Abstract

OBJECTIVES: To compare cancer care among American Indian and Alaska Native (AIAN) patients with other racial groups.

METHODS: We used Washington State cancer registry records to identify 33,624 patients < age 65 diagnosed with local and regional stage breast, colorectal, and lung cancer from 1997 to 2003. Records were linked with regional tribal registry and Medicaid records to identify AIAN.

RESULTS: Enrollment in Medicaid at or after diagnosis was 50% for AIAN, 34% for Hispanic, 33% for black, and 18% for Asian/Pacific Islander compared to 13% of white cancer patients. AIAN were equally as likely as whites and other minority groups to receive surgery for breast and colorectal cancer, but significantly less likely (OR = 0.67) to receive surgery for lung cancer. Medicaid patients in general were less likely to receive surgery within 2 months of diagnosis, but AIAN were no less likely to receive timely surgery compared to other racial groups.

CONCLUSION: AIAN rely more heavily than other racial groups on Medicaid for insurance after they are diagnosed with cancer. Issues associated with Medicaid enrollment, as well as non-insurance related factors may account for delays in time to surgery and lower rates of lung cancer surgery among AIAN.