



Association of Community Cancer Centers

July 27, 2022

The Honorable Charles Schumer
Majority Leader
322 Hart Senate Office Building
Washington, D.C. 20510

The Honorable Mitch McConnell
Minority Leader
317 Russell Senate Office Building
Washington, D.C., 20510

Dear Leaders Schumer and McConnell,

The Association of Community Cancer Centers (ACCC) is the leading education and advocacy organization for our nation's cancer care community, representing a network of 30,000 multidisciplinary practitioners from 1,700 hospitals and practices nationwide. The diversity of our membership uniquely positions ACCC to effectively engage with policymakers about the need for reforms to reduce out-of-pocket costs for prescription drugs and drugs administered in oncology practices, clinics, and hospitals.

ACCC strongly supports the goal of reducing the cost of cancer care for Medicare beneficiaries, and we appreciate that a number of the provisions included in the current Senate reconciliation package address healthcare affordability. In particular, the extension of expanded and enhanced subsidies for Affordable Care Act marketplace plans will help patients with cancer afford comprehensive health insurance coverage beyond 2022. Additionally, the redesign of the Medicare Part D benefit and enactment of a \$2,000 out-of-pocket cap will better allow Part D enrollees to afford high-cost cancer drugs purchased at the pharmacy counter, improving access to necessary and life-saving therapies.

However, we remain concerned with the provisions of the reconciliation package that would allow Medicare to negotiate the price of prescription drugs. Specifically, basing provider reimbursement on the proposed "maximum fair price" would negatively impact reimbursement for providers that administer drugs covered under Medicare Part B. These cuts would significantly reduce beneficiary access to crucial medications and treatments and also threaten the financial viability of cancer programs and practices across the country. We therefore request that Congress hold providers harmless in the drug pricing negotiation between the federal government and drug manufacturers and seek alternative solutions to reduce out-of-pocket drug costs for Medicare beneficiaries.

The current level of reimbursement for Medicare Part B drugs affords cancer care providers the capital necessary to fund crucial elements of a comprehensive cancer care program. This not only includes the cost of overhead, but the ability to invest in new and innovative technologies, patient care coordination and supportive care services, and adequate staffing structures for care delivery. By reducing reimbursement for Medicare Part B drugs, we believe that the drug pricing provisions of the Senate's reconciliation package would limit the ability of cancer programs to provide quality care to the diverse communities they serve.

Moreover, we are concerned that reductions in drug reimbursement outlined in the package may worsen the financial challenges that many community cancer programs are already experiencing. Oncology programs and practices in smaller communities, rural areas, and areas of high Medicare penetration stand to be most severely affected by these reimbursement cuts. These community providers may be faced with

the difficult decision to reduce available treatment options and services or even close their doors as a result. This would create new access issues for Medicare beneficiaries, with a disproportionate effect on the poor, vulnerable, and people of color.

ACCC believes that the most effective treatment options should be available to patients at the lowest cost, and any proposed changes in reimbursement for drugs should promote health equity while maintaining the ability of cancer programs to provide necessary support services for potentially disadvantaged populations. Therefore, we are troubled by the drug pricing provisions of the reconciliation package because of their potential to exacerbate existing inequities in cancer care delivery.

For these reasons, we urge Congress to refine this piece of legislation to remove providers from the middle of proposed drug pricing negotiations between the federal government and drug manufacturers. The proposal to establish a new negotiated price would severely impact reimbursement for providers that administer the selected Part B drugs, with the largest and most immediate impact on providers that treat predominantly Medicare beneficiaries. This change in pricing structure would also impact commercial reimbursement in a way that unfairly penalizes providers. **We fear the drug pricing provisions of the reconciliation package would have significant unintended consequences on cancer care providers and their ability to provide high quality, equitable care to the patients they serve, so we encourage Congress to seek alternative policy solutions to combat rising prescription drug costs.**

If you have any questions about our letter or would like to discuss in further detail, please contact Matt Devino at mdevino@acc-cancer.org or (301) 263-3510.

Respectfully,



Thomas A. Gallo, MS, MDA
Chair, Governmental Affairs Committee
Association of Community Cancer Centers

CC: Senate Finance Committee Members