

# Support Value-Based Radiation Therapy for Cancer Patients

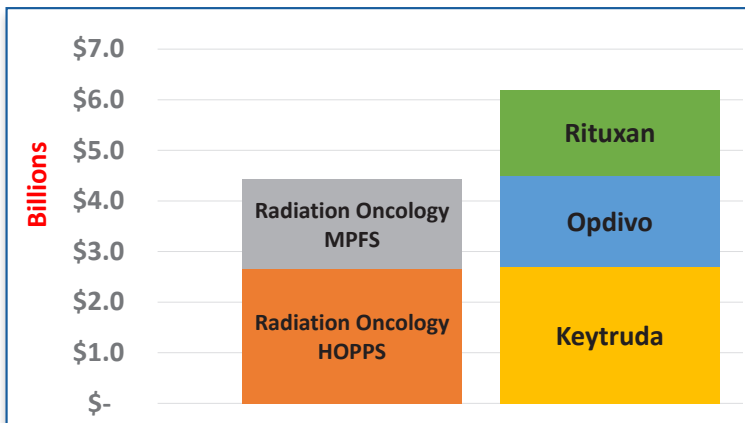
2022

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America's radiation oncology clinics deliver life changing cancer treatments to over one million Americans annually. In the hands of skilled clinicians with advanced technology, radiation therapy is curing thousands of patients every year and contributing to the public health priority to reduce cancer mortality rates. Radiation oncology is also a highly cost-effective treatment for patients, with Medicare Part B spending for all of radiation oncology (\$4.4B) totaling much less than the Part B spending on just three top cancer drugs (\$6.2B). Radiation oncology is poised to provide even more value for patients if Congress will support urgent policies this year to protect access to care for Medicare beneficiaries.

The radiation oncology community appreciates Congress' support of radiation oncology and its value-based payment goals, as demonstrated by the passage of bipartisan legislation in 2015 and 2018 to freeze Medicare payments and allow for a smooth transition away from a fee-for-service model. Most recently, clinics are grateful that the Protecting Medicare and American Farmers from Sequester Cuts Act delayed the implementation of the radiation oncology alternative payment model (RO-Model). The Centers for Medicare and Medicaid Services has now delayed the RO Model indefinitely, but ASTRO remains committed to value-based payment and is developing an alternative payment model that will be ready in the coming months.

**Medicare Part B Spending in 2019:  
Radiation Oncology vs. Top 3 Cancer Drugs**



Source: Kaiser Family Foundation analysis of 2019 CMS data

**ASTRO and radiation oncology remain committed to value-based care, and we appreciate Congress' commitment to high quality cancer care for the millions of patients, and their families, who are battling cancer.**

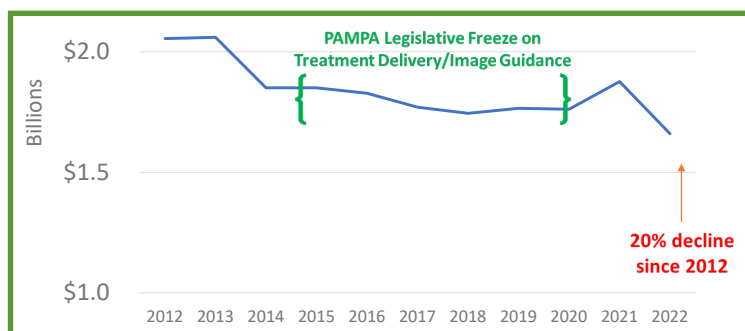
Despite radiation oncology's track record, Medicare has cut payments for radiation therapies in community-based clinics by 20% in the last 10 years, with millions of dollars in new cuts due to the clinical labor price update scheduled for the next four years. While ASTRO agrees that clinical labor price updates are needed, budget neutrality rules under the physician fee schedule have resulted in steep cuts to radiation oncology clinics, with some key cancer treatments slashed by 10%. As the specialty with the most significant capital costs in medicine, clinics faced with such significant cuts have no choice but to reduce vital staff and services, cancel technology investments, and, in some cases, close or consolidate.

In the meantime, ASTRO backs policies that would help the country's radiation therapy clinics continue to provide life-saving cancer care for patients, particularly those in underserved communities that too often lack access to state-of-the-art care.

## ASTRO's Asks

- Support legislation this year to mitigate the cuts to radiation oncology and other specialties under the new clinical labor price update.
- Support the development of a new alternative payment model for radiation oncology that improves access and quality, advances equity and reduces costs.
- Support major reforms to Medicare's physician payment system to stop the annual cycle of cuts and ensure stability, access, value and equity.

**Radiation Oncology MPFS Total Allowed Charges**



With these reforms, community-based radiation oncology practices will finally experience payment stability, allowing them to recover from pandemic declines and invest in patient services that prevent patients from traveling far from home to access advanced treatment technologies. A new payment model that evolves from the CMS alternative payment model would capitalize on the opportunity to provide higher quality, lower cost care for beneficiaries across physician offices and hospitals. Such a model would help clinics advance health equity among historically marginalized populations by providing supportive services, such as care navigation, nutrition and transportation.