

February 15, 2019

The Honorable Ben Ray Lujan
U.S. House of Representatives
2231 Rayburn House Office Building
Washington, DC 20515

The Honorable Gus Bilirakis
U.S. House of Representatives
2112 Rayburn House Office Building
Washington, DC 20515

Dear Representative Lujan and Representative Bilirakis,

On behalf of the undersigned organizations, representing patients, medical researchers, providers, survivors and their families, thank you for introducing H.R. 913, the *CLINICAL TREATMENT Act*. As organizations that value patient access to clinical trials, we are pleased to endorse your legislation, which would ensure states cover routine care costs of participation in an approved clinical trial for Medicaid enrollees with life-threatening conditions.

Medicaid insures nearly one-fifth of the US population and is the only major payer that is not required by federal law to cover routine costs associated with participation in clinical trials. This coverage is already assured for Medicare beneficiaries and for patients with private health insurance. Although twelve states require their Medicaid programs to cover these costs, there are still as many as 42.2 million Medicaid patients that are potentially without this needed coverage.

Routine costs include the non-experimental costs of treating a patient who is participating in a clinical trial, such as the cost of physician visits or laboratory tests. These costs are part of standard care and would be incurred regardless of whether a patient participates in a clinical trial. The cost of any investigative device or drug would continue to be covered by the trial sponsor. As such, this coverage would have little to no impact on the overall cost of care to Medicaid programs.

Importantly, clinical trials often provide patients with the best—perhaps only—treatment option for their condition. Without the guarantee of coverage, however, many Medicaid beneficiaries do not have the latest technological and scientific advancements as a treatment option.

Robust clinical trial participation improves the quality of medical research. Medicaid serves many demographics, including ethnic minorities and women, that are underrepresented in current clinical trial enrollment. Lack of participation in clinical trials from the Medicaid population means these patients are being excluded from potentially life-saving trials and are not reflected in the outcome of the clinical research. Increased access to clinical trial participation for Medicaid enrollees helps ensure medical research results more accurately capture and reflect the populations of this country.

Thank you for your leadership on this issue. We urge others in Congress to support your legislation and are eager to help you advance the *CLINICAL TREATMENT Act*.

Sincerely,

African Services Committee
American Association for Cancer Research
American Cancer Society Cancer Action Network

American Heart Association
American Medical Association
American Medical Women's Association
American Society for Radiation Oncology
American Society of Clinical Oncology
The Arizona Clinical Oncology Society
Asian Services in Action, Inc.
Association of American Cancer Institutes
Association of Community Cancer Centers
Association of Northern California Oncologists
Association of Pediatric Hematology/Oncology Nurses
The Blue Hat Foundation
Cancer Support Community
CancerCare
Charlene Miers Foundation for Cancer Research
Children's Cause for Cancer Advocacy
Colon Cancer Coalition
Colon Cancer Stars
COLONTOWN, a patient community supported by the PALTOWN DEVELOPMENT FOUNDATION
Colorectal Cancer Alliance
Delaware Society for Clinical Oncology
Denali Oncology Group
Dermatology Nurses' Association
Empire State Hematology & Oncology Society
Fight Colorectal Cancer
Florida Society of Clinical Oncology
FORCE: Facing Our Risk of Cancer Empowered
Friends of Cancer Research
Hadassah, The Women's Zionist Organization of America, Inc.
Hawaii Society of Clinical Oncology
Hematology/Oncology Pharmacy Association
Idaho Society of Clinical Oncology
Illinois Medical Oncology Society
Indiana Oncology Society
International Myeloma Foundation
Iowa Oncology Society
Kansas Society of Clinical Oncology
Kentucky Association of Medical Oncology
Kiel Colon Cancer Foundation
The Leukemia & Lymphoma Society
Livestrong
Louisiana Oncology Society
Lung Cancer Alliance
Lymphoma Research Foundation
Massachusetts Society of Clinical Oncology
Medical Oncology Society of New Jersey
Michigan Society of Hematology and Oncology
Minnesota Society of Clinical Oncology

Mississippi Oncology Society
Missouri Oncology Society
Montana State Oncology Society
National Brain Tumor Society
National Comprehensive Cancer Network
National Hispanic Medical Association
National Patient Advocate Foundation
Nebraska Oncology Society
Nevada Oncology Society
North Carolina Oncology Association
Northern New England Clinical Oncology Society
NothingPink
Ohio Hematology Oncology Society
Oklahoma Society of Clinical Oncology
Oncology Nursing Society
Ovarian Cancer Research Alliance
Pancreatic Cancer Action Network
Pediatric Palliative Care Coalition
Prevent Cancer Foundation
Research Advocacy Network
Rocky Mountain Oncology Society
Roswell Park Comprehensive Cancer Center
Sarcoma Foundation of America
SCAD Alliance
Society for Immunotherapy of Cancer (SITC)
Society of Utah Medical Oncologists
Solve ME/CFS Initiative
South Carolina Oncology Society
Tennessee Oncology Practice Society
Texas Society of Clinical Oncology
Triage Cancer
Virginia Association of Hematologists and Oncologists
West Virginia Oncology Society
Wisconsin Association of Hematology and Oncology
WomenHeart: The National Coalition for Women with Heart Disease