



A PATIENT-CENTERED FORUM OF NATIONAL ADVOCACY ORGANIZATIONS ADDRESSING PUBLIC POLICY ISSUES IN CANCER

March 4, 2004

The Honorable Tommy Thompson
Secretary
Department of Health & Human Services
200 Independence Ave., S.W.
Room 615-F – HHH Bldg.
Washington, D.C. 20201

Dear Secretary Thompson:

The undersigned organizations represent people with cancer who look forward to the benefits authorized by § 641 of the recent Medicare Prescription Drug, Improvement, and Modernization Act (MMA). The demonstration project under § 641 provides coverage between now and January 2006 for certain drugs that would not otherwise be covered by Medicare. As the Conference Report clearly articulates, at least 40% of the total funding should be allocated to oral anti-cancer drugs.

As you know, cancer patients have been active in seeking Medicare coverage of oral anti-cancer drugs during the 107th and 108th Congress. Before it became clear that the Congress would consider a comprehensive drug benefit (which of course was passed by the Congress and signed by the President), this coverage provision was one of the most popular measures in the Congress, with more than three-fourths of the House and more than half the Senate signed on as co-sponsors in the 107th Congress.

It was in significant part the enthusiasm of cancer patients that resulted in the § 641 demonstration project as a vehicle for drug coverage prior to implementation of the comprehensive drug benefit in January 2006. The demonstration project should unquestionably include access to new targeted therapies—both less toxic and more effective than available alternatives—for deadly blood cancers and solid tumors like lung cancer. In addition, hormonal agents for diseases like breast and prostate cancer obviously must be part of the demonstration project to culminate the decade of advocacy for Medicare coverage of these important life-extending medicines.

The § 641 demonstration project reflects the will of Congress that certain drugs, including oral anti-cancer drugs, be immediately available to Medicare beneficiaries with unmet needs. Despite the many implementation issues confronting your Department and the Centers for Medicare & Medicaid Services, we are confident that the demonstration project will succeed and will address

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the unmet needs of Medicare beneficiaries with cancer until comprehensive coverage is available in January 2006. The cancer community stands ready to help Medicare officials in realizing the potential of § 641 for the benefit of beneficiaries with cancer.

Sincerely,

Cancer Leadership Council

American Cancer Society
American Psychosocial Oncology Society
American Society of Clinical Oncology
American Society for Therapeutic Radiology &
Oncology, Inc.
Association of American Cancer Institutes
Cancer Care, Inc.
Cancer Research and Prevention Foundation
The Children's Cause, Inc.
Coalition of National Cancer Cooperative
Groups
International Myeloma Foundation
Kidney Cancer Association

The Leukemia & Lymphoma Society
Lymphoma Research Foundation
Multiple Myeloma Research Foundation
National Coalition for Cancer Survivorship
National Patient Advocate Foundation
North American Brain Tumor Coalition
Ovarian Cancer National Alliance
Pancreatic Cancer Action Network
The Susan G. Komen Breast Cancer Foundation
Us Too International Prostate Cancer Education
and Support Network
The Wellness Community
Y-ME National Breast Cancer Organization

cc: The Honorable Charles Grassley
The Honorable Max Baucus
The Honorable Olympia Snowe
The Honorable Jay Rockefeller
The Honorable William Thomas
The Honorable Charles Rangel
The Honorable Joe Barton
The Honorable John Dingell
The Honorable Deborah Pryce
Dr. Mark McClellan, FDA
Doug Badger, White House
Scott Whitaker, HHS
Dennis Smith, CMS
Leslie Norwalk, CMS
Timothy Trysla, CMS
Dr. William Rogers, CMS
Robert Foreman, CMS
Stuart Guterman, CMS
Jody Blatt, CMS