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Congress Goes Back to School

BY MATT FARBER, MA



his year, Congress has been busy dealing with issues that will significantly impact the future of the United States. Some of these issues are government spending, military readiness, immigration reform, and gun control. While you will note healthcare is not on that immediate list, rest assured that lawmakers are not ignoring the issue. This means that organizations, such as ACCC, cannot afford to ignore the issue either.

For example, there is an effort to introduce legislation related to oral parity on the federal level. (In brief, oral parity legislation requires payers that cover chemotherapy treatment to provide coverage for oral anti-cancer drugs on terms that are no less favorable than the coverage provided for IV medication.) Many readers know that 21 states* and Washington, D.C., have successfully enacted oral parity legislation. ACCC and many oncology state societies supported this legislation and other laws protecting patients' access to care.

That said, these state initiatives only regulate certain insurance plans within the state. Further, oral parity laws differ across the states. If oral parity is enacted as a federal law, patients will be afforded the same protection across all states. To help further this cause, ACCC joined a coalition effort that has been advocating for a federal oral parity law—Patient Equal Access Coalition (PEAC).

In 2012 the House of Representatives introduced an oral parity bill that more than 50 bi-partisan representatives signed on to support. Unfortunately, last year's political climate hindered the bill's progress. With a new Congress in place, PEAC is working to have the bill reintroduced in the House. In addition, the coalition is also working to have a Senate companion bill introduced. Running companion bills in the House and Senate underscores the importance of the issue and will ultimately speed the approval process.

In February, ACCC joined other PEAC coalition members in visiting numerous Senate offices. Our meetings were successful in educating staff members on the issue of oral parity and patient access to care. Our efforts were especially important in offices with newly-elected members of Congress. Because these members may not be familiar with the issue of oral

parity, we were able to educate them in our own words and using the powerful stories of our members.

The importance of educating congressional representatives cannot be overstated. Even if our efforts do not result in a Senate co-sponsor, PEAC members were still able to introduce this issue to members of Congress. Now, when the issue of oral parity comes up again, staff members will remember our meetings, and perhaps even call on a member of the coalition to provide further information.

This advocacy effort is an example of the type of efforts we are asking you our ACCC members—to get involved in through ACCC's Grassroots Advocacy Campaign. If you are interested in helping to educate Congress on the issues affecting your cancer program and your cancer patients, visit www.accc-cancer. org/advocacy/QualityCare.asp. Here, you will learn more about the issues impacting cancer care, along with easy avenues to reach out to your elected officials. There are many ways for your practice or cancer center to participate in grassroots advocacy; some efforts take as little as five minutes. To learn more or to get involved today, contact mfarber@accc-cancer.org. **O**

*Colorado, Connecticut, Delaware, Hawaii, Illinois, Indiana, Iowa, Kansas, Louisiana, Massachusetts, Maryland, Minnesota, Nebraska, New Jersey, New Mexico, New York, Oregon, Texas, Vermont, Virginia, Washington