

Medicaid Expansion Leads to Less Metastatic Cancer

Allowing people to get insurance via expanded Medicaid reduces cancer disparities based on income, a new study shows.

August 19, 2020 By [Caroline Tien](#)

A decade after the Affordable Care Act (ACA, or Obamacare) was signed into law, the expansion of insurance coverage under Medicaid it made possible has been found to reduce medical outcome disparities between low-income and high-income communities.

The latest example: diagnosing cancer before it metastasizes.

In a study published in [Cancer](#), chief investigator Uriel Kim, an MD/PhD student at the Case Western Reserve University School of Medicine, and colleagues compared rates of metastatic cancer among 12,760 underinsured or publicly insured adults in several low-income Ohio communities before and after the start of ACA-enabled Medicaid expansion in 2014. They looked at common cancers such as breast, cervical, colorectal and lung.

The researchers found that participants diagnosed with cancer between 2014 and 2016 were 15% less likely to have metastases than participants diagnosed between 2011 and 2013.

“A substantial number of low-income cancer patients gained insurance coverage as a result of the Affordable Care Act’s Medicaid expansion, so we anticipated improvements in cancer outcomes,” Kim told Cancer Health. “However, we were surprised at how quickly and dramatically Medicaid expansion ‘moved the needle’ on a long-standing cancer disparity—a 15% reduction in the odds of metastatic cancer is remarkable!”

By comparison, no statistically significant change in the rates of metastatic cancer diagnoses among privately insured adults in high-income Ohio communities was noted during that time period.

“Medicaid expansion is associated with a narrowing of a critical cancer outcome disparity in adults from low-income communities,” Kim told [Healio](#). Medicaid expansion, unlike other ACA policies, he said, “targets a particularly vulnerable group that tends to face the worst cancer outcomes.”

He added that the COVID-19 pandemic presents a further opportunity to study the effects of

Medicaid expansion on population health. “We will be able to compare how newly jobless Americans fare in terms of cancer and other health outcomes between states that expanded Medicaid and those that did not,” he told Cancer Health, adding that actions such as overturning the ACA—as the Trump administration has [attempted to do](#) several times—would likely exacerbate disparities by reducing the total number of people insured.

“Although individuals may be able to maintain insurance coverage through COBRA benefits [which allows eligible employees to continue their workplace health insurance coverage after losing a job for a limited time] or through the ACA’s Marketplace, these options may be cost prohibitive,” he said. “Thus, those who lost their insurance during the pandemic and live in states that decided against Medicaid expansion lack a vital safety net, precisely when they need it the most.”

Medicaid expansion via Obamacare is available only in states that choose to offer it. To date, it has provided health care coverage to 12 million previously uninsured low-income American adults in 37 U.S. states.

Want to read more about the impact of insurance plan type on health outcomes? Click [here](#), [here](#) and [here](#).

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