issues

A Look Ahead to 2015

BY LEAH RALPH

he last few months have brought big changes to Washington, D.C. The 2014 midterm elections dealt a sweeping victory to Republicans in Congress, giving the party a 54-seat majority in the Senate and its biggest majority in the House since 1928. As we start the New Year, both chambers are now under GOP control. The parties are reorganizing and, importantly, the legislative agenda is shifting. While it's still anyone's guess whether new leadership will mean less political infighting in 2015, issues like trade, energy, and tax reform are early contenders for potential areas of compromise.

The ACA (Affordable Care Act), on the other hand, will be top of the list for a different reason—in the 114th Congress you can count on Republicans to look for every opportunity to take the legs out from under President Obama's signature achievement. Although full repeal is unlikely, as it would face an all-but-guaranteed presidential veto, expect the new majority to focus their efforts on introducing a series of stand-alone bills targeting the most unpopular provisions of the law.

How non-ACA related healthcare legislation will fare is a harder question. Healthcare fatigue still looms large among legislators, making issues like oral parity, sequestration, and a long-term fix to the Sustainable Growth Rate (SGR) more of an uphill climb. Yet new leadership, a renewed vow to work across the aisle, and palpable public dissatisfaction with the status quo are bringing new energy to Congress—and ACCC is committed to focusing attention on these issues by sharing your experiences and bringing real-world perspectives to the table.

Make a New Year's resolution to add vour voice on these important issues. Join us March 16, as ACCC holds its third annual Capitol Hill Day, meeting with legislators on issues that are critical to ensuring access to quality cancer care. Specifically, we will remind Congress (once again!) that the time is ripe to pass a long-term fix to the SGR. In 2014 we saw what seemed to be the best opportunity in years to finally fix the fundamentally flawed formula used to calculate physician payments in Medicare: Congress came to agreement on a bipartisan bill that had a relatively low price tag. While the bill did not come to a vote and will need to be reintroduced in the new Congress, finding consensus on policy is a promising sign for this year. Physicians have now seen 17 (seventeen!) patches that, if added together, cost far more than the comprehensive approach lawmakers are considering today. This year, ACCC members will be on Capitol Hill just before the current "doc fix" expires on March 31.

Passing a national oral parity law continues to be a top priority for ACCC membership. Oral parity efforts are gaining momentum: 34 states and D.C. have now passed oral parity laws, and several other states are ramping up their grassroots efforts for 2015. With an estimated 25 to 35 percent of all therapies in the oncology pipeline only available in pill form, the need for comprehensive, federal oral parity legislation is increasingly critical to patient access. Although many states have passed



state-level legislation, lawmakers need to understand that federal legislation would ensure consistency in oral parity laws across the country and would include plans that fall outside the purview of state regulation.

This is the time to make your voice heard on these and other issues important to cancer care. Join us for Hill Day, and stay for the ACCC 41st Annual Meeting, CANCERSCAPE, which will follow March 17–18 in Arlington, Va. Meeting attendees will hear healthcare policy experts discuss issues such as recent developments in the 340B Program, emerging oncology payment and delivery models in Medicare, the economics of pharmaceutical pricing, how to put quality initiatives to work for your program, and much more. Learn more and register today at: www.accc-cancer. org/cancerscape.

If you have additional questions or would like to get involved another way, please contact me at lralph@accc-cancer.org.

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