October 7, 2020

The Honorable Richard Neal
Chairman
Ways and Means Committee
U.S. House of Representatives
Washington, D.C. 20515

Dear Chairman Neal:

On behalf of the Association for Clinical Oncology (Association) and its affiliated organization, the American Society of Clinical Oncology (Society) (together, ASCO), thank you for your efforts to reduce health disparities and increase access to quality health care for patients from minority and underserved populations. We represent nearly 45,000 clinical oncologists, researchers, and other oncology professionals who treat patients with cancer across the country. We are pleased to respond to your Request for Information (RFI) and share our views on the impact of health inequities on cancer patients and ASCO's initiatives to improve disparities in cancer care. We hope that this background is helpful and look forward to working with you on policies that can reduce disparities in cancer.

ASCO’s Clinical Practice Guidelines

With the consultation of multidisciplinary panels of experts, including patient advocates, the Society develops and publishes clinical practice guidelines, provisional clinical opinions (PCOs), and guideline endorsements, providing evidence-based recommendations to serve as a tool for doctors. These evidence-based outlines of treatment and care options are intended to support shared decision making by patients and care teams. The guidelines can also address specific clinical situations or use of approved medical products, procedures, or modality-oriented tests.

ASCO clinical practice guidelines do not include race or ethnicity as a factor to determine methods of treatment for patients. Our clinical practice guidelines represent expert recommendations on best practices in disease management to provide the highest level of cancer care based on available high-quality evidence. However, it is important to note that factors including race and ethnicity, age, socioeconomic status, geographic location, and insurance access
are known to impact cancer care outcomes. We believe that stakeholders should work towards achieving health equity by ensuring equitable access to both high-quality cancer care and research, and addressing the structural barriers that preserve health inequities.

**ASCO's Cancer Disparities and Health Equity Policy Statement**

Since 2003, ASCO has convened cancer health equity experts to focus on improving our understanding, advancing our scientific knowledge, and developing solutions to eliminate disparities in cancer. Earlier this year the Society's Health Equity Committee published its ten-year policy update "Cancer Disparities and Health Equity: A Policy Statement From the American Society of Clinical Oncology," which dives into the issue of health inequity in cancer and offers recommendations to help improve health equity for underserved minorities. The statement highlights four key pillars to achieving health equity: 1) ensuring equitable access to high-quality care, 2) ensuring equity in research, 3) addressing structural barriers, and 4) increasing awareness and action. These pillars are the keys to achieving our mission of conquering cancer through research, education, and promotion of the highest quality and equitable patient care. With the release of the statement, the Society and Association are poised to confront and address the complex forces and systems that have created disparities in disease prevention, diagnosis, treatment, and research participation for cancer patients.

**Expanding Access to Clinical Trials and Increasing Participant Diversity**

We believe that all populations should have an equal opportunity to participate in, be recognized for, and benefit from research across the spectrum, including clinical trials, health services research, and other types of research studies and methodologies. However, due to a variety of barriers, racial and ethnic minorities continue to be underrepresented in clinical trials and health care-related research. More information on disparities in cancer research can be found in the Society's joint statement with the American Association for Cancer Research and the National Cancer Institute "Charting the Future of Cancer Health Disparities Research."

In July of this year, the Society and the Association of Community Cancer Centers (ACCC) announced a new collaboration to foster participation in cancer-related clinical trials to more fully reflect the diversity of patients with cancer in the United States (U.S.). Recent analyses of cancer treatment trials found that only four to six percent of clinical trial participants are African American and only three to six percent of participants are Hispanic, despite these groups representing fifteen and thirteen percent of all patients with cancer, respectively. This diversity initiative began with a request for ideas (RFI), which sought novel strategies and practical solutions to address the lack of diversity in clinical trials. Participation for the RFI closed on August 24, 2020; responses are currently being reviewed.
For more information about this initiative, its progress, and next steps please visit: https://www.asco.org/practice-policy/policy-issues-statements/asco-in-action/asco-accc-join-forces-increase-participation.

A variety of barriers prevent patients from racial and ethnic minority groups from participating in clinical trials, including: provider bias, challenges with access, insurance coverage and cost of care, lack of awareness of trials, lack of trust in the health care system and/or research process; linguistic, cultural or literacy-related issues; study design barriers; and other factors. Legislatively, the Association has advocated to remove barriers to trials participation by prioritizing support for H.R. 913, the CLINICAL TREATMENT Act, which would guarantee Medicaid coverage of the routine care costs associated with clinical trials participation for enrollees with life threatening conditions. Although nearly twenty percent of Americans receive their health insurance coverage through Medicaid, only fifteen states guarantee this coverage. For more information about this bill and the Association’s efforts, please visit: https://www.asco.org/advocacy/advocacy-agenda-initiatives/clinical-trials-coverage-under-medicaid.

Increasing the Diversity of the Oncology Workforce

Developing a physician workforce that reflects the diversity of patients with cancer will bring increased intercultural responsiveness, foster trust and comfort in patients, and improve attitudes, awareness, and biases toward minorities in healthcare. A diverse workforce will also help expand healthcare access, enhance research and discovery in minority populations, and can lead to better health outcomes for patients.

In the U.S., less than nine percent of active physicians identify as Black, Hispanic, American Indian, or Alaska Native. Of the physician workforce practicing oncology, only 2.3 percent of those physicians identify as Black and 3 percent identify as Hispanic or Latino. To address this disparity ASCO launched its Diversity Mentoring Program in 2013, to connect medical students and trainees from historically underrepresented minority groups with oncologists who can provide career and educational guidance. In its most recent year, this program provided one-on-one mentoring opportunities, professional guidance, and resources for more than 22 trainees.

In 2017, the Society continued its commitment to health equity by publishing its Strategic Plan for Increasing Racial and Ethnic Diversity in the Oncology Workforce, a plan approved by our board of directors to enhance “existing programs and create new opportunities that will move us closer to the vision of achieving an oncology workforce that reflects the demographics of the U.S. population it serves.” To support diversity in clinical research, the Society’s Diversity in Oncology Initiative has provided more than $1 million in grant and funding support for clinical research led by historically underrepresented minority trainees to attend and present their research at ASCO’s Annual Meeting.

Improving Education, Awareness, and Training
Achieving health equity requires efforts that inform, educate, and empower all individuals. In 2016, the Society launched online education courses in cultural literacy and cancer health disparities to aid in this effort. Since then, nearly 3,000 oncology professionals have completed this coursework. The push for additional education, training, and awareness on this issue has also impacted the content at our Annual Meeting, which now has five times more workforce diversity and health disparities related content than it did even ten years ago. Health equity remains a top priority for both the Association and the Society.

While the Association and the Society have worked to improve health equity in cancer care, we acknowledge that health inequities still impact minority patients with cancer. Both the Society and the Association stand ready to assist in your efforts to advance solutions to this pressing concern. For questions about health equity in the cancer space, please contact Tyler Hanson at Tyler.Hanson@asco.org.

Sincerely,

Monica Bertagnolli, MD, FACS, FASCO
Chair of the Board
Association for Clinical Oncology