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Re: Insurance Disparities in Head and Neck Cancer – Reply

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In Reply

We thank Wu et al. for their observations regarding our recent study.¹ They raise the concern of potential selection bias due to the exclusion of patients who were not treated at the reporting hospitals. As suggested, we compared the demographic characteristics between excluded and included patients and found them to be similar between the two groups.

Second, the authors raised the concern that insurance status disparities in advanced disease stage at diagnosis may confound the observed association of insurance status with hospital quality and survival outcomes. They suggested stratifying the results by both insurance status and tumor stage simultaneously. However, this concern is unfounded given that all regression models used to examine the association of insurance status with hospital quality and guideline-compliant care adjusted for cancer stage. Furthermore, they note that insurance status was associated with survival in the analysis evaluating the association of hospital quality and survival, even though this was not the focus of that analysis. Nevertheless, that model also adjusted for cancer stage.

Finally, the authors recommend employing Causal Mediation Analysis to justify our statement that, "the association between insurance status and receipt of guideline compliant care did not appear to be mediated by hospital quality."¹ We respectfully disagree with the suggestion. The associations between insurance status and guideline-compliant care remained significant before and after adjustment for hospital quality. The effect sizes were also similar (0.01 – 0.04 difference in OR) before and after adjustment for hospital quality. This is a strong indication of a lack of mediation. A mediation analysis would be needed if there was a substantial difference, and we wanted to prove mediation.

References

1. Megwalu UC, Ma Y, Divi V, Tian L. Insurance Disparities in Quality of Care Among Patients With Head and Neck Cancer. *JAMA Otolaryngol-- Head Neck Surg*. Published online June 13, 2024.
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Author Contributions:

Uchechukwu C. Megwalu: conception and design; data acquisition and interpretation; drafting of the manuscript; final approval of the version to be published; agreement to be accountable for all aspects of the work.

Yifei Ma: design; data acquisition, analysis, and interpretation; manuscript revision; final approval of the version to be published; agreement to be accountable for all aspects of the work.

Uchechukwu C. Megwalu and Yifei Ma had full access to all of the data in the study and take responsibility for the integrity of the data and the accuracy of the data analysis.