

Making Cancer a Priority in Washington, DC & Augusta Capitols: *A Federal & State Legislative Update*

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“The ultimate conquest of cancer is as much a matter of public policy as it is a scientific and medical challenge.”

-John R. Seffrin, Ph.D., former CEO of ACS and ACS CAN





Today's Roadmap

Federal Update

- Research and Prevention Funding
- Affordable Care Act
- Patient and Survivor Quality of Life
- Colorectal Cancer Control
- Childhood Cancer

State Update

- Tobacco Prevention and Control
- Medicaid Expansion
- Cancer Prevention and Early Detection





Federal Research and Prevention Funding

FY 18 Federal Budget

- Largest increase in NIH funding in 15 years! ↑\$3B
 - NCI: \$275 million increase
- CDC: \$10 million increase for cancer prevention programs
 - Increase in funding for Office of Smoking and Health
- FDA: \$15 million 1st time funding – Oncology Center of Excellence
 - Preserves FDA regulatory authority over tobacco products



Affordable Care Act

ACA Defense

- Goal: to preserve patient protections and ensure affordability
- Cost-sharing reduction payments ended
- Individual mandate repealed in tax vote
- Short-term Limited Duration Plans
- Medicaid work requirements



Palliative Care and Hospice Education and Training Act (PCHETA)

- Intended to facilitate access to palliative care and coordinated care management for cancer patients and survivors.
- Supported by nearly 300 members of Congress
- Currently trying to get PCHETA added to opioid addiction bill expected to pass Congress
 - Senator Collins could play key role





Medicare CRC Loophole

Removing Barriers to Colorectal Cancer Screening Act

- Would eliminate cost-sharing during a routine screening colonoscopy when a polyp is removed under Medicare
- Strong bi-partisan support
 - 43 co-sponsors in Senate
 - 269 co-sponsors in House

For more info (bill fact sheet and to contact your members of Congress):

<https://www.acscan.org/what-we-do/colorectal-cancer>



Childhood Cancer

Support the Childhood Cancer Survivorship, Treatment, Access and Research (STAR) Act

- Advances pediatric cancer research and increases transparency and expertise for pediatric cancer research at the NIH
- 3/22/18: passed the Senate
- Moves to House for vote
 - 362 bipartisan House cosponsors
 - Strong support from Energy and Commerce Committee

State Update

- Statutory adjournment April 18
- House Rs blocked extra days
- Legislature going back May 2 for “Veto Day”
- Possibility of “special session” to act on 100s of bills still in play
- Gridlock largely over spending package w/ most disagreement over:
 - Medicaid expansion funding
 - Tax conformity
 - Delay in minimum wage implementation





Tobacco Prevention and Control

- Smoking Lounge/Cigar bar bill defeated....again
- Governor's bill to repeal Tobacco 21
- Numerous threats to smoke-free work and public places laws as a result of marijuana legalization
 - Social clubs
 - Sampling in marijuana manufacturing facilities
- Numerous attempts to spend tobacco settlement funds for uses other than tobacco control





Medicaid Expansion

- Governor set out parameters for funding
- Bill to fund administrative costs
- Administration missed deadline to file State Plan Amendment
- Updated report from Manatt Consulting
- Non-partisan legislative fiscal office – funding appropriation not needed – program will not run out of funding until 6/19
- Likely legal challenge
- Coverage goes into effect July 2018 by law



Cancer Prevention and Early Detection

❖ An Act To Ensure Continued Coverage for Essential Health Care

- Ensures 100% preventive coverage on tobacco cessation, HPV vaccination and USPSTF A&B rated cancer screenings even if changes are made at the federal level to the ACA
- Passed into law through veto override
 - 30-4 in Senate; 115-34 in House
- Impacts more than 700,000 Mainers with private health insurance coverage

❖ Medicaid Lung Cancer Screening



Regulatory – State/Federal

Section 1115 Research and Demonstration Waiver – Medicaid

- Gives states more “flexibility” in design and implementation of Medicaid
- Maine submitted an 1115 waiver proposal to Feds in 2017, subject to public comments at state and federal level
- Many concerning provisions in Maine’s proposal:
 - Work requirements
 - Penalties for non-payment of premiums and “lock-out” period
 - Copayments for non-emergent ER use
 - Asset test
 - Elimination of retroactive eligibility

Section 1332 State Innovation Waiver – Private Insurance

- Allow states to pursue innovative strategies for providing access to high quality, affordable health insurance while retaining the basic protections of the ACA
- Comments at state level due on Maine’s proposal this week
- Maine’s proposal essentially to seek federal “pass-through” funding for reinsurance
- Goal to stabilize individual market and lower premiums



We Need YOUR Voice: Get involved!

- Become an **ACS CAN member** (acscan.org/join)
- **Take action** on the issues... acscan.org/me
- **“Like” ACS CAN Maine** on Facebook (facebook.com/acscanMaine) or Follow us on Twitter
- Join ACS CAN’s **volunteer Advocacy Committee**: meets the 3rd Monday of every month, 6-7:30 pm (in-person & call-in options). Contact chris.feeney@cancer.org for more info.



For more information

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