The undersigned organizations representing cancer interests are sending a strong message of disappointment to the Senate for critical omissions in the Senate Finance Committee’s Medicare legislation. This package contains more than $40 billion in so-called provider give-backs and virtually nothing in the way of patient benefits.

The Access to Cancer Therapies Act (S. 913) would provide Medicare coverage for all oral anti-cancer drugs. S. 913 enjoys broad bipartisan support, with 56 cosponsors in the Senate and 326 cosponsors for the corresponding bill in the House (H.R. 1624). In addition, a national poll found that 9 in 10 Americans believe Medicare should pay for all medically approved cancer therapies, and 4 out of 5 Americans want legislation requiring Medicare coverage of all oral anti-cancer drugs to be passed in this Congress.*

Cancer strikes one in every two Americans and kills one in every three. The Senate can demonstrate its leadership by providing coverage of life-saving drugs like tamoxifen for breast cancer and other drugs for cancers of the blood, lungs, and prostate. There can be no refuge on this issue for Senators by characterizing increases in provider payments as benefits for patients.

We call on you and the entire Congress to remedy the benefit gap glaring from the Finance Committee package and to include the Access to Cancer Therapies Act in any Medicare legislation that emerges from the 107th Congress.

*Harris Poll, March 2002