

# MA & ME Cancer Advocacy Call March 24, 2021

## **AGENDA**

- Welcome
- Updates and Action Items
- Ambassador Action Center Deep Dive
- State Team Time





#### **Ambassador Action Center:**

- Shout out to Bethany & Mikala in Maine, and Dan, Dana, Patti, Kate and Steve logging actions in the Ambassador Action Center since our February call
- Don't have access to the Ambassador Action Center? Email Melissa (melissa.stacy@cancer.org) and she'll hook you up!

### **Diversity, Equity, and Inclusion:**

Last month, the National Comprehensive Cancer Network® (NCCN®) www.nccn.org, American Cancer Society Cancer Action Network (ACS CAN) www.fightcancer.org and the National Minority Quality Forum (NMQF) www.nmqf.org presented new ideas for overcoming inequality in oncology. The recommendations—developed by a group of 17 national experts, representing patients and advocates, caregivers, healthcare providers, researchers, and industry—directly address how medical systems in the United States often disproportionately fail minority patients, particularly those who are Black and/or Indigenous, and draws on extensive polling data from a recent poll fielded by Public Opinion Strategies on behalf of the organizations to make clear the case for urgent action. Among the notable survey findings: 63% of African American and 67% of Latinx patients, survivors, and caregivers said they had a negative experience with their oncology care team, such as having assumptions made about them or their financial situation, or trouble

getting questions answered; in contrast to 43% of white respondents who reported such experiences. As for oncologists, 2/3 of those surveyed believed that non-white patients experienced worse outcomes from cancer care but only 1/3 felt those patient populations were receiving worse care or poorer communication during care.

To address the inequalities in access to cancer care, the three organizations convened the Elevating Cancer Equity Working Group. Workgroup recommendations include a new Equity Report Card (www.nccn.org/policy) to help providers, payers, and accreditation entities advance equitable care delivery. The report card includes 17 measurable practice changes, such as having health systems provide and require annual implicit bias training for all employees, offer culturally and linguistically representative patient navigators or community health workers through internal hiring or contracting with community-based organizations, and offer flexible hours for screening and treatment appointments. The full list of practice recommendations are broken down into the following categories: Community Engagement, Accessibility of Care and Social Determinants of Health, Addressing Bias in Care Delivery, Quality and Comprehensiveness of Care.

The Organizations also created a series of policy change recommendations targeted toward: The United States Congress, CMS and Commercial Payers, Federal Agencies, State and Local Policymakers. Policy examples include measures to remove barriers to clinical trial participation and requiring the Food and Drug Administration to consider clinical trial diversity as part of a drug approval process, providing resources to historically black colleges and universities and other minority serving institutions with the goal of fostering a more diverse health care workforce, funding public awareness campaigns around cancer prevention that are linguistically and culturally reflective of diverse audiences, and ensuring access to and reimbursement for patient navigators to assist patients with all kinds of insurance.

The groups plan a series of ongoing engagements for providers, patients and lawmakers as a means to advance this work and improve patient care. A deeper analysis of the Public Opinion Strategies data— which was captured in two surveys, one geared toward patients, survivors, and family caregivers with an oversampling to assure minority representation, and another of oncologists— will be addressed in a future, peer-reviewed article. To learn more about the working group and next steps, visit <a href="McCN.org/policy">MCCN.org/policy</a>: Melissa will include links to the equity report card and NCCN policy in the meeting minutes.

#### **Fundraising:**

- Trivia night: Dan is hosting a Trivia Night on April Fools Day at 7pm! There is a suggested donation of \$10 per device (please limit teams to six devices). We are working on getting prizes donated for the winning teams (bragging rights only go so far). Please feel free to invite anyone else! Sign up through <a href="http://action.fightcancer.org/goto/TriviaNight">http://action.fightcancer.org/goto/TriviaNight</a> Find and share the event on Facebook from our State pages and Melissa will include the link in the meeting minutes.
- New England Cookbook: Calling all recipes! Maine and Massachusetts will be leading the New England team on creating a New England wide cookbook by state! Submit your favorite state specific recipes – whoopie pies, boiled dinner, blueberry pie, clam chowder – they can be traditional recipes or a twist on an old favorite. Submit your recipe to

## ACSCANNewEnglandCookbook@gmail.com!

### **April Meeting Date and Topic:**

- Our next volunteer meeting will be focused on updates and federal grassroots actions, media advocacy, and then we'll be splitting into state groups to talk about actions we all can take to move our states 2021 priority legislation forward.
- We want to know what evening of the week, time of day works best for you to join our monthly calls. Watch for a link with the meeting minutes to let us know.

## **Maine Conversation**

- > Budget
- > Access to Care
- > Tobacco
- Day of Action



- HHS Committee passed a budget amendment that restores the proposed \$5 million/year cut in tobacco control program funding from the Governor's biennial budget proposal. The amendment would establish \$13.9 million/year of funding in the budget baseline by allocating an additional \$5 million/year from tobacco MSA dollars to the program's funding and deallocating an equivalent amount of tobacco MSA dollars going to Medicaid-payment to providers. It fills the hole made in Medicaid through available general fund dollars, so neither program's funding is cut. The amendment was put forward by the House chair of HHS, who is our flavors bill sponsor and who has been working with the GRD on the amendment, and was supported unanimously by the joint standing HHS committee. This is a great milestone win. The budget now moves to the appropriations committee for final negotiations, but the unanimous committee report strengthens the position of this funding.
- The HHS committee voted unanimously to support a bill that clarifies Maine's smoke-free public places law by ensuring bus shelter are covered in the smoke-free law.
- The Insurance committee voted on numerous access to care bills we opposed with majority "ought not to pass" votes of 8-3. Once 2 absent committee members vote, the committee votes on the bills are likely to be 8-5. The bills voted down include a bill to allow for the sale of short-term limited duration health plans, a bill to prohibit the state from merging the individual and small group markets and a bill to limit the standardized benefit law to only the individual market (and not include the small group market).

- Flavors Hook Kids Maine campaign held a legislative briefing on Menthol and Race. Delmonte Jefferson from the Center for Black Health and Equity was the keynote speaker. He was joined by a Maine pediatrician and dentist as well as our bill sponsors. GRD participated to answer policy questions related to Maine law that speakers could not answer. The event was attended by 15 legislators, 2 staff from the Governor's office, 1 staff from the DHHS Commissioner's office and 1 staff from the Speaker's office. All of the speakers were fantastic and it was a great event overall. It can be viewed here: <a href="Issue Briefing: "Menthol and Race" https://youtu.be/bg3\_NzOLPYE">Issue Briefing: "Menthol and Race" https://youtu.be/bg3\_NzOLPYE</a>
- GRD delivered testimony in support of a bill to require insurance carriers to provide
  clearer, actionable information to individuals who lose job-based insurance coverage. Due
  to federal work on COVID-relief bill's access to care provisions, we have identified a
  patient with a relevant story for this bill and will work in the upcoming weeks to collect
  her story.
- Our Maine Day of Action, traditionally Day at the Capitol, will be held on April 13<sup>th</sup>. The deadline to register is April 2<sup>nd</sup>, which is a hard deadline. Please visit www.fightcancer.org/me to register for this event.