



## Association of American Cancer Institutes COMMENTARY

September 2018



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### Commentary Overview

\* Through cancer-focused education and partnerships with key stakeholders, The University of Kansas Cancer Center has helped advance legislation that has had a positive impact on the state's economy and the health of its citizens.

\* With proper tools, AACI cancer centers across the country have the potential to affect public policy at the state level.

\* AACI's new presidential

### A Legislation Library to Benefit AACI Cancer Centers

BY ROY A. JENSEN, MD

Cancer centers are an enormous force for good and collectively have worked to lower cancer incidence and mortality rates for over four decades. In many cases, this improvement has resulted from basic science advances being translated into the clinic for the benefit of cancer patients. But in other cases, cancer centers worked diligently to prevent cancer from developing in patients in the first place. This has primarily resulted from the enactment of good public policy that limits carcinogen exposures or promotes the adoption of healthy behaviors in large populations. Such efforts can often save hundreds—if not thousands—of lives over the course of many years and represent a critical tool in our efforts to lower cancer mortality.

As a membership organization serving 98 cancer centers in the United States and Canada, the Association of American Cancer Institutes (AACI) has an unprecedented opportunity to exert enormous influence on public policy. I suspect nearly every AACI cancer center in our organization is working to advance at least one public policy initiative, however we haven't been able to leverage our collective efforts for maximum impact.

At the upcoming AACI/CCAF Annual Meeting, September 30 to October 2 in Chicago, I will begin my two-year term as president of AACI. For my presidential initiative, I intend to spearhead the development of a comprehensive, cancer-specific clearinghouse of model legislation for AACI cancer centers to share with their state/province legislators.

initiative will focus on developing a comprehensive library of sample legislation for cancer centers to adapt and use.

\* AACI's Government Relations Steering Committee will advise on the development of model legislation, backed by robust data provided by other national cancer advocacy organizations.

### About AACI Commentary

As part of AACI's efforts to feature the work and views of its member centers, AACI publishes *AACI Commentary*, a quarterly editorial series. Written by cancer center leaders, each edition focuses on a major issue of common interest to AACI cancer centers.



At The University of Kansas Cancer Center, we are deeply engaged in a broad range of public policy initiatives, such as state funding for biomedical research, increasing tobacco taxes, and banning indoor tanning for minors. Through cancer-focused education and partnerships with key stakeholders across Kansas, KU Cancer Center has helped advance legislation that has positively affected the state's economy and the health of its citizens. For example, as part of the Healthy KC coalition, we worked closely with the Greater Kansas City Chamber of Commerce and other community partners to get local municipalities to pass Tobacco 21, which raises the minimum age for purchasing tobacco products from 18 to 21 in the Kansas City region. The ordinance has been adopted in over 29 municipalities in the region, covering nearly 1.5 million lives.

In April 2016, Kansas banned indoor tanning for minors. The bill—one of the strongest of its kind in the U.S.—came as a direct result of KU Cancer Center doctors' efforts to educate Kansas lawmakers about the dangers of tanning facilities and melanoma.

But we are not alone in our public policy efforts. AACI cancer centers across the country are engaged in advocacy activities to advance cancer research, treatment, and prevention. For instance, three of Florida's leading academic cancer centers joined forces to advocate for state funding to create a premier cancer research network. Established in 2014, the Florida Consortium of National Cancer Institute Centers Program provides more than \$60 million each year to support Moffitt Cancer Center, an NCI-Designated Comprehensive Cancer Center, and to help the University of Florida Health Cancer Center and Sylvester Comprehensive Cancer Center achieve NCI designation. The funding has enabled these cancer centers to step up recruitment of top-tier researchers and physician-scientists and to collaborate on groundbreaking cancer research.

### “One-Stop Shop” for Model Legislation

Inspired by these successful efforts and groups like the American Cancer Society's Cancer Action Network (ACS CAN), I envision creating a web-based hub of model legislation on state-level issues that matter most to AACI cancer centers. The goal is to establish a resource library that provides thoroughly vetted, “off-the-shelf” proposals that can be customized according to a cancer center's unique needs, minimizing the legwork for individual centers.

My hope is to offer a dynamic, online library of model policies – each of which is the product of many hours of research and data collection. Using this framework, I believe AACI would be positioned to become a “one-stop shop” for cancer-related public policy. AACI will not engage in formal lobbying; however, the database will serve as a go-to source for

information that AACI's members can use to educate legislators on the issues vital to decreasing cancer incidence and mortality in their catchment area.

To implement this plan, AACI Government Relations Steering Committee members would serve as advisers to develop the model legislation. Through partnerships with other national cancer advocacy organizations, we will collect robust data to support policy statements on priority issues. Our hope is that members who use the legislative tools will walk away with solid public policy proposals that stimulate real change.

Some common issues have emerged in recent communications among cancer center government relations staff, including oral chemotherapy parity, radon legislation, coverage of routine care for clinical trials, and raising the minimum age for purchasing tobacco. We plan to survey government relations staff to determine the top priorities for launching the project, which has the potential to expand over time from two or three model policies to a portfolio with dozens of examples of sample legislation.

The timing couldn't be better. As I prepare to begin my term as AACI president, the association is developing a new website, which will provide a convenient, user-friendly platform for accessing the advocacy toolkit. Once it's up and running, this resource library will provide a major benefit to AACI members, further enhancing the value of membership.

Ultimately, my hope is that by creating model legislation on a variety of key issues, we will be able to collectively push state policies forward to improve the prevention and treatment of cancer across the country.



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*Representing 98 of North America's premier academic and free-standing cancer centers, the Association of American Cancer Institutes is dedicated to reducing the burden of cancer by enhancing the impact of leading cancer centers.*

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