



Association of  
American  
Cancer Institutes

REPORT  
2020



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**THE ASSOCIATION OF AMERICAN CANCER INSTITUTES (AACI) COMPRISES 102 PREMIER ACADEMIC AND FREESTANDING CANCER CENTERS IN THE UNITED STATES AND CANADA. AACI IS ACCELERATING PROGRESS AGAINST CANCER BY EMPOWERING NORTH AMERICA'S LEADING CANCER CENTERS IN THEIR SHARED MISSION TO ALLEVIATE SUFFERING.**



# A Message From AACI



**Dr. Roy A. Jensen**

*President, AACI*

*Director, The University of Kansas Cancer Center*



**Jennifer W. Pegher**

*Executive Director, AACI*

## THERE IS NO DENYING THAT 2020 WAS A TUMULTUOUS—AND TRANSFORMATIVE—YEAR.

Just two months into the year the novel coronavirus changed life as we knew it. In addition to its devastating impact on public health, the COVID-19 pandemic has reshaped how we work, how we deliver meetings, and how cancer centers provide care for patients who are particularly vulnerable to the virus.

The pandemic has also shone a harsh spotlight on social determinants of health, racial discrimination, and other inequities. Telemedicine—a lifeline for those at high risk for COVID-19, especially patients with cancer—is still inaccessible to many patients, particularly those living in rural and impoverished areas. The communities hit hardest by COVID-19 also experienced disparities in cancer screening, diagnosis, and treatment—and continue to do so. Incidents of violence against Black people and subsequent protests have led some to describe systemic racism and COVID-19 as “twin pandemics.”

Higher rates of cancer cases, deaths, and complications among certain groups are major concerns to AACI cancer centers. In fact, mitigating cancer health disparities is the focus of Dr. Karen E. Knudsen’s presidential initiative, which formally launched at the 2020 AACI/CCAF Annual Meeting in October.

The past year was also marked by a historic presidential election. Surrogates from both presidential campaigns were invited to speak at the virtual Government Relations Forum meeting in October. The meeting provided a platform for each campaign to share details on their health care policy positions. Earlier in the year, all active Democratic and Republican candidates were encouraged to endorse five key public policy priorities of AACI members: funding lifesaving research, eliminating

HPV-related cancers, implementing evidence-based tobacco control and vaping policies, achieving oral chemotherapy parity, and addressing cancer disparities.

Despite the year’s upheavals, AACI welcomed two new members: University of Puerto Rico Comprehensive Cancer Center and Cancer Center at Brown University. The association quickly pivoted to a “new normal” to provide COVID-19 resources to members and reliably deliver the 2020 AACI/CCAF Annual Meeting and the 12th Annual Clinical Research Innovation (CRI) Meeting in new, virtual formats. Both meetings drew a record number of registrants and featured sessions highlighting the impact of COVID-19 on cancer clinical research and care.

As part of his National Cancer Institute (NCI) director’s report Dr. Norman E. Sharpless described the devastating impact of the pandemic on cancer patients’ screening and treatment. Dr. Sharpless also announced the launch of NCI’s public relations campaign to mark the 50th anniversary of the National Cancer Act (NCA).

In 2021, AACI will join the NCI and others in commemorating the NCA anniversary. “Nothing will stop us,” the NCI’s tagline for the anniversary year, underscores the tenacity and perseverance demonstrated by the cancer center network through the many challenges of 2020.

AACI extends its deep appreciation to its 102 cancer center members, corporate roundtable members, and sustaining members, whose work—and continued support—are vital to achieving our mission of accelerating progress against cancer.

# Annual Meeting

**BY SOME MEASURES, CHANGES CAUSED BY THE CORONAVIRUS PANDEMIC HAVE HAD POSITIVE EFFECTS. A CASE IN POINT: THE 2020 AACI/CCAF ANNUAL MEETING.**

Held virtually for the first time over two days in October, the event drew more than twice as many participants as recent in-person annual meetings. Nearly 900 cancer center colleagues registered for presentations on topics ranging from cancer screening guidelines and managing change in clinical trials to pediatric oncology and end-of-life care.

National Cancer Institute (NCI) Director **Dr. Norman E. Sharpless** announced the launch of NCI's public relations campaign marking the 50th anniversary of the National Cancer Act. As part of his NCI director's report—a regular feature of the annual meeting—Dr. Sharpless emphasized the coronavirus pandemic's devastating impact on cancer screening and treatment.



*Dr. Norman E. Sharpless*

**Dr. Henry Ciolino**, director of NCI's Office of Cancer Centers, led a wide-ranging discussion about NCI's goals for the national cancer research enterprise; standards for developing new and better approaches to preventing, diagnosing, and treating cancer; and the optimal distribution of limited federal cancer research funds at AACI cancer centers. A lengthy Q&A session provided clarity on issues such as safety net hospital reporting, overlapping catchment areas, and the impact on final score of the individual components of a cancer center's NCI Cancer Center Support Grant application.

In line with AACI's goal to reduce cancer disparities, one meeting session examined ways that cancer centers are reducing the burden of cancer on people of color—particularly Black communities—in their waiting rooms, laboratories, and office suites, and through outreach and community engagement. Similarly, a session on rural oncology, moderated by **Dr. Steven D. Leach**, director of the Dartmouth-Hitchcock Norris Cotton Cancer Center and chair of the 2020 AACI/CCAF Annual Meeting Program Committee, illustrated that cancer disparities cut across ethnic and geographic lines.

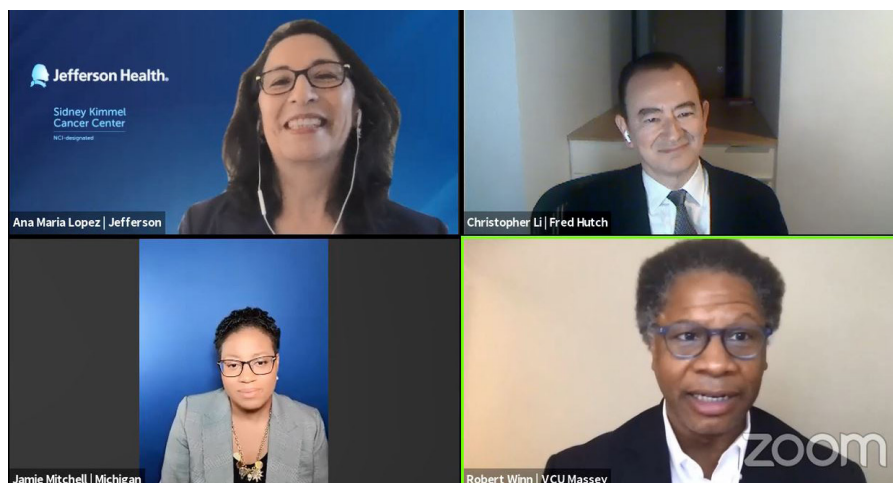
Capping the theme of cancer care equity, AACI's new president, **Dr. Karen E. Knudsen**, enterprise director of Sidney Kimmel Cancer Center at Jefferson Health, announced her 2020–22 presidential initiative, focused on understanding and mitigating cancer disparities (see page 12).

In other meeting sessions, directors from four basic science centers highlighted work at their institutions, including exploring RNA as a drug target in cancer; the use of basic models and technology development; new therapeutic approaches in pancreatic cancer; and



how a basic science center can contribute to precision medicine beyond checkpoint inhibitors and CAR T technology.

In an overview of the association's service to members in 2020, AACI Executive Director **Jennifer W. Pegher** acknowledged annual meeting support from industry sponsors (see page 14), including vendor presentations from Advarra, Caris Life Sciences, and Complion. She also recognized outgoing president, **Dr. Roy A. Jensen**, director of The University of Kansas Cancer Center, and thanked him for his commitment to the cancer centers, particularly in spearheading his presidential initiative, the AACI Public Policy Resource Library (see page 9).



*"Health Disparities and Social Injustice" annual meeting session panelists, clockwise from upper left: Drs. Ana Maria Lopez, Christopher I. Li, Robert Winn, and Jamie Mitchell.*



# Awardees

## Champion for Cures

Nike, Inc., co-founder **Phil Knight** and his wife, **Penny**, received the 2020 AACI Champion for Cures Award, in recognition of their transformational philanthropy that advances our shared vision of a future without cancer.

The Knights' commitment to the cancer community began more than a decade ago with a \$100 million gift in 2008 to the Oregon Health and Science University (OHSU). They have also helped build a network of people who are invested in the success of Knight Cancer Institute.

In accepting the award via video-recorded remarks, Phil Knight reflected on the path that led to the couple's cancer research philanthropy.

"I suppose it began ... with a favorite aunt. Lois Porter and her husband Fred never had kids of their own, so her three nephews filled that role. We were special.

Every Friday in the summer Aunt Lois would take us on a Friday surprise.

We'd go into town and each of us would get five dollars to buy anything in the world. Some 30 years later, it pained me enormously when she lost her long two-year battle with breast cancer."

Knight also recounted that his father, William W. Knight, had finally retired at age 71, then was diagnosed with leukemia which he battled for a year before dying in 1981. Knight's philanthropic course was also influenced by a college friend who introduced him to **Dr. Brian Druker**, director of the OHSU Knight Cancer Institute and developer of the drug Gleevec®, for the treatment of chronic myeloid leukemia.

"My wife and I have given over \$3 billion to philanthropic causes, but none has had the emotional impact of our donation to cancer research," Knight said. To illustrate the point, he recalled a dinner where a woman told him she was desperate because her son was diagnosed with a "death sentence" for cancer. She sent emails to many doctors; only Dr. Druker responded. He prescribed a series of medications including Gleevec.



*Phil and Penny Knight with Dr. Brian Druker, director, OHSU Knight Cancer Institute*  
Photo credit: OHSU Foundation

"With tears running down her cheeks, she announced that her son's cancer was in remission," Knight recalled.

Concluding his remarks, Knight observed that cancer is not like polio; it will not be cured with a single vaccine. "It will be cured drip by drip, over a long period of time. But I sincerely believe that Brian Druker and his team at OHSU will be one of those drips, and Penny and I cannot have a bigger legacy than that."



*Dr. William G. Kaelin, Jr.*  
Photo credit: Steve Marsel Studio

## Distinguished Scientist

AACI's Distinguished Scientist Award was presented to **Dr. William G. Kaelin, Jr.**, the Sidney Farber Professor of Medicine in the Department of Medicine at Dana-Farber Cancer Institute and the Brigham and Women's Hospital, Harvard Medical School; and Howard Hughes Medical Institute investigator.

The 2019 Nobel Prize in Physiology or Medicine was awarded jointly to Dr. Kaelin, Sir Peter J. Ratcliffe, and Gregg L. Semenza for their discoveries of the oxygen-sensing system in cells.

After accepting the AACI award, Dr. Kaelin presented some of his scientific work, adding color with an engaging review of his career.

In a Q&A session, Dr. Kaelin highlighted mentorship as vital to career development and trainee success. "To become a scientist you learn by apprenticeship," he said.

"The mentor and environment are critical to learning how to ask good questions. Be a little bit courageous. If you see an important question and you think you have a path don't shy away

from it," he advised. "And be self-critical: 'What am I missing? Do I need another control, another corroborating line of evidence?' Techniques of science can be learned from anybody, but the scientific 'taste,' having a nose for a good question, comes from a good mentor."

Dr. Kaelin added that young people look for cues from their mentors. So while it is sometimes tempting to convey frustrating aspects of the job, it is important to emphasize the joy of being a scientist and participating in discovery.

Dr. Kaelin also offered advice to cancer center directors struggling to manage scientific talent at their institutions.

"It has to be a big tent; there has to be room for all types of people," he said. "Be facilitators for collaboration."

# Clinical Research Innovation

**THE 12TH ANNUAL AACI CRI MEETING DREW 1,005 REGISTRANTS. IT FOCUSED ON THE UNIQUE CHALLENGES OF CONDUCTING CANCER CLINICAL TRIALS DURING THE COVID-19 PANDEMIC. SESSIONS AT THE TWO-DAY VIRTUAL MEETING ADDRESSED TECHNOLOGY TO IMPROVE CLINICAL TRIALS, MANAGING CHANGE IN CLINICAL TRIALS OFFICES, AND EFFECTIVE STRATEGIES FOR WORKING ACROSS GENERATIONAL DIVIDES.**

Meeting attendees represented 87 cancer centers, AACI Corporate Roundtable and sustaining members, and industry. The meeting app provided new opportunities to connect in lieu of face-to-face networking, from an interactive game to a virtual exhibit hall and a live activity feed with photos and social media posts.

**Dr. Theresa L. Werner**, CRI Steering Committee chair, opened the meeting with a look at CRI's recent accomplishments, including updated strategic objectives and an active Shared Investigator Platform (SIP) Task Force.

A panel discussion on harnessing technology to improve cancer clinical trials included a report on the use of wearable devices and sensors in monitoring cancer patients. A review of ways that cancer centers are managing change, especially in relation to coronavirus restrictions,

highlighted the importance of trust at institutions for everything from training, communication, and management, to determining pay and goals.

As in previous years, the session on the National Cancer Institute (NCI) Cancer Center Support Grant (CCSG) was particularly popular. **Alex Zafirovski**, executive director of administration at Robert H. Lurie Comprehensive Cancer Center of Northwestern University, moderated the panel discussion. The CCSG Q&A session featured **Dr. Gisele Sarosy**, associate director for informatics and biomarkers at NCI, and **Dr. Henry Ciolino**, director of NCI's Office of Cancer Centers. Question topics included community outreach and engagement and NCI's Clinical Trials Reporting Program.

Supporters who exhibited, presented, and otherwise participated in this event included: Advarra, home of Forte Technology Solutions; ASCO; Complion; Essex Management; Florence, Huron; Merck; Novartis; and Veeva Systems.

Following the CRI annual meeting, the 2020 AACI/CCAF Annual Meeting, held virtually in October, featured a two-part session titled "Managing Change," hosted by the CRI steering committee.



Dr. Theresa L. Werner

## Winning Abstracts

The 12th Annual AACI CRI Meeting included information-rich presentations by three abstract winners. Seventy-seven abstracts were submitted, focusing on solutions tested and implemented to address clinical research challenges that can impede cancer drug development.

### First Place

*Standardized and Personalized Training Results in Increased Job Satisfaction and a Reduction in Turnover*

K. Jenkins, J. Workman, L. Mooney, M. Kilbane

Cleveland Clinic Cancer Center

### Second Place

*The Challenges and Successes of Enrolling Participants on the Tomosynthesis Mammographic Imaging Screening Trial (TMIST or study EA1151) in Hawai'i's Minority/Underserved NCI Community Oncology Research Program (M/U NCORP)*

S. Cheng<sup>1</sup>, S. Wakui<sup>1</sup>, S. Lieu<sup>1</sup>, N. Ramos<sup>1</sup>, K. Bryant-Greenwood<sup>1</sup>, K. Cassel<sup>1</sup>, J. Berenberg<sup>1</sup>, M. Ka'aihue<sup>2</sup>, R. Lee<sup>2</sup>, E. Capps<sup>2</sup>

<sup>1</sup>University of Hawai'i Cancer Center, University of Hawai'i at Mānoa;

<sup>2</sup>Queen's Medical Center

### Third Place

*Enhancing Productivity: Utilizing the ONBASE Application and Pharmacist Created Order Sets to Streamline the Trial Launch Process*

B. Secor, I. Reveles, D. Yzquierdo, A. Rodriguez, M. Nashawati, M. Tomasini, P. Manea

Mays Cancer Center, UT Health San Antonio



## CRI Steering Committee

AACI held elections in September for a new chair-elect and four new steering committee members. The chair-elect is **Dr. Tara Lin**, clinical trials office (CTO) medical director and associate professor of medicine, from The University of Kansas Cancer Center. Dr. Lin has served as a steering committee member for the past two years.



*Dr. Tara Lin*

Joining the CRI Steering Committee are: **Tiffany Colvin**, University of Colorado Cancer Center; **Dr. Thomas J. George**, University of Florida Health Cancer Center; **Dr. Patricia LoRusso**, Yale Cancer Center, Yale School of Medicine; and **Anne Schnatterly**, WVU Cancer Institute. **Dr. Kimberly F. Kerstann**, Winship Cancer Institute of Emory University, ex officio, will represent the Cancer Center Administrators Forum (CCAF).

Four members rotated off the CRI Steering Committee: **Tricia Adrales Bentz**, Hollings Cancer Center, Medical University of South Carolina; **Dr. Stefan C. Grant**, Wake Forest Baptist Comprehensive Cancer Center; **Helen Peck**, Wilmet Cancer Institute, UR Medicine; and **Alex Zafirovski**, Robert H. Lurie Comprehensive Cancer Center of Northwestern University.

## Working Groups and Task Force

### CTO Medical Director Working Group

The CRI Steering Committee distributed a survey to 86 CTO medical directors in May, receiving 43 responses. The survey aimed to learn more about CTO medical director, or similarly titled, responsibilities for overseeing cancer center clinic research programs. A CTO Medical Director Working Group met monthly throughout 2020 to create the survey, review responses, and develop survey outcomes including crafting a job description for CTO medical directors.

### eRegulatory File Management Working Group and Education Operations Subcommittee

While both of these working groups pursued different goals at the start of the year, the COVID-19 pandemic created a “new normal” along with the need for CTO leaders to understand how CTO operations were being conducted remotely. Since the two working groups had similar questions, they were merged to address challenges such as monitoring staff productivity, assuring timely and accurate data collection, and providing sponsors with remote monitoring access.

### AACI Shared Investigator Platform (SIP) Task Force

The SIP task force met monthly to discuss SIP implementation. The meetings generated three webinars for AACI members and a 2021 Virtual SIP Summit is planned.

## CRI Listserv

The CRI Listserv was a valuable resource during the pandemic as cancer centers discussed ways that CTO staff have worked remotely while maintaining trial treatments and safety monitoring. The listserv reaches more than 700 members at 85 AACI cancer centers.

### Topics discussed since December 2019 include:

- COVID-19 and trial recruitment
- Investigational drug shipping to study patients at home
- Study patient transfer policies
- Updates to delegation-of-authority logs
- Remote monitoring best practices
- Data safety and monitoring committee policies
- Trainees and clinical trial assessments
- Multisite investigator-initiated trial guidance for COVID-19
- Quality control and quality assurance performance metrics
- Effort-tracking for staff working remotely
- Electronic signature policies
- Utilization of community members for protocol review monitoring system
- Use of principal investigator satisfaction surveys

## CRI Benchmarking Survey

A report on results of a CRI benchmarking survey—“Clinical Trial Metrics: The Complexity of Conducting Clinical Trials in North American Cancer Centers”—was published in November in the American Society of Clinical Oncology’s *Journal of Oncology Practice*. Seventy-nine of 92 AACI centers that conduct clinical trials completed the survey, which asked about clinical trial office workload, funding, staffing, and trial activation timelines. Primary authors were Drs. Carrie Lee, immediate past CRI steering committee chair, and Theresa L. Werner, current CRI steering committee chair.

Median Number of Trials for Centers Within Each Budget Range

CTO Budget (Millions)	No. of Centers (N=75)	Trials
<\$4	22	198 (31–491)
\$4–\$8	15	307 (129–1,833)
\$8–\$12	21	245 (63–739)
\$12–\$16	8	394 (173–710)
>\$16	9	549 (255–937)

NOTE: Data are reported as median (range); four responding centers did not answer this question.

## Clinical Trial Metrics: The Complexity of Conducting Clinical Trials in North American Cancer Centers

Carrie Lee, MD, MPH<sup>1</sup>; Theresa L. Werner, MD<sup>2</sup>; Allison M. Deal, MS<sup>3</sup>; Cassandra J. Krize-Conte, MPH<sup>4</sup>; Tricia Adreles Benitz, MHA<sup>5</sup>; Theresa M. Cummings, RN, MS<sup>6</sup>; Stefan C. Grant, MBSCH, MD, JD, MBA<sup>7</sup>; Ashley Baker Lee<sup>8</sup>; Jessica Moshir, BS<sup>9</sup>; Krista Moffett, MHA<sup>10</sup>; Helen Puck, RN, MA<sup>11</sup>; Stephen Williamson, MD<sup>12</sup>; Aleksander Zefrevski, MBA<sup>13</sup>; Kate Shaw, MA<sup>14</sup>; and Janie K. Helzlsouer, RN, MS<sup>15</sup>

**QUESTION ASKED:** What are the benchmarks for North American cancer center clinical trial offices (CTOs) with regard to sources of financial support, interventional treatment trial volume, trial activation timelines, accrual by trial sponsor type, full-time equivalents (FTEs), staff turnover, and do these benchmarks vary by National Cancer Institutes (NCI) designation?

**SUMMARY ANSWER:** Trial volumes, accruals, activation timelines, and sources of support varied widely by cancer center size and regional demographics. NCI designation, among those CTOs with a budget of less than \$4 million, was associated with more trials, accruals, and FTEs.

**WHAT WE DID:** An 11-question survey designed by the Association of American Cancer Institutes Clinical Research Innovation steering committee was sent to CTO administrator at 90 cancer centers in the United States and two in Canada. 72 centers responded. A dictionary of terms was included to standardize survey responses. For data collection consistency, cancer centers were asked to report interventional treatment clinical trial activity for 12 months after 2016 and to use the same period for all survey questions.

**WHAT WE FOUND:** The number of FTE employees working within the CTOs ranged from 4.5 to 811; the median was 104. The median number of analytic cases (ie, newly diagnosed or received first course of treatment) reported by the main center was 3,856. Annual CTO budgets ranged from \$250,000 to \$23,900,000 (median, \$8.2 million). The median trial activation time, based on 61 centers, was 167 days. Median accruals per center was 480 (range, 5–6,271) and the median number of trials per center was 282 (range, 31–1,833). Budget and FTE ranges varied by NCI designation. Estimating on the basis of benchmark data, the accrual to trial ratio was 1.5, median accrual to FTE ratio was 5, and median cost per accrual was \$17,363.

**BIAS, CONFOUNDING FACTORS, DRAWBACKS:** A wide range in each of the outcomes was noted, in keeping with the wide variation in size and scope of cancer center CTOs across the United States and Canada. Among the smaller centers (CTO budget < \$4 million), there was an association between a larger number of trials, accruals, FTEs, and NCI designation. This finding is hypothesis generating; it cannot be concluded that the relationship is causal and reveals the need for more investigation of the value of NCI designation and its impact on CTO operations and support.

**REAL-LIFE IMPLICATIONS:** Transparent sharing of these benchmark data are essential for helping centers determine if their offices are “right sized” for their clinical goals and for justifying the cost of oncology clinical trials. The data may be used as a baseline for as how to systematically address the gap between trial selection and trial accrual (ie, improve the accrual-to-trial ratio) and how to more collaboratively address the problems of slow activation and underfunded trials.

## Other Initiatives

### Network Care

Led by AACI Immediate Past President **Dr. Stanton L. Gerson**, director of the Case Comprehensive Cancer Center, the Network Care Initiative’s goal is to improve access to high quality specialty care across a broader geographic region and a larger population.



Dr. Stanton L. Gerson

A report on an AACI survey detailing the nature of the relationships between main cancer centers and their network sites was accepted for publication in the *Journal of the National Comprehensive Cancer Network* in September. It will be published in 2021.



Dr. Joseph McGuirk

### CART

The CAR T Initiative Steering Committee convened in 2020 to develop a survey focusing on how cancer centers have responded to the challenges of managing cellular therapy programs during the pandemic. The survey will be sent to AACI cancer centers in early 2021. **Dr. Joseph McGuirk**, of The University of Kansas Cancer Center, leads the initiative.



# Physician Clinical Leadership Initiative

**AACI'S PHYSICIAN CLINICAL LEADERSHIP INITIATIVE (PCLI) ESTABLISHES BEST PRACTICES TO ADDRESS CANCER CENTER INTERESTS THROUGH AN ANNUAL MEETING, WEBINARS, SURVEYS, STEERING COMMITTEE MEETINGS AND, NEW IN 2020, A LISTSERV DISCUSSION GROUP.**



PCLI's 8th annual meeting was held in October as part of the virtual AACI/CCAF annual meeting. The session began with **Dr. Claire Verschraegen** (pictured left),

chair of the PCLI steering committee, providing an overview of PCLI and the past year's activities, followed by a 90-minute panel discussion moderated by **Dr. Edith P. Mitchell**, Sidney Kimmel Cancer Center at Jefferson Health,



*Clockwise, from upper left: Drs. Melissa A. Simon, Edith P. Mitchell, Otis W. Brawley, and Carmen E. Guerra*

## Protected Time Survey Results to be Published



The *Journal of the National Comprehensive Cancer Network* accepted for publication a manuscript titled, "Status of the Clinician

Investigator in America: An Essential Health Care Provider Driving Advances in Cancer Care." The paper includes results of an AACI survey on protected time for research efforts by physician-scientists, clinician investigators and academic clinicians.

The lead author was **Dr. Randall F. Holcombe**, director of the University of Hawai'i Cancer Center, University of Hawai'i at Mānoa and past chair of the PCLI steering committee. A publication date is to be determined.

## Webinars

- **Maintaining a Clinical Research Practice at an Academic Cancer Center**  
**Dr. Claire Verschraegen**,  
*The Ohio State University Comprehensive Cancer Center – James Cancer Hospital and Solove Research Institute*
- **Implementation of Germline Testing for Prostate Cancer**  
**Drs. Edith Mitchell and Dr. Veda N. Giri**, *Sidney Kimmel Cancer Center at Jefferson Health*
- **Oncology Workforce Challenges: The Role of Advanced Practice Providers in Academic Oncology**  
**Dr. John Sweetenham and Angela F. Bazzell**, *Simmons Comprehensive Cancer Center, UT Southwestern Medical Center*

## New Steering Committee Members

Six new members were selected to join PCLI's Steering Committee:

- Dr. Steven R. Alberts**  
*Mayo Clinic Cancer Center*
- Dr. Julie Brahmer**  
*Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins University*
- Dr. Lisa Carey**  
*UNC Lineberger Comprehensive Cancer Center, University of North Carolina at Chapel Hill*
- Dr. Merry Jennifer Markham**  
*University of Florida Health Cancer Center*

**Dr. Jessica Rhee**  
*University of Hawai'i Cancer Center  
University of Hawai'i at Mānoa*

**Dr. John Sweetenham**  
*Simmons Comprehensive Cancer Center  
UT Southwestern Medical Center*

AACI thanks the following outgoing PCLI steering committee members for their service: **Dr. Craig Bunnell**, Dana-Farber Cancer Institute, Harvard Medical School; **Dr. Richard Goldberg**, WVU Cancer Institute; **Dr. Randall F. Holcombe**, University of Hawai'i Cancer Center, University of Hawai'i at Mānoa; and, **Dr. Dan Mulkerin**, University of Wisconsin Carbone Cancer Center.

# Public Policy

THROUGHOUT 2020 THE ASSOCIATION CONTINUED TO ADVOCATE FOR MANY OF ITS EXISTING POLICY PRIORITIES AS WELL AS EMERGENT ISSUES RELATED TO THE COVID-19 PANDEMIC.



In 2020, AACI continued to advocate for stable, predictable funding increases for the National Institutes of Health (NIH) and the National Cancer Institute (NCI). AACI joined other advocates in requesting \$44.7 billion for the NIH and \$6.9 billion for the NCI in the Fiscal Year (FY) 2021 budget, an amount that

represented a positive step toward the goal of increasing the NCI payline to 15 percent by 2025.

## Virtual Hill Day

For the 13th year, AACI co-hosted its annual Hill Day with the American Association for Cancer Research (AACR). Due to the COVID-19 pandemic, the event was held virtually on June 5. Cancer center directors, researchers, oncologists, cancer survivors, and other advocates identified members of Congress serving on key committees. Participants updated members of Congress and staff on developments at their cancer centers and reiterated AACI's FY 2021 funding request. They also asked for an additional \$15.5 billion to address disruptions to NIH research due to the pandemic.

## Government Relations (GR) Steering Committee

AACI welcomed four new members to the GR Steering Committee:

- **Matthew Swaback**  
*Thomas Jefferson University and Jefferson Health*
- **James Kennedy**  
*Roswell Park Comprehensive Cancer Center*
- **Jill Homer Stewart**  
*The Jackson Laboratory Cancer Center*
- **Alex Krigstein**  
*University of Florida Health Cancer Center*

The steering committee extends its appreciation to the following members, whose terms ended in 2020:

- **Jack Cline**  
*The University of Kansas Cancer Center*
- **Jennifer Evans Stacey**  
*The Wistar Institute*
- **Orly Isaacson**  
*Memorial Sloan Kettering Cancer Center*

## Engagement With Presidential Campaigns

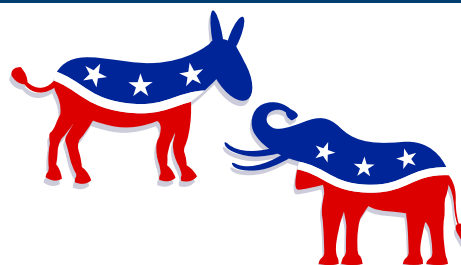
### 5-Point Pledge

In early 2020, AACI called upon presidential candidates to pledge their support of five policy priorities for our nation's cancer centers. Candidates were also invited to share detailed feedback on the issues that resonated with them. These priorities are funding lifesaving research; eliminating HPV-related cancers; implementing evidence-based tobacco control and vaping policies; achieving oral chemotherapy

parity; and addressing cancer disparities. Former South Bend, Indiana mayor, Pete Buttigieg, and former Vice President Joe Biden provided comprehensive responses to the survey.

### Election-Themed Forum

In October, AACI hosted its first virtual GR Forum meeting, featuring Senior Trump Campaign Advisor Jason Miller and Representatives Ami Bera (D-CA) and Raul Ruiz (D-CA), surrogates for the Biden campaign.



The surrogates provided status reports on their respective campaigns and discussed the candidates' health care policies, particularly as they relate to cancer and COVID-19.



## Public Policy Resource Library

### A Capstone on the 2018–2020 Presidential Initiative

Established as the presidential initiative of **Dr. Roy A. Jensen**, director of The University of Kansas Cancer Center, the AACI Public Policy Resource Library (PPRL) has enabled cancer advocates to share talking points and legislation enacted across the U.S. to foster collaboration, promote cancer prevention, and spur the development of sound public health policy. By providing a platform to share carefully-vetted information on topics including state funding programs for cancer research, efforts to curb HPV-related cancers, and tobacco control, AACI aims to improve the lives of Americans through lowered cancer incidence and mortality.

### Federal Legislation Tracker

During the 2020 AACI/CCAF Annual Meeting in October, AACI launched a federal legislation tracker tool as a companion to the PPRL. The legislation tracker provides updates on the status of cancer-related bills and progress by AACI and like-minded organizations to advance the legislation. The tracker specifically highlights federal legislation that has been endorsed by AACI.

The PPRL and legislation tracker were built in collaboration with undergraduate information systems students at Carnegie Mellon University (CMU) in Pittsburgh. A CMU team worked closely with AACI staff and web developers to integrate the tracker with the PPRL to ensure ease of use for government relations professionals at AACI cancer centers.



*Dr. Roy A. Jensen*

AACI staff regularly updates the tracker with news, co-sponsorship numbers, and committee activity related to relevant bills. Members are encouraged to share status updates on legislation.

## Correspondence

**FROM “THANK YOU” TO MEMBERS OF CONGRESS TO COMMENTS ON FEDERAL AGENCY GUIDELINES, LETTER WRITING IS ONE OF THE MAIN WAYS THAT GOVERNMENT RELATIONS LEADERS AT CANCER CENTERS, WORKING WITH AACI STAFF, MAKE THE CASE FOR CANCER RESEARCH. HERE IS A SELECTION OF CORRESPONDENCE FROM 2020:**

### Thank You

- To the National Cancer Institute (NCI) Director Dr. Norman E. Sharpless for setting a goal in the NCI’s FY 22 bypass budget to reach the 12th percentile payroll for RO1 grants
- To Senators Roy Blunt (R-MO) and Chris Murphy (D-CT) for introducing S. 4421, the Temporary Reciprocity to Ensure Access to Treatment Act of 2020, which allows temporary uniform licensing standards for telehealth and in-person visits during a national

emergency and subsequent transition period

- To Biden and Trump presidential campaign surrogates for participating in the GR Forum meeting and reiterating AACI’s policy priorities for the next four years

### Comments

- To the Centers for Medicare & Medicaid Services on its Inpatient Prospective Payment System rule as it applies to CAR T therapy



- To Hill leadership requesting delayed implementation of the Radiation Oncology (RO) Alternative Payment Model, which would threaten the long-term financial viability of institutions that practice RO
- To the Department of Homeland Security regarding a proposed rule that would place additional burdens on foreign nationals working in research and medicine



**WHEN THE CORONAVIRUS PUBLIC HEALTH EMERGENCY WAS DECLARED IN MARCH, AACI ACTED QUICKLY TO ADAPT TO THE UNPRECEDENTED CRISIS, PROVIDING ADDITIONAL SUPPORT TO CANCER CENTER MEMBERS AS PRIORITIES SHIFTED FROM WEEK TO WEEK.**

“Cancer centers are often equipped to lead their larger academic health systems in pandemic recovery, and they have a responsibility to do so.”

—Dr. Steven D. Leach, “*Confronting Our Twin Pandemics: Reflections on the 2020 AACI/CCAF Annual Meeting*,” AACI Commentary, October 2020

## **COVID-19 Advocacy**

On the public policy front, numerous COVID-related issues generated the following AACI actions through letters and press releases:

- Requested invocation of the Defense Production Act to marshal American manufacturing to confront the COVID-19 emergency, and called for military mobilization to help build temporary hospital facilities and to assist hospital personnel.
- Asked congressional leaders to consider the needs of academic cancer centers in future COVID-19 response legislation. Priorities included supplemental appropriations for major research agencies and additional funding for hospitals and health systems.
- Urged the federal government to take the lead in deploying personal protective equipment (PPE) to hospitals, establishing a consistent national COVID-19 testing strategy, and managing the COVID-19 testing supply chain.
- Opposed a presidential proclamation that aimed to suspend visa processing for certain individuals from China and for certain categories of high-skilled, nonimmigrant visas from around the world amid the COVID-19 public health emergency and economic crisis.
- Called on the Trump administration to share vital information about its coronavirus response with President-elect Joe Biden and his transition team to ensure continuity of care for patients with cancer.



## Collaborating to Confront the Crisis

AACI joined nearly 50 cancer advocacy organizations on a letter to Congress regarding a potential fourth coronavirus relief package. The letter included priorities such as oral chemotherapy parity, requiring insurers to provide a 90-day supply of retail medications, creating a special enrollment period for HealthCare.gov, increasing funding for state Medicaid programs, and providing assistance for people who have lost employer-sponsored health coverage. AACI drafted the letter with the American Cancer Society Cancer Action Network, American Society of Clinical Oncology Cancer Support Community, Friends of Cancer Research, National Comprehensive Cancer Network, and The Leukemia & Lymphoma Society.



AACI and more than 80 science and public health organizations joined forces to express strong support for **Dr. Anthony S. Fauci**, director of the National Institutes of Health's National Institute of Allergy and Infectious Diseases. The letter highlighted Dr. Fauci's five decades of expertise in addressing HIV/AIDS, Ebola, Zika, and other infectious diseases, and his integral role in developing sound public health guidance during the COVID-19 pandemic.

AACI continued to host monthly calls in 2020 for government relations staff to discuss public policy issues important to cancer centers.

The calls were instrumental in providing a venue for members to discuss their centers' pandemic responses, bringing key issues to the forefront such as COVID-19 testing, telehealth, and securing PPE. Recognizing the importance of staying connected—even virtually—AACI transitioned the calls to Zoom videoconferences. The platform also became an important tool in hosting AACI's annual Government Relations Forum meeting.

## Keeping Members Connected

At the advent of COVID-related workplace restrictions, AACI launched a Slack workspace as a forum for AACI members and National Cancer Institute leaders to share challenges and solutions related to COVID-19 and cancer. In addition, a COVID-19 Resources page on AACI's website shares news, guidelines, and cancer center policies related to the pandemic.

AACI communicated with its members about the intersection of COVID-19 and cancer through its AACI *Commentary* editorial series:

- The **March Commentary** provided an overview of the measures AACI cancer center members had taken to protect patients, their families, and the community from COVID-19 infection, including travel restrictions, remote work, and screening protocols for patients and staff entering their facilities.
- In the **May Commentary**, AACI's Corporate Roundtable members summarized the COVID-19 assistance they had provided for cancer centers and patients, from maintaining the integrity of clinical trials and ensuring the flow of protective equipment and



other supplies to cancer centers, to accelerating vaccine development and providing medicine to patients facing financial hardship.

- **Dr. Ruben Mesa**, director of Mays Cancer Center, UT Health San Antonio, authored the **August Commentary**, which focused on how the rapid shift toward telemedicine has underscored the ways that technology can improve cancer care while reducing the risk of COVID-19 transmission. Later in the year AACI distributed a survey to cancer center leadership to better understand the use of telehealth at member institutions.
- 2020 AACI/CCAF Annual Meeting Program Committee Chair **Dr. Steven D. Leach**, director of Dartmouth-Hitchcock Norris Cotton Cancer Center, summarized major themes of the meeting in the **October Commentary**. Citing the “twin pandemics” of COVID-19 and systemic racism, Dr. Leach wrote that the 2020 annual meeting addressed not only the unique challenges of running a cancer center and delivering care amid the pandemic, but also the parallel urgent task of overcoming cancer disparities.

# Diversity and Inclusion

AS AN ASSOCIATION COMPRISED OF 102 ACADEMIC AND FREESTANDING CANCER CENTERS ACROSS THE UNITED STATES AND IN CANADA, AACI IS DEDICATED TO ACCELERATING PROGRESS AGAINST CANCER THROUGH RESEARCH, TREATMENT, AND ADVOCACY; DIVERSITY AND INCLUSION ARE KEY TO FULFILLING OUR MISSION.

Recognizing that the burden of cancer falls disproportionately on communities of color—particularly Black communities—AACI is committed to promoting health equity. AACI cancer centers are actively working to reduce cancer health disparities, such as higher rates of cancer cases, deaths, and complications among certain population groups, and lower screening rates among some groups.

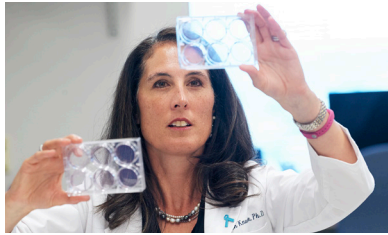
In early 2020, AACI called upon U.S. presidential candidates to build on decades of progress against cancer by increasing access to comprehensive health care and addressing health disparities. In Summer 2020, AACI issued a statement condemning racism, suggesting that it must be confronted with the same urgency as cancer, COVID-19, and other

crises that impact public health. And the September AACI *Commentary*, by Dr. Ana Maria Lopez, Sidney Kimmel Cancer Center at Jefferson Health, asserted that inclusion is a mission-based goal integral to the cancer centers.

## Presidential Initiative

### Mitigating Cancer Disparities

At the 2020 AACI/CCAF Annual Meeting in October, **Dr. Karen E. Knudsen** began her two-year term as AACI president. Her presidential initiative aims to mitigate cancer disparities, beginning with a clear definition of the problem as it impacts AACI cancer centers and patients and establishing platforms for ongoing discussion of cancer health disparities.



Dr. Karen E. Knudsen

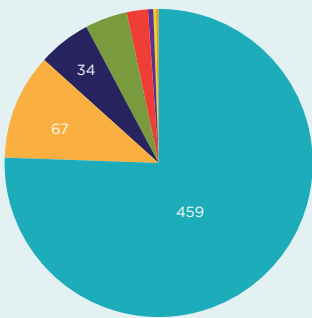
In Fall 2020, AACI surveyed cancer center directors to learn more about their centers' catchment areas and to begin to address gaps in services and access to care. Another AACI survey focused on the use of telemedicine at cancer centers. Though it has come to the fore since the COVID-19 pandemic, certain patients still face obstacles to accessing care via telemedicine, including reliable access to internet service and appropriate devices. Results from the surveys will provide a foundation for a podcast series hosted by Dr. Knudsen. With the podcast, AACI hopes to raise awareness of cancer disparities while fostering collaboration and advocacy among cancer centers throughout North America.

## Cancer Center Leadership Diversity

In Summer 2020, AACI and *The Cancer Letter* partnered on a diversity survey that was distributed to cancer center leadership. The results highlighted dimensions of diversity that must be improved at our nation's leading cancer centers, including better representation of women and underserved populations throughout the leadership pipeline.

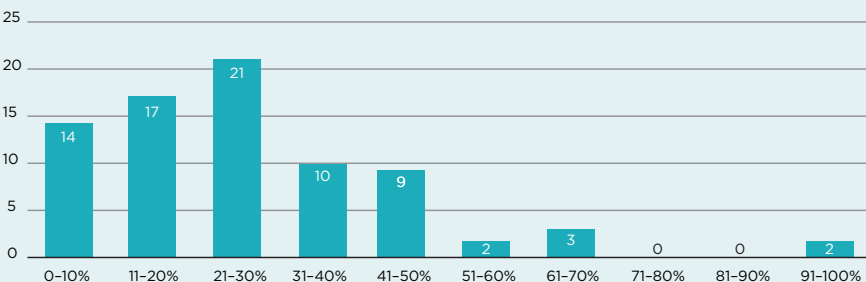
Seventy-eight directors at AACI cancer centers responded, 61 of them from NCI-designated centers. One director identified as Black and 17 identified as either Hispanic, Latino, or Spanish; Middle Eastern or North African; Asian/Asian American; Pacific Islander; or multiracial. Gender identity among directors also skews toward men. Sixty-six directors identified as men and 12 directors identified as women.

### Deputy/Associate Directors by Race/Ethnicity



White (75.7%)  
Asian/Asian American (11.1%)  
Black or African American (5.6%)  
Hispanic, Latino, or Spanish origin (4.5%)  
Middle Eastern or North African (2.3%)  
Native Hawaiian or Pacific Islander (0.5%)  
Native American or Alaska Native (0.2%)  
Unknown (0.2%)

### Number of Institutions According to Percentage of Non-white Deputy/Associate Directors



Data source: AACI Cancer Center Leadership Diversity Survey, 2020

# Corporate Roundtable

THE AACI CORPORATE ROUNDTABLE PROVIDES A FORUM FOR AACI CANCER CENTERS TO ADDRESS TOPICS OF COMMON INTEREST WITH INDUSTRY COLLEAGUES. THIS INTERACTION LEADS TO SUPPORT FOR BOTH NEW AND ONGOING AACI PROGRAMS AND INITIATIVES. BY WORKING TOGETHER, CANCER CENTERS AND INDUSTRY SHARE THEIR MUTUAL STRENGTHS TO SPEED THE DEVELOPMENT OF PROMISING THERAPIES FOR PATIENTS.



The AACI Corporate Roundtable met virtually twice in 2020—in July at the 12th Annual AACI CRI Meeting and in October at the AACI/CCAF annual meeting.

At the Corporate Roundtable meeting in July, CRI Steering Committee chair Dr. Theresa L. Werner reported on the AACI Shared Investigator Platform (SIP) for clinical trials, convened in cooperation with Cognizant. The discussion highlighted the progress of SIP implementation at the cancer centers and how the SIP task force and Cognizant staff have worked together to host various webinars.

The topics of remote monitoring and trial activation, featured in past meetings, were identified as top areas of collaboration between AACI member centers and the pharmaceutical industry.

Also discussed were lessons learned from COVID-19, technology that accelerates trial conduct, and streamlining trial inclusion/exclusion criteria. The meeting led to creation of a new task force on trial activation, which will include roundtable and CRI steering committee members.

At the roundtable meeting in October, outgoing AACI President **Dr. Roy A. Jensen** provided an overview of his presidential initiative, the AACI Public Policy Resource Library, designed to encourage AACI cancer centers to be more involved in advocacy at the federal and state levels. The initiative compiles public policy materials in a single website, particularly, cancer-specific legislation endorsed by AACI.

AACI's incoming president, **Dr. Karen E. Knudsen**, summarized her presidential initiative for 2020-2022. Other roundtable discussion points included cancer center operations post-COVID-19 and an update on AACI's CRI program.

AACI extends its gratitude to our 2020 Corporate Roundtable members for their commitment and support (at right).

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# Supporters

**THE AACI/CCAF ANNUAL MEETING AND THE ANNUAL CLINICAL RESEARCH INNOVATION (CRI) MEETING PROVIDE OPPORTUNITIES FOR SUPPORTERS TO INTERACT WITH AACI MEMBERS AND REPRESENTATIVES FROM OTHER LIKE-MINDED ORGANIZATIONS.**

Supporters and exhibitors at both events utilized the virtual platform to promote their products and services to a record number of meeting attendees, including cancer center directors, executive administrators, and clinical leaders.

AACI received support in 2020 for its events, programs, and other activities from:

- Advarra
- American Society of Clinical Oncology (ASCO)
- AstraZeneca
- Caris Life Sciences
- Complion
- Deep6 AI®
- Essex Management
- Florence
- Huron Consulting Group
- Merck
- nCoup
- Novartis
- Pfizer
- The Society for Immunotherapy of Cancer (SITC)
- Varian Medical Systems
- Veeva Systems

## Exhibitors

### 12th Annual AACI CRI Meeting

- Advarra
- American Society of Clinical Oncology (ASCO)
- Complion
- Essex Management
- Florence
- Huron
- Veeva Systems

### 2020 AACI/CCAF Annual Meeting

- Advarra
- Caris Life Sciences
- Complion
- Deep 6 AI®
- Huron
- nCoup
- The Society for Immunotherapy of Cancer (SITC)
- Veeva Systems

AACI appreciates these companies' vital assistance with fulfilling the association's mission.

## Sustaining Members

Sustaining membership in AACI is open to nonprofit organizations that represent and support the educational and professional development of clinical oncology health professionals and researchers. These like-minded cancer organizations and patient advocacy groups share a common goal of accelerating progress against cancer.

Sustaining members can take advantage of AACI's resources for educating policymakers on the importance of cancer research funding and are invited to participate in AACI-sponsored meetings, workshops, and forums as well as meet annually with AACI leadership.

AACI thanks its 2020 sustaining members for their support.



Society for Immunotherapy of Cancer

# New Cancer Center Members

**AACI WELCOMED CANCER CENTER AT BROWN UNIVERSITY AND UNIVERSITY OF PUERTO RICO COMPREHENSIVE CANCER CENTER TO ITS MEMBERSHIP ROSTER.**



*Dr. Marcia Cruz-Correa, director, University of Puerto Rico Comprehensive Cancer Center*

## University of Puerto Rico Comprehensive Cancer Center

Directed by **Dr. Marcia Cruz-Correa**, University of Puerto Rico Comprehensive Cancer Center (UPRCCC) has a longstanding relationship with AACI, first holding membership in the association in 1977. Today UPRCCC aims to deliver research-driven cancer care by integrating patient care, research, and prevention and to eradicate cancer in Puerto Rico using a multidisciplinary approach of translational, clinical, and population sciences research. The cancer center's research model includes the Division of Cancer Control and Population Sciences, Division of Cancer Biology, and the Division of Cancer Medicine.

UPRCCC participates in programs across the island for cancer screening including colorectal, breast, cervical, and lung cancer. The center is affiliated with University of Puerto Rico Medical Sciences Campus, with participation of clinical and research faculties and

educational programs across various schools including medicine, dentistry, pharmacy, and public health. The cancer center has also implemented several research and prevention activities and programs related to human papillomavirus (HPV), including HPV vaccination clinics established in partnership with a local coalition for vaccination. A strong early-phase cancer prevention clinical trials program and a community-based National Cancer Institute clinical trials oncology program provides access to novel therapies to the Hispanic population the center serves.

## Cancer Center at Brown University

The mission of Cancer Center at Brown University is to build world-class cancer research programs that bring basic science discoveries; interdisciplinary research; and innovative therapeutic, disease intervention, and cancer prevention clinical trials to patients in Rhode Island. Under the direction of **Dr. Wafik S. El-Deiry**, the cancer center takes a broad-spectrum approach, from working to understand how cancer develops, grows, and metastasizes, to developing new, personalized therapeutics and addressing the needs of patients with cancer from risk through survivorship.

Cancer center members represent Brown University, the Lifespan Cancer Institute, affiliated hospitals, the Warren Alpert Medical School, and Brown's School of Public Health and School of Engineering, among others. The center has research programs in Cancer Biology, Cancer Therapeutics, and Population Science; cancer type-specific translational research disease groups; and a robust portfolio of clinical trials. A particular focus of the Cancer Center at Brown University is malignancies with higher rates of incidence in Rhode Island such as bladder, lung, breast, thyroid, and skin cancer, as well as issues of access to and affordability of cancer care.



*Dr. Wafik S. El-Deiry, director, Cancer Center at Brown University*

# New Leadership



*Dr. Karen E. Knudsen*

Under Dr. Knudsen, Sidney Kimmel Cancer Center at Jefferson Health is one of only four NCI-designated centers to be ranked “Exceptional” in Community Outreach and Engagement.

## President and President-elect Assume Duties

**Dr. Karen E. Knudsen** is AACI’s new president. She began her two-year term during the 2020 AACI/CCAF Annual Meeting, accepting the gavel in a clever online hand-off from outgoing AACI president **Dr. Roy A. Jensen**. Dr. Knudsen has been a member of AACI’s Board of Directors since 2016 and chaired AACI’s Annual Meeting Program Committee in 2017.

Dr. Knudsen is the third director of the Sidney Kimmel Cancer Center (SKCC) at Jefferson Health, a National Cancer Institute (NCI)-Designated Cancer Center since 1995. With oversight of the cancer care and cancer discovery mission in the Jefferson Health enterprise, Dr. Knudsen also serves as the executive vice president of Oncology Services for Jefferson Health, and is the chair and Hilary Koprowski Professor of the Department of Cancer Biology.

Under Dr. Knudsen’s leadership, SKCC was evaluated as “Outstanding” in its most recent NCI renewal, and was one of only four cancer centers to be ranked “Exceptional” in Community Outreach and Engagement. SKCC has significantly extended the center’s reach since 2015, now delivering cancer care in three Advanced Care Hubs outside the main academic site and offering clinical trials in a two-state region.

Dr. Knudsen’s own research centers on advanced prostate cancer, with a focus on successful conversion of translational discoveries into clinical interventions. She maintains an actively funded research program and serves on the board of the American Association for Cancer Research, and on the NCI’s Board of Scientific Advisors. She serves as an editor for several leading oncology journals and has received numerous awards for her accomplishments.

In 2020, AACI members elected **Dr. Caryn Lerman** as vice president/president-elect of the association. Dr. Lerman is director of the USC Norris Comprehensive Cancer Center. Her two-year term began in October during the 2020 AACI/CCAF Annual Meeting.



*Dr. Caryn Lerman*

Prior to leading the USC Norris Comprehensive Cancer Center and serving as associate dean for cancer programs at USC’s Keck School of Medicine, Dr. Lerman was senior deputy director of the Abramson Cancer Center and vice dean for strategic initiatives in the Perelman School of Medicine at the University of Pennsylvania. She is recognized for her cancer prevention research that bridges the fields of neuroscience, genomics, pharmacology, and population science.

Dr. Lerman joined AACI’s board of directors in 2019. She is an elected member of the National Academy of Medicine and has served as a member of the NCI Board of Scientific Advisors, the National Human Genome Research Advisory Council, and the National Institutes on Drug Abuse Advisory Council.



## Three Cancer Center Directors Join AACI Board

**Dr. Cornelia Ulrich** and **Dr. Robert Winn** were elected in 2020 as new members of AACI's Board of Directors, and **Dr. Charles S. Fuchs** was appointed to complete Dr. Lerman's term. They will work closely with other AACI leaders to support the organization's mission of enhancing the impact of academic cancer centers.

Dr. Ulrich is the executive director of the Comprehensive Cancer Center at Huntsman Cancer Institute. She is also a Jon M. and Karen Huntsman Presidential Professor in Cancer Research in the Department of Population Health Sciences at the University of Utah. Dr. Ulrich leads an interdisciplinary team of scientists on research related to the prevention, epidemiology, prognosis, and survivorship of cancer. She is also principal investigator of the HCI Total Cancer Care Protocol in the ORIEN network of cancer centers. Dr. Ulrich serves on AACI's Conflict of Interest Task Force.

Dr. Winn was appointed director of VCU Massey Cancer Center in December 2019. He served as director of the University of Illinois Cancer Center from 2015 to 2019 and as associate vice chancellor of health affairs for community-based practice at the University of Illinois Hospital and Health Science System. Dr. Winn is committed to community-engaged research centered on eliminating health disparities and is a principal investigator on several community-based projects funded by the National Institutes of Health (NIH) and the National Cancer Institute (NCI). He served on the 2020 AACI/CCAF Annual Meeting Program Committee.

Dr. Fuchs is the director of the Yale Cancer Center and physician-in-chief of Smilow Cancer Hospital. He has spent his career leading research programs in gastrointestinal cancer epidemiology, biology, and drug development.



*Dr. Cornelia Ulrich*



*Dr. Robert Winn*



*Dr. Charles S. Fuchs*

Previously, Dr. Fuchs served as Robert T. and Judith B. Hale Chair in Pancreatic Cancer at Dana-Farber Cancer Institute and Harvard Medical School and chief of the Gastrointestinal Oncology Division. He served on the 2019 AACI/CCAF Annual Meeting Program Committee.

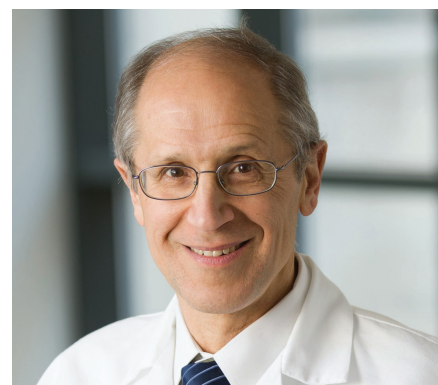
## Outgoing Board Members

AACI extends its appreciation to outgoing board members **Drs. Gerold Bepler, Stanton L. Gerson, and Timothy L. Ratliff**, for their service to the cancer center community.

Dr. Bepler is president and chief executive officer of Barbara Ann Karmanos Cancer Institute, Wayne State University. He served on the 2017 AACI/CCAF Annual Meeting Program Committee. Dr. Gerson is a past president of AACI and director of the Case Comprehensive Cancer Center. Dr. Ratliff, Robert Wallace Miller Director of the Purdue University Center for Cancer Research, was instrumental in the development of more robust programming for AACI's basic science cancer centers, moderating a panel discussion at the 2020 annual meeting.



*Dr. Gerold Bepler*



*Dr. Stanton L. Gerson*



*Dr. Timothy L. Ratliff*

# 2020 Committees

## ANNUAL MEETING PROGRAM COMMITTEE

**Chair: Steven D. Leach, MD**

Dartmouth College  
Dartmouth-Hitchcock Norris Cotton  
Cancer Center

**Julie Brabbs, MBA**

University of Michigan Rogel Cancer Center

**Roy A. Jensen, MD**

The University of Kansas Cancer Center

**Karen E. Knudsen, MBA, PhD**

Sidney Kimmel Cancer Center at  
Jefferson Health

**Steven K. Libutti, MD**

Rutgers Cancer Institute of New Jersey

**Jennifer W. Pegher, MA**

Association of American Cancer Institutes

**Timothy L. Ratliff, PhD**

Purdue University Center for Cancer Research

**Charles W. M. Roberts, MD, PhD**

Comprehensive Cancer Center  
St. Jude Children's Research Hospital

**Mindy Roberts, MA**

OHSU Knight Cancer Institute

**Robert A. Winn, MD**

VCU Massey Cancer Center

**Alex Zafirovski, MBA**

Robert H. Lurie Comprehensive Cancer Center of  
Northwestern University

## CAR T STEERING COMMITTEE

**Chair: Joseph McGuirk, DO, FACP**

The University of Kansas Cancer Center

**Lihua Elizabeth Budde, MD, PhD**

City of Hope Comprehensive Cancer Center

**Matthew H. Carabasi, MD**

Sidney Kimmel Cancer Center at  
Jefferson Health

**Clint L. Divine, MBA, MSM**

The University of Kansas Cancer Center

**Helen Heslop, MD**

Dan L. Duncan Comprehensive Cancer Center at  
Baylor College of Medicine

**Brian T. Hill, MD, PhD**

Cleveland Clinic Cancer Center

**Frederick L. Locke, MD**

Moffitt Cancer Center

**Kunle Odunsi, MD, PhD, FRCOG, FACOG**

Roswell Park Comprehensive Cancer Center

**Sheila Ouverson, MPA**

Holden Comprehensive Cancer Center  
University of Iowa

**Miguel-Angel Perales, MD**

Memorial Sloan Kettering Cancer Center

**Jennifer W. Pegher, MA**

Association of American Cancer Institutes

**David L. Porter, MD**

Abramson Cancer Center of the  
University of Pennsylvania

**Peter Riedell, MD**

The University of Chicago Medicine  
Comprehensive Cancer Center

**Sam Sharf, RN, BSN, NE-BC, CHTC**

UNC Lineberger Comprehensive Cancer Center  
University of North Carolina at Chapel Hill

**Joseph Uberti, MD, PhD**

Barbara Ann Karmanos Cancer Institute  
Wayne State University

## CLINICAL RESEARCH INNOVATION (CRI) STEERING COMMITTEE

**Chair: Theresa L. Werner, MD**

Huntsman Cancer Institute  
University of Utah

**Tricia Adrales Bentz, MHA, CCRP**

Hollings Cancer Center  
Medical University of South Carolina

**Stefan C. Grant, MD, JD, MBA**

Wake Forest Baptist  
Comprehensive Cancer Center

**Janie Hofacker, RN, BSN, MS**

Association of American Cancer Institutes

**Collette Houston**

Memorial Sloan Kettering Cancer Center

**Tara Lin, MD**

The University of Kansas Cancer Center

**Melissa Nashawati, MPA**

Mays Cancer Center  
UT Health San Antonio

**Bhanu Pappu, PhD, MHA**

UPMC Hillman Cancer Center

**Helen Peck, RN, MA, OCN, CCRP**

Wilmot Cancer Institute  
UR Medicine

**Jennifer W. Pegher, MA**

Association of American Cancer Institutes

**Jessica Rhee, MD**

University of Hawai'i Cancer Center  
University of Hawai'i at Mānoa

**Michael Sainz**

Dartmouth-Hitchcock  
Norris Cotton Cancer Center

**Alex Zafirovski, MBA, RTT, ARRT**

Robert H. Lurie Comprehensive Cancer Center of  
Northwestern University

## CRI EDUCATION AND OPERATIONS SUBCOMMITTEE

**Chair: Pamela Degendorfer, MA, CCRP**

Princess Margaret Cancer Centre  
University Health Network

**Alexandra Annis, CCRP**

UAMS Winthrop P. Rockefeller Cancer Institute

**Dina Aziz, MSHS**

The University of Texas  
MD Anderson Cancer Center

**Ingrid L. Block, APRN, CNS**

Stephenson Cancer Center  
University of Oklahoma

**Wendy Bloomer, PhD, CCRP**

Duke Cancer Institute  
Duke University Medical Center

**Barbara J. Broome**

The University of Kansas Cancer Center

**Deidre Cleary, RN, BSN, CCRC**

UPMC Hillman Cancer Center

**Nicholas Farley, MS**

Dana-Farber Cancer Institute  
Harvard Medical School

**Megan Farmer, MS**

Wake Forest Baptist  
Comprehensive Cancer Center

**Karen Forman**

Yale Cancer Center, Yale School of Medicine

**Brenda Hann, RN, MBA**

Stanford Cancer Institute

**Cathleen Hugney, RN, CCRP**

Cleveland Clinic Cancer Center

**Christine Hui, MPH**

UCI Chao Family Comprehensive Cancer Center

**Ginny Keeling, MS**

Robert H. Lurie Comprehensive Cancer Center of  
Northwestern University

**Karen Kharasch**

Duke Cancer Institute  
Duke University Medical Center

**Rachel Kingsford, MS, CCRP**

Huntsman Cancer Institute  
University of Utah

**Darlene Kitterman, MBA**

University of Illinois Cancer Center

**Erin Lynch, CCRP**

Dartmouth-Hitchcock Norris Cotton  
Cancer Center

**Michelle Marcum, MS, CCRP**

University of Cincinnati Cancer Center

**Kim Nguyen**

Winship Cancer Institute of Emory University

**Sarah Osipowicz, MSED, CCRP**

Sidney Kimmel Cancer Center at  
Jefferson Health

**Daniel Otap, CCRP**

City of Hope Comprehensive Cancer Center

**Cary Passaglia, CCRP**

Robert H. Lurie Comprehensive Cancer Center of  
Northwestern University

**Helen Peck, RN, MA, OCN, CCRP**

Wilmot Cancer Institute  
UR Medicine

**Elizabeth Pon, CCRP**

UCSF Helen Diller Family  
Comprehensive Cancer Center

**Mindy Roberts, MA**

OHSU Knight Cancer Institute

**Erin F. Williams, MBA**

Simmons Comprehensive Cancer Center  
UT Southwestern Medical Center

**Evan Yu, MD**

Fred Hutchinson Cancer Research Center

## **CRI AACI SHARED INVESTIGATOR PLATFORM (SIP) TASK FORCE**

**Chair: Theresa L. Werner, MD**  
Huntsman Cancer Institute  
University of Utah

**Hobs Apell**  
The University of Kansas Cancer Center

**Tricia Adrales Bentz, MHA**  
Hollings Cancer Center  
Medical University of South Carolina

**Cheryl Byers, MHA, CIP, CHRC**  
Moffitt Cancer Center

**Lindsay Casetta, CCRP**  
Barbara Ann Karmanos Cancer Institute  
Wayne State University

**Nicholas Cimaglia**  
Memorial Sloan Kettering Cancer Center

**Tiffany Colvin**  
University of Colorado Cancer Center

**Theresa Cummings, RN, MS, CCRC**  
UNC Lineberger Comprehensive Cancer Center  
University of North Carolina at Chapel Hill

**Pamela Degendorfer, MA, CCRP**  
Princess Margaret Cancer Centre  
University Health Network

**Stefan Grant, MD, JD, MBA**  
Wake Forest Baptist  
Comprehensive Cancer Center

**Jessica Moehe, CCRP**  
Huntsman Cancer Institute  
University of Utah

**Lindsay Philip**  
Princess Margaret Cancer Centre  
University Health Network

**Neelam Prabhu**  
Georgetown Lombardi  
Comprehensive Cancer Center

**James Shock**  
Barbara Ann Karmanos Cancer Institute  
Wayne State University

**Jillian Steinberg**  
Moffitt Cancer Center

**Kendra Todd, MBA**  
OHSU Knight Cancer Institute

**Kristina Williams**  
Siteman Cancer Center

## **CONFLICT OF INTEREST TASK FORCE**

**Co-Chair: Karen E. Knudsen, MBA, PhD**  
Sidney Kimmel Cancer Center at  
Jefferson Health

**Co-Chair: Leonidas C. Platanius, MD, PhD**  
Robert H. Lurie Comprehensive Cancer Center of  
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UPMC Hillman Cancer Center

**Randall F. Holcombe, MD, MBA**  
University of Hawai'i Cancer Center  
University of Hawai'i at Mānoa

**Candace S. Johnson, PhD**  
Roswell Park Comprehensive Cancer Center

**Pamela Munster, MD**  
UCSF Helen Diller Family  
Comprehensive Cancer Center

**Jennifer W. Pegher, MA**  
Association of American Cancer Institutes

**Patricia M. Wiley**  
On the Wings of Angels  
Cancer Advocacy Foundation

## **FINANCE AND INVESTMENT**

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City of Hope National Medical Center

**Julian Bell, MHA, CPA**  
The Ohio State University  
Comprehensive Cancer Center – James Cancer  
Hospital and Solove Research Institute

**John A. Kolosky**  
Moffitt Cancer Center

**Ray Lynch, MBA**  
Fox Chase Cancer Center, Temple Health

**Gregory A. McDonald, CPA**  
Roswell Park Comprehensive Cancer Center

## **GOVERNMENT RELATIONS**

**Chair: John DeMuro**  
Moffitt Cancer Center

**Jack Cline**  
The University of Kansas Cancer Center

**Orly Isaacson, MA**  
Memorial Sloan Kettering Cancer Center

**Catherine Liao**  
Duke Cancer Institute  
Duke University Medical Center

**Peter J. Mackler**  
City of Hope Comprehensive Cancer Center

**Kent Springfield**  
University of Colorado Cancer Center

**Jennifer Evans Stacey, Esq.**  
The Wistar Institute

## **NETWORK CARE INITIATIVE STEERING COMMITTEE**

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Case Comprehensive Cancer Center

**Louis Harrison, MD, FASTRO**  
Moffitt Cancer Center

**Randall Holcombe, MD, MBA**  
University of Hawai'i Cancer Center  
University of Hawai'i at Mānoa

**Laura Hutchins, MD**  
UAMS Winthrop P. Rockefeller Cancer Institute

**Patrick J. Loehrer, Sr., MD**  
Indiana University  
Melvin and Bren Simon  
Comprehensive Cancer Center

**Daniel T. Mulkerin, MD**  
University of Wisconsin Carbone Cancer Center

**Thomas Purcell, MD, PhD, MBA**  
University of Colorado Cancer Center

**Lois Teston, MD**  
Case Comprehensive Cancer Center

**George J. Weiner, MD**  
Holden Comprehensive Cancer Center  
University of Iowa

**Louis M. Weiner, MD**  
Georgetown Lombardi  
Comprehensive Cancer Center

## **NOMINATING**

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The Jackson Laboratory Cancer Center

**Stanton L. Gerson, MD**  
Case Comprehensive Cancer Center

**Ruben A. Mesa, MD, FACP**  
Mays Cancer Center, UT Health San Antonio

## **PCLI STEERING COMMITTEE MEMBERS**

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The Ohio State University  
Comprehensive Cancer Center – James Cancer  
Hospital and Solove Research Institute

**Steven R. Alberts, MD**  
Mayo Clinic Cancer Center

**Julie R. Brahmer, MD**  
Sidney Kimmel Comprehensive Cancer Center at  
Johns Hopkins University

**Andrew Chapman, DO, FACP**  
Sidney Kimmel Cancer Center at  
Jefferson Health

**David Gaffney, MD**  
Huntsman Cancer Institute  
University of Utah

**Merry-Jennifer Markham, MD, FACP**  
University of Florida Health Cancer Center

**Ruben A. Mesa, MD**  
UT Health San Antonio Cancer Center

**Edith P. Mitchell, MD, FACP**  
Sidney Kimmel Cancer Center at  
Jefferson Health

**Charles Ryan, MD**  
Masonic Cancer Center  
University of Minnesota

**John Sweetenham, MD, FRCP, FACP, FASCO**  
Simmons Comprehensive Cancer Center  
UT Southwestern Medical Center

**Srinivasan Vijayakumar, MD**  
UMMC Cancer Center and Research Institute



# 2020 Members

## United States

### ALABAMA

**O'Neal Comprehensive Cancer Center at the University of Alabama at Birmingham**  
Birmingham, Alabama

### ARIZONA

**Mayo Clinic Cancer Center, Arizona**  
Scottsdale, Arizona

**The University of Arizona Cancer Center**  
Tucson, Arizona

### ARKANSAS

**UAMS Winthrop P. Rockefeller Cancer Institute**  
Little Rock, Arkansas

### CALIFORNIA

**Cedars-Sinai Cancer**  
Los Angeles, California

**City of Hope Comprehensive Cancer Center**  
Duarte, California

**Loma Linda University Cancer Center**  
Loma Linda, California

**Salk Institute Cancer Center**  
La Jolla, California

**Sanford Burnham Prebys Medical Discovery Institute**  
La Jolla, California

**Stanford Cancer Institute**  
Palo Alto, California

**UC Davis Comprehensive Cancer Center**  
Sacramento, California

**UCI Chao Family Comprehensive Cancer Center**  
Orange, California

**UCLA Jonsson Comprehensive Cancer Center**  
Los Angeles, California

**UC San Diego Moores Cancer Center**  
La Jolla, California

**UCSF Helen Diller Family Comprehensive Cancer Center**  
San Francisco, California

**USC Norris Comprehensive Cancer Center**  
Los Angeles, California

### COLORADO

**University of Colorado Cancer Center**  
Aurora, Colorado

### CONNECTICUT

**Yale Cancer Center**  
**Yale School of Medicine**  
New Haven, Connecticut

### DISTRICT OF COLUMBIA

**Georgetown Lombardi Comprehensive Cancer Center**  
Washington, District of Columbia

**GW Cancer Center**  
Washington, District of Columbia

### FLORIDA

**Mayo Clinic Cancer Center, Florida**  
Jacksonville, Florida

**Moffitt Cancer Center**  
Tampa, Florida

**Sylvester Comprehensive Cancer Center**  
**University of Miami Health System**  
Miami, Florida

**University of Florida Health Cancer Center**  
Gainesville, Florida

### GEORGIA

**Georgia Cancer Center, Augusta University**  
Augusta, Georgia

**Winship Cancer Institute of Emory University**  
Atlanta, Georgia

### HAWAII

**University of Hawai'i Cancer Center**  
**University of Hawai'i at Manoa**  
Honolulu, Hawai'i

### ILLINOIS

**Cancer Center at Illinois**  
Urbana, Illinois

**Cardinal Bernardin Cancer Center**  
**Loyola University Medical Center**  
Maywood, Illinois

**Robert H. Lurie Comprehensive Cancer Center of Northwestern University**  
Chicago, Illinois

**The University of Chicago Medicine Comprehensive Cancer Center**  
Chicago, Illinois

**University of Illinois Cancer Center**  
Chicago, Illinois

### INDIANA

**Indiana University Melvin and Bren Simon Comprehensive Cancer Center**  
Indianapolis, Indiana

**Purdue University Center for Cancer Research**  
West Lafayette, Indiana

### IOWA

**Holden Comprehensive Cancer Center**  
**University of Iowa**  
Iowa City, Iowa

### KANSAS

**The University of Kansas Cancer Center**  
Kansas City, Kansas

### KENTUCKY

**UK Markey Cancer Center**  
Lexington, Kentucky

**UofL James Graham Brown Cancer Center**  
Louisville, Kentucky

### LOUISIANA

**Feist-Weiller Cancer Center**  
**LSU Health Shreveport**  
Shreveport, Louisiana

**Louisiana Cancer Research Consortium of New Orleans**  
New Orleans, Louisiana

**Stanley S. Scott Cancer Center**

**Tulane Cancer Center**

### MAINE

**The Jackson Laboratory Cancer Center**  
Bar Harbor, Maine

### MARYLAND

**Murtha Cancer Center at Walter Reed Bethesda**  
Bethesda, Maryland

**Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins University**  
Baltimore, Maryland

**University of Maryland Marlene and Stewart Greenebaum Comprehensive Cancer Center**  
Baltimore, Maryland

### MASSACHUSETTS

**Boston University Cancer Center**  
Boston, Massachusetts

**Dana-Farber Cancer Institute**  
**Harvard Medical School**  
Boston, Massachusetts

### MICHIGAN

**Barbara Ann Karmanos Cancer Institute**  
**Wayne State University**  
Detroit, Michigan

**University of Michigan Rogel Cancer Center**  
Ann Arbor, Michigan

### MINNESOTA

**Masonic Cancer Center**  
**University of Minnesota**  
Minneapolis, Minnesota

**Mayo Clinic Cancer Center**  
Rochester, Minnesota

### MISSISSIPPI

**UMMC Cancer Center and Research Institute**  
Jackson, Mississippi

### MISSOURI

**Siteman Cancer Center**  
St. Louis, Missouri

## NEBRASKA

**Fred and Pamela Buffett Cancer Center**  
Omaha, Nebraska

## NEW HAMPSHIRE

**Dartmouth-Hitchcock Norris Cotton Cancer Center**  
Lebanon, New Hampshire

## NEW JERSEY

**Rutgers Cancer Institute of New Jersey**  
New Brunswick, New Jersey

## NEW MEXICO

**University of New Mexico Comprehensive Cancer Center**  
Albuquerque, New Mexico

## NEW YORK

**Albert Einstein Cancer Center**  
**Albert Einstein College of Medicine**  
Bronx, New York

**Cold Spring Harbor Laboratory Cancer Center**  
Cold Spring Harbor, New York

**Herbert Irving Comprehensive Cancer Center**  
**Columbia University Irving Medical Center**  
New York, New York

**Laura and Isaac Perlmutter Cancer Center at NYU Langone**  
New York, New York

**Memorial Sloan Kettering Cancer Center**  
New York, New York

**Roswell Park Comprehensive Cancer Center**  
Buffalo, New York

**Stony Brook Cancer Center**  
Stony Brook, New York

**The Tisch Cancer Institute at Mount Sinai**  
New York, New York

**Upstate Cancer Center**  
**SUNY Upstate Medical University**  
Syracuse, New York

**Wilmot Cancer Institute**  
**UR Medicine**  
Rochester, New York

## NORTH CAROLINA

**Duke Cancer Institute**  
**Duke University Medical Center**  
Durham, North Carolina

**UNC Lineberger Comprehensive Cancer Center**  
**University of North Carolina at Chapel Hill**  
Chapel Hill, North Carolina

**Wake Forest Baptist Comprehensive Cancer Center**  
Winston-Salem, North Carolina

## OHIO

**Case Comprehensive Cancer Center**  
Cleveland, Ohio

**Cleveland Clinic Cancer Center**  
Cleveland, Ohio

**The Ohio State University Comprehensive Cancer Center – James Cancer Hospital and Solove Research Institute**  
Columbus, Ohio

**University of Cincinnati Cancer Center**  
Cincinnati, Ohio

## OKLAHOMA

**Stephenson Cancer Center**  
**University of Oklahoma**  
Oklahoma City, Oklahoma

## OREGON

**OHSU Knight Cancer Institute**  
Portland, Oregon

## PENNSYLVANIA

**Abramson Cancer Center of the University of Pennsylvania**  
Philadelphia, Pennsylvania

**Fox Chase Cancer Center**  
**Temple Health**  
Philadelphia, Pennsylvania

**Penn State Cancer Institute**  
Hershey, Pennsylvania

**Sidney Kimmel Cancer Center at Jefferson Health**  
Philadelphia, Pennsylvania

**The Wistar Institute**  
Philadelphia, Pennsylvania

**UPMC Hillman Cancer Center**  
Pittsburgh, Pennsylvania

## PUERTO RICO

**University of Puerto Rico Comprehensive Cancer Center**  
San Juan, Puerto Rico

## RHODE ISLAND

**Cancer Center at Brown University**  
Providence, Rhode Island

## SOUTH CAROLINA

**Hollings Cancer Center**  
**Medical University of South Carolina**  
Charleston, South Carolina

## TENNESSEE

**Comprehensive Cancer Center**  
**St. Jude Children's Research Hospital**  
Memphis, Tennessee

**Vanderbilt-Ingram Cancer Center**  
Nashville, Tennessee

## TEXAS

**Dan L Duncan Comprehensive Cancer Center at Baylor College of Medicine**  
Houston, Texas

**Livestrong Cancer Institutes**  
**The University of Texas at Austin Dell Medical School**  
Austin, Texas

**Mays Cancer Center**  
**UT Health San Antonio**  
San Antonio, Texas

**Simmons Comprehensive Cancer Center**  
**UT Southwestern Medical Center**  
Dallas, Texas

**The University of Texas MD Anderson Cancer Center**  
Houston, Texas

**University of Texas Medical Branch Cancer Center**  
Galveston, Texas

## UTAH

**Huntsman Cancer Institute**  
**University of Utah**  
Salt Lake City, Utah

## VERMONT

**The University of Vermont Cancer Center**  
Burlington, Vermont

## VIRGINIA

**University of Virginia Cancer Center**  
Charlottesville, Virginia

**VCU Massey Cancer Center**  
Richmond, Virginia

## WASHINGTON

**Fred Hutchinson Cancer Research Center**  
Seattle, Washington

## WEST VIRGINIA

**WVU Cancer Institute**  
Morgantown, West Virginia

## WISCONSIN

**Medical College of Wisconsin Cancer Center**  
Milwaukee, Wisconsin

**University of Wisconsin Carbone Cancer Center**  
Madison, Wisconsin

## Canada

### BRITISH COLUMBIA

**BC Cancer**  
Vancouver, British Columbia

### ONTARIO

**Princess Margaret Cancer Centre**  
**University Health Network**  
Toronto, Ontario



Medical Arts Building  
3708 Fifth Avenue, Suite 503  
Pittsburgh, PA 15213

412-647-6111  
[www.aaci-cancer.org](http://www.aaci-cancer.org)