

ACCESS TO QUALITY CANCER CARE

As the world's leading professional organization representing physicians who treat people with cancer, the American Society of Clinical Oncology (ASCO) is committed to ensuring that people with cancer and cancer survivors receive the highest quality care.

ASCO is working to address three key issues related to access to quality care for cancer patients and survivors:

- **Health coverage is critical.** A cancer diagnosis can make it difficult or impossible to get health coverage. ASCO is working to ensure that people with cancer receive the care they need, regardless of insurance status.
- **Minorities face stark health disparities.** Every patient deserves the same high-quality care. ASCO is working to reduce disparities in care and outcomes among different racial and ethnic groups in the United States.
- **As the number of cancer patients and survivors grow, more oncologists are needed to treat them.** A larger oncologist workforce will increase access to care. ASCO is working to build and maintain a strong, diverse workforce to meet patient needs, now and in the future.

###

Health Care Access Can Be A Matter of Life and Death for Cancer Patients.

In 2002, the Institute of Medicine found that uninsured Americans receive too little medical care too late, are sicker, and die sooner than Americans with insurance.¹ Among cancer patients, the report found:

- Women who are uninsured are more likely to be diagnosed with a later stage of breast cancer, and are 30% to 50% more likely to die from the disease, compared to women who have private coverage.
- Uninsured patients had a significantly greater chance of being diagnosed with late-stage colorectal cancer than insured patients.

Other studies have found that:

- 33% of families report problems paying their cancer bills.²
- 27% of people that were ever uninsured reported that they or their family member delayed or decided not to get care for cancer because of the cost.²
- For people aged 50 to 64 across all major racial and ethnic backgrounds, those with insurance are significantly more likely to be screened for colorectal cancer than people without insurance.³

Minorities with Cancer Face Stark Health Disparities.

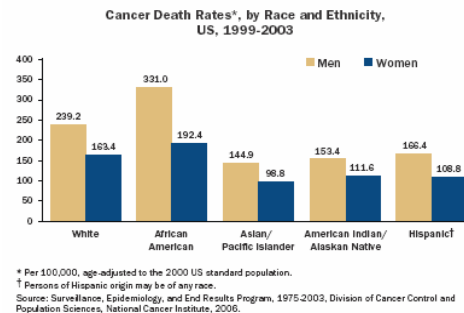
Research demonstrates that minorities have more limited access to health insurance and poorer outcomes when faced with cancer diagnoses than their white counterparts. Studies have shown:

- From 2005 to 2006, the percentage of African Americans and Hispanic Americans without insurance increased, while the percentage of non-Hispanic whites without insurance remained the same.⁴

Uninsured Americans by Race/Ethnicity

	2005	2006
African Americans	19.0%	20.5%
Hispanic Americans	32.3%	34.1%
Non-Hispanic Whites	10.8%	10.8%

- Compared with white patients, insured and uninsured African American and Hispanic patients have an increased risk of advanced-stage, harder-to-treat cancer at diagnosis.⁵
- African Americans have the highest cancer incidence and death rates of all ethnic groups.⁶



For additional information about health disparities among cancer patients, go to www.asco.org/healthdisparities.

The Looming Shortage of Oncologists Threatens Quality Care.

Growing evidence shows the United States is facing a physician shortage, driven by an aging population and a physician workforce that has not grown to meet the needs of the nation. An ASCO-commissioned oncologist workforce study found:

- Between 2000 and 2020, there will be a 48% increase in cancer incidence and an 81% increase in people living with or surviving cancer.⁷
- By 2020, there will be a significant shortage of oncologists (up to 4,000).⁷
- More than half of currently practicing oncologists are over the age of 50, and most of those oncologists are expected to retire by 2020.⁷
- The projected shortage will result in a deficit of up to 15.1 million oncologist visits for cancer patients.⁷

Read ASCO's workforce study online at www.asco.org/workforce.

ASCO's Highest Priority is Quality Cancer Care.

ASCO is committed to providing oncologists with the tools and resources they need to ensure that every patient receives the highest level of cancer care. To address these barriers to quality care, ASCO is:

- Exploring models for expanding care to the uninsured.
- Developing tools to help physicians counsel patients about cost of treatment.
- Training oncologists how to improve care for patients from underserved and/or minority populations.
- Working to increase diversity of the oncology workforce as a requisite to improving access to cancer care for the underserved.
- Supporting research and the development of clinical cancer researchers in the area of health disparities.
- Advocating for public policy that ensures access to cancer care for the underserved.
- Encouraging oncologists to practice in underserved communities.
- Working to maintain and build a strong oncology workforce to meet patient needs.

For more information about ASCO's quality care initiatives, visit <http://www.asco.org/ASCO/Quality+Care+%26+Guidelines>

¹ Committee on the Consequences of Uninsurance. *Care Without Coverage: Too Little, Too Late*, The National Academies Press, 2002.

² USA Today/Kaiser Family Foundation/Harvard School of Public Health Cancer Survey (conducted August 1-September 14, 2006)

³ "Association of Insurance with Cancer Care Utilization and Outcomes," Wart et al. *CA Cancer J Clin* 2008; 0:CA.2007.0011v1-20070011.

⁴ DeNavas-Walt C, Proctor BD, Smith, J. Income, Poverty, and Health Insurance Coverage in the United States: 2006. Washington, DC: U.S. Census Bureau; 2007

⁵ "Association of insurance status and ethnicity with cancer stage at diagnosis for 12 cancer sites: a retrospective analysis," Halpern, M. T., Ward, E. W., Pavluck A. L., Schrag, N. M., Bian J., Chen A. Y., February 2008.

⁶ Cancer Facts and Figures: 2008, American Cancer Society

⁷ Erikson, C., Salsberg, E. Forte, G., Bruinooge, S., Goldstein, M. Future Supply and Demand for Oncologists : Challenges to Assuring Access to Oncology Services. *Journal of Oncology Practice*, Vol 3, No 2 (March), 2007: pp. 79-86