

2024 Federal Priorities

During the 118th Congress, the American Cancer Society Cancer Action Network (ACS CAN) will advocate for policies and legislation that work to end cancer as we know it, for everyone, by accelerating cures, improving access to care, and ensuring access to cancer prevention services. ACS CAN is committed to supporting initiatives in research, prevention, screening and early detection, and patient support services to reduce disparities in cancer that will lead to healthier outcomes for cancer patients and survivors. This document is intended for ACS CAN colleagues and volunteers.

Major Campaigns

Cancer Research and Prevention Funding (Fiscal Year 2025)

- **Increased Funding Levels for Cancer Research and Prevention.** ACS CAN advocates to ensure continued progress in the fight against cancer at the National Institutes of Health (NIH), the National Cancer Institute (NCI), the Advanced Research Projects Agency for Health (ARPA-H), and the Centers for Disease Control and Prevention's (CDC) cancer programs.

Our FY25 funding asks include:

- ◆ \$51.3 billion for the NIH;
 - ◆ \$7.934 billion for the NCI;
 - ◆ \$1.5 billion for ARPA-H; and
 - ◆ \$472.4 million for CDC Cancer Programs, including \$230 million for the National Breast and Cervical Cancer Early Detection Program (NBCCEDP)
- **ACS CAN advocates for \$120 million for the Prostate Cancer Research Program (PCRP)** within the U.S. Department of Defense (DoD).

Cancer Prevention and Early Detection and Screening

- **Medicare Multi-Cancer Early Detection Screening Coverage (MCED) Act (S.2085/H.R.2407).** ACS CAN advocates for the passage of legislation to improve access to new and innovative cancer screenings for Medicare beneficiaries by creating a pathway to allow Medicare to initiate coverage of multi-cancer tests following FDA approval if a clinical benefit is shown.
- **Screening for Communities to Receive Early and Equitable Needed Services (SCREENS for Cancer) Act (S.1840/H.R.3916).** ACS CAN supports the reauthorization of the National Breast and Cervical Cancer Early Detection Program (NBCCEDP) for fiscal years 2024 through 2028 to provide the program greater flexibility in providing access to lifesaving screening, diagnostic, and treatment services and continue its innovative work aimed to reduce disparities and advance health equity in breast and cervical cancer.

Targeted Campaigns

Prostate Cancer

- **Prostate-Specific Antigen Screening for High-Risk Insured Men (PSA Screening for HIM) Act (S.2821/H.R.1826).** ACS CAN advocates for passage of legislation to remove cost sharing of PSA testing for those at the highest risk of being diagnosed with prostate cancer — African American men and men with a family history of prostate cancer.

Palliative Care and Research Funding

- **Palliative Care and Hospice Education and Training Act (PCHETA) (S.2243).** ACS CAN advocates for the passage of legislation to facilitate access to palliative care and coordinated care management.

- **Palliative Care Research Funding.** ACS CAN advocates for funding to focus and expand national research programs in palliative care at the National Institutes of Health. Specifically, ACS CAN is working to ensure the U.S. Congress, for the first time, appropriates specific money for palliative care research, upon enactment of the FY2024 LHHS Appropriations bill.

Access to Clinical Trials

- **Diversifying Investigations Via Equitable Research Studies for Everyone (DIVERSE) Trials Act.** ACS CAN advocates for passage of the DIVERSE Trials Act to increase diversity in clinical trials and make it easier for all persons with cancer to participate by reducing barriers to enrollment. Barriers may include ancillary (non-medical) costs, such as transportation and lodging, and remote access to trials, particularly for people who are underrepresented, including certain racial and ethnic groups, older adults, rural residents, and those with limited incomes.
- **NIH Clinical Trial Diversity Act (S.1701/H.R.3503).** ACS CAN supports legislation to increase the diversity of participants in all National Institutes of Health (NIH)-funded trials.
- **Harley Jacobsen Clinical Trial Participant Income Exemption Act (H.R.7090).** ACS CAN supports legislation to amend the Internal Revenue Code of 1986 to exclude from gross income certain compensation to clinical trial participants.
- **Clinical Trials Report Language.** ACS CAN advocates for FY2025 Appropriations to support HHS in diversifying clinical trials.

Drug Shortages

- **Drug Shortage Prevention Act of 2023 (S.2362/H.R.3008).** ACS CAN supports legislation to improve transparency around potential shortages of critical essential medicines. We advocate for policy that requires drug manufacturers to notify the Food and Drug Administration (FDA) if there is an increased demand for certain critical essential medicines that may result in a shortage.
- **Pediatric Cancer Drug Supply Act of 2024 (H.R.6963).** ACS CAN advocates for legislation that will ensure the United States maintains a stable supply of essential pediatric cancer drugs. ACS CAN supports the bill as one step toward solving pediatric drug shortages.
- **Drug Shortages Appropriations Report Language.** ACS CAN advocates for inclusion of report language to the Agriculture, Rural Development, Food and Drug Administration, and Related Agencies and Labor, Health and Human Services, Education, and Related Agencies bills to address and prevent the ongoing drug shortage crisis.

Patient Navigation

- **Patient Navigation for People with Cancer.** ACS CAN advocates for legislation and policies to increase access to patient navigation for people with cancer, prioritizing policies that create sustainable funding to ensure access to patient navigation services across the cancer continuum.
- **Appropriations Request.** ACS CAN advocates for funding to the National Academy of Sciences (NAS) to provide a roadmap of reimbursement policy pathways and recommendations to expand access to sustainable patient navigation services, including oncology patient navigation for those at risk of cancer, cancer patients and survivors.

Access to Health Care

- **Inflation Reduction Act (IRA).** ACS CAN actively monitors implementation of the Medicare negotiation provisions of the IRA to ensure cancer patients' access to medically necessary treatments, both now and in the future, are not unintentionally hindered. ACS CAN strongly supports the Medicare Prescription Payment Plan, an optional program to allow Part D enrollees to spread their out-of-pocket costs over the course of the plan year and will continue to advocate for beneficiary improvements to the program.

- **Affordable Care Act (ACA) Tax Credits.** ACS CAN supports extending the enhanced ACA subsidies to improve affordability for consumers who purchase coverage in the marketplaces.
- **Ensuring Access to Comprehensive Health Care.** ACS CAN promotes policies that ensure protections for cancer patients and survivors and that enable equitable access to affordable, quality health care, insurance coverage, and no cost preventive services including cancer screenings. ACS CAN advocates for lower patient out-of-pocket costs, including prescription drugs, while maintaining cancer patients' access to lifesaving drugs & therapies.
- **Medicaid Unwinding.** ACS CAN is working to ensure that states comply with federal law by actively monitoring their data submissions and tracking the impact on Medicaid beneficiaries. We will continue to urge the Centers for Medicare & Medicaid Services (CMS) to take corrective action if states fail to comply with federal Medicaid redetermination requirements.

Tobacco Control

- **Legislative and Regulatory Policies to Reduce Death and Disease Caused by Commercial Tobacco.** ACS CAN advocacy includes finalizing the Food and Drug Administration (FDA) proposed rule to prohibit menthol in cigarettes and flavors in cigars. We continue working with our tobacco control partners to maintain and grow support for the FDA's regulation to prohibit menthol and other flavorings.

For more information, contact Tammy Boyd, VP, Federal Advocacy & Strategic Alliances at tammy.boyd@cancer.org.

The American Cancer Society Cancer Action Network (ACS CAN) advocates for evidence-based public policies to reduce the cancer burden for everyone. We engage our volunteers across the country to make their voices heard by policymakers at every level of government. We believe everyone should have a fair and just opportunity to prevent, detect, treat, and survive cancer. Since 2001, as the American Cancer Society's nonprofit, nonpartisan advocacy affiliate, ACS CAN has successfully advocated for billions of dollars in cancer research funding, expanded access to quality affordable health care, and advanced proven tobacco control measures. We stand with our volunteers, working to make cancer a top priority for policymakers in cities, states and our nation's capital. Join the fight by visiting www.fightcancer.org.