



## Maintaining a Strong Investment in Cancer Research and Prevention

Thank you for your strong commitment to cancer research. Please continue to build upon that momentum in FY 2020 by funding the:

- NIH – increase of \$2.5 billion, for a total of \$41.6 billion, including \$6.5 billion for the NCI
- Providing at least \$555 million for the CDC’s Cancer Control and Prevention programs, including \$70 million for the National Cancer Registry Program.

Cosponsor H.R. 1570/S. 668, the *Removing Barriers to Colorectal Cancer Screening Act*.

Cosponsor H.R. 647, the *Palliative Care Hospice Education and Training Act (PCHETA)*.

The American College of Surgeons (ACS) and the Commission on Cancer (CoC) are dedicated to improving survival and quality of life for cancer patients through advocacy of issues pertaining to prevention and research.

### Congressional Action

#### Cancer Research and Prevention Appropriations Requests

The ACS and CoC have been strong advocates in the fight against cancer and securing additional cancer research and prevention funding. Past congressional support for federally funded cancer research has been the foundation for progress made in the battle against this disease. The ACS and the CoC strongly support the goal of maintaining and enhancing funding of these programs in order to build upon the momentum gained throughout the last few years.

To continue the progress that has led to medical breakthroughs for treatment and therapies for millions of cancer patients ACS and CoC support the following increases in the Fiscal Year (FY) 2020 Labor, Health and Human Services (HHS), Education and Related Agencies appropriations package:

- National Institutes of Health (NIH) – increase of \$2.5 billion, for a total of \$41.6 billion, including \$6.5 billion for the National Cancer Institute (NCI).
- Providing at least \$555 million for the Center for Disease Control and Prevention’s (CDC) Cancer Control and Prevention programs, including \$70 million for the National Cancer Registry Program.

#### Improve Access to Colorectal Cancer Screening

According to the NCI, colorectal cancer is the second leading cause of cancer related death in the United States when men and women are combined. This statistic is especially troubling since colorectal cancer is largely preventable due to effective screening methods. The ACS and the CoC request your support for the *Removing Barriers to Colorectal Cancer Screening Act* (H.R. 1570/S. 668), sponsored by Representatives Donald M.



Payne, Jr. (D-NJ), Rodney Davis (R-IL), Donald McEachin (D-VA), David McKinley (R-WV) and Senators Sherrod Brown (D-OH), Roger Wicker (R-MS), Ben Cardin (D-MD), and Susan Collins (R-ME), which would eliminate an unintended cost barrier for Medicare beneficiaries to life-saving colorectal cancer screening.

Under current law, Medicare waives co-insurance and deductibles for preventative colonoscopies. However, when a polyp is discovered and removed, the procedure is reclassified as therapeutic for the purposes of Medicare billing and patients are therefore required to pay the coinsurance. This bipartisan legislation would waive Medicare's cost-sharing requirement for preventative colonoscopies, even if a polyp or tissue is removed.

Not only is the cost-sharing obligation of current law confusing to patients, it also results in the unintended consequence of creating a financial barrier to the most effective method of colorectal cancer prevention. The *Removing Barriers to Colorectal Cancer Screening Act* would help to ensure that the threat of unanticipated costs do not deter a patient from having the screening performed. By removing this financial barrier, Congress would help increase screening rates and reduce the incidence of colorectal cancer.

### **Palliative Care Hospice Education and Training Act**

The ACS and CoC strongly believe educating patients and providers on the benefits of palliative care has the potential to significantly improve the quality of life for patients and their families during times of serious and complex chronic conditions. Unfortunately not all palliative care programs have the interdisciplinary teams necessary to provide comprehensive, high quality care. ACS and the CoC request your support for H.R. 647, the *Palliative Care Hospice Education and Training Act* (PCHETA), sponsored by Representatives Eliot Engel (D-NY), Tom Reed (R-NY), Yvette Clarke (D-NY), Buddy Carter (R-GA), Frank Pallone (D-NJ) and Greg Walden (R-OR), which would establish Palliative Care and Hospice Education Centers to improve the training of health professionals in palliative care. The PCHETA legislation would also establish traineeships for individuals preparing for advanced education in nursing, social work, or physician assistant studies in palliative care.<sup>i</sup>

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<sup>i</sup> Current to April 2, 2019. Please contact [ahp@facs.org](mailto:ahp@facs.org) for an updated version.

