

Zion's Story: The Need to Cover Cancer Treatment

The Human Cost of Inaction on Expanding Emergency Medicaid for Cancer Care

Zion was a chubby-cheeked, quiet, but wide-eyed toddler adored by his family. He was also a two-year-old resident of Fairfax, Virginia, diagnosed with acute lymphoblastic leukemia (ALL), a type of leukemia with an over 90% survival rate for children his age. Zion faced a major barrier to care: his immigration status prevented him from accessing timely treatment and created numerous obstacles, making it extremely difficult for him to receive the care he needed.

Like any parents, Zion's were committed to making sure their baby made it to his next birthday. His mother quit her job to be his full-time caregiver while also raising their 4-year-old daughter. His father worked overtime, struggling to make ends meet, to ensure their son's treatment wouldn't end simply because he couldn't afford it.

A cancer diagnosis is daunting for anyone. For low-income families without documentation, the financial burden adds an overwhelming layer of difficulty and limits treatment options, and many remain uninsured and without care. Lawmakers have an opportunity to expand Emergency Medicaid to cover cancer treatment and remove barriers to care for families like Zion's. Without legislative action, the cost of care will continue to shift to safety-net health centers, hospitals, and local governments, and providers will face ethical dilemmas such as unsafe discharges.

Zion's family faced these harsh realities firsthand. Barriers to care meant the cancer progressed to stage 2 before treatment could begin. Unfortunately, Virginia lacked facilities willing to provide affordable care and relocating was financially impossible. His treatment was possible only because an empathetic doctor happened to overhear their case and decided to act. This doctor offered them a glimmer of hope, but it required his family to take the metro an hour and a half daily from Fairfax to a hospital in Washington, D.C.

His disease's survival rate gave his doctors and parents hope to continue treatment, but the ongoing care led to mounting debt and insurmountable financial barriers. Unwilling to give up, his doctor continued treatment for nearly two years until Zion's eventual death.

Zion's story is not unique, yet his family's journey highlights the profound challenges that people without documentation face when seeking cancer care in Virginia. Over 48,000 new cancer cases were reported in Virginia in 2024. Of those, an estimated 800 people — children and adults alike — could face similar barriers to timely care due to their immigration status.

For families like Zion, a cancer diagnosis is a crisis. Zion was lucky enough to have a family who could look after him, make a comparably short commute to D.C., and secure a care team that provided him with charitable care. Many Virginians don't have those privileges, but their story mirrors his. Zion's story underscores the urgency for lawmakers to take action.

Virginia lawmakers can support more of our neighbors by expanding Emergency Medicaid to cover cancer treatment, as six other states have done, which could save countless lives. This program, supported by both state and federal funding, would provide much-needed relief and help ensure no person with cancer goes untreated simply because care is out of reach.