Medicaid Expansion Begins Closing Racial Gap in Colorectal Cancer Screening for Latino Adults

Amid threats to Medicaid, researchers “continue to emphasize the importance of increasing access to insurance.”

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State-by-state expansion of Medicaid coverage via the Affordable Care Act (ACA, or Obamacare) led to a modest increase in colorectal cancer screening among Latino men and Latina women, according to a new study published in JAMA Network Open.

“Unfortunately, the broader changes to Medicaid, combined with the current immigration climate, pose a significant risk of undermining these gains, potentially reversing the progress we’ve made in improving access to preventive care for these communities,” said lead study author Nathalie Huguet, PhD, in a Healio Gastroenterology press release.

Colorectal—or colon—cancer is the third most common cancer, accounting for approximately 10% of all cancer cases worldwide, according to the World Health Organization. People above age 45 should begin regular screening for colon cancer in accordance with U.S. Preventive Services Task Force recommendations. For most people, screening is done every 10 years via colonoscopy, every year with a stool test or every five years through sigmoidoscopy or virtual colonoscopy (CT colonography). Earlier and more frequent colon cancer screening may be necessary for people with genetic syndromes that affect the colon, inflammatory bowel diseases, such as Crohn’s disease or ulcerative colitis, or a family history of colon cancer or colorectal polyps, according to the Centers for Disease Control and Prevention.

To learn more about colorectal cancer, read Cancer Health’s basics on Colon Cancer. It reads in part:

> “Colon cancer affects women and men equally in the United States. African Americans have higher rates of colon cancer occurrence and death. Black men and women are about 25%

more likely to develop colon cancer than whites. Latinos or Hispanics have the lowest rates of colon cancer occurrence and death.

What are the risk factors for colon cancer?

Older age is the biggest risk factor for developing colon cancer. This is because colon and rectal tumors can take a long time to form. Sometimes benign (noncancerous) tumors in the colon can take 10 to 20 years to progress to cancer.

Other risk factors include genetic factors, a family history of colon cancer or polyps in the colon or rectum, and long-term inflammatory bowel disease (such as Crohn's disease or ulcerative colitis). Lifestyle factors are known to increase the risk of colon cancer, including obesity, lack of physical activity, tobacco use, alcohol consumption and a diet high in fat and red meat. A diet high in fruits and vegetables may protect against colon cancer."

The ACA expanded Medicaid coverage for adults with incomes up to 138% of the federal poverty level, (approximately $22,000 for an individual and $45,500 for a family of four in 2026). However, not every state adopted expansion.

The study focused on 6,503 Latino men and women between ages 50 and 63 from 218 clinics using OCHIN Epic electronic health record data from clinics from January 2018 to December 2023 in states that expanded Medicaid eligibility regardless of immigration status by 2021 (California and Oregon) and from those that did not expand their eligibility (Indiana, Minnesota, Ohio, and Washington).

Regardless of Medicaid eligibility during state-by-state expansions, up-to-date colorectal screening prevalence increased by around 10% and 11% for Latino men and Latina women, respectively, between 2020, when rates were lowest, and 2023, when rates were highest.

"We aim to identify gaps in care and highlight which populations are falling behind, allowing health care professionals and policymakers to target our outreach efforts more effectively and ensure that those who need it most receive the support they need," said Huguet, in Healio Gastroenterology's press release.

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