Young and Uninsured: Insurance Patterns of Adolescent and Young Adult (AYA) Cancer Survivors

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Young adults have historically had one of the highest uninsurance rates in the United States.

Previous studies of long-term survivors of childhood cancer indicate that lack of insurance negatively affects receipt of appropriate survivor-based and general medical care.

No studies have specifically examined continuity and type of insurance coverage after cancer diagnosis in the AYA population.
Objectives

1) To evaluate changes in and sponsors of health insurance coverage after cancer diagnosis for AYAs (15-39)
2) To examine coverage of doctor-recommended tests/treatments
3) To investigate factors associated with insurance discontinuity after diagnosis
Data

Adolescent and Young Adult Heath Outcomes and Patient Experience study (AYA HOPE):

• A repeated survey of cancer survivors
• Baseline: 6-14 months after diagnosis
• Follow-up: 15-35 months after diagnosis
• N=465
Measures

• Insurance (Dis-)Continuity:

- Through employer/school; through spouse/parent; government/state programs; other
- Change in insurance coverage between diagnosis and baseline

• Insurance Sponsors at Baseline/Follow-up:

• Coverage of Recommended Test/Treatments
Approach

- Frequencies for type of insurance sponsors, change in coverage, coverage of recommended test/treatments
- Logistic regression analysis of insurance discontinuity (at least some time uninsured vs. continuously insured) adjusted for:
  - Age at diagnosis, sex, race, education, marital status, change in work/school after diagnosis, ongoing treatment, treatment intensity, health characteristics (# of symptoms, # of comorbidities, self-perceived health)
Study Population Characteristics

- 70% of individuals were 25 years or older at diagnosis
- The majority of participants were male, White, diagnosed with early stage disease, and did not change their work/school status after diagnosis
- > 80% of survivors were not in ongoing treatment at baseline or follow-up
- At baseline, most participants reported having ≥ 2 symptoms and 27% had at least one comorbidity.
Sponsors of and Changes in Health Insurance

* Other includes military/veteran’s benefits, self/family pay, COBRA, other, don’t know, and missing
Coverage of Recommended Test/Treatments

At Baseline

Were there any tests or treatments that your doctor recommended for cancer that your insurance did not cover?

- All tests were covered 73.8%
- Tests were not covered 20.0%
- Don't know 6.2%

Got Tests/Treatments anyway?

- Got test anyway 80.6%
- Did not get test 16.1%
- Don't know 3.2%
Insurance Discontinuity Results

- > 25% of AYA cancer survivors experienced some period of no coverage up to 35 months post-diagnosis
- Insurance rates were high in the initial year after diagnosis (6-14 months: 93.3%) but decreased substantially at follow-up (15-35 months: 85.2%)
- After adjusting for demographic and cancer characteristics, multivariable analysis indicated that older survivors and those with less education were significantly more likely to experience a lapse in coverage after diagnosis
Summary of Results

• ¼ of AYA cancer survivors experienced insurance discontinuity
• More patients were uninsured at follow-up than at baseline, may decrease with time
• Insurance was mostly sponsored by the employer/school or a parent/spouse
• 20% reported non-coverage of recommended treatments
• Older age at diagnosis & lower levels of education increased likelihood of experiencing discontinuity
Limitations

1. Self-reported outcomes, no information on out-of-pocket costs and healthcare access
2. Small sample size $\rightarrow$ unable to examine factors associated with lack of insurance by age group
3. Did not examine the quality of employer-sponsored insurance
4. Study cohort may not be generalizable to all AYA cancer survivors, as our cohort was predominately White, had to read and write English to be eligible, and did not include survivors diagnosed with all types of cancer $\rightarrow$ may underestimate uninsurance rates in the larger AYA cancer survivor population
Conclusion

• Our analysis sheds light on insurance patterns in AYAs, who after battling cancer, may now be faced with the challenges of finding affordable & adequate healthcare coverage for their survivorship care needs.

• With the growing number of AYA cancer survivors in the US, the majority of whom will require consistent, long-term medical care to address their survivorship needs, future studies should examine how new policies under the ACA extend access to and uptake of insurance coverage beyond initial treatment to this population.
QUESTIONS?

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