

## **The Effect of Insurance and Ethnicity on Healthcare Access and Health Behaviors: A Childhood Cancer Survivor Study (CCSS)**

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**Background:** We examined the influence of ethnicity and insurance coverage on healthcare access and healthy behaviors in adult childhood cancer survivors.

**Methods:** The CCSS is a resource designed to evaluate the long-term effects of cancer and associated therapies in 5-year survivors. The cohort, established through a consortium of 25 centers, includes 20,316 subjects diagnosed with cancer < 21 years of age between 1970-86. We analyzed cross-sectional, self-reported data from 443 Black, 503 Hispanic and 7,821 non-Hispanic white (NHW) childhood cancer survivors  $\geq$  18 years of age. Outcomes are defined in Table 1 and compared with reference to survivors with private insurance within each ethnic group.

## Results:

### Odd Ratios and 95% Confidence Intervals of the likelihood of reporting Healthcare Access and Health Behaviors For Survivors with Medicaid/Public Insurance and Uninsured in comparison to those with Private Insurance, stratified by ethnic group.<sup>+</sup>

Outcome	Blacks Referent n= 256		Hispanics Referent n= 295		NHW Referent n= 5841	
	Medicaid/Public Insurance n= 67	No Insurance n=93	Medicaid/Public Insurance n=72	No Insurance n= 109	Medicaid/Public Insurance n= 498	No Insurance n= 1177
<b>Medical Care (within previous 2 yrs)</b>						
General medical contact	NS	NS	NS	NS	1.7 (1.2-2.4)	0.6 (0.5-0.7)
General PE	NS	0.6 (0.3-0.9)	NS	NS	1.3 (1.1-1.7)	0.5 (0.5-0.6)
Cancer-related medical visit	NS	NS	2.2 (1.1-4.2)	NS	1.8 (1.4-2.2)	0.7 (0.6-0.9)
Cancer center visit	NS	NS	2.2 (1.1-4.3)	NS	1.8 (1.4-2.3)	0.8 (0.7-0.9)
<b>Positive Health Behaviors</b>						
Clinical breast examination ( ≤ 1 year)	NS	NS	NS	0.3 (0.1-0.6)	NS	0.7 (0.5-0.8)
Dental examination ( ≤ 1 year)	NS	0.4 (0.2-0.7)	NS	0.6 (0.4-0.9)	NS	0.6 (0.4-0.5)
PAP smear ( ≤ 3 years)	NS	NS	NS	NS	NS	NS

<sup>+</sup> Adjusted for age, gender, cancer diagnosis, household income and highest level of educational attainment; Referent = private insurance within each ethnic group; NS = nonsignificant

**Conclusions:** Compared to survivors with private insurance, NHW and Hispanics with public insurance are more likely to report cancer-related follow-up care. Uninsured survivors are less likely to report preventive health behaviors, regardless of ethnicity.