



2019 Advocacy Accomplishments

# CHAMPIONS FOR CHANGE:

Leading the Fight to Conquer Cancer





## Dear Friends,

2019 was an exceptional year in our fight against cancer, and one that brought us closer to fulfilling our vision of a world without cancer.

The American Cancer Society Cancer Action Network (ACS CAN) advocated fiercely and relentlessly at each level of government to move our mission forward. We demanded that policymakers make cancer a national priority. We resisted attempts to weaken laws proven to help prevent death and suffering caused by cancer. We fought to preserve fundamental patient protections, and focused discussions on what it means to have access to affordable, quality health care. We established new partnerships in our work to achieve health equity for all communities.

Most importantly, we elevated the voices of cancer patients and survivors to ensure they were heard, loudly and clearly, in the halls of Congress, in state capitols and in communities nationwide.

Changing the reality of cancer requires a bold agenda, a forward-thinking strategy and unwavering determination to surmount any and all challenges. I am immensely honored to lead an organization that is uniquely able to influence public policy and drive impact that benefits the millions of Americans whose lives have been touched by cancer. I hope you'll [join us](#) as we relentlessly pursue a world without cancer.



Lisa A. Lacasse, MBA  
President, ACS CAN

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# ACS CAN Board of Directors

The ACS CAN Board of Directors is comprised of volunteers who lead ACS CAN in partnership with ACS CAN Chief Executive Officer Gary M. Reedy and President Lisa A. Lacasse.

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## In Memoriam: David Woodmansee



*ACS CAN lost one of our beloved employees and fierce cancer advocates, David Woodmansee, to cancer in September 2019. Known by colleagues as ACS CAN's Mayor, Dave's career began in Connecticut, where he developed his love for government relations and advocacy.*

*He served as part of the first staff team when ACS CAN was formed in 2001 and most recently was director, Access to Care on the State and Local Campaigns Team. Throughout his 30-year career with ACS CAN and the American Cancer Society, Dave never met a stranger and offered expertise, guidance and friendship to every volunteer, staff member and partner with whom he engaged. In 2015, Dave received the Alan Mills Award, ACS CAN's highest staff honor, in recognition of his incredible passion and dedication to passing federal, state and local laws that improved the lives of hundreds of thousands of cancer patients, survivors and their families. His lasting impact on ACS CAN and our mission will never be forgotten.*



## What is ACS CAN?

The American Cancer Society Cancer Action Network (ACS CAN) is making cancer a top priority for public officials and candidates at the federal, state and local levels. ACS CAN empowers advocates across the country to make their voices heard and influence

evidence-based public policy change, as well as legislative and regulatory solutions that will reduce the cancer burden. As the American Cancer Society's nonprofit, nonpartisan advocacy affiliate, ACS CAN is critical to the fight for a world without cancer.

### Involvement

ACS CAN empowers cancer patients, survivors, their families and other experts on the disease, amplifying their voices in public policy matters that are relevant to the cancer community at all levels of government. We mobilize our powerful grassroots network of cancer advocacy volunteers to bring awareness to lawmakers on cancer issues that matter to their constituents.

ACS CAN staff work closely with the American Cancer Society's research and cancer control leadership to identify and develop key public policies firmly rooted in scientific evidence that promote access to prevention and early detection, treatment and follow-up care. ACS CAN uses our expert lobbying, policy, grassroots and communications capacity to advance evidence-based solutions that reduce death and suffering from cancer.

### Influence

Like the American Cancer Society, ACS CAN is an evidence-based organization. ACS CAN is looked to in the public health community as a leader, engaging scientists, researchers, medical providers, advocates and patients to influence critical public health policies important to our cancer mission.

ACS CAN is strictly nonpartisan and does not endorse, oppose or contribute to candidates or political parties. In combination with our evidence-driven work, we are considered a trusted source of health policy information by legislators, policymakers and opinion leaders. The only side ACS CAN takes is the side of cancer patients.

# 2019 Impact



Nearly

# 81,400

**volunteers nationwide**

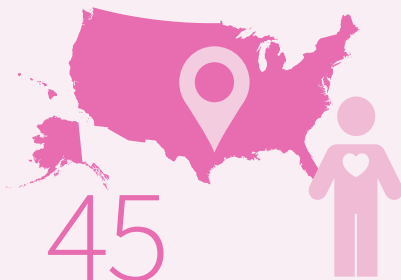
took action with ACS CAN, such as signing a petition or directly asking their lawmakers to support our advocacy efforts.



# 40,000

**Lights of HOPE**

illuminated the Lincoln Memorial Reflecting Pool as part of ACS CAN Leadership Summit & Lobby Day.



# 45

**public policy forums**

across the country highlighted the importance of cancer research, access to clinical trials and affordability of cancer care.

ACS CAN advocated for

# 3 OF THE TOP 5

**health care bills**

with the most House cosponsors.



ACS CAN

# PROTECTED

access to cutting-edge therapies for cancer patients and survivors on Medicare.

ACS CAN helped secure more than

## \$829 MILLION

in appropriations

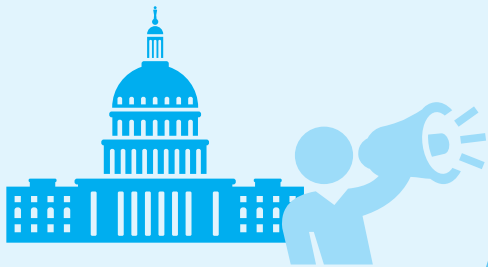
at the state and local levels . . .



. . . including

## \$459 MILLION

to fund lifesaving tobacco prevention and cessation programs.



More than

## 4,500

ACS CAN volunteers and staff

attended Day at the Capitol events across the country.



Nearly

## 61%

of the U.S. population

is protected by comprehensive smoke-free laws covering workplaces, including restaurants and bars, thanks in large part to ACS CAN's ongoing advocacy efforts at the state and local levels.

## 2019

ACS CAN was instrumental in the passage of a bipartisan funding bill that included a

## \$2.6 BILLION

increase in medical research funding at the NIH,

including a \$296 million increase for the NCI. The bill also included:

- **\$50 million** to support cancer registries
- **\$10 million** for cancer control programs at the CDC
- **\$2.5 billion** for federally qualified health centers



# 2019 Advocacy Accomplishments

This report includes key accomplishments from 2019. However, it is not an exhaustive list of all of the advocacy work that ACS CAN staff and volunteers did across the country. For more information on ACS CAN's advocacy efforts, visit our website at [fightcancer.org](https://fightcancer.org).

## Sustained Investments in Cancer Research

Advancements in cancer research are essential to driving discovery, saving lives and advancing our fight against this disease. The ability to ensure innovative breakthroughs reach those who need them most depends entirely on sustained, year-over-year increases in funding for cancer research.

In 2019, the National Institutes of Health (NIH) provided 50,000 extramural grants to 300,000 researchers at 2,500 universities, medical schools and other research institutions across all 50 states.

### Increasing Research Funding at All Levels of Government

Throughout 2019, Congress made it clear that funding for cancer research and cancer control programs is a priority. ACS CAN strongly advocated throughout the year for sustained federal funding at the NIH and the National Cancer Institute (NCI), and celebrated when a [year-end bipartisan funding package](#) included significant funding for cancer research and prevention programs, including:

- + A \$2.6 billion increase for the NIH, including a \$296 million increase for the NCI
- + \$25 million for the continued implementation of the Survivorship, Treatment, Access and Research (STAR) Act, the most comprehensive childhood cancer legislation ever passed by Congress
- + A \$50 million childhood cancer data initiative to facilitate a connected data infrastructure and integrate multiple data sources to make data work better for patients, clinicians and researchers
- + A \$10 million increase for cancer control programs at the Centers for Disease Control and Prevention (CDC), including increases for skin cancer, prostate cancer and ovarian cancer programs, as well as a \$20 million increase for the Office on Smoking and Health
- + A new \$50 million initiative to support a data modernization effort at the CDC, with language that directs the organization to prioritize advancements in cancer registries as part of the effort. [Cancer registries](#) provide a critical road map in the fight against cancer, and this is the first funding increase to the program since fiscal year 2010 (FY2010).

Thanks to potentially lifesaving advancements in research, there are more than 16.9 million cancer survivors in the U.S.





## Texans Vote ‘Yes’ to Cancer Research Funding

Texas showed its commitment to furthering cancer prevention and discovery when more than 63% of voters said ‘Yes’ to Proposition 6 during the November elections, allowing the state legislature to increase the maximum amount of bonds for the Cancer Prevention and Research Institute of Texas (CPRIT) by \$3 billion. CPRIT has funded more than 5.7 million prevention services since its inception, and since 2010 has provided \$2.5 billion in research grants. The ACS CAN Texas team was instrumental in securing this mission-critical win, which will ensure world-class cancer care continues throughout the state for the next decade.

### Advocating as One Voice Against Cancer



ACS CAN is the founder and the leading organization of One Voice Against Cancer (OVAC), a coalition of leading nonprofits unified by the importance of funding cancer research. During the 19th annual OVAC Lobby Day, nearly 100 volunteers from 32 states and 50+ cancer organizations engaged in 144 meetings with members of Congress and their staff, advocating for sustained funding for the NIH and the NCI.

ACS CAN volunteers and staff continue to advocate for critical cancer research funding at the state level. In 2019, the **Iowa** team successfully maintained \$150,000 in funding directed to melanoma research at The University of Iowa. In **Hawaii**, legislation passed in June that includes a one-year appropriation of \$350,000 to the University of Hawaii Cancer Research Center to investigate factors contributing to the state’s highest-ever liver and bile duct cancer mortality rates.



## Breast Cancer Research Stamp

Since the U.S. Postal Service's breast cancer research stamp was introduced in 1998, it has raised more than \$89 million for cancer research, including partial funding for

a landmark study on the benefits of chemotherapy for women with breast cancer who have certain genetic markers. Without reauthorization in 2019, the future of the stamp was in jeopardy. ACS CAN volunteers weighed in with House and Senate offices on the importance of the stamp, and in December the breast cancer research stamp was reauthorized until 2027.

## ACS CAN Volunteers Share Their Stories at Childhood Cancer Action Days

Ten ACS CAN volunteers from seven states joined more than 200 other childhood cancer patients, survivors and caregivers on Capitol Hill for the Alliance for Childhood Cancer's eighth annual Childhood Cancer Action Days.

Advocates asked their lawmakers to:

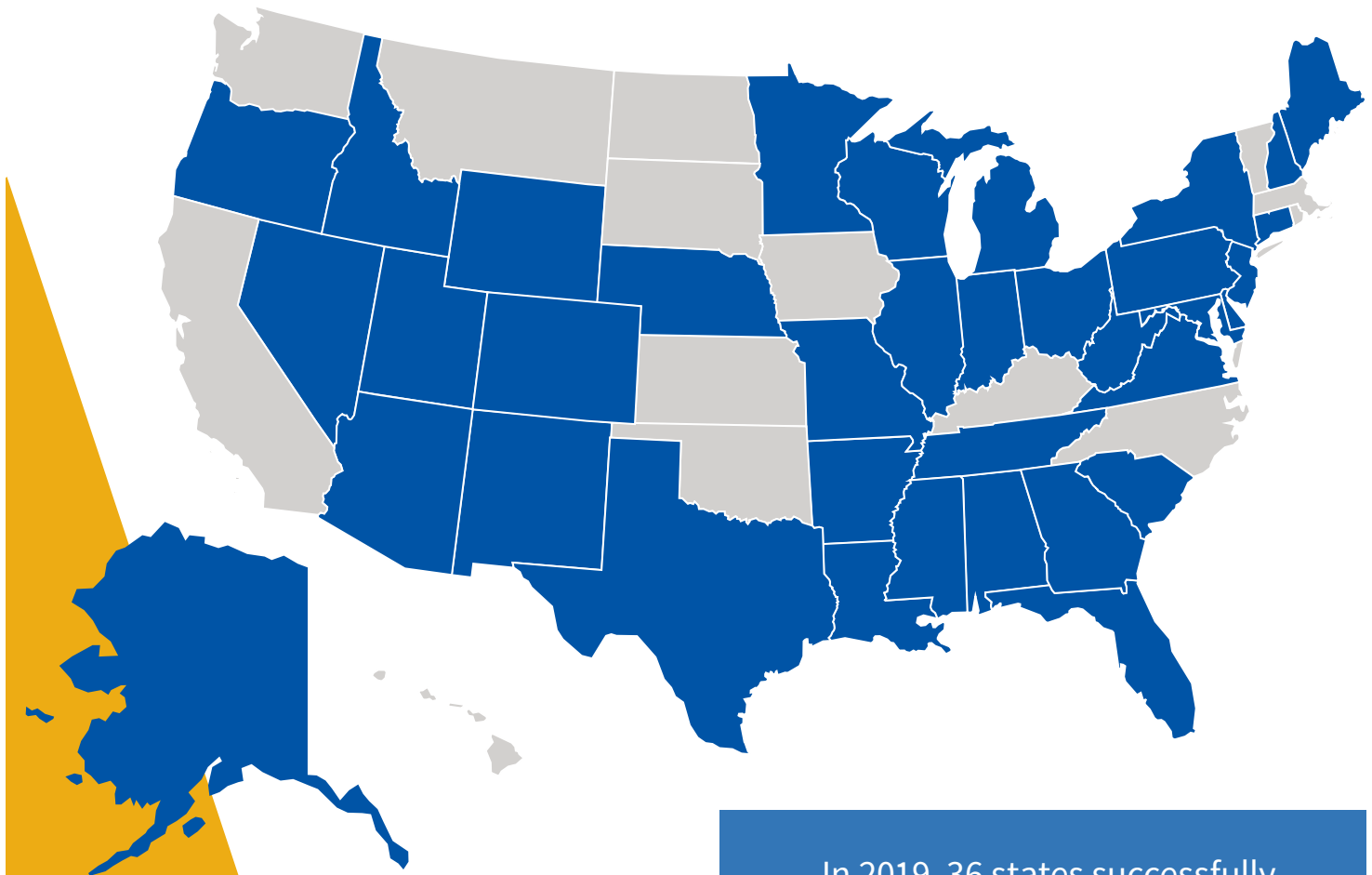
- + Increase research funding for the NIH and the NCI.
- + Fully fund the Survivorship, Treatment, Access and Research (STAR) Act, the comprehensive childhood cancer research bill that was signed into law in 2018.
- + Support the Palliative Care and Hospice Education and Training Act (PCHETA) to improve quality of life for survivors and their families.

# Cancer Prevention and Early Detection

## Breast and Cervical Cancer Prevention

The CDC's National Breast and Cervical Cancer Early Detection Program (NBCCEDP) is critical to increasing access to and awareness of potentially lifesaving cancer screenings for low-income, uninsured and underinsured women. Protecting funding for breast and cervical cancer screening and prevention programs at both the state and federal levels remains a top priority for ACS CAN, and one in which we continue to make a significant impact across the country.

In **West Virginia** for the 10th year in a row, ACS CAN advocates secured critical funding for the state's Breast and Cervical Cancer Diagnostic and Treatment Fund. **Ohio** lawmakers expanded the state's Breast and Cervical Cancer program eligibility criteria to provide more vulnerable and underserved women the opportunity to access potentially lifesaving screenings. In **Illinois**, ACS CAN advocated successfully for a \$1 million increase for the breast and cervical cancer program, and **Colorado** advocates passed legislation calling for a 10-year extension for the state breast and cervical cancer treatment program for uninsured women.



In 2019, 36 states successfully protected, maintained or increased funding for breast and/or cervical cancer screening programs.

## Colorectal Cancer Prevention

Nearly all colorectal cancers are preventable or treatable when detected at an early stage. Despite this, colorectal cancer is the second-leading cause of cancer death among men and women combined in the U.S.

Out-of-pocket costs create financial barriers that discourage use of recommended screening services, particularly for Medicare beneficiaries on a fixed income. A loophole currently exists that results in a surprise bill of as much as \$350 for Medicare patients if a polyp is found and removed during a screening colonoscopy. ACS CAN strongly advocated throughout 2019 to close the loophole and stop surprise bills for seniors receiving potentially lifesaving screenings, which are critically important to better detecting and treating colorectal cancer in its early stages.

- + ACS CAN worked to advance the Removing Barriers to Colorectal Cancer Screenings Act through Congress. In December 2019, the House of Representatives passed comprehensive drug pricing legislation that included a provision to eliminate this cost-sharing loophole.

- + The Removing Barriers to Colorectal Cancer Screenings Act was one of the most-supported pieces of legislation in Congress, with 337 House cosponsors and 61 Senate cosponsors in 2019.
- + ACS CAN led 43 other patient and provider organizations in sending a letter to President Trump, asking him to exercise his administrative authority to fix the loophole.
- + ACS CAN CEO Gary M. Reedy penned an [op-ed in USA Today](#) calling on President Trump to fix the Medicare loophole.

ACS CAN will continue to advocate to close the loophole and stop surprise bills for seniors receiving lifesaving screenings.

State volunteers and staff urged their policymakers throughout 2019 to dedicate funding for colorectal cancer screening and control programs. **Alabama, Arkansas, North Dakota** and **South Carolina** each maintained or increased appropriations for their state colorectal cancer screening programs.

In 2018, the American Cancer Society updated its science-based colorectal cancer screening guideline, recommending that people at average risk start regular screening at age 45 instead of age 50. To ensure all those at risk of the disease are able to access and afford potentially lifesaving screenings, ACS CAN worked to pass legislation that requires insurers to cover all recommended colon cancer screening tests in accordance with the updated guideline. Our team in **Maine** was successful in convincing state lawmakers to pass a bill in 2019 requiring private health insurance plans to cover these potentially lifesaving cancer screenings starting at age 45.



## Skin Cancer Prevention

One of the most avoidable risks of skin cancer – the most commonly diagnosed cancer in the U.S. – is exposure to ultraviolet (UV) radiation. ACS CAN advocates for laws restricting the use of indoor tanning devices for minors, a policy that is proven to significantly reduce this increased risk of skin cancer. In 2019, both **Maryland** and **Maine** passed legislation prohibiting the use of indoor tanning devices by youth under the age of 18. The achievement in Maine was the result of a nine-year campaign spearheaded by ACS CAN volunteers and staff.

## Healthy Eating and Active Living Environments

For people who don't use tobacco, the greatest behavioral risk factors for cancer are diet, levels of physical activity, amount of alcohol consumption and weight. ACS CAN advocates have worked with their state

policymakers to develop and implement ways to make healthy choices more accessible.

**Delaware, Hawaii** and **New York City** passed legislation in 2019 ensuring that healthy beverages are the default drink in children's meals; the ACS CAN **New York City** team also secured \$20 million in funding for physical education programming. The **Michigan** team played a critical role in securing increased funding for initiatives to increase access to healthy foods in schools around the state. In **New Jersey**, new legislation requires the state Department of Health to develop a Healthy Corner Store Program aimed at improving the availability of fresh produce and healthy food in small food retailers in rural, urban and low- and moderate-income areas. **West Virginia** committed \$500,000 in new funding to address obesity rates throughout the state.

## Improving Quality of Life for Cancer Patients and Survivors

Cancer patients, survivors and their families deserve the best quality of life possible, from the point of diagnosis through survivorship. ACS CAN frequently engages with state and federal policymakers to support policies that expand access to, and understanding of, palliative care, a type of coordinated care that focuses on treating the whole patient as well as the disease.

ACS CAN has led the charge to advance the Palliative Care and Hospice Education Act (PCHETA) through Congress, and in October 2019 the bill was passed by the U.S. House of Representatives with overwhelming bipartisan support.

By the end of 2019, PCHETA had a significant number of bipartisan cosponsors: 295 in the House and 37 in the Senate.

Once passed, PCHETA will:

- + Increase federal research funding for palliative care, including pain and symptom management.
- + Establish palliative care education and training programs for doctors, nurses and other health professionals.
- + Create a national public education and awareness campaign to educate patients and providers about the availability and benefits of palliative care.

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ACS CAN volunteers and staff were instrumental in asking their lawmakers to advance this critical legislation.

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## ACS CAN Leads Sixth Annual Patient Quality of Life Coalition Lobby Day

The Patient Quality of Life Coalition (PQLC) – a coalition of over 40 organizations advocating for patients and families facing serious illness – held its sixth annual lobby day in 2019. The goal of the event was to encourage lawmakers to help move PCHETA through both chambers of Congress.

- + More than 80 advocates from 20 states participated in 90 Capitol Hill meetings.
- + PQLC and ACS CAN, which is the founder and a leading member of the coalition, led a successful social media day of action targeting key members of Congress. The hashtags #MakeTodayBetter and #PQLCLobbyDay generated more than 735 tweets from 525 unique authors and more than 2 million impressions.
- + The coalition ran print and digital advertisements in Capitol Hill publications in conjunction with PQLC Lobby Day.



When you're living with a serious illness, quality of life counts.

Support the Palliative Care and Hospice Education and Training Act (PCHETA) (H.R. 647) to help patients live better.

The PCHETA bill increases access to palliative care—a team-based approach designed to help manage pain and other symptoms, explain treatment options, and ultimately give patients more control over their care. Passing this bill will improve quality of life for millions of Americans. Learn how at [patientqualityoflife.org](http://patientqualityoflife.org)



At the state level, ACS CAN has created model legislation that establishes a Palliative Care Advisory Council with experts to build out [palliative care programs](#) and education initiatives. In 2019, **Kentucky, Louisiana** and **New Jersey** became the latest states to establish a Palliative Care Interdisciplinary Advisory Council and Professional Information and Education Program, a significant step in all three states toward greatly improving patient quality of life. The **Massachusetts** state budget included a \$1 million increase in funding for pediatric palliative care programs that support children with serious illness and their families.

- + 72% of U.S. hospitals with 50 or more beds now have a palliative care team.
- + Research shows that when provided alongside curative treatment, palliative care can lead to improved health outcomes.

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# An estimated 2.3 million individuals with a history of cancer rely on the health care coverage provided by their state Medicaid program.

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## Access to Quality Health Care

Access to affordable, quality health care is an essential piece of ACS CAN's mission to reduce death and suffering from cancer. Research clearly demonstrates that insurance status directly impacts health outcomes, and that those who are insured are diagnosed earlier when cancer is easier and less expensive to treat. ACS CAN works diligently at every level of government to expand access to affordable care for all cancer patients, survivors and those most at risk of the disease.

### Medicaid Covers US

In partnership with the American Cancer Society and the Robert Wood Johnson Foundation, ACS CAN in 2019 continued its Medicaid Covers US campaign, a national public education project that engages community members, health care providers, patients and their families, policymakers and the public in dialogue about the impact that Medicaid has on the health of patients, health care providers and state and local economies. With an emphasis on eight states – **Alabama, Georgia, Kansas, Louisiana, North Carolina, Oklahoma, Tennessee** and **Virginia**, the campaign fosters discussion on the crucial role that Medicaid plays in improving the well-being of communities. The project, available at [medicaidcoversus.org](https://www.medicaidcoversus.org), includes three documentary-style films and a [digital storybook](#) that share the experiences of individuals, families and health care providers who have seen firsthand how Medicaid sustains communities, health systems and families. Medicaid



Covers US is a crucial resource in ACS CAN's ongoing work to highlight the benefit of access to affordable health insurance coverage for those who need it most.

### Increasing Access to Care through Medicaid

Our ability to eliminate health and cancer disparities is dependent on providing people with comprehensive health coverage that is affordable regardless of income level. Expanding access to health care through Medicaid is a key opportunity for states to utilize federal funds to help more Americans access the care they need.

In **Montana**, ACS CAN helped pass a reauthorization of the expansion of the state's Medicaid program in 2019, and in **Idaho** advocates successfully defeated attempts to repeal the state's Medicaid program.

An increasing number of states have sought flexibility in administering the Medicaid program with 1115 Research and Demonstration waivers, many of which include provisions that could seriously hinder patient access to care, such as work or administrative requirements. In 2019, ACS CAN advocates successfully prevented the implementation of work requirements for Medicaid beneficiaries in **Iowa, Maine, Missouri, New Hampshire, West Virginia** and **Wyoming**, ensuring cancer patients are able to maintain eligibility for their health care coverage.

In June 2019, ACS CAN joined an *amicus curiae* (friend-of-the-court) brief in an appeal to the U.S. Court of Appeals for the District of Columbia Circuit, arguing that **Kentucky's** Medicaid work requirements will cause thousands to be disenrolled from Medicaid in the state and lead to worse health outcomes for cancer patients who rely on Medicaid for coverage. The appeal was in support of a ruling that blocked HHS Secretary Alex Azar's approval of Medicaid waivers with work and reporting requirements and other eligibility and enrollment restrictions in Kentucky.

## Fighting to Preserve Patient Protections

In December 2019, the U.S. Court of Appeals for the Fifth Circuit ruled in the case *Texas v. United States* that the individual mandate without a tax penalty was unconstitutional, sending the case back to the District Court to determine if the mandate can be "severed" from the rest of the health care law known as the Affordable Care Act and whether a ruling should be limited to just plaintiff states or apply to all states. The ruling causes uncertainty for the millions of Americans who rely on the health care law to access comprehensive health coverage.

Sixteen patient groups joined ACS CAN to file an *amicus curiae* brief on behalf of the millions of patients with pre-existing conditions who depend on the critical protections provided by the health care law. The groups provided the court with extensive scientific data linking health insurance coverage with medical outcomes and detailed the potentially devastating impact on patients should the court rule the health law invalid.

ACS CAN continues to advocate on behalf of the cancer community and ensure that the impact on cancer patients is considered in any future legal decisions.

Keysha Brooks-Coley (right), ACS CAN vice president, Federal Advocacy and Strategic Alliances, testified in January before a House Ways and Means Committee about how the patient protections included in the Affordable Care Act have improved cancer patients' access to health care.





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# Nearly 20 million people gained access to health insurance coverage as a result of the enactment of the Affordable Care Act.

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Throughout 2019, ACS CAN worked hard at the state level – including in **Maine, Nevada** and **New Hampshire** – to shore up patient protections and ensure cancer patients and survivors are able to continue to access the care they depend on, regardless of their health status or if they have pre-existing conditions.

## Improving Patient Access to Health Care

Seeking ways to control costs, health insurers often put in place utilization management techniques. Some practices – such as requiring prior authorizations before a prescription can be filled or step therapy requiring patients to try and fail on an insurer-chosen drug before gaining access to another, more expensive drug – may delay access to potentially lifesaving care for patients.

ACS CAN supported a bill in **Kentucky** in 2019 that streamlines the state’s prior authorization process to make it timelier and more transparent for patients. Bills passed in **Georgia, Maine, Oklahoma** and **Virginia** to protect patients with serious illnesses by creating an exception process for step therapy when appropriate, providing quicker access to the treatment they need.

Medication synchronization allows pharmacists to coordinate all of a patient’s maintenance prescription medications to be filled on the same date, promoting better patient outcomes and adherence to their medication regimen. ACS CAN successfully advocated for the passage of medication synchronization legislation in **Indiana, Nebraska** and **Pennsylvania** in 2019.

## Survivor Views: Ensuring the Voices of Cancer Survivors Are Heard

In June 2019, ACS CAN launched [Survivor Views](#), an initiative designed to further incorporate the experiences and perspectives of cancer survivors in the policy process. The initiative established a panel of more than 3,000 cancer survivors to participate in regular surveys based on ACS CAN priority issues, such as experiences with pain and palliative care, how survivors access and pay for care and their understanding and preferences related to genetic testing, diagnostic testing oversight and use of medical data for research. Data generated from these surveys will directly support and inform ACS CAN’s policymaking process.

## Protecting Patients from Inadequate Health Insurance

Short-term, limited-duration (STLD) health plans can deny or charge people more for coverage based on their health status, such as cancer, and are exempt from covering essential health services, like hospitalization. ACS CAN strongly opposed a finalized rule by the Department of Health and Human Services (HHS) in 2019 that allowed for the extension of these plans for up to 36 months, and led 12 other patient organizations to file an *amicus curiae* brief in support of a federal lawsuit filed to stop the final rule, arguing that the plans would destabilize the insurance market and force those who need comprehensive coverage to pay more or be unable to obtain the coverage they need. The court ruled in favor of preserving the rule, and ACS CAN anticipates filing another *amicus curiae* brief in higher court appeals. ACS CAN will continue to work diligently to bring the patient voice to this critical fight for adequate health care.

ACS CAN led efforts at the state level to curtail the extension of the STLD plans in 2019. In **Missouri**, a proposal to allow short-term insurance policies to extend to a year, rather than six months, was successfully defeated. **Maine, Rhode Island** and **Virginia** also successfully opposed the expansion of short-term insurance plans.

ACS CAN released a report in 2019 illustrating the inadequacies of short-term health insurance plans by examining short-term plans for a hypothetical breast cancer patient in six states. In each scenario, we found that the patient would be exposed to significant out-of-pocket costs, which in some cases would be tens of thousands of dollars.

ACS CAN led nearly 60 patient and provider organizations to launch this advertising campaign in January 2019, urging the Department of Health and Human Services to stop the proposed changes to Medicare part D, which could impact timely access to affordable medication for patients.

## Committing to Reducing Patient Drug Costs

Reducing the cost of prescription drugs is a crucial piece of efforts to improve patient affordability of health care. A law implemented in **New Jersey** in 2019 requires pharmacy benefit managers and payers to charge patients the actual cost of a prescribed drug if the cost is lower than patients' out-of-pocket cost. **Virginia** and **West Virginia** adopted legislation that helps cancer patients pay for prescription medicines by requiring insurance companies to count copayment assistance payments toward a patient's cost-sharing responsibilities.

At the federal level, the House of Representatives passed legislation that included multiple provisions, including a cap on out-of-pocket costs in Medicare Part D, aimed at reducing prescription drug prices. ACS CAN has long advocated for and strongly supports imposing a cap on out-of-pocket prescription drug costs, which could result in more affordable and predictable expenses for Medicare beneficiaries with cancer, many of whom rely on Part D drug therapies to treat their disease and prevent recurrence.

**Rx** WHEN YOU LIMIT DRUG THERAPIES, YOU THREATEN LIVES.

Every patient is different. A drug therapy that works for one may not work for another. That's why for more than a decade, Medicare beneficiaries have had access to cutting-edge FDA-approved therapies included in the "six protected classes" to treat their cancer, organ transplants, epilepsy, HIV/AIDS and mental illness. Our patients know this policy works and it saves lives. But a proposal from the administration could interfere with what doctors think is the best course of treatment for their patients and if finalized, could delay patients' access to lifesaving innovative therapies. It's wrong and it will put patients' lives at risk.

USE AS DIRECTED.  
Tell Secretary Azar and Congress: **Protect patients' lives and stop the proposed changes to Medicare Part D's Six Protected Classes.** Don't delay access to lifesaving medicines for patients living with cancer, organ transplants, epilepsy, HIV/AIDS or mental illness.

- Addario Lung Cancer Medical Institute
- Advocates for Responsible Care
- Alliance for Patient Access
- American Autoimmune Related Diseases Association
- American Brain Coalition
- American Cancer Society Cancer Action Network
- American Heart Association
- American Kidney Fund
- American Lung Association
- American Medical Association
- American Society of Clinical Oncology
- American Society of Consultant Pharmacists
- Bladder Cancer Advocacy Network
- Bonnie J. Addario Lung Cancer Foundation
- CancerCare
- Cancer Support Community
- Center for Health Law and Policy Innovation
- Colorectal Cancer Alliance
- COPD Foundation
- Deadliest Cancers Coalition
- Disability Rights Legal Center
- Epilepsy Foundation
- Esophageal Cancer Action Network, Inc.
- Fight Colorectal Cancer
- FORCE: Facing Our Risk of Cancer Empowered
- Global Healthy Living Foundation
- Global Liver Institute
- ICAN, International Cancer Advocacy Network
- International Myeloma Foundation
- Long Term Care Community Coalition
- Lung Cancer Alliance
- LUNGevity Foundation
- Lupus and Allied Diseases Association, Inc.
- Lupus Foundation of America
- MAPRS Coalition
- Men's Health Network
- Mental Health America
- Metastatic Breast Cancer Alliance
- Metastatic Breast Cancer Network
- METAvivor Research and Support
- Movement Disorders Policy Coalition
- NASTAD
- National Alliance on Mental Illness
- National Blood Clot Alliance
- National Brain Tumor Society
- National Coalition for Cancer Survivorship
- National Comprehensive Cancer Network
- National Council for Behavioral Health
- National Health Council
- National Hemophilia Foundation
- National Infection Center Association
- National Kidney Foundation
- National Organization for Rare Disorders
- National Patient Advocate Foundation
- Susan G. Komen
- The AIDS Institute
- Tuberculosis Sclerosis Alliance

SIGNATURE: Paid for by American Cancer Society Cancer Action Network

Make your voice heard at [fightcancer.org/sixprotectedclasses](https://fightcancer.org/sixprotectedclasses)

## Amplifying the Voices of Cancer Patients and Survivors

In 2018, the Department of Health and Human Services (HHS) announced a proposed rule around Medicare Part D's six protected classes policy that, if finalized, could have dramatically impacted timely access to affordable medication and quality care for cancer patients enrolled in the program. Specifically, HHS proposed allowing plans to use additional utilization management techniques, like prior authorization, for all drugs in these classes.

ACS CAN executed a five-month-long advertising, grassroots and lobbying campaign in 2019 to express widespread patient opposition to the proposed changes.

- + January: Along with nearly 60 other patient and provider organizations, ACS CAN launched print and digital ads calling on HHS to stop the proposed changes.
- + ACS CAN advocates shared their concerns directly with policymakers:
  - ▷ The #CoverCancerRx hashtag was used nearly 1,380 times throughout the year, and ACS CAN's posts were shared more than 1,400 times.
  - ▷ 8,500 emails were sent to HHS Secretary Alex Azar and members of Congress.
  - ▷ 7,800 calls were made to members of Congress, urging them to weigh in on the issue.
- + March: ACS CAN met with members of Congress to voice our strong opposition to the proposed rule and hosted a congressional briefing to present the results of a new nationwide survey of cancer patients, caregivers and doctors that detailed the significant negative impact the policies could have on cancer patients who receive their care through Medicare.

- + May: ACS CAN launched a series of TV ads featuring our volunteers explaining how the proposed rule could affect their access to the potentially lifesaving medicines.
- + The TV ads aired more than 100 times in the Washington, D.C., market on cable and broadcast outlets.

Just two days into the second phase of ACS CAN's campaign, HHS issued its final rule for Medicare Part D, which did not include all of the proposed changes to the six protected classes policy.

The decision was a direct result of collective action by ACS CAN staff and volunteers, making it clear that the voices of cancer patients were heard loud and clear.



Jennifer Wall, Cancer survivor and ACS CAN volunteer

In recognition of our successful strategic communication campaign, ACS CAN received a Silver Award from the 2019 Modern Healthcare Marketing Impact Awards.

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# Tobacco use is the leading cause of preventable death nationwide.

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## Reducing Tobacco's Toll

Tobacco use represents a significant, devastating burden on our nation's health. Almost one-third of cancer deaths in our country are still caused by smoking.

ACS CAN works persistently and strategically at each level of government to advance strong, evidence-based tobacco control policies that are proven to effectively prevent people, particularly youth, from starting to use tobacco, as well as encourage current users to quit.

## Protecting Kids from Flavored Tobacco Products

Tobacco use among youth reached epidemic levels in 2019, fueled both by the proliferation of flavored tobacco products on the market and the absence of the Food and Drug Administration (FDA) exercising its full authority to regulate all tobacco products, including e-cigarettes. The tobacco industry uses fruit, candy, mint and menthol flavors to attract and addict youth to its deadly products.



In response to the skyrocketing rates of youth use of e-cigarettes, policymakers at every level of government took significant steps to address the epidemic of tobacco use among youth. In September 2019, President Trump stated his intention to remove all flavored e-cigarettes from the market. ACS CAN and our partners strongly supported the administration's plan and urged its immediate implementation. In response to reports that the administration was considering weaker guidance that allowed exemptions for menthol flavors, ACS CAN led public health partners in a [print and television advertising campaign](#) calling on President Trump to put children's health over the tobacco industry's profits and remove all flavored e-cigarettes from the market. ACS CAN CEO Gary M. Reedy attended a meeting at the White House to urge the president to protect the next generation from a lifetime of addiction by moving forward with his original and comprehensive plan.

State and local policymakers across the country introduced policies and regulatory solutions in 2019 in an attempt to curb the public health crisis of youth tobacco use, and ACS CAN monitored policies and engaged with elected officials to make clear that tobacco control policies should comprehensively protect youth from all flavored tobacco products. Twenty-four localities in **California** – including **Los Angeles County** and **Sacramento** – passed ordinances restricting the sale of all flavored tobacco products, including menthol cigarettes, and voters in **San Francisco** overwhelmingly opposed an industry-backed ballot measure that would have overturned an ordinance restricting the sale of flavored tobacco products. In addition, **New York City** passed legislation prohibiting the sale of flavored e-cigarettes.

More than 80% of teens who have ever used a tobacco product started with a flavored product.

ACS CAN also strongly advocated for federal legislation aimed at protecting children from the dangers of flavored tobacco products. ACS CAN launched an advertising campaign in support of the Reversing the Youth Tobacco Epidemic Act of 2019, which would prohibit the sale of nearly all flavored tobacco products, including mint and menthol products, and raise the minimum age of sale of tobacco products to 21, had 103 House cosponsors at the end of 2019.

### Victory on Premarket Review of Tobacco Products

In a major victory for public health, a federal judge set a May 2020 deadline for e-cigarette manufacturers to apply to the FDA and submit their products for public health review if they want to keep their products on the market. ACS CAN and our partner public health groups brought the case, challenging the FDA's decision to allow e-cigarettes and cigars to remain on the market for years without review. The years of delay allowed the tobacco industry to market its products to teens, addicting a new generation to those products.

### FDA's Ability to Regulate E-cigarettes

In a separate legal challenge by the tobacco industry, the U.S. Court of Appeals for the District of Columbia Circuit upheld the FDA's authority to regulate e-cigarettes in their entirety by: requiring a manufacturer show that the product

More than 5 million middle and high school students report using e-cigarettes.



IT SHOULDN'T  
BE SO EASY  
TO HIDE  
NICOTINE  
ADDICTION  
BEHIND  
E-CIGARETTE  
FLAVORS.

It's time to stop the tobacco industry from using flavors to attract kids. As the FDA continues to delay regulation, Congress must act. Cosponsor the Reversing the Youth Tobacco Epidemic Act (H.R. 2339) and the SAFE Kids Act (S. 655/H.R. 1498).

Learn more at [fightcancer.org/hide](http://fightcancer.org/hide).



is consistent with public health, upholding a ban on free samples and requiring scientific proof to make claims that a product is safer. ACS CAN had filed *amicus* briefs supporting the FDA at trial and on appeal.

### Graphic Warnings Show the Dangerous Reality of Tobacco

As a direct result of a lawsuit filed by the American Cancer Society, ACS CAN and other public health groups after the FDA continuously delayed issuing its required warnings, a federal court ordered the agency to issue a proposed rule in August 2019. After analyzing the draft graphic warnings, ACS CAN joined with 39 other public health groups to support the warnings, providing scientific data and legal arguments to bolster the agency's actions in the inevitable legal challenge to come from the tobacco industry. The final rule was to be submitted in March 2020.

## Working toward a Smoke-free Nation

ACS CAN has worked across the country to implement strong smoke-free ordinances that protect everyone's right to breathe clean air.

**California** passed legislation in 2019 ensuring all state parks and beaches are tobacco-free. Thirteen localities in **Mississippi**, 10 in **Louisiana**, four in **California**, two in **Colorado, Kentucky, Massachusetts** and **Minnesota** and one in **Georgia, Indiana, Michigan, Missouri, Texas, Washington** and **Wisconsin** passed smoke-free ordinances. **Florida, Guam, Minnesota, Nevada** and **South Dakota** strengthened existing statewide smoke-free laws to include electronic cigarettes, a critical step to ensure existing legislation remains as strong and effective as possible and we don't risk renormalizing tobacco use.

## Atlanta Goes Smoke-free

ACS CAN has led a years-long campaign with local and national partners to implement a smoke-free workplace ordinance throughout **Atlanta, Georgia**, the home of the American Cancer Society global headquarters and one of the last major U.S. cities to go smoke-free. After strategic engagement with City Council members, building community support throughout Atlanta around the health

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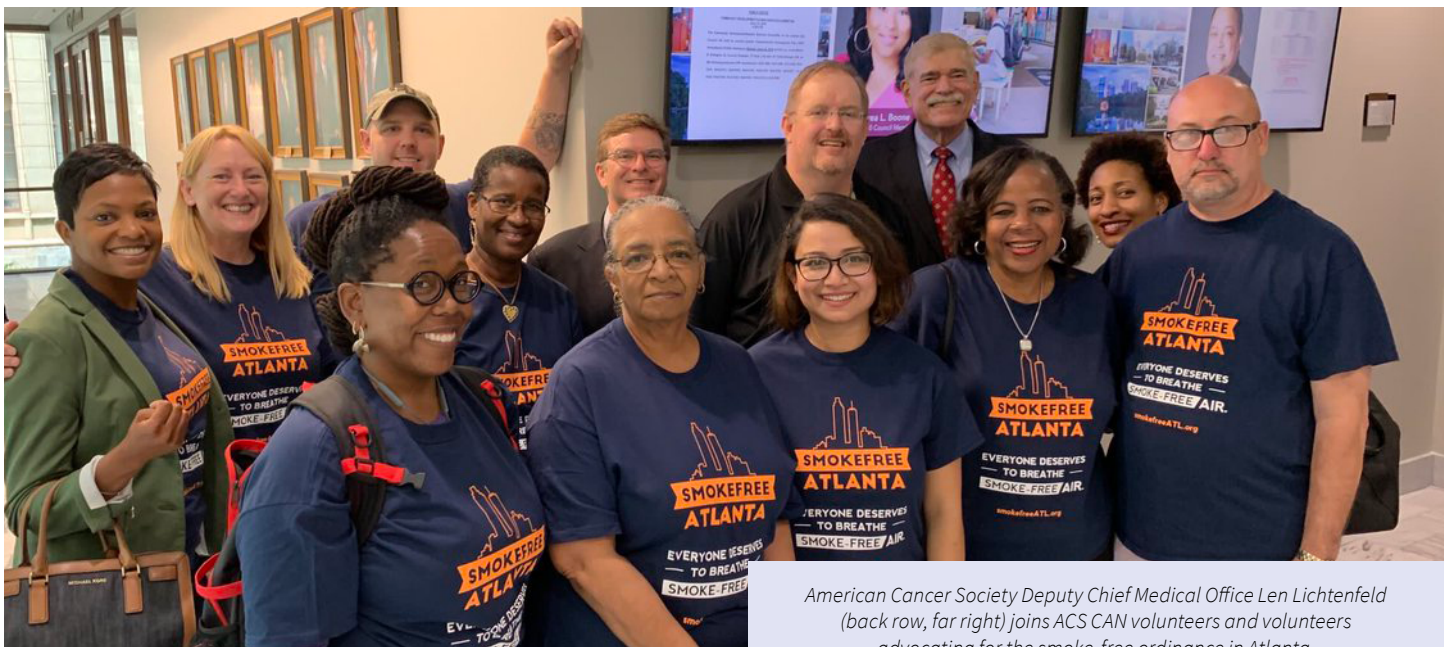
Secondhand smoke causes nearly 42,000 deaths in the U.S. each year.

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and economic benefits of smoke-free laws and securing the participation of public health leaders – led by ACS CAN CEO Gary M. Reedy – the Atlanta City Council passed an ordinance in July 2019 that establishes smoke-free workplaces, including restaurants, bars and Hartsfield-Jackson International Airport, the world's busiest airport.

## Increasing Tobacco Taxes

Research shows that regular, significant increases to taxes on cigarettes and tobacco products are an effective tool to reduce tobacco use – particularly among youth – and ultimately to save lives. The ACS CAN **Illinois** team advocated for a \$1 per-pack cigarette tax increase in 2019, a policy expected to prevent approximately 28,700 kids from becoming adults who smoke. **Maine, Massachusetts, Nevada**, and **Vermont** increased taxes on e-cigarettes and other tobacco products to more effectively deter youth from initiating any form of tobacco.



American Cancer Society Deputy Chief Medical Officer Len Lichtenfeld (back row, far right) joins ACS CAN volunteers and staff advocating for the smoke-free ordinance in Atlanta.

## Supporting State Tobacco Control, Prevention and Cessation Programs

Comprehensive evidence-based statewide tobacco control programs are an essential way to reduce tobacco-related disease and death. ACS CAN strongly advocates to protect and increase state investment in these lifesaving programs. Thirty-six states successfully maintained or increased funding for state tobacco prevention and cessation programs in 2019.

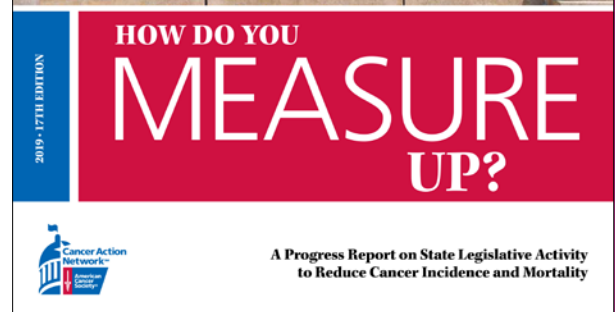
### The Push for Tobacco 21

In response to the rapidly increasing epidemic of youth tobacco use, a flurry of state and local policy proposals were introduced to increase the legal minimum age of sale of tobacco products to 21 in 2019. While some Tobacco 21 bills have the potential to prevent youth use of tobacco, ACS CAN saw several pieces of legislation that were coopted by the tobacco industry to weaken restrictions, create carve-outs for certain products and exempt specific populations – creating an ineffective policy that does not comprehensively protect youth from dangerous tobacco products. ACS CAN strategically engaged with Tobacco 21 proposals across the country to determine which would most effectively reduce the burden of tobacco. We advanced strong policies in **Connecticut, Delaware, Illinois, Maryland, New York, Vermont** and **Washington** and defeated weak bills in **Arizona, Iowa, Florida, Louisiana, Montana, Nevada, New Mexico** and **West Virginia**.

Through direct lobbying, ACS CAN successfully engaged with Congressional leadership to advance legislation that would effectively reduce the burden of youth tobacco use. In December 2019, the federal year-end funding package added an amendment to the Tobacco Control Act of 2009, which raises the age of sale for all tobacco products from 18 to 21 – without exemptions – and extends age verification requirements from 26 to 30.

- + In 2019 alone, 40 localities in **Minnesota** adopted Tobacco 21 measures.

In 2019, ACS CAN **Massachusetts** staff and volunteers were instrumental in the passage of the nation's first statewide law that comprehensively prohibits the sale of all flavored tobacco products, including menthol cigarettes, e-cigarettes, chewing tobacco and cigars, a significant win in the fight to protect youth from addictive tobacco products.



The 17<sup>th</sup> edition of ACS CAN's annual *How Do You Measure Up? A Progress Report on State Legislative Activity to Reduce Cancer Incidence and Mortality* featured a special section highlighting the tobacco industry's decades-long strategy of coopting seemingly strong tobacco control legislation – Tobacco 21 is just the latest example – to implement weak laws that do not effectively reduce the tobacco burden.

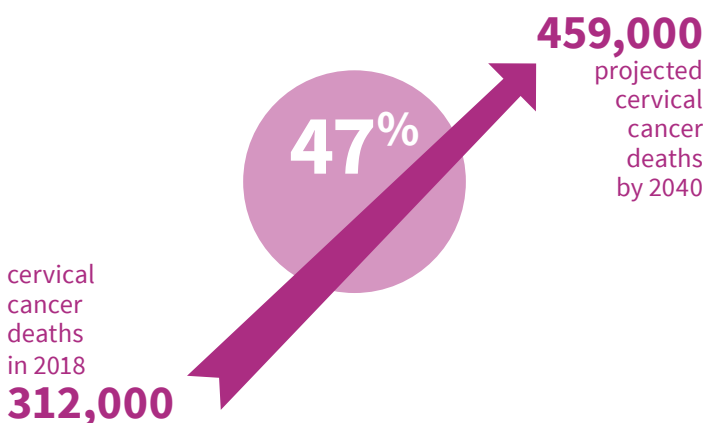
# Cervical cancer is the leading cause of cancer death for women in 42 countries.

## Global Advocacy

### Eliminating Death from Cervical Cancer

Cervical cancer remains the primary cause of cancer-related deaths among women in many low- and middle-income countries (LMICs), despite being one of the most successfully treated cancers if detected early. Cervical cancer is preventable with cost-effective interventions such as human papillomavirus (HPV) vaccinations and screenings and preventive treatment of precancerous lesions; yet, cervical cancer is not addressed or integrated into most global health programs. Ninety percent of all cervical cancer deaths occur in LMICs, a stark disparity that highlights the need for sustained U.S. investment to help implement proven strategies that reduce death caused by cervical cancer.

- + Without action, deaths from cervical cancer will rise nearly 47% by 2050.
- + With U.S. investment, we can accelerate the elimination of cervical cancer across the globe.



In 2019, ACS CAN cohosted two briefings with AdvamedDx – one on Capitol Hill and one during the Congressional Black Caucus Foundation’s Annual Legislative Conference – that convened patient advocates and members of the public and private sectors to address how a unified collective of stakeholders can eliminate cervical cancer globally with a coordinated, strategic campaign.

With the release of our new *Saving Women’s Lives: Accelerating Action to Eliminate Cervical Cancer Globally* report, ACS CAN called on Congress to dedicate a portion of U.S. global health funding to scale-up vaccination and screening and treatment services in LMICs. The FY2020 State Foreign Operations and Related Agencies Appropriations bill included language expressing Congress’ approval of U.S. government partnerships addressing HPV vaccination and cervical cancer screening and treatment programs globally. ACS CAN continues to actively engage with members of Congress to increase U.S. engagement and contribution to the elimination of cervical cancer.



Brittany Larson (second from left), ACS CAN senior Digital Campaigns manager, interviews Sara Namaganda (far right) in Uganda in December 2019. Sara and her sister Betty help provide care for their mother, Edith, a cervical cancer patient.





## Bringing Leaders Together in the Fight against Cancer

ACS CAN convenes researchers, medical providers, patient advocates and public officials to foster discussion and examine policies that are critical in the fight against cancer. We held our eighth annual National Forum on the Future of Health Care in April 2019 in Washington, D.C., where leaders from government, private and nonprofit organizations gathered to discuss ways to make cancer care more affordable for patients. Panelists discussed innovative new approaches to care at the provider, payer and patient levels and examined how state and federal programs are working to identify ways to mitigate indirect costs of cancer treatment, like transportation and lodging.

The United States spends \$88 billion annually on cancer care, with patients paying nearly \$4 billion in out-of-pocket costs. The 2019 ACS CAN health care forum examined best practices employers and other payers are using to contain costs while keeping coverage affordable for cancer patients.

Throughout the country, ACS CAN hosted events in 2019 to educate the public, health community and elected officials about our work and to raise funds to support our mission. These events brought together thousands of leaders from the business, education, government and research communities and covered a wide variety of topics, including cancer research, quality of life, access to care, clinical trials and more.



ACS CAN **Idaho's** State Policy Breakfast was held in September 2019 and focused on tobacco's impact on the state's health and convened leaders from business, academia, government and the health community.



ACS CAN's South **Florida** Policy Forum was held at Nova Southeastern University in October 2019 and highlighted the role of health care systems, researchers and policymakers in addressing patient barriers to clinical trials.

As the founder of coalitions including the Patient Quality of Life Coalition (PQLC) and One Voice Against Cancer (OVAC), ACS CAN leads lobby days on Capitol Hill, works jointly to analyze and address policy proposals and cultivates relationships with partners to expand our ability to impact the cancer burden.

Partnerships also help ACS CAN further our goal of building a diverse and inclusive organization that better represents communities across America and the diverse reality of the cancer burden.

- + Since 2014, ACS CAN has collaborated with the Gates Millennium Scholars Program (GMSP), which offers full scholarships to qualified students from the African American, Hispanic/Latino, Native American and Asian Pacific Islander communities. These future leaders are invited to take action with ACS CAN, join us at lobby days at state capitols and collaborate with volunteer ambassador teams throughout the country. For the sixth year in a row, six GMSP scholars joined ACS CAN at our Leadership Summit & Lobby Day to meet with federal lawmakers on Capitol Hill alongside our volunteers and staff.

- + ACS CAN's partnership with Delta Sigma Theta Sorority, Inc. continued in 2019, with ACS CAN advocates joining regional Delta Days at the Capitol events to meet with state lawmakers. Members of Delta Sigma Theta and The Links, International were invited to attend our annual Leadership Summit & Lobby Day, to meet with federal lawmakers and join ACS CAN advocates for four days of learning, relationship-building, celebrating cancer survivors and honoring those we've lost to the disease.
- + ACS CAN partnered with the National African American Tobacco Prevention Network (NAATPN) in 2019 to sponsor in part the State of Black Health National Conference, which convened more than 350 public health professionals, social justice leaders and community advocates in pursuit of health equity for African Americans. This annual event examines the core influences on health, including economic, institutional and social inequalities, and developed a cohesive policy platform to address chronic disease and other health challenges in the African American community.

# Volunteers: The Heart of ACS CAN

ACS CAN's ability to advance our mission is grounded in the hundreds of thousands of remarkable individuals across the country who volunteer their time and skills on behalf of those impacted by cancer. Our volunteers are cancer patients, survivors, caregivers and family members who have been affected by the disease, and health care providers and researchers, who are committed to eliminating cancer as a major health problem. They are truly the heart of ACS CAN.

ACS CAN volunteers:

- + Engage their elected officials through phone calls, emails, letters and face-to-face meetings.
- + Speak out in their communities and the media in support of policies that help save lives from cancer.

A major component of our success is a volunteer structure that is sophisticated, innovative and effective. ACS CAN prioritizes building a volunteer base that reflects the nation's diverse population. Our dedicated and powerful volunteer teams support key elements of our advocacy campaigns, including grassroots mobilization, media outreach, fundraising and integrating advocacy into American Cancer Society Relay For Life®, Colleges Against Cancer®, Coaches vs. Cancer® and Making Strides Against Breast Cancer® signature programs and events.



- + 51 State Lead Ambassadors – one for each state and the District of Columbia – serve as ACS CAN's top advocacy volunteers.
- + In every congressional district, Ambassador Constituent Team Leads collaborate with staff partners and other volunteers to develop and implement advocacy campaigns.

ACS CAN's efforts are also supported by the work of attorneys who provide specialized expertise as part of the Judicial Advocacy Initiative (JAI). Since 2008, JAI firms have donated their time and services – nearly \$4 million in services by the end of 2019 – to help advance our mission to reduce the cancer burden, including representing ACS CAN as a plaintiff in tobacco control litigation, as *amicus* in cases related to access to care and writing regulatory comments and legislative analysis.

## Better Together

Together, ACS CAN and the American Cancer Society have a powerful cancer-focused grassroots network. In 2019, ACS CAN's Power of the Purse campaign gave American Cancer Society Making Strides Against Breast Cancer participants an opportunity to connect the mission of breast cancer education, treatment and research to ACS CAN's priority of federal cancer research and prevention funding, including recruiting **6,200** new ACS CAN members. ACS CAN also integrated with American Cancer Society Relay For Life events across the country, with an emphasis on cancer research funding, and more than **8,500** people joined ACS CAN through Relay For Life events.



## Cancer Votes

Through [Cancer Votes](#), ACS CAN's nationwide candidate and voter education campaign, volunteers across the country work to inform the public by talking to candidates of all political parties about cancer issues. It is an opportunity for our organization to educate voters and candidates about steps they should take to make cancer policy a national priority. ACS CAN does not advocate for or against the election of particular candidates or political parties or otherwise attempt to influence the outcome of any elections.

In preparation for the 2020 presidential election, Cancer Votes focused on the presidential primary race, capitalizing on the emergence of health care as a top issue and focusing on the key states of **Iowa**, **New Hampshire** and **South Carolina**. In 2019, ACS CAN conducted polls of likely Republican and Democratic voters to gauge attitudes on relevant issues including access to health care and tobacco control. Volunteers and staff met with campaign

policy staff for several presidential campaigns to share information on ACS CAN's priority issues, as well as share results of our voter polling.

ACS CAN volunteers and staff scheduled Coffee with the Candidates events, where candidates met directly with Cancer Votes volunteers to discuss policy issues related to ACS CAN's mission.

Eighty ACS CAN volunteers attended the **Iowa** State Fair in August, speaking face-to-face with more than a dozen presidential candidates about their stances on cancer-related policies.

During two televised candidate forums in 2019, **Iowa** ACS CAN volunteers asked presidential candidates questions about their commitment to fighting cancer and how they would address affordability of health care.

# Leadership Summit & Lobby Day

Hundreds of cancer patients, survivors and their loved ones traveled to Washington, D.C. in September 2019 for [ACS CAN's 13th annual Leadership Summit & Lobby Day](#). They urged Congress to make cancer a national priority and advance federal legislation that would reduce the burden of cancer for communities nationwide.

- + Nearly 700 ACS CAN advocates from all 50 states, D.C. and Puerto Rico – and representing 397 congressional districts – participated in Leadership Summit & Lobby Day.
- + ACS CAN advocates attended 497 congressional meetings, 58% of which were conducted face-to-face with members of Congress.

ACS CAN advocates urged lawmakers to:

- + Address the growing epidemic of youth tobacco use by supporting legislation that would restrict flavoring of tobacco products.
- + Support increased funding levels for cancer research that ensure continued progress in the fight against cancer in FY2020.
- + Cosponsor and advocate for the Palliative Care and Hospice Education and Training Act, which would improve access to palliative care for people with serious and chronic illnesses.
- + Bring to a final vote before the end of 2019 the Removing Barriers to Colorectal Cancer Screening Act, which would address a loophole in Medicare that results in surprise bills for seniors undergoing a colonoscopy.

The event hashtag #CancerLobbyDay was used more than 3,100 times as advocates thanked lawmakers and their staff for meetings and shared powerful messages during the Lights of HOPE event.

## NCAA Coaches Join the Cancer Fight

Three members of the Coaches vs. Cancer® program [joined ACS CAN volunteers](#) before they headed to Capitol Hill during Leadership Summit & Lobby Day. Coaches vs. Cancer® is a nationwide collaboration between the American Cancer Society and the National Association of Basketball Coaches that empowers coaches, teams and communities to help save more lives from cancer. Coach Jamion Christian of George Washington University, Coach Fran McCaffery of The University of Iowa and recently retired Coach Dave Rose of Brigham Young University each shared their personal cancer stories and motivated ACS CAN advocates as they prepared to ask their lawmakers to make cancer a national priority.

The Leadership Summit & Lobby Day also featured the [Lights of HOPE](#) ceremony (see photos, page 28) where more than 40,000 lights – the most in the event's nine-year history – circled the Lincoln Memorial Reflecting Pool, each representing a loved one impacted by cancer. Sponsored by Celgene, the 2019 Lights of HOPE event raised \$578,000 to help save lives from cancer.



ACS CAN President Lisa Lacasse (left), Coach Jamion Christian of George Washington University and Coach Fran McCaffery of The University of Iowa listened to retired Coach Dave Rose (not pictured) of Brigham Young University share his motivation for fighting cancer before advocates headed to Capitol Hill to meet with lawmakers during Leadership Summit & Lobby Day. The event also included the annual Lights of HOPE ceremony at the Lincoln Memorial Reflecting Pool.





*Jim Knox (third from left), ACS CAN managing director of government relations and recipient of the 2019 Alan Mills Award, posed alongside ACS and ACS CAN CEO Gary Reedy (left), ACS CAN President Lisa Lacasse and ACS CAN Vice President of Advocacy Administration, Training and Operations Jeff Martin.*



*U.S. Senator Dick Durbin (D-IL, third from left) talked with ACS CAN Illinois advocates after receiving his National Distinguished Advocacy Award.*

## 2019 Advocacy Award Recipients

ACS CAN recognizes exceptional volunteers, staff members and elected officials throughout Leadership Summit & Lobby Day.

**The National Distinguished Advocacy Award (NDAA), which is ACS CAN’s most prestigious advocacy honor, is awarded to public officials for leadership in the mission to end cancer as a public health problem.**

**The 2019 NDAA recipients were:**

### **U.S. Senator Dick Durbin (D-IL)**

Senator Dick Durbin was honored as a longtime public health advocate and for his role as a staunch champion of policies aimed at curbing tobacco use, including passage of the law that prohibits smoking on airplanes and his current efforts in Congress to bring attention to the youth e-cigarettes epidemic.

### **U.S. Senator Lisa Murkowski (R-AK)**

Senator Lisa Murkowski has repeatedly prioritized policies aimed at advancing the fight against cancer. She delivered a critical vote in 2017 against legislation that would have overturned the Affordable Care Act and has provided strong bipartisan support to anti-tobacco legislation.

### **Illinois Senate President John Cullerton (D)**

Under Senate President John Cullerton’s leadership, Illinois became the first and only Midwestern state to enact Tobacco 21 legislation in 2019. He also helped to secure the country’s only statewide tax increase on cigarettes in 2019, demonstrating his commitment to protecting youth from the dangers of tobacco products.

### **Washington State Representative Paul Harris (R)**

Representative Paul Harris has championed tobacco control efforts for many years in his state, including a five-year effort to raise the legal age of sale of tobacco products to 21. He fought to ensure that revenue from e-cigarette retailers’ license fees and fines would be directed to Washington’s severely underfunded tobacco prevention and control program, efforts that will help reduce the burden of tobacco throughout his state.

### **Texas State Representative John Zerwas (R)**

Representative John Zerwas, MD, played a crucial role in securing passage of two bills to reauthorize and fund the Cancer Prevention and Research Institute of Texas (CPRIT), the second-largest funder of cancer research in the United States after the National Cancer Institute. His steadfast leadership was instrumental in the successful reauthorization of bonds for CPRIT’s lifesaving cancer research and prevention work.



*George and Brooke Blough, longtime ACS CAN West Virginia volunteers, received the Volunteer Award for Excellence in Advocacy, ACS CAN's highest honor for volunteers, in recognition of their incredible dedication to reducing the cancer burden through public policy.*

## Volunteer Awards:

### **Volunteer Award for Excellence in Advocacy\*:**

George and Brooke Blough, West Virginia

### **State Lead Ambassador of the Year:**

Michael Holtz, Tennessee

### **Ambassador Constituent Team Leads of the Year:**

Mario Landera, Florida; Pam Manges, Ohio; Grace Pugh, California

### **Emerging Leader:**

Cindy Vo, Georgia, Advocacy Lead – Regional Campus Leadership Team, Southeast Region

### **State Advocacy Team of the Year**

#### **(Volunteer & Staff Award):**

Illinois

### **Judicial Advocacy Initiative:**

Allison Cohen and Tesch West, of Dentons

*\*The Volunteer Award for Excellence in Advocacy, ACS CAN's highest honor for volunteers, is presented annually to exemplary volunteers in recognition of outstanding leadership and continuous service in the area of advocacy and public policy.*

## Staff Awards:

### **Field Government Relations Professional of the Year:**

Lynda Barbour, Southern California Government Relations Director

### **Field Grassroots Professional of the Year:**

Cori Chandler, Rhode Island Grassroots Manager

### **American Cancer Society Partner of the Year:**

Ruth Hong, Director, Strategic Partnerships-Volunteer Engagement

### **Regional Professional of the Year:**

Cynthia Serna, Associate Director, Grassroots and Program Integration

### **Alan Mills Award\*\*:**

Jim Knox, Managing Director, California

*\*\*The Alan Mills Award, ACS CAN's highest honor for advocacy staff, is presented to the individual who best embodies the passion and dedication of the late Alan Mills, a former American Cancer Society staff lobbyist and one of the founders of the National Government Relations department.*



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\*Contribution to Texans Fighting Cancer

# Special Thanks

Following are some of the individuals and organizations that helped make 2019 such a successful year for ACS CAN. We also extend a sincere thank-you to those not specifically mentioned here, as this list is by no means exhaustive. Please know your contributions did not go unnoticed.

State Lead Ambassadors  
Ambassador Constituent Teams  
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ACS CAN Staff  
American Cancer Society Staff  
ACS CAN Board of Directors

## Coaches vs. Cancer

Coach Jamion Christian, George Washington University  
Coach Fran McCaffery, The University of Iowa  
Coach Dave Rose, Brigham Young University (retired)

## Judicial Advocacy Initiative Volunteers

Danielle Boram  
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Robert Daley  
Kyle Druding  
Jeffrey Dubner  
Ashley Edmonds  
Ramy Fayed  
Jeffrey Fitzgerald  
Bruce Merlin Fried  
Peter Giunta  
Alyssa Emi Golay

## Speakers at the 2019 Leadership Summit & Lobby Day

Alex Azar, U.S. Health and Human Services Secretary  
Rita Carreón, Deputy Vice President, Health, UnidosUS  
Marcia Cross, actress and cancer survivor  
Thomas Van Veen, Documentary Associates

## Speakers at the 2019 Lights of HOPE Ceremony

Mark Alles, Chairman and CEO of Celgene  
U.S. Representative Brian Higgins (D-NY)  
U.S. Representative Brian Fitzpatrick (R-PA)  
U.S. Representative Lisa Blunt Rochester (D-DE)  
U.S. Representative Buddy Carter (R-GA)  
U.S. Representative. Debbie Wasserman-Schultz (D-FL)

Andrew Goldfarb  
Samantha Groden  
Matthew Higgins  
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American Cancer Society Colleges Against Cancer  
American Cancer Society Making Strides Against Breast Cancer  
American Cancer Society Relay For Life  
The House Cancer Caucus  
The Senate Cancer Coalition

Christina Marshall  
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