



SAVING LIVES AND ADVANCING  
RESEARCH BY EMPOWERING  
THOSE LIVING WITH AND  
AT RISK FOR LUNG CANCER.

LungCancerAlliance.org

1700 K Street NW, Ste 660  
Washington, DC 20006

June 26, 2017

The Honorable Mitch McConnell  
Majority Leader  
United States Senate  
S-230 U.S. Capitol  
Washington, DC 20510

The Honorable Charles Schumer  
Minority Leader  
United States Senate  
S-221 U.S. Capitol  
Washington, DC 20510

Dear Majority Leader McConnell and Minority Leader Schumer:

On behalf of Lung Cancer Alliance (LCA), the nation's leading patient advocacy organization dedicated solely to improving outcomes for those living with or at risk for lung cancer, I am writing to express our views about the major impacts the "[Better Care Reconciliation Act of 2017](#)" (BCRA) could have on the lung cancer community and the health care system.

Lung cancer is the leading cause of death among men and women, every racial and ethnic group in every state nationwide. An estimated 222,500 people will be diagnosed with lung cancer in 2017, accounting for 25% of all cancer diagnoses, the majority of which are former or non-smokers.

Historically, patients with lung cancer have experienced an exceptionally low survival rate (five-year survival rate of 18%) due to an overarching stigma and lack of early detection and treatment options. But recent exciting and dramatic breakthroughs including life-saving screening and approval of more personalized and targeted drug therapies have resulted in a transformative shift in the management of the disease, patient quality of life during treatment and increased survivorship.

We recognize Senate efforts to make improvements to the American Health Care Act (AHCA), which passed the House in May, by allowing people to contribute more to their health savings accounts, and stipulating that insurance companies are not allowed to increase someone's premiums or deny coverage based on pre-existing conditions.

However, the BCRA embraces many other critical consumer protections that the House AHCA would repeal. As a result, we remain deeply concerned that this draft legislation in its current form places barriers to access, still allows insurance coverage restrictions and removes key patient protections. Specifically, we are concerned:

- Cutting federal funding from the Medicaid program could result in significantly reduced benefits for patients. This undermines the purpose of the Medicaid Program- as states will likely be forced to cut eligibility, coverage, and services across the entire Medicaid population to compensate for the loss in funding.
- Millions of currently insured Americans could lose coverage and access to comprehensive and affordable healthcare.
- Broad waivers given to states makes it unclear how coverage and costs for low income, seniors and people with pre-existing conditions like lung cancer will be impacted.
- By allowing states to amend the “Essential Health Benefits,” the newly approved preventive services for lung cancer screening could be left without full coverage, making it impossible to detect and treat the disease at an early, less costly and curable stage.
- Our system could go back to annual, lifetime limits and high out-of-pocket costs in healthcare.
- Repealing the Prevention and Public Health Fund without a corresponding plan leaves a funding gap for essential public health programs.

As the Senate prepares to vote on its version of health reform, we urge you to reconsider the process under which the BCRA was drafted; far outside of regular order, with no public input, or any Senate committee hearings to allow further deliberation on a major legislative proposal that will affect millions of Americans’ access to life saving care. Instead of a rapid vote to repeal and replace the imperfect Patient Protection and Affordable Care Act, we urge you to work in a bipartisan way to make improvements and a long term dedicated investment to a patient-valued healthcare delivery system.

As we further our mission of saving lives and advancing research by empowering those living with and at risk for lung cancer, LCA appreciates the opportunity to comment and working with you on next steps. Please feel free to contact Elridge Proctor, Director of Health Policy at 202-742-1427 ([Eproctor@lungcanceralliance.org](mailto:Eproctor@lungcanceralliance.org)) with any questions or updates.

With Sincere Regards,



Laurie Fenton-Ambrose  
President and CEO Lung Cancer Alliance

