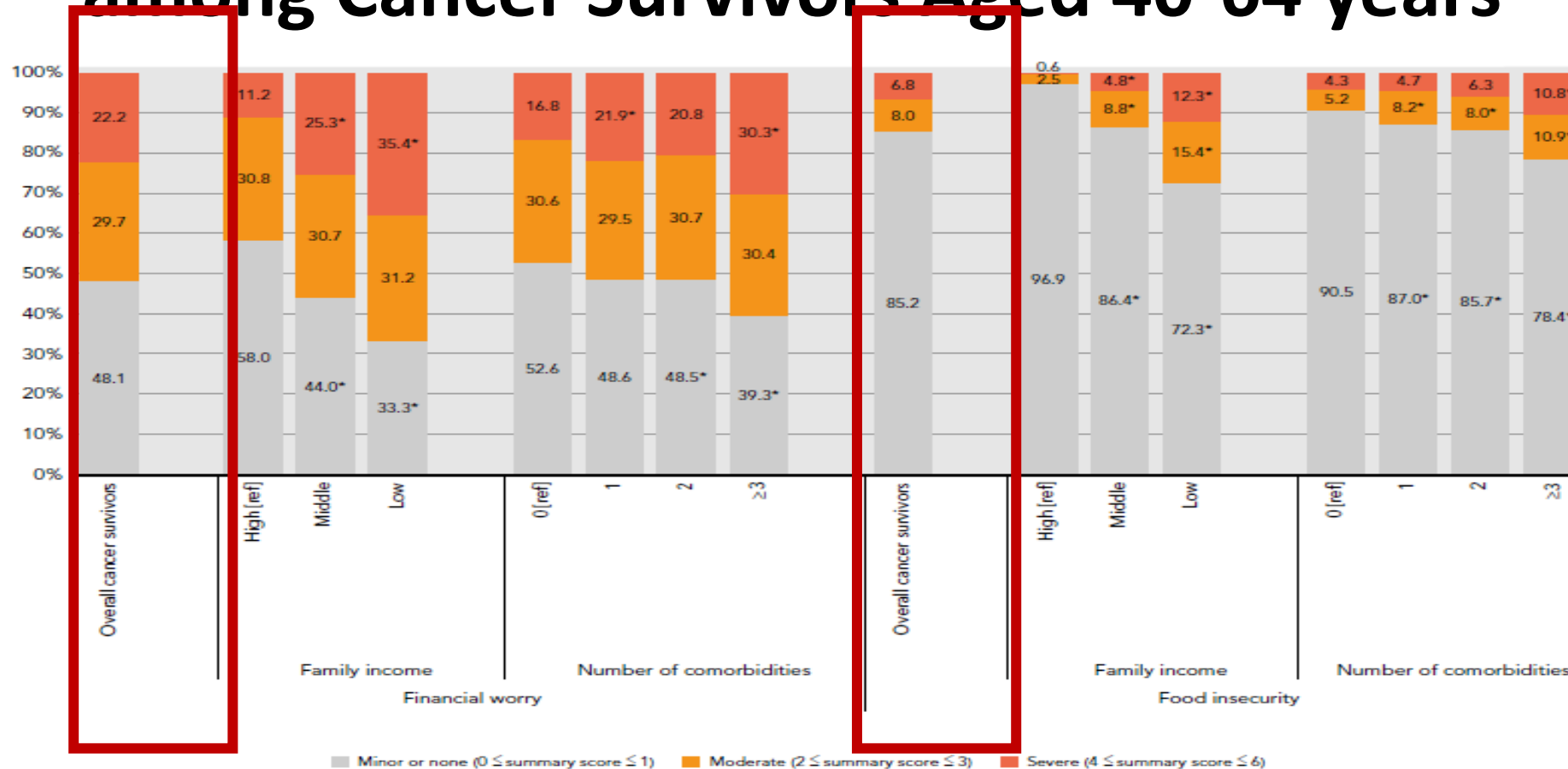


Figure 2. Adjusted intensity of financial worry and food insecurity among cancer survivors aged 40–64 years (n=4,269), stratified by family income (from high to low income: n=1,693, n=1,024, and n=1,317, respectively) and number of comorbidities (from 0 to ≥3 comorbidities: n=1,203, n=1,312, n=878, and n=876, respectively).

All regressions controlled for survey year, age group, sex, race/ethnicity, educational attainment, marital status, health insurance, and geographic region. The number of comorbid conditions or family income level as a percentage of the federal poverty level was included in the adjusted analyses unless the analyses were stratified by it. *P<.05.

Food insecurity's impact on healthcare



\$1,834

higher annual healthcare expenditures for a food insecure adult¹



47%

increased likelihood of an adult in a food insecure household being admitted to the hospital²



27%

increase in hypoglycemia admissions during the last week of the month for low-income, diabetic adults due to food budget exhaustion³



Among cancer survivors:

- Increased ED visits
- Lower use of preventive services
- Increased mortality risk

Adapted from [Humana's Food Insecurity Issue Brief](#).

Sources: The Commonwealth Fund <https://www.commonwealthfund.org/publications/2020/jan/chronic-care-act-prompts-some-medicare-advantage-plans-incorporate-social>
Zheng Z, Han X, Zhao J, Banegas MP, Tucker-Seeley R, Rai A, Fedewa SA, Song W, Jemal A, Yabroff KR. Financial Hardship, Healthcare Utilization, and Health Among U.S. Cancer Survivors. Am J Prev Med. 2020 Jul;59(1):68-78. Zheng Z, Zhao J, Shi KS, Hu X, Han X, Banegas MP, Yabroff KR> Associations of cancer history, food insecurity, and nonmedical financial worry and mortality risk in the US. J Clin Oncol 41, 2023 (suppl 16; abstr 6537)

Measuring And Addressing Health-Related Social Needs in Cancer:



Working Group Recommendations

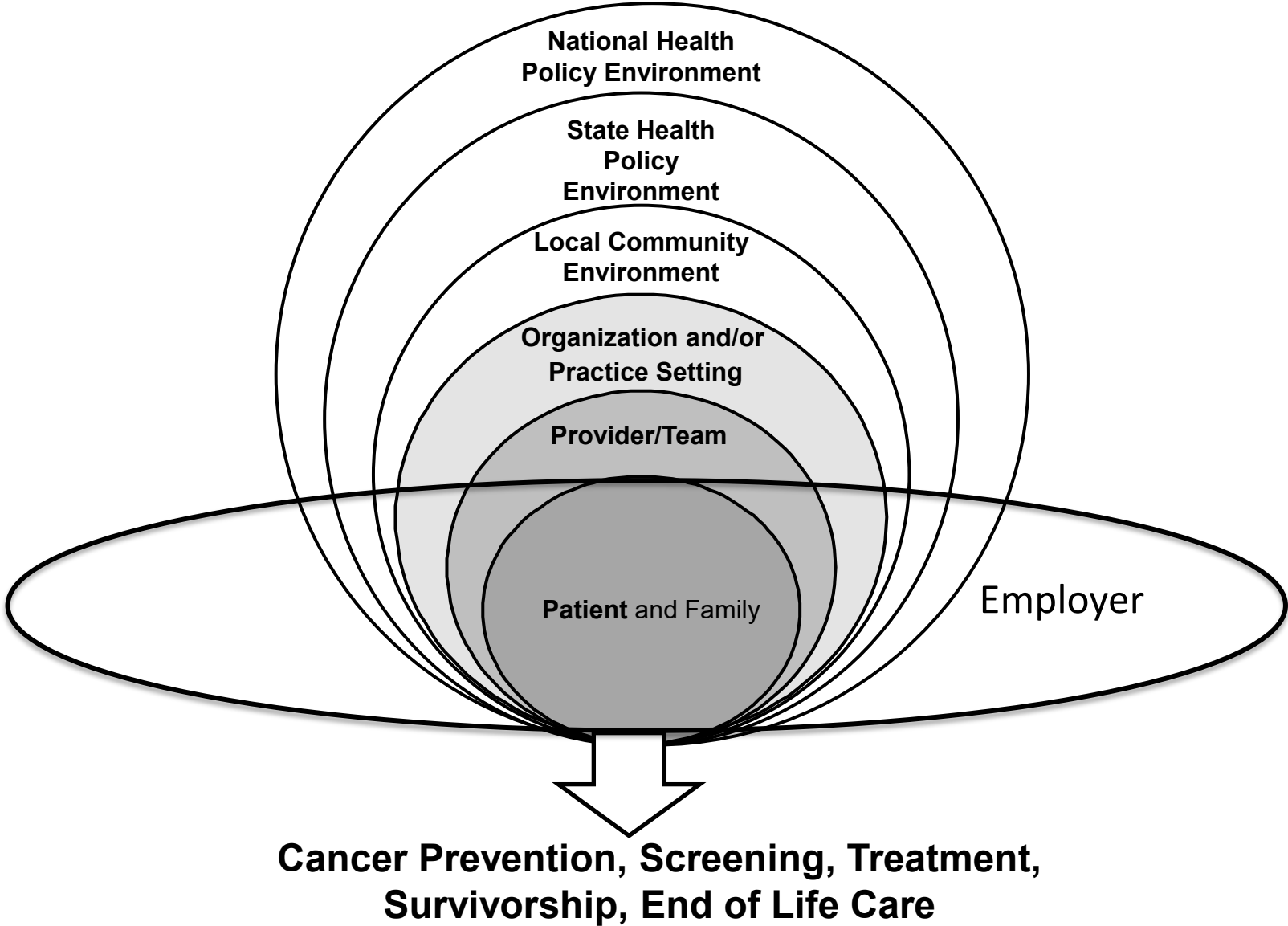
Core Measures for Assessment and Intervention:

- Transportation Access
- Housing Security
- Access to Healthy Food
- Financial Security

Recommendations for integration in high-quality care:

- Practices and Health Systems
- Policies
- Professional Society Guidelines

Factors at Multiple Levels Affect Equity in Cancer Care and Outcomes



Affordable Care Act



Essential health benefit standards
Elimination of pre-existing condition exclusions
Elimination of life-time and annual coverage limits



2010 Dependent coverage expansion
Elimination of cost-sharing for preventive services

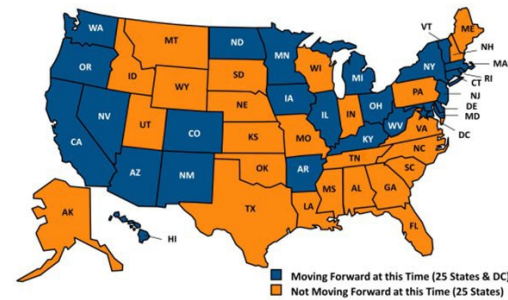
2014

Signed into law

Majority of provisions implemented

Creation of Centers for Medicare & Medicaid Services Innovation Center

Medicaid Expansion Status by State as of January 2014



Expansion of Medicaid Income Eligibility and Cancer Care and Outcomes

- Medicaid expansion associated with better
 - Access to care
 - Earlier stage cancer diagnosis
 - Improved survival following cancer diagnosis
 - Reduced disparities in care and outcomes
- As of 2023, 10 states yet to expand Medicaid eligibility

Sources: Han X, Zhao J, Yabroff KR, Johnson CJ, Jemal A. Association Between Medicaid Expansion Under the Affordable Care Act and Survival Among Newly Diagnosed Cancer Patients. *J Natl Cancer Inst.* 2022 May 18:djac077. Zhao J, Mao Z, Fedewa SA, Nogueira L, Yabroff KR, Jemal A, Han X. The Affordable Care Act and access to care across the cancer control continuum: A review at 10 years. *CA Cancer J Clin.* 2020 May;70(3):165-181.

Medicaid Expansion Spillover Effects: Reduction in Very Low Food Security

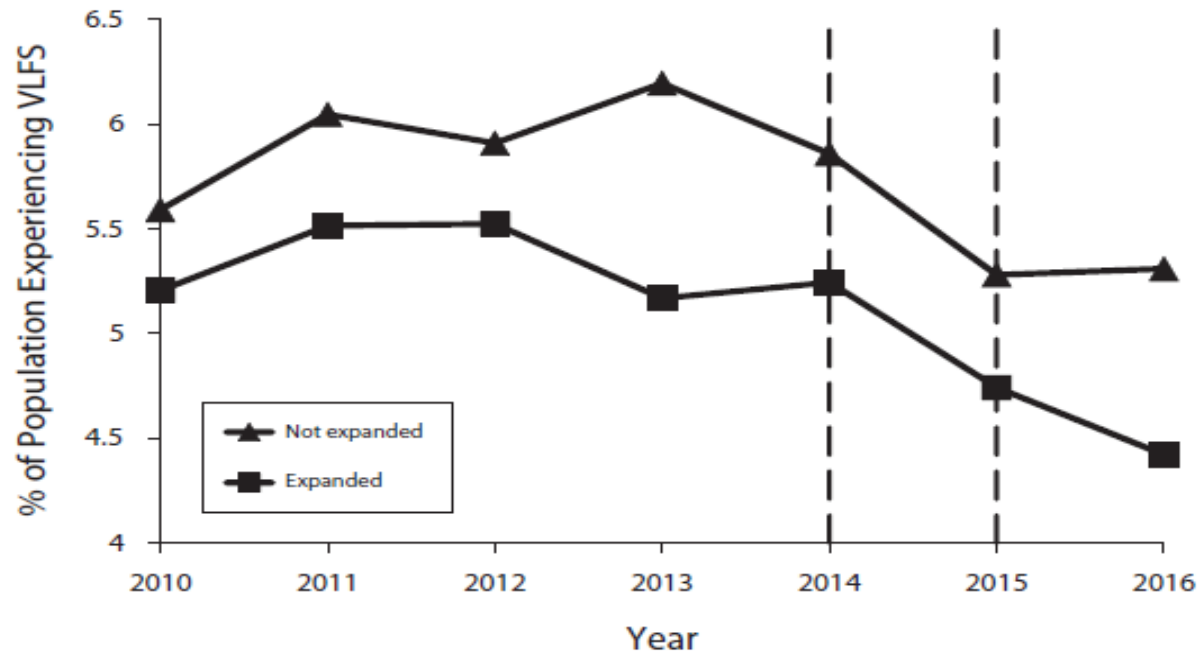


FIGURE 1—Rates of Very Low Food Security (VLFS) Among Adults in States That Did and Did Not Expand Medicaid in 2014: United States, 2010–2016

Source: Himmelstein G. Effect of the Affordable Care Act's Medicaid Expansions on Food Security, 2010-2016. Am J Public Health. 2019;

109(9):1243-1248.



Accountable Health Communities Model

- Launched in 2017
- **28 organizations** participating
- Connects **Medicare and Medicaid** beneficiaries with community services to address health-related social needs
- Screening, referral and navigation services





Medicare Managed Care Flexibilities

Creating High-Quality Results and Outcomes Necessary to Improve Chronic Care (CHRONIC) Act

Plans can offer nonmedical supplemental benefits to address health-related social needs:

- Meals
- Transportation
- Services Supporting Self-Direction (e.g., health literacy education)
- General Supports for Living (e.g., rent subsidies)

Medicaid Authorities and Flexibilities

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services

7500 Security Boulevard, Mail Stop 92-26-12

Baltimore, Maryland 21244-1850



SHO# 21-001

RE: Opportunities in Medicaid and CHIP
to Address Social Determinants of Health
(SDOH)

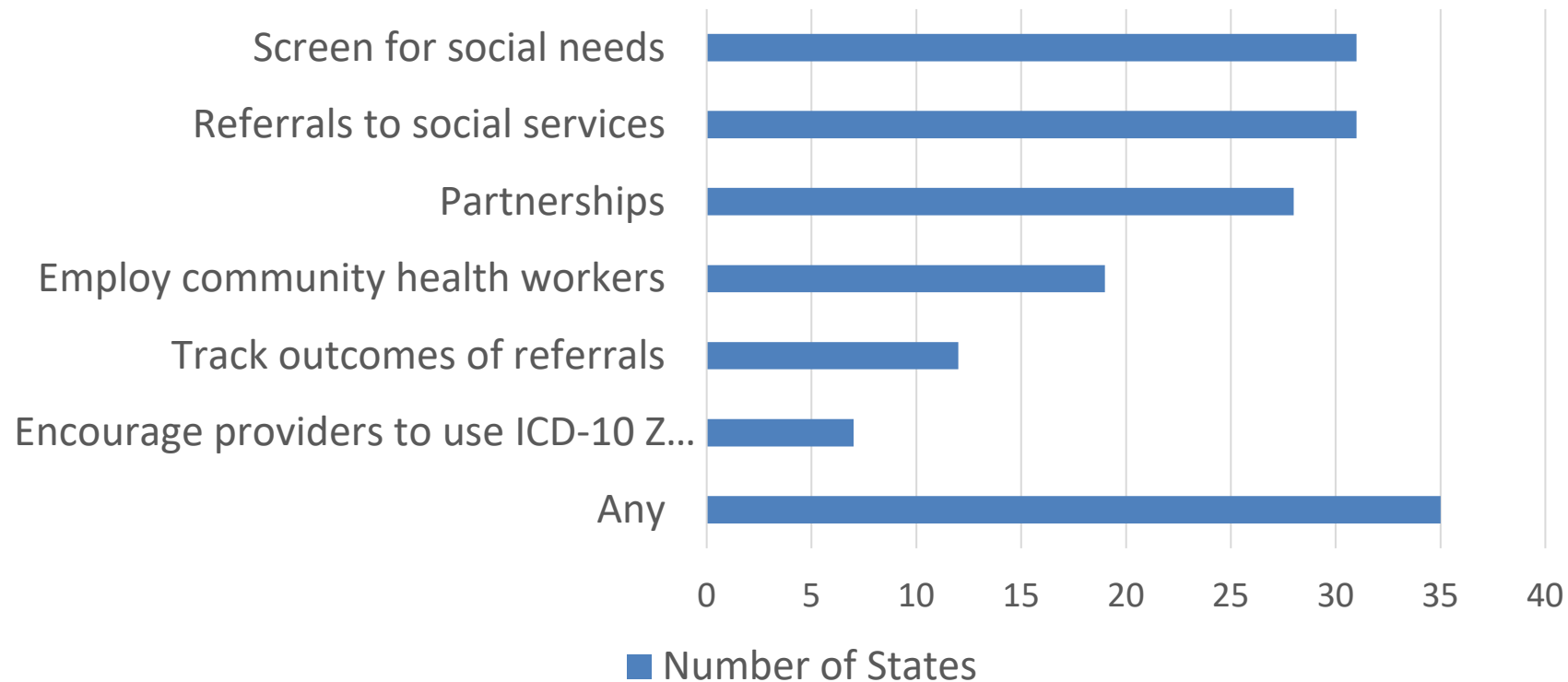
January 7, 2021

Dear State Health Official:

- Health home models
- Managed care
- Section 1115 waivers

SOURCE: Kaiser Family Foundation. <https://www.kff.org/medicaid/issue-brief/medicaid-authorities-and-options-to-address-social-determinants-of-health-sdoh/>

35 States Reported Leveraging Medicaid Managed Care to Address Social Determinants of Health in 2020



SOURCE: Kaiser Family Foundation. <https://www.kff.org/medicaid/issue-brief/medicaid-authorities-and-options-to-address-social-determinants-of-health-sdoh/>

Section 1115 waivers

Medicaid value-based payments to cover health-related social needs:

- Housing
- Interpersonal violence
- Food
- Transportation



ACS Integrated Approach

Combating cancer through advocacy, research and patient support to impact **55 million lives** annually

Discovery

\$430M
in grants

Largest private, non-profit funder of cancer research in the US

Advocacy

50 states
the District of Columbia,
Puerto Rico & Guam

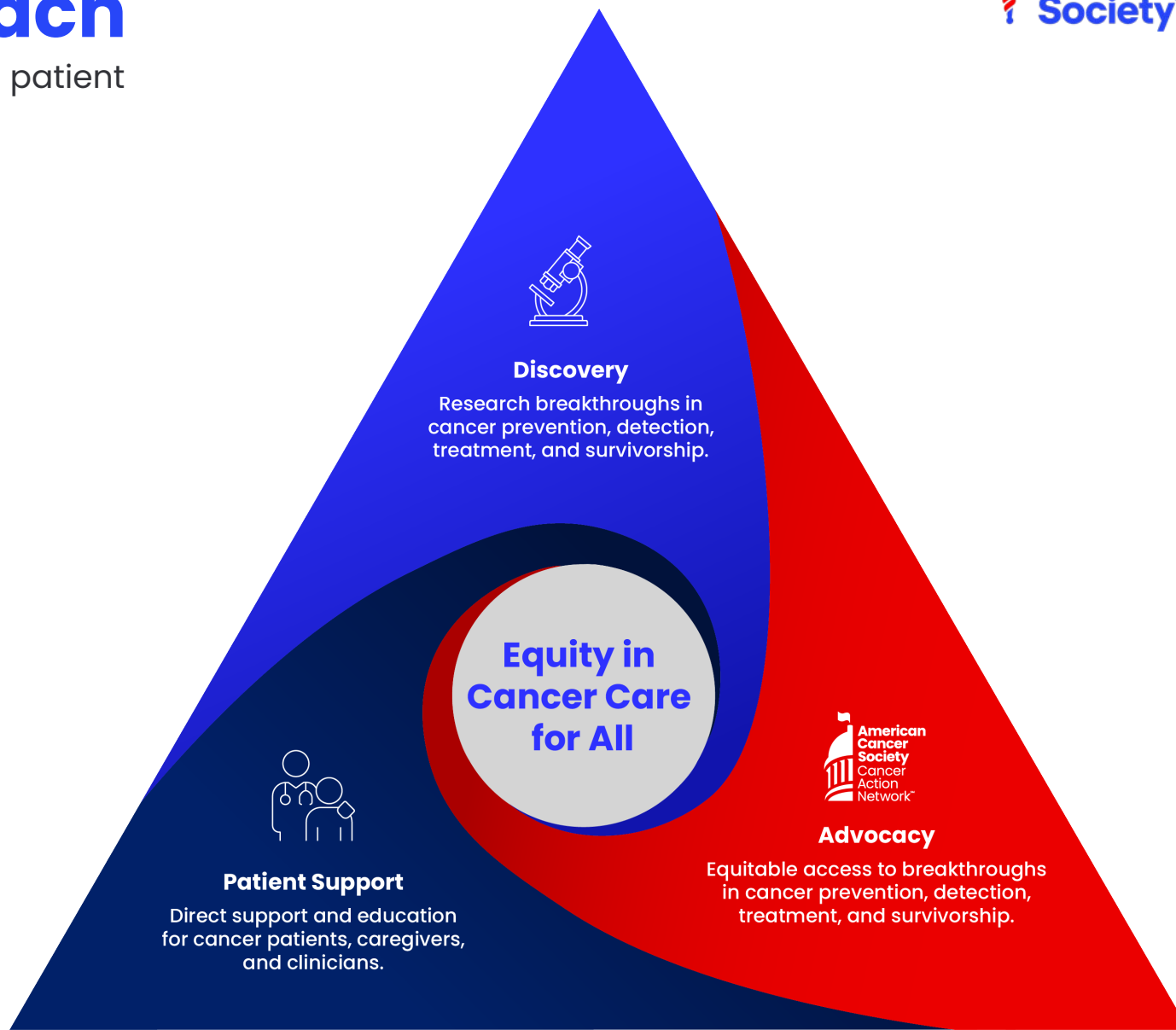
Advocacy presence at every level of government

Patient Support

20,000+
communities*

Direct patient support in prevention, screening, lodging, transportation, navigation, survivorship, education

*Reflects zip codes touched by patient support programs & services within the U.S. and its territories



Addressing Health-Related Social Needs

Discovery

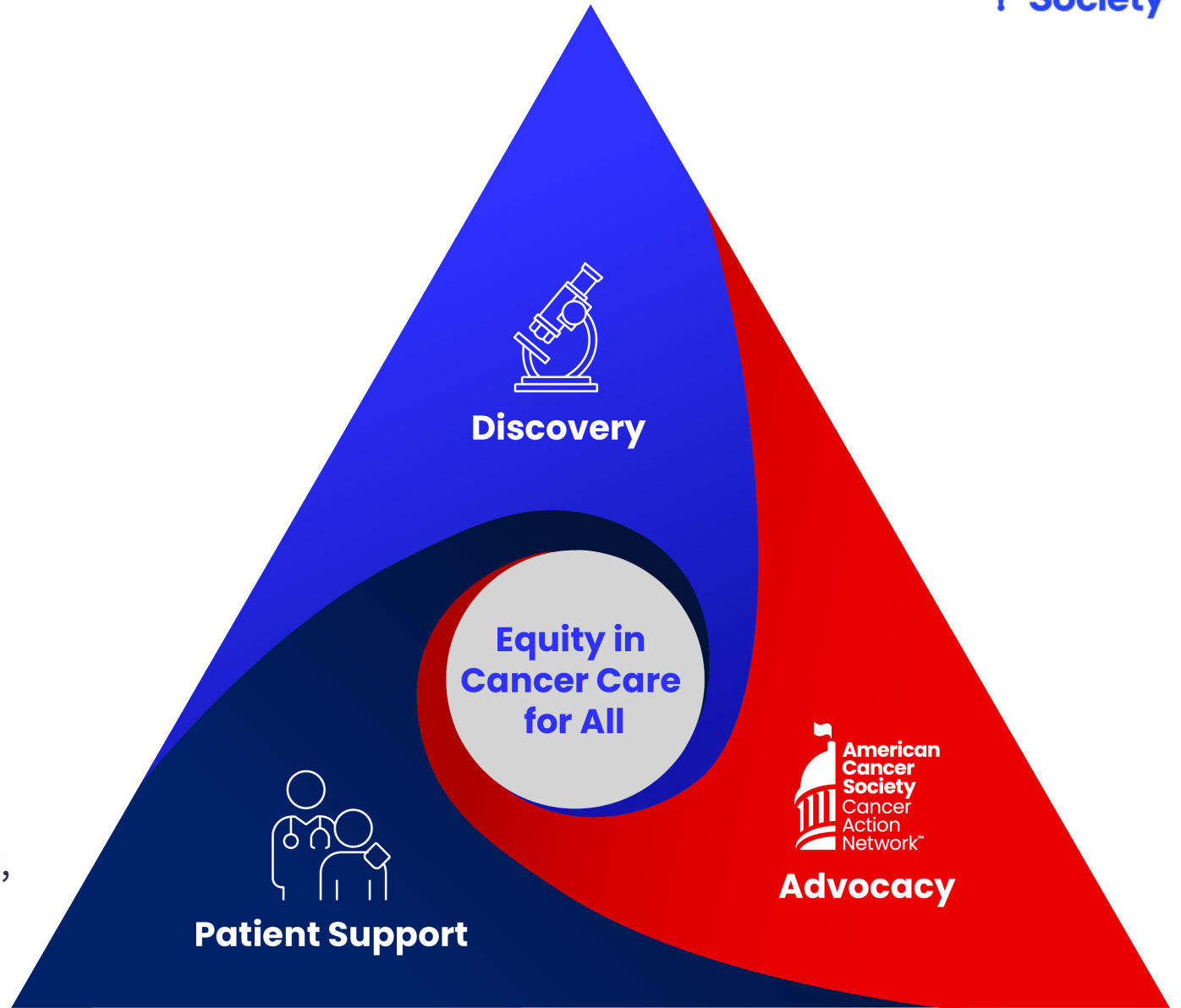
Large portfolio of practice- and policy-relevant research addressing health insurance coverage and benefit design, housing insecurity, transportation barriers to care, food insecurity, and financial insecurity/hardship.

Advocacy

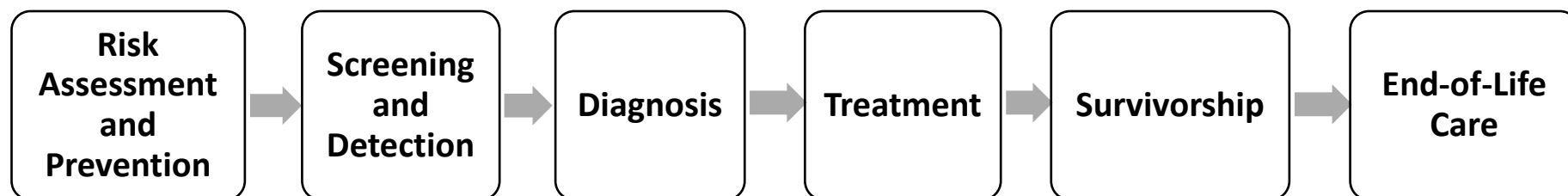
Local, state, and federal efforts to improve access to care and affordability

Patient Support

Resources including Hope Lodge, Ride to Recovery, Patient, Provider, Caregiver education, 24/7 Call Center



Reducing Inequities in Care Across the Cancer Control Continuum



Ensuring everyone has a fair and equitable opportunity to prevent, detect, treat, and survive cancer

Thank You!