

2025 ACS CAN Federal Priorities



The American Cancer Society Cancer Action Network (ACS CAN) advocates for evidence-based policies to reduce the cancer burden for everyone. As the American Cancer Society's advocacy affiliate, ACS CAN engages advocates across the nation, and in every Congressional district, to make their voices heard to advance legislation and regulatory solutions that promote health equity and help end cancer as we know it, for everyone.

PRIORITY NATIONAL CAMPAIGNS



Investing in Cancer Research and Prevention: Support robust funding for cancer research at the National Institutes of Health (NIH), the National Cancer Institute (NCI), and the Advanced Research Project Agency for Health (ARPA-H), and cancer screening and prevention programs at the Centers for Disease Control and Prevention (CDC). Oppose funding cuts and structural changes that jeopardize progress.

Protecting Care Through Medicaid: Oppose cuts to Medicaid that would leave millions of people without access to affordable health coverage, benefits and services, including cancer care.

Accessing Affordable Health Insurance: Extend the enhanced Affordable Care Act tax credits to prevent millions from experiencing major increases in enrollee premiums and losing health coverage.

Accessing Innovation: Pass the Nancy Gardner Sewell Medicare Multi-Cancer Early Detection Act (MCED) (H.R.842/S.339) to improve access to new and innovative cancer screenings for Medicare beneficiaries.

TARGETED LEGISLATIVE CAMPAIGNS



Modernizing Clinical Trials: Pass the Clinical Trial Modernization Act (H.R.3521) to reduce barriers to enrollment for those with cancer.

Screening for Breast and Cervical Cancer: Pass the SCREENS for Cancer Act (H.R.2381/S.1866) which reauthorizes the National Breast and Cervical Cancer Early Detection Program (NBCCEDP).

Ensuring Access to Affordable, Comprehensive Health Insurance: Support legislative and regulatory policies that promote patient protections in health insurance, curtail the availability of non-comprehensive options, and strengthen patient navigation services.

Ending Drug Shortages: Prevent shortages of critical medicines and ensure a stable supply of essential drugs, including pediatric drugs.

Reforming Pharmacy Benefit Manager (PBM) Practices: Support new transparency and accountability measures, limits on PBM funding sources, and the requirement that rebates be passed through to plan sponsors.

Improving Palliative Care: Pass the Palliative Care and Hospice Education and Training Act to facilitate access to palliative care and coordinated care management. Support FY26 appropriations funding for a palliative care consortium at NIH.

Screening for Prostate Cancer: Pass the PSA Screening for HIM Act (H.R.1300/S.297) to remove cost-sharing of PSA testing for those at the highest risk of being diagnosed with prostate cancer.

Strengthening Tobacco Control: Support legislative and regulatory policies to reduce death and disease caused by commercial tobacco.

Removing Treatment Barriers: Pass the Safe Step Act, which requires group health plans to provide an exception process, in specified cases, for any medication step-therapy protocol to help ensure patients safely and efficiently access treatment.

Reducing Childhood Cancer: Support full funding for the Childhood Cancer STAR and Childhood Cancer Data Initiative. Pass the Accelerating Kids' Access to Care Act (H.R.1509/S.752) and the Give Kids a Chance Act (H.R.1262/S.932) which includes the RARE Act and reauthorizes the Creating Hope Act.

OTHER PRIORITIES

- **Co-pay Accumulators:** Support the use of copay assistance to bridge the affordability gap, allowing patients to access necessary medications without financial hardship and oppose restrictive copay accumulator programs.
- **Nutrition:** Support policies that increase access to SNAP, food is medicine, and healthy eating incentives.
- **Medical Debt:** Support policies that prevent and reduce the negative impact of medical bills.
- **Survivorship:** Support the Comprehensive Cancer Survivors Act.