

# ASCO<sup>®</sup> State/Regional Affiliate Program

## 2022-2023 STATE AFFILIATE COUNCIL PRIORITIES

### TELEMEDICINE

- The Centers for Medicare and Medicaid Services (CMS) has made significant changes to regulations related to telehealth services in response to the COVID-19 Public Health Emergency, to facilitate and encourage the use of telehealth services for all Medicare patients and providers.
- As the response to the pandemic evolves, it is important to keep state societies and their members updated with the most accurate information regarding telemedicine including new regulations and reimbursement.
- In July 2020, ASCO issued a policy statement, [Telemedicine in Cancer Care](#), which encouraged policymakers to permanently expand coverage to adequately reimburse providers for telehealth services.

### PHARMACY BENEFIT MANAGERS (PBMs)

- Members of the Council reported increasing incidence of PBMs switching prescription medications without the knowledge of either patient or prescribing physician. Several Council members characterized these PBM strategies as interfering in the practice of medicine.
- Members also reported PBM requirements are causing delays in treatment—and some learn after the fact that drugs have been wasted or delivered directly to patients without the prescribing physician's knowledge.
- Staff and volunteers worked to develop an ASCO Statement: [Pharmacy Benefit Managers and Their Impact on Cancer Care](#) in response to these concerns.

### PRIOR AUTHORIZATION

- The Council views prior authorization as a barrier for patients with cancer to receive proper care. Prior authorization requires patients or prescribers to secure pre-approval as a condition of payment or insurance coverage of the prescribed medication.
- Members report burdensome wait times, complex processes, and administrative challenges that take away time and resources that can be better used for patient care.
- ASCO staff continues to advocate for guardrails around the prior authorization process to ensure transparency and timely access to care.

### STEP THERAPY

- The Council considers step therapy a barrier to care for patients with cancer. These “fail-first” policies put patient care at risk, greatly shortening the time a patient can use a preferred treatment. Generally, the preferred treatments are based on cost, which should not be an indicator for which treatment a patient with cancer must be given.
- ASCO Statement: [The Impact of Utilization Management Policies for Cancer Drug Therapies](#)

### EQUITY, DIVERSITY & INCLUSION (EDI)

- The Council views diversity in oncology as an important aspect in patient access to care. The care of racial and gender minorities, patient care in underserved populations (both rural and inner cities), and diversity

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in the oncology workforce, are all important aspects of diversity and allow for better health outcomes for patients with cancer.

- ASCO has also published a policy statement, [Cancer Disparities and Health Equity](#).
- Members of the Council participate in a variety of ASCO initiatives to increase diversity, improve equity and inclusion.
- In the coming year, Council leadership is looking to identify concrete ways in which the group can help move the needle on ASCO's EDI initiatives.