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## Tracking National and State Cancer Policy

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### Commentary Overview

- AACI has launched a campaign urging passage of the Clinical Trial Modernization Act. The bill would reduce health disparities by attracting a more diverse pool of patients to clinical trials.
- This summer, AACI recommended policy guidelines for a revamped 21st Century Cures Act and shared priorities for reforming the National Institutes of Health with the U.S. House Committee on Energy & Commerce.
- AACI's Public Policy Resource Library tracks federal cancer legislation as well as innovative measures in the states. Recent posts describe efforts to minimize the impact of occupational cancer risks, protect fertility for patients with cancer, improve screening access, extend CAR T coverage to Medicaid patients, and more.

**With all eyes on the presidential election—and the prospect of a government shutdown while Congress considers another continuing resolution for the federal budget—AACI's Government Relations Steering Committee continues to promote legislation at the federal and state level that supports the work of over 100 member cancer centers in the U.S.**

This month, the association launched a campaign urging passage of the Clinical Trial Modernization Act. The legislation would reduce health disparities by attracting a more diverse pool of patients to clinical trials. Please [write your congressional delegation](#) today and ask them to support this critical bipartisan legislation.

Over the summer, AACI recommended [policy guidelines](#) to congressional leaders for inclusion in a revamped 21st Century Cures Act. Along with increased funding for the National Cancer

Institute (NCI) to improve its grant success rate, AACI called for protecting cancer centers from future site-neutral proposals; mitigating disparities in health care, including efforts to increase diversity in clinical trials; and eliminating burdensome regulations on laboratory developed tests for academic and research cancer centers.

In a separate letter to the U.S. House of Representative's Committee on Energy & Commerce, AACI shared its [priorities for reforming the National Institutes of Health](#), including maintaining demographic-based research to better address persistent health disparities, and continuing adequate support of grantee institutions for the Facilities and Administration (F&A) costs incurred when conducting research.

## Advancing Cancer Policy at the State Level

[AACI's Public Policy Resource Library](#) (PPRL), a significant online resource, [tracks federal cancer legislation](#) as well as innovative measures in the states. Each month, the library features a state-level effort, with the goal of inspiring the cancer center community to advocate locally for policies that can improve the lives of patients with cancer.

Recent PPRL posts describe multi-state efforts to minimize the impact of occupational cancer risks and protect fertility for patients with cancer, as well as state-specific initiatives to improve screening access, extend CAR T coverage to Medicaid patients, and more.

## Occupational and Cancer Treatment Risks

Along with the myriad dangers faced by firefighters, the job can entail significant risk of exposure to carcinogens, leading to a level of "certain uncertainty" that compromises firefighters' ability to make informed choices about their health. They know they may encounter carcinogens while fighting a fire, but they do not know which ones, when they might be exposed, and for how long. The carcinogens range from byproducts of combustion, such as formaldehyde and benzene, to toxic materials like asbestos in older buildings. This dilemma has led to the development of presumptive cancer laws for firefighters to help provide some level of control and protection to those who develop cancer related to fighting fires.

Twenty-three states currently have [presumption laws](#) for duty-related exposure. Specifics vary by state, but there are commonalities around coverage and eligibility. Most laws provide coverage for all treatments related to duty-related cancers like those affecting the throat or lungs. They also cover death benefits for the family if the patient dies due to their cancer. Eligibility for this coverage includes length of service requirements, having a physical before joining the department, and refraining from using tobacco products.

Similar to protecting firefighters' health, some states have passed bills aimed at preserving fertility for cancer patients.

The impacts of cancer treatment on fertility vary based on the type of treatment, specific cancer, affected areas of the body, and other factors. For instance, chemotherapy can damage sperm, affect egg and estrogen production, cause premature ovarian failure, disrupt menstrual cycles, and trigger premature menopause. Hormone therapy disrupts the endocrine system, potentially impacting menstrual cycles and decreasing sperm production, and radiation therapy in the brain may disrupt the production of hormones, while radiation therapy in the reproductive organs, pelvis, or abdomen may cause premature ovarian failure or kill sperm cells.

Strategies to prevent these issues in patients of reproductive age include cryopreservation – freezing eggs, sperm, fertilized embryos, and even ovarian or testicular tissue. [Legislation in 12 states](#) mandates that insurance plans cover cryopreservation and other methods of fertility preservation for patients experiencing iatrogenic infertility. Expanded insurance coverage that includes a range of preventive measures for iatrogenic infertility allows cancer patients to focus fully on their recovery.

## State-Specific Initiatives and Legislation

The [Delaware Cancer Consortium](#) (DCC) is supported by [Delaware's](#) Division of Public Health. Its latest four-year plan extends to 2026 and the state has implemented more than 30 of its recommendations in the past four years. The DCC's roots reach back to 2001, when the state formed the Delaware Advisory Council on Cancer Incidence and Morality. The goal: advise the governor on the causes of cancer incidence and mortality in Delaware and create plans on how to address them.

In 2024, the **Florida** Legislature passed a state budget and a landmark bill that shined a spotlight on cancer research and screening in the state. The 2024 budget increased funding for many cancer-related programs and institutions, including **AACI's four members in the state** and the **Florida Cancer Innovation Fund**. In addition, **SB 7072** codified and expanded the role of the **Cancer Connect Collaborative**, a coalition of government leadership and medical professionals focused on all things related to Florida's approach to cancer.

In 2023, **Louisiana** passed legislation extending Medicaid coverage to chimeric antigen receptor T-cell (CAR T) therapy. The **bill** provides clear definitions for CAR T therapy and mandates that the state's Medicaid program cover inpatient and, if necessary, outpatient CAR T therapy, subject to approval by the U.S. Food and Drug Administration for medically accepted instances.

Also last year, **Pennsylvania** passed a **comprehensive bill**, unique in the country, to expand preventive breast cancer screening, care, and insurance coverage. The legislation outlines two key components: coverage for mammographic examinations and breast imaging, and BRCA-related genetic counseling and testing.

During the 2022 **Maryland** General Assembly, the state's governor used supplementary budgetary funds to introduce a **\$216-million amendment** to boost the amount of funding dedicated to cancer research, prevention, and treatment. The **American Cancer Society Cancer Action Network**, the advocacy branch of AACI Sustaining Member American Cancer Society, successfully advocated for this funding. Dubbed the "Maryland Cancer Moonshot," the program is modeled after the Biden Cancer Moonshot.

[AACI Public Policy Resource Library](#)

[Write Your Congressional Delegation](#)

## Our Mission

The Association of American Cancer Institutes (AACI) represents over 100 premier academic and freestanding cancer centers in the United States and Canada. AACI is accelerating progress against cancer by enhancing the impact of academic cancer centers and promoting cancer health equity.

## About AACI Commentary

To promote the work of its members, AACI publishes *Commentary*, a monthly editorial series focusing on major issues of common interest to North American cancer centers, authored by cancer center leaders and subject matter experts.

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