

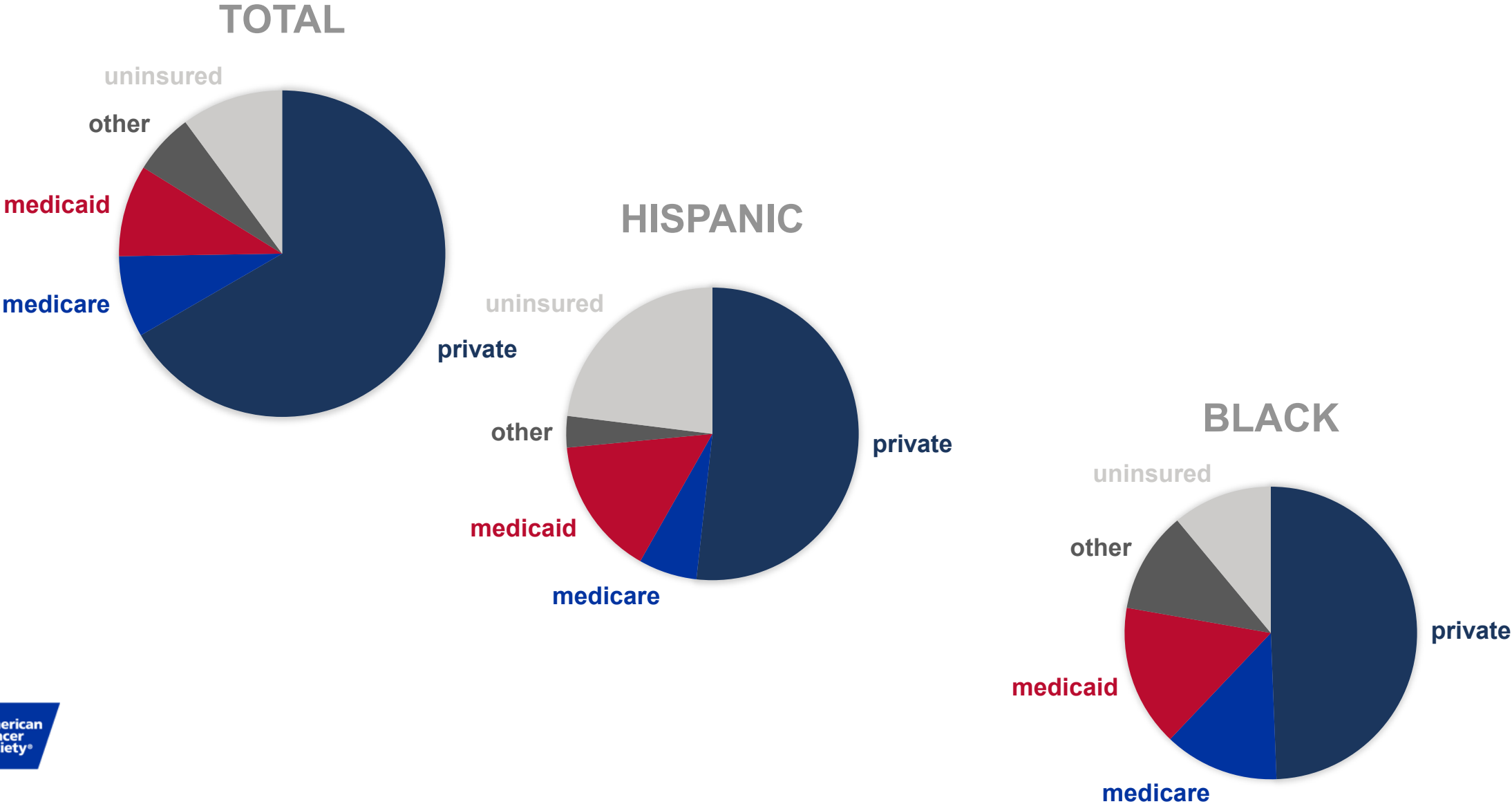
What are the remaining barriers to coverage of preventive services that the ACA has not addressed?

Stacey A Fedewa, PhD

**Scientific Director
American Cancer Society
March 1, 2021**



Type of Insurance Among Screening Aged Adults 50-64, NHIS 2019



Outline

- Cost-sharing loopholes (Private)
- Expanding existing policies (Medicaid)
- Tightening existing policies (Medicaid)
- Other barriers that the ACA has not addressed

Cost-Sharing Loopholes: Grandfathered Plans


- Issue: Plans that existed before ACA enactment (March 23, 2010) do *not have* to comply with cost-sharing
- Scope
 - In 2018: 20% of surveyed employers offered Grandfathered Plans
 - 16% of current workers were enrolled in a Grandfathered Plans



[https: Kaiser Family Foundation: //www.kff.org/report-section/2018-employer-health-benefits-survey-section-13-grandfathered-health-plans/](https://www.kff.org/report-section/2018-employer-health-benefits-survey-section-13-grandfathered-health-plans/)

CRC Screening Loophole: Cost-sharing after a Positive Stool-Test

- **Issue:** If a person has a stool-test and it's positive, cost can be imposed for recommended and necessary follow-up colonoscopy
- Timely follow-up after a positive stool-test is suboptimal (eg: 42% in one community health center)
- Delayed follow-up (>10 months vs within 1 month) is associated with greater likelihood of CRC and advanced staged-CRC
- **Scope:**
 - In 2018, 11% of adults receive stool-testing, this % is higher among Hispanic and Asian adults and people with lower household incomes
 - 5% of stool-tests are positive



Increase because of COVID?



Sources: Bahrti et al 2019: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7008958/>; Corley et al 2017: <https://jamanetwork.com/journals/jama/fullarticle/2620087>; Jensen et al 2016: <https://pubmed.ncbi.nlm.nih.gov/26811150/>

Breast Cancer Screening: Cost Sharing after Abnormal Mammogram

- Issue: If a woman has an abnormal mammogram or has dense breasts identified as part of her initial mammogram, she may face out of pocket expenses for additional tests (including MRI)
- Scope:
 - 11% of women with a screening mammogram are called back
 - 33-46% of women 50-64 years in the US have heterogenous or extremely dense breasts, may need additional testing
 - Black women are more likely to have dense breast tissue



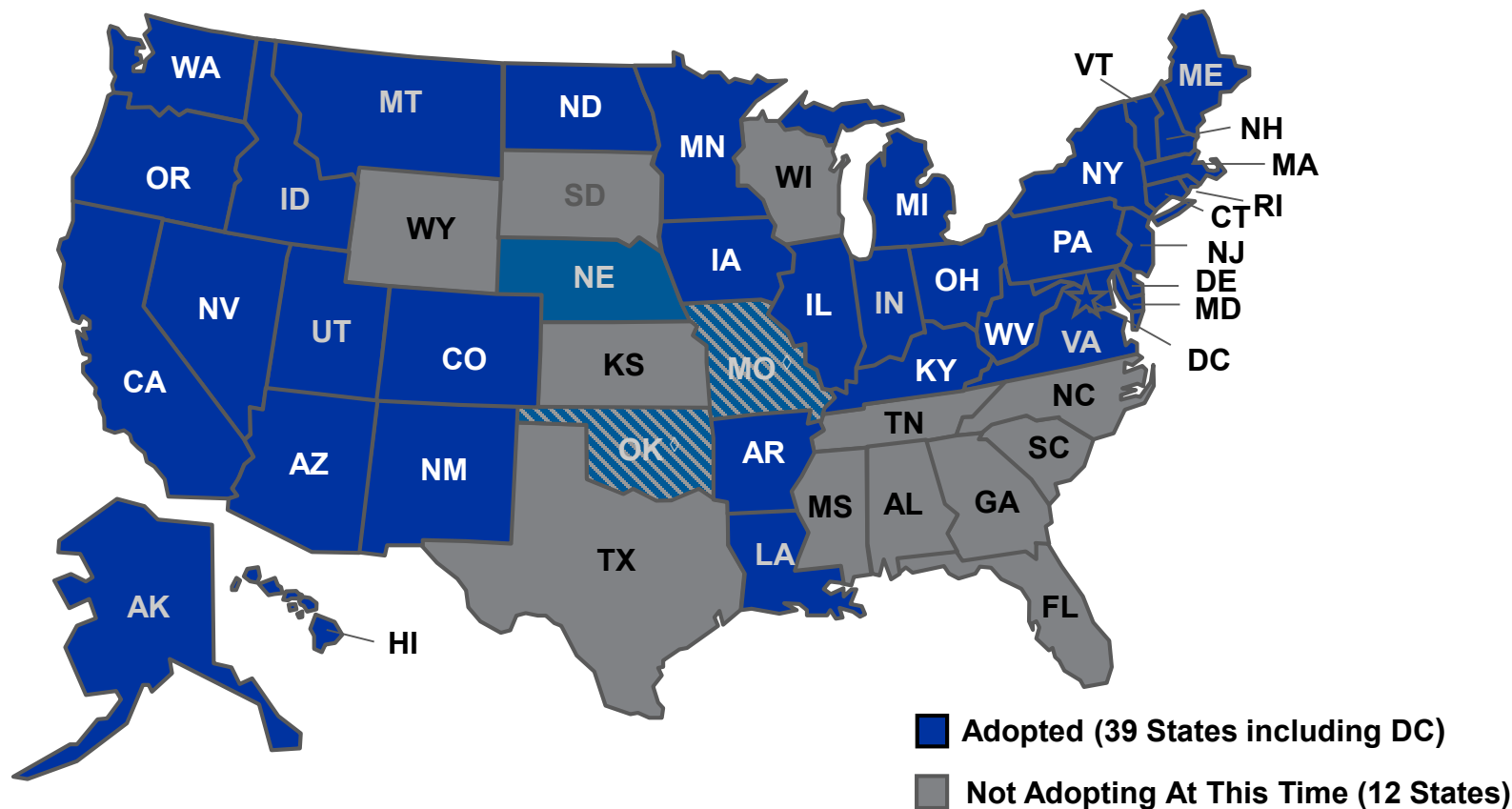
Sources: Lehman et al 2017 <https://pubs.rsna.org/doi/full/10.1148/radiol.2016161174>; Sprague et al 2014 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4200066/>; McCarthy et al 2016: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5939658/>;

Outline

- Loopholes
- **Expanding existing policies**
- Tightening existing policies
- Other barriers that the ACA has not addressed

Expanding existing policies with Medicaid Expansion

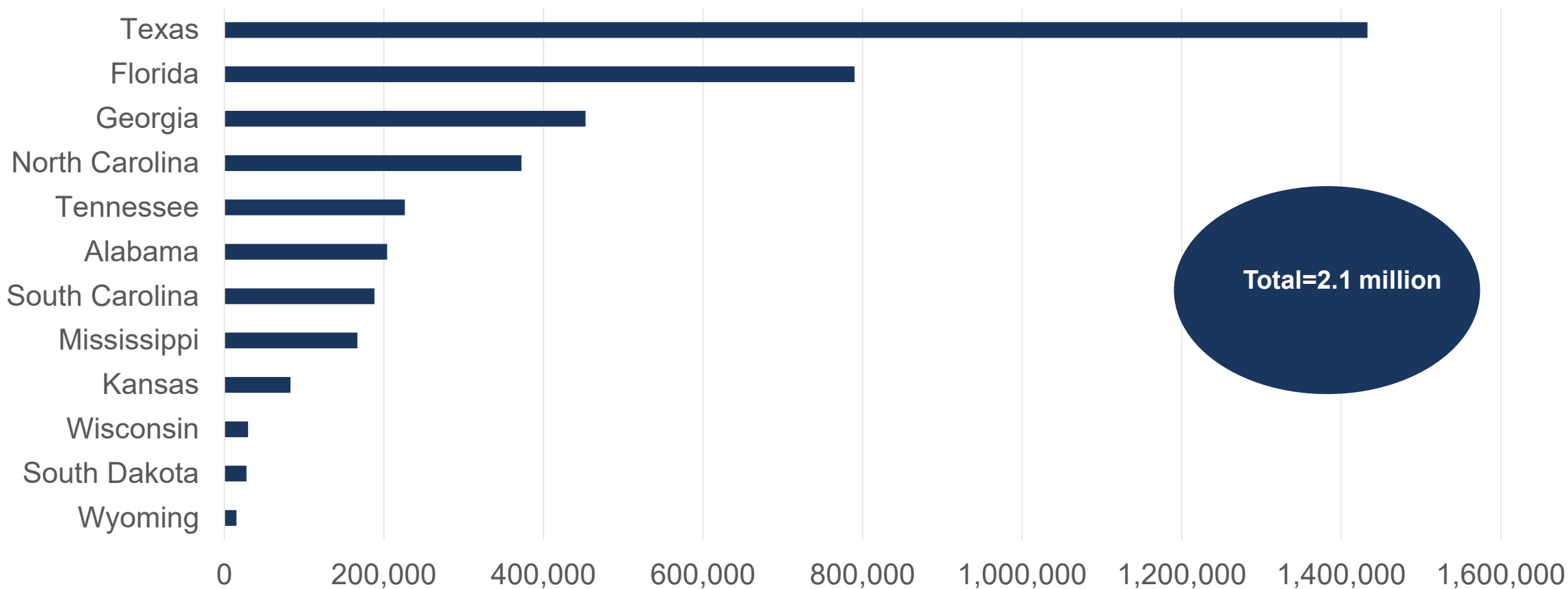
Issue: 12 states have not yet expanded Medicaid



NOTES: Current status for each state is based on KFF tracking and analysis of state activity. ◇Expansion is adopted but not yet implemented in MO and OK. (See link below for additional state-specific notes).

SOURCE: "Status of State Action on the Medicaid Expansion Decision," KFF State Health Facts, updated February 4, 2021. <https://www.kff.org/health-reform/state-indicator/state-activity-around-expanding-medicaid-under-the-affordable-care-act/>

Number of Non-Elderly Adults Who are Uninsured but would be Eligible for Coverage




Source: Kaiser Family Foundation :<https://www.kff.org/medicaid/issue-brief/the-coverage-gap-uninsured-poor-adults-in-states-that-do-not-expand-medicaid/>

Based on: current population survey

Outline

- Loopholes
- Expanding existing policies
- **Tightening existing policies**
- Other barriers that the ACA has not addressed

Medicaid Work Requirements?



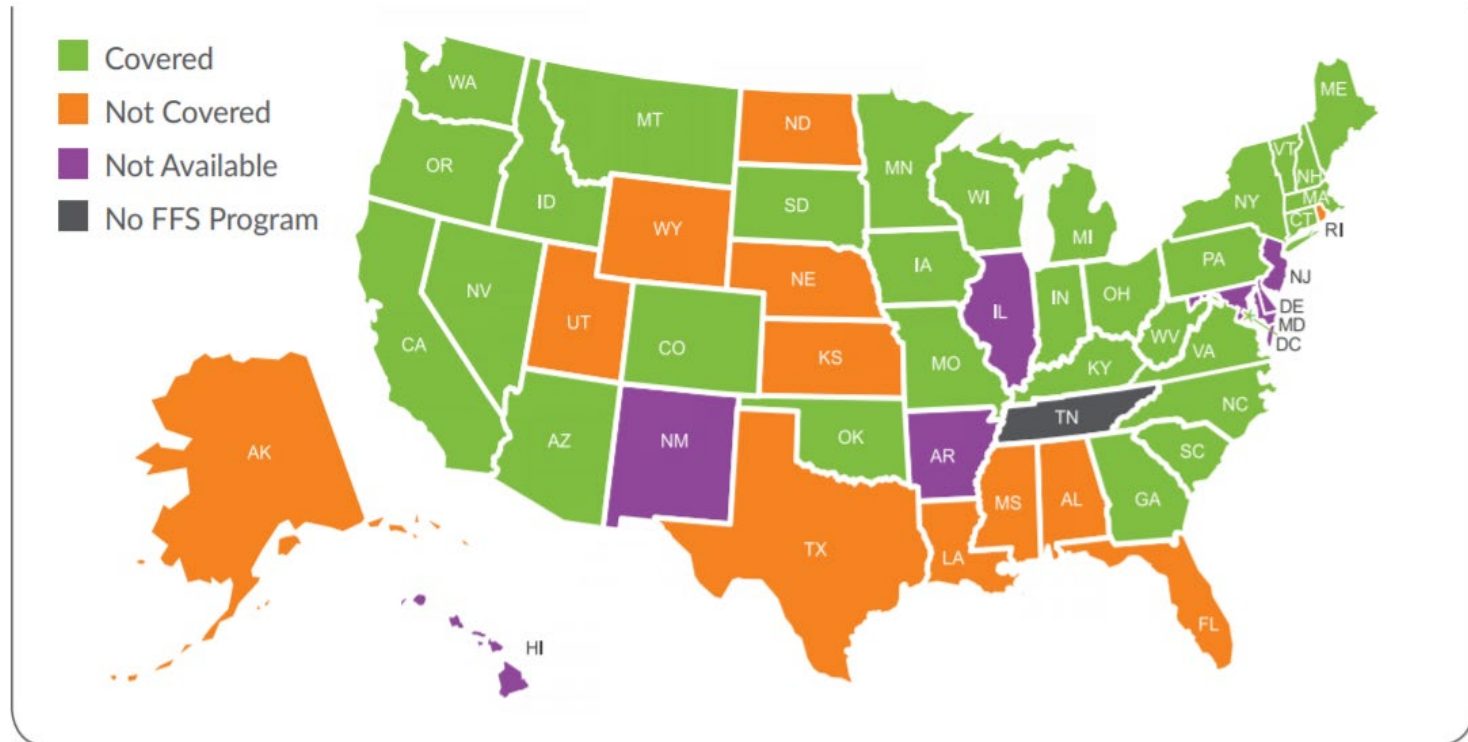
Stay
tuned!

- Issue: Section 1115 Waivers impose work requirements on Medicaid recipients
 - 12 states have received Federal approval from CMS, 7 more states have application
 - Case Example: In June 2018, Arkansas became the first state to issue work requirement (before Federal Judge stopped it in 2019): 17,000 adults lost insurance coverage because of it.

Medicaid Coverage for Lung Cancer Screening

- Lung cancer screening is recommended for 50-80 years who currently or formerly smoked w/ a 20 year pack-history (draft USPSTF recommendations)
- Many eligible non-elderly adults have Medicaid coverage
- Only 5-6% of people who are eligible receive lung cancer screening

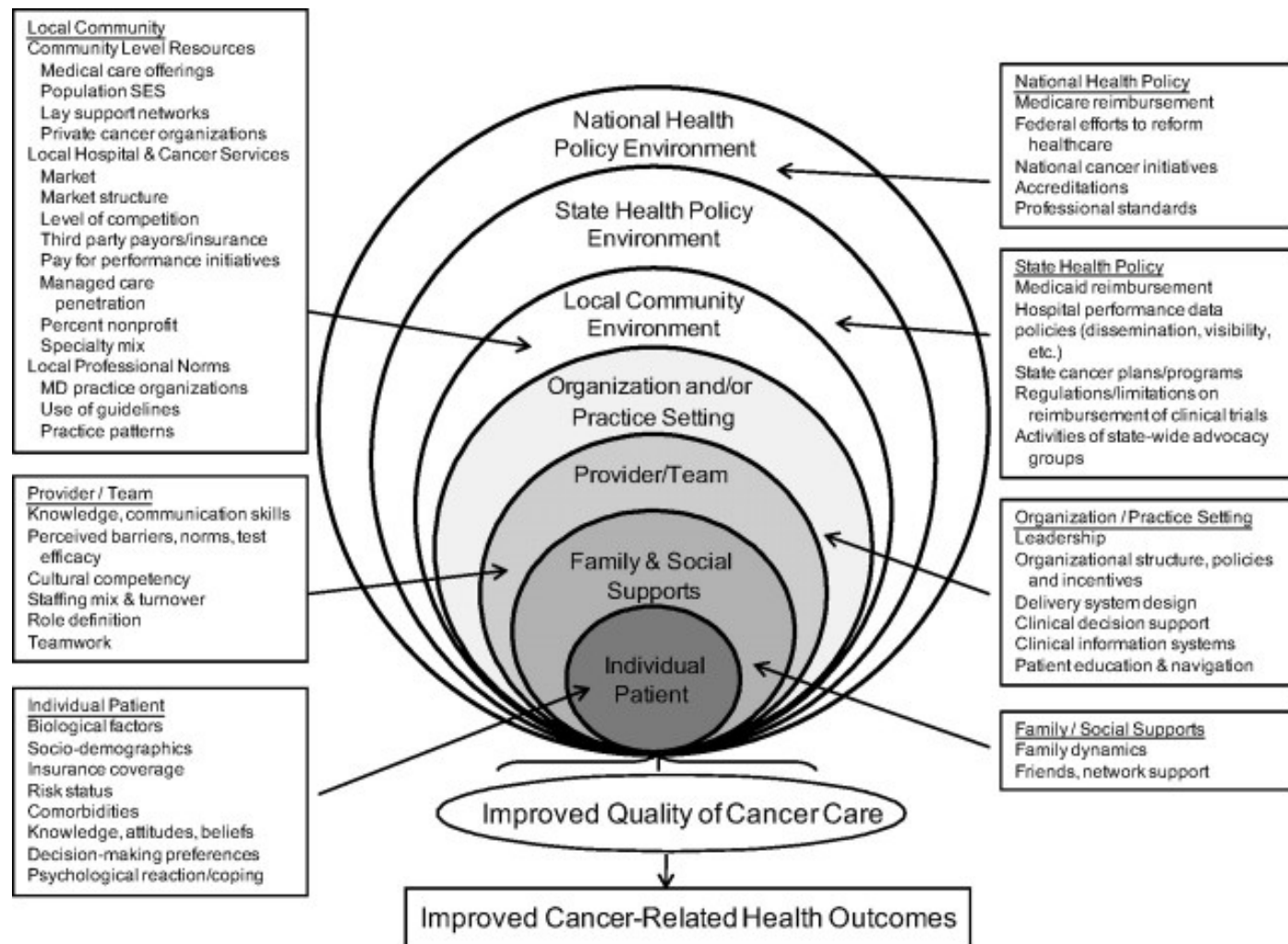
Figure 1: Coverage of Lung Cancer Screening in State Medicaid Fee-for-Service Programs



Outline

- Loopholes
- Expanding existing policies
- Tightening existing policies
- **Other barriers that the ACA has not addressed**

Barriers to Cancer Screening



Thank you!