



ASSOCIATION FOR CLINICAL ONCOLOGY

March 22, 2020

ASSOCIATION CHAIR OF THE BOARD

Monica M. Bertagnolli, MD, FACS, FASCO

ASSOCIATION TREASURER

Jaap Verweij, MD, PhD, FASCO

ASSOCIATION DIRECTORS

Peter C. Adamson, MD

Howard A. "Skip" Burris, III, MD, FACP, FASCO

Melissa S. Dillmon, MD, FASCO

Laurie E. Gaspar, MD, MBA, FASTRO, FACR

Maha H. A. Hussain, MD, FACP, FASCO

Daniel P. Mirda, MD

Lori J. Pierce, MD, FASTRO, FASCO

Blase N. Polite, MD, MPP, FASCO

NON-VOTING DIRECTOR

CHIEF EXECUTIVE OFFICER

Clifford A. Hudis, MD, FACP, FASCO

President Trump
The White House
1600 Pennsylvania Ave
Washington, DC 20500

Vice President Pence
Old Executive Office Building
1650 Pennsylvania Avenue
Washington, DC 20501

The Honorable Nancy Pelosi
Speaker of the House
U.S. House of Representatives
Washington, DC 20515

The Honorable Mitch McConnell
Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
Washington, DC 20515

The Honorable Charles Schumer
Minority Leader
U.S. Senate
Washington, DC 20510

Dear President Trump, Vice President Pence, Speaker Pelosi, Majority Leader McConnell, Minority Leader McCarthy, and Minority Leader Schumer,

Caring for individuals with cancer raises unique challenges even when our health care systems are at their best. In this time of a national public health emergency, the Association for Clinical Oncology (the Association) and its affiliate organization, the American Society of Clinical Oncology (the Society), are working to support our nearly 45,000 members in providing care to patients with cancer and survivors- populations that are particularly vulnerable during this crisis.

The Association calls on the Administration and Congress to swiftly work together to meet the needs of patients and health care professionals.

Increase the Availability of Testing for Vulnerable Patients and Health Care

Professionals: We applaud the quick action already taken by the Administration and Congress to ease regulatory burdens to hasten approval of tests during this crisis. However, we continue to hear concerns from our members across the country about the lack of testing for their patients and their staff. Patients with cancer need testing if they are showing symptoms of COVID-19, if they have been exposed to infected individuals, or if it is clinically indicated prior to certain cancer treatments. In addition, many people with cancer have more than one chronic health condition, are immunocompromised, and at an increased risk for complications or worse outcomes if they develop COVID-19. Due to these vulnerabilities, it is also imperative that family or caregivers of cancer patients exposed to infection (asymptomatic) and/or exhibiting symptoms be tested.

Additionally, testing, including regular screening, for health professionals must be prioritized to ensure the safety of their patients and the availability of the workforce to treat them.

Increase the Availability of Personal Protective Equipment (PPE) for Health Care Professionals and Patients: Our members have raised the alarm about their practices running short of personal protective equipment (PPE). Some facilities report only having sufficient PPE for their staff for a few days. PPE is not only necessary to protect the oncology team as they treat patients, but also to protect vulnerable cancer patients from the spread of the virus. We are hearing of situations where physicians are having to extend the use of PPE for many days, or potentially weeks. This is not a safe or sustainable way to prevent the spread of COVID-19 and compounds the risks to both patients and the practitioners on the front lines of this crisis.

Provide Support for Physician Practices to Ensure Uninterrupted Patient Access to Care: Many practices are following the recommendations to postpone elective and non-essential procedures and screenings at this time. We strongly support this recommendation but note that it will result in financial hardship for practices and their staff. We are concerned about the viability of practices, particularly small and rural ones that treat underserved communities and are already under significant financial and operational strains. We ask that you consider additional financial aid and support for practices, including specifically interest-free loans. It is critical practices can stay open so that patient access is not impeded now or in the future after we recover from this crisis. We appreciate the potential of a delay in the application of sequester to Medicare payments, but do not believe this will be enough for many practices to survive. Given the likely long-term financial impact of this crisis, we urge permanent relief from sequester reductions. We would welcome the opportunity to explore other mechanisms that might be available to ensure practices can stay afloat.

Continue to Support the Use of Telehealth: We applaud the steps you have already taken to allow expanded use of telehealth to protect the health and safety of patients and health care professionals. These steps will protect patients by decreasing the possibility of exposure to COVID-19. We urge the Centers for Medicare and Medicaid Services (CMS) to continue to clarify the parameters of telehealth under the emergency declaration and urge you to ensure all payers allow its expanded use.

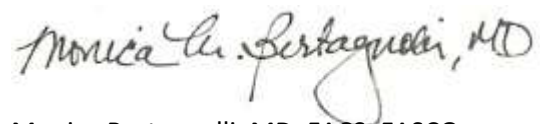
Implement Policies to Address Drug Shortages: We support the inclusion of elements from the *Mitigating Emergency Drug Shortages (MEDS) Act* in additional actions under consideration by Congress. The COVID-19 crisis has placed a spotlight on existing drug shortages and potential supply chain disruptions and has the potential to exacerbate them even more as the spread of the virus disrupts manufacturing around the globe. We urge Congress to pass measures that would prioritize Food & Drug Administration (FDA) review of drugs in shortage, increase manufacturer reporting and transparency, and spur agency coordination to reduce the number of drugs in shortage or have risk of manufacturing issues.

Our members are reporting that critical decisions about how to proceed with cancer treatment are currently being made with great fear, concern and uncertainty about whether it is safe to delay treatments in general or start or continue others. This is especially a concern in immune compromised patients but impacts everyone during the current public health crisis. The longer this crisis continues, the more delays there will be in screening, diagnosis, and treatment of cancer, which could potentially

worsen the overall health of the American people but also poses significant risks to people with cancer and those at high risk of developing cancer. Addressing the issues outlined in this letter urgently would help mitigate those harms.

Thank you for your leadership. The Association and its members stand ready to work with you on appropriate measures and to disseminate information quickly.

Sincerely,

A handwritten signature in black ink that reads "Monica Bertagnoli, MD". The signature is written in a cursive style with a large, stylized "M" and "B".

Monica Bertagnoli, MD, FACS, FASCO
Chair of the Board
Association for Clinical Oncology