

March 22, 2010

**OFFICERS:**

Al B. Benson III, MD, FACP  
President  
(Chicago, Illinois)

Thomas L. Whittaker, MD, FACP  
President-Elect  
(Greenfield, Indiana)

Virginia T. Vaitones, MSW, OSW-C  
Secretary  
(Rockport, Maine)

George Kovach, MD  
Treasurer  
(Davenport, Iowa)

Luana R. Lamkin, RN, MPH  
Immediate Past President  
(Boise, Idaho)

**TRUSTEES:**

Edward B. Aribisala, RTT, MSc, MBA  
(St. Thomas, US Virgin Islands)

Frances Becker, LCSW, OSW-C  
(Stamford, Connecticut)

Steven D'Amato, RPh, BCOP  
(Scarborough, Maine)

Becky L. DeKay, MBA  
(Shreveport, Louisiana)

Heidi Floden, PharmD  
(Washington, DC)

Diane M. Otte, RN, MS, OCN  
(La Crosse, Wisconsin)

W. Charles Penley, MD  
(Nashville, Tennessee)

Nicholas J. Petrelli, MD  
(Newark, Delaware)

Matt Sherer, MBA, MHA  
(Columbus, Georgia)

Alan S. Weinstein, MD, FACP  
(Mount Holly, New Jersey)

**EXECUTIVE DIRECTOR:**  
Christian G. Downs, JD, MHA

*BY ELECTRONIC DELIVERY*

Maria Ellis  
Executive Secretary for MEDCAC  
Centers for Medicare & Medicaid Services  
Office of Clinical Standards and Quality, Coverage and Analysis Group  
C1-09-06  
7500 Security Boulevard  
Baltimore, MD 21244

**Re: Meeting of the Medicare Evidence Development &  
Coverage Advisory Committee: Radiation Therapy for  
Localized Prostate Cancer**

Dear Ms. Ellis:

The Association of Community Cancer Centers (ACCC) appreciates this opportunity to comment on the Medicare Evidence Development & Coverage Advisory Committee (MEDCAC) meeting on radiation therapy for localized prostate cancer.<sup>1</sup> ACCC is a membership organization whose members include hospitals, physicians, nurses, social workers, and oncology team members who care for millions of patients and families fighting cancer. ACCC's more than 900 member institutions and organizations treat 60 percent of all U.S. cancer patients when combined with our physician membership. We are often at the front line in fighting cancer and therefore have a unique perspective on the importance of treatment options such as radiation therapy for localized prostate cancer.

At its April 21, 2010 meeting, the MEDCAC will consider the "currently available evidence regarding the risks, benefits, and outcomes of radiation therapy, inclusive of external beam radiotherapy (EBRT) and brachytherapy, for the treatment of

<sup>1</sup> 75 Fed. Reg. 8980 (Feb. 26, 2010).

localized prostate cancer.”<sup>2</sup> On its website, the Centers for Medicare & Medicaid Services (CMS) says, “the scope of this MEDCAC is limited to radiotherapy for the treatment of localized prostate cancer with comparisons to watchful waiting.”<sup>3</sup> ACCC believes that each cancer patient should have access to the most appropriate treatment options for his condition, including various forms of radiation therapy for localized prostate cancer.

As CMS considers this issue, we urge the agency to recognize that each form of radiation therapy presents unique benefits and risks for patients with prostate cancer. Patients and their physicians select treatment options based on the stage of the cancer, the patient’s comorbidities, the patient’s tolerance for certain adverse effects, and the patient’s quality of life during and after treatment. Today, patients have access to a variety of radiation therapy options, allowing patients and physicians to select the option best suited for the patient’s needs. Medicare’s coverage policies must continue to allow beneficiaries access to the full range of treatment options so that each patient diagnosed with cancer has the best chance of survival.

ACCC also urges CMS to consider the effect of its coverage policies on access to future improvements in care. Continued innovation will depend on whether inventors, manufacturers, physicians, and facilities have confidence that reimbursement will be available for new treatment options. Our members are among those who chose to invest in radiation therapy technologies to give their patients additional treatment choices. Unduly restrictive Medicare coverage and uncertainty about Medicare coverage could discourage such investment, restrict treatment options, and deny patients the benefits of evolving technology.

In addition, we support continued research into cancer treatment, including radiation and other therapies for prostate cancer. Our members constantly search for tools to appropriately diagnose, treat, and manage cancer, and we understand the necessity of clinical research to evaluate those tools. We also believe that Medicare beneficiaries should be encouraged to participate in clinical trials, but should not be denied promising treatment options if they do not have access to a trial. ACCC looks forward to continuing to work with CMS to establish coverage decisions that allow beneficiaries to access important technologies while also encouraging the development of the body of evidence to support future treatment decisions.

ACCC thanks CMS for this opportunity to comment on radiation therapy for localized prostate cancer. We would be pleased to answer any questions regarding

---

<sup>2</sup> Id.

<sup>3</sup> CMS, MEDCAC Meeting: 4/21/2010 - Radiation Therapy for Localized Prostate Cancer, <http://www.cms.hhs.gov/mcd/viewmccac.asp?where=index&mid=54>.

Maria Ellis  
March 22, 2010  
Page 3 of 3

these comments. Please contact Matt Farber at 301-984-9496 ext. 221 if ACCC can be of any assistance as CMS continues to evaluate radiation therapy for localized prostate cancer.

Sincerely,

A handwritten signature in black ink that reads "Al B. Benson III". The signature is written in a cursive style with a horizontal line under the "III".

Al B. Benson III, MD FACP  
President  
Association of Community Cancer Centers