

November 27, 2001

Dear Senator/Representative:

The undersigned organizations, representing seniors, cancer patients, providers, and health care organizations, applaud the united and bipartisan response to the events of September 11. We join the rest of the nation in offering support to Congress and the Administration at this time of grief and recovery.

We understand that the energies of Congress must be directed to prompt action on measures to aid in the nation's healing from the recent terrorist attacks and that the Congressional agenda may be abbreviated to allow efforts to concentrate on recovery measures. However, if Congress chooses to consider a Medicare amendments package this year, we urge that you include a provision to expand current Medicare Part B coverage of anti-cancer drugs to oral anti-cancer agents for which there is no intravenous equivalent. House and Senate versions of the Access to Cancer Therapies Act (H.R. 1624 and S. 913), authorizing Medicare coverage of oral anti-cancer agents, enjoy broad bipartisan support and represent important incremental reform.

Medicare already covers the cost of most anti-cancer drugs because those drugs are administered by injection by providers. Since 1993, oral anti-cancer drugs with an injectable equivalent have also been covered by Medicare. Unfortunately, many of the most important oral anti-cancer agents would not be eligible for Medicare coverage because they have no intravenous equivalent.

To guarantee that seniors have access to new, more effective anti-cancer drugs, Medicare should pay for them. In the past, Medicare beneficiaries have been able to depend on the program for quality cancer care, and expanding the current system of coverage to include oral anti-cancer drugs will ensure that beneficiaries still have access to good cancer care. We believe that this approach would be a modest improvement to Medicare that Congress should consider this fall.

During the last year, you have heard from cancer advocates regarding this legislation, and they are now joined by a number of senior organizations in promoting this legislation to ensure that beneficiaries with cancer have access to all cancer treatment options. This is a responsible approach to enhancing Medicare benefits, and we

urge you to consider it as a step toward more comprehensive reform in the future. We stand ready to provide you with additional information about promising new oral anti-cancer therapies and about how the Access to Cancer Therapies Act will help beneficiaries.

Sincerely,

AFSCME Retiree Program
Alliance for Retired Americans
American Association of Homes and Services for the Aging
American Federation of Teachers Program on Retirement and Retirees
American Public Health Association
Association of Jewish Aging Services
Catholic Health Association
Families USA
International Union, UAW
National Academy of Elder Law Attorneys
National Association for Home Care
National Association of Nutrition and Aging Services Programs
National Association of Retired and Senior Volunteer Program Directors
National Association of State Long-Term Care Ombudsman Programs
National Association Senior Companion Project Directors
National Caucus and Center on Black Aged
National Committee to Preserve Social Security and Medicare
National Council on the Aging
National Hispanic Council on Aging
National Senior Citizen's Law Center

Cancer Leadership Council

Alliance for Lung Cancer Advocacy, Support and Education
American Cancer Society
Association of American Cancer Institutes
Cancer Care, Inc.
Coalition of National Cancer Cooperative Groups, Inc.
Colorectal Cancer Network
Kidney Cancer Association
The Leukemia & Lymphoma Society
Lymphoma Research Foundation
Multiple Myeloma Research Foundation
National Coalition for Cancer Survivorship
National Patient Advocate Foundation
National Prostate Cancer Coalition
Oncology Nursing Society
Ovarian Cancer National Alliance
Pancreatic Cancer Action Network
Susan G. Komen Breast Cancer Foundation
US TOO! International, Inc.
The Wellness Community
Y-ME National Breast Cancer Organization

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