

Cancer survivors in rural areas forgo health care because of cost

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Older cancer survivors living in rural areas were more likely to forgo medical and dental care because of financial concerns compared with older cancer survivors living in urban areas, according to a study published in *Cancer Epidemiology, Biomarkers & Prevention*, a journal of the American Association for Cancer Research.

Data analysis showed [cancer survivors](#) in rural areas who were aged 65 or older were 66 percent more likely to forgo medical care and 54 percent more likely to forgo [dental care](#) because of cost, compared with their urban counterparts.

"This is the first population-based study to examine whether cancer survivors in rural and urban areas are equally likely to forgo [health care](#) as a result of concerns about cost," said Nynikka Palmer, Dr.P.H., M.P.H., postdoctoral fellow in the Department of Social Sciences and Health Policy at Wake Forest School of Medicine in Winston-Salem, N.C. "We found a disparity among older survivors, for whom [health insurance](#) coverage through Medicare is almost universal, while no disparity was found for younger survivors after controlling for various factors. This suggests that health insurance coverage alone may not ensure equal access to health care.

"Cancer survivors who require regular follow-up care after treatment, but do not receive it, may be at risk for other health conditions like diabetes and heart disease, poorer quality of life, and possibly premature death. Health care providers and public health officials should be aware

of this rural-urban disparity so that they can help rural cancer survivors access the resources they need to get care."

The researchers noted that older cancer survivors in rural areas may have to travel farther to reach a medical provider, causing them to incur greater out-of-pocket costs associated with travel and lost wages. They may also face challenges with social support and transportation issues if younger family members leave rural areas for better economic opportunities in cities. "While insurance coverage may not have fully explained rural-urban disparities in older survivors, we did observe strong associations between health insurance and forgoing care," said Palmer. "With the expected changes in health care policies in the forthcoming year, it will be important to assess the impact on rural and urban cancer survivors."

Palmer and colleagues analyzed data from 7,804 cancer survivors who participated in the National Health Interview Surveys conducted by the National Center for Health Statistics of the Centers for Disease Control and Prevention (CDC) between 2006 and 2010. They used the United States Department of Agriculture (USDA), Office of Management and Budget's Rural-Urban Continuum (RUC) codes to categorize participants as rural or urban residents.

The authors used RUC codes because most other studies and reports addressing health care disparities have used similar coding schemes, and this provides the opportunity to compare data across different studies.

Among the study participants, 1,642 were from [rural areas](#), and 6,162 were from [urban areas](#). About 49 percent of them were aged 18 to 64, and primarily received health [insurance coverage](#) through their employers while some of them had no health insurance. The remaining 51 percent were aged 65 older, and the majority of these survivors were covered by Medicare and supplemental Medicaid or private insurance.

The researchers collected data on three outcomes: if the participants delayed or did not get medical care because of cost, if they could not afford prescription medicine, and if they could not afford dental care.

Provided by American Association for Cancer Research

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