July 7, 2004

Mark A. McClellan, M.D., Ph.D.
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
200 Independence Ave., S.W.
Room 314-G – HHH Bldg.
Washington, D.C. 20201

Dear Dr. McClellan:

The undersigned organizations, representing cancer patients, physicians, and researchers, are writing to encourage the Centers for Medicare & Medicaid Services (CMS) to release certain data that would permit assessment of the changes in payment for cancer care taking effect in January 2005 under the Medicare Modernization Act (MMA). There is significant anxiety in the cancer community about the ability to maintain access to high quality cancer care and sustain the nation’s strong cancer clinical research enterprise in light of changes in reimbursement in 2005. Some of the uncertainty surrounding this issue could be dispelled by the timely release of preliminary average sales price (ASP) data for cancer drugs so that physicians, patients, the Administration and the Congress can all know, well in advance of January 2005, whether the new payment levels are adequate to enable physicians to acquire all the drugs that are required for quality cancer care.

A recent trade press article (Inside CMS, June 3, 2004) indicated that, although companies have now reported the first-quarter data necessary to calculate preliminary ASP figures for each drug, CMS may delay release of that information indefinitely. Disturbingly, the article suggested that CMS was being supported in this delay by certain pharmaceutical companies and the Biotechnology Industry Organization (BIO), who do not want the information to become public.

While we understand that the ASP information is preliminary and will need additional refinement, it would appear that there is no good reason not to supply the data promptly to facilitate planning for physicians, patients and policymakers in both the Administration and the Congress. More information should be better than less, and the sooner the information is available, the better the outcome for patients. In addition, it is important that preliminary ASP data be made available for all cancer drugs, not just selected drugs, as quality cancer care can require access to any approved therapies and inadequate payment could easily disrupt such access.

Contact: One Metro Center, 700 12th Street N.W. • Suite 900 • Washington, D.C. 20005
Phone: 202-508-4670 • Fax: 202-508-4650 • www.cancerleadership.org
In summary, we urge immediate release of the preliminary ASP data for all cancer drugs. Thank you very much for your personal attention to this important matter.

Sincerely,

-American Cancer Society
-American Society of Clinical Oncology
-Cancer Care, Inc.
-Cancer Research and Prevention Foundation
-Coalition of National Cancer Cooperative Groups
-Fertile Hope
-International Myeloma Foundation
-Kidney Cancer Association
-The Leukemia & Lymphoma Society
-Lymphoma Research Foundation

-Multiple Myeloma Research Foundation
-National Coalition for Cancer Survivorship
-North American Brain Tumor Coalition
-Ovarian Cancer National Alliance
-Pancreatic Cancer Action Network
-Sarcoma Foundation of America
-Us Too International Prostate Cancer Education and Support Network
-The Wellness Community
-Y-ME National Breast Cancer Organization

Cancer Leadership Council