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

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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?

“What 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
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

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

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

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

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

[Bar chart showing survival rates by race and ethnicity across different socioeconomic quintiles]

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

Social Determinants of Health

- Education Access and Quality
- Economic Security
- Social and Community Context
- Healthcare Access And Quality
- Neighborhood and Built Environment
Health-Related Social Needs

- Limited health literacy
- Financial insecurity, unemployment, food insecurity
- Lack of health insurance coverage, transportation to care
- Housing instability
- Lack of informal caregivers
Financial Worries and Food insecurity among Cancer Survivors Aged 40-64 years

![Bar chart and table]

Food insecurity’s impact on healthcare

$1,834
higher annual healthcare expenditures for a food insecure adult

47%
increased likelihood of an adult in a food insecure household being admitted to the hospital

27%
increase in hypoglycemia admissions during the last week of the month for low-income, diabetic adults due to food budget exhaustion

Among cancer survivors:
• Increased ED visits
• Lower use of preventive services
• Increased mortality risk

Adapted from Humana’s Food Insecurity Issue Brief.

Sources:
Measuring And Addressing Health-Related Social Needs in Cancer:

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

Cancer Prevention, Screening, Treatment, Survivorship, End of Life Care
Affordable Care Act

- Signed into law
- Majority of provisions implemented

- Creation of Centers for Medicare & Medicaid Services Innovation Center

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

Medicaid Expansion Spillover Effects:
Reduction in Very Low Food Security

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

-Health home models
-Managed care
-Section 1115 waivers

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

- Screen for social needs
- Referrals to social services
- Partnerships
- Employ community health workers
- Track outcomes of referrals
- Encourage providers to use ICD-10 Z...

Number of States

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
Advocacy presence at every level of government

the District of Columbia,
Puerto Rico & Guam

**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

https://www.cancer.org/
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!