



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

November 20, 2017

Honorable Seema Verma
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-5524-P
P.O. Box 8013
Baltimore, MD 21244-1850
Dear Administrator Verma:

Submitted Electronically:
CMMI_NewDirection@cms.hhs.gov

Dear Administrator Verma:

On behalf of Lung Cancer Alliance (LCA), I am writing in response to the CMS Request for Information (RFI) seeking insights on a new direction to promote patient-centered care and test market-driven reforms that empower beneficiaries as consumers, provide price transparency, increase choices and competition to drive quality, reduce costs, and improve outcomes.

As one of the nation's leading and highest rated non-profit, since 1995, we have played a critical role in every major advance in changing how we support, talk about, detect and treat lung cancer. LCA's core healthcare principle is to ensure a people-centered healthcare delivery system that ensure "value" is defined by the patient and not third party interests, so we appreciate the strong and prominent commitment you have made – both within the RFI and in media statements – to putting patients first at CMMI. We join our coalition partners in urging CMS to achieve a value-based innovation model with strategies that effectively includes the patient's voice and perspectives.

Through advocacy, research and support we work with patients, survivors, caregivers and multi-disciplinary teams of medical professionals to advance better outcomes for all those impacted by or at risk for lung cancer. In our view, patients battling lung cancer and other serious life-long diseases are seeking access to high quality and affordable care that includes medications and support services to improve their quality of life.

In order to achieve the goals and objectives to foster an affordable and accessible healthcare system, CMS must put patients first and empower them along with their family and professional caretakers to make informed decisions based on what the individual patient value most. LCA strongly supports and would like to reiterate some of the following comments:

1. **Defining a clear, consistent process for engaging patients and other stakeholders in development and implementation of CMMI evaluations.** In order to increase stakeholder involvement and transparency. We agree that patient engagement both formal and informal opportunities must occur at the beginning and throughout the process.
2. **Defining and adopting detailed criteria for patient-centeredness in CMMI evaluations.** Consider better education tools to help patients and their caregivers make informed decisions and most importantly, consider patient reported experiences and outcomes as measurements.
3. **Building on and strengthening the patient safeguards articulated in the RFI.** Both patients and providers must be informed of their participation in the Alternative Payment Model (APM) and patients and consumers should be informed of the financial incentives driving their care and the evidence supporting those incentives.
4. **Pursuing demonstrations that embody these reforms and put patients at the center of the health care.** In order to ensure a people-centered healthcare system, CMS must reform the system to be more agile as to match the right care deemed necessary by the individual patient and their physician. This is evident by the personalized practice of precision medicine that is improving individualized outcomes for cancer patients.

Lung cancer is still the leading cause of cancer deaths among men and women in every state and nationwide. This underscores the need to promote patient-centered care that incentivize early detection along with prevention, wellness and intervention strategies to reverse costly and late stage management of diseases.

LCA appreciates the opportunity to comment and your consideration of these recommendations. We look forward to engaging in the development, implementation and evaluation of alternative payment models. Please feel free to contact our Director of Health Policy, Elridge Proctor at 202-742-1427 or Eproctor@lungcanceralliance.org with any questions.

Sincerely,



Laurie Fenton-Ambrose
President & CEO
Lung Cancer Alliance