

May 4, 2020

The Honorable Nancy Pelosi
Speaker of the House of Representatives
U.S. Capitol Building, H-222
Washington, DC 20515

The Honorable Kevin McCarthy
House Republican Leader
U.S. Capitol Building, H-204
Washington, DC 20515

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

The Honorable Charles Schumer
Senate Democratic Leader
U.S. Capitol Building, S-221
Washington, DC 20510

Dear Speaker Pelosi, Majority Leader McConnell, Minority Leader McCarthy, and Minority Leader Schumer:

The American Society for Radiation Oncology (ASTRO)¹ greatly appreciates your bipartisan action to address the COVID-19 outbreak demonstrated most recently by passage of the Coronavirus Aid, Relief, and Economic Security Act or the “CARES Act” (P.L. 116-136) and Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139). We believe these powerful legislative steps, taken in concert with regulatory actions by federal agencies, are helping to turn the tide against COVID-19. However, stabilizing the health care system and establishing a path to recovery requires additional federal action and support. As you consider further legislation, we want to inform you of the dire conditions facing America’s radiation oncology care providers and their cancer patients. COVID-19 deaths have temporarily surpassed the mortality of cancer during this emergency, but we are concerned that cancer deaths will mount without a concerted effort to shore up our cancer care infrastructure through support to practices and patients.

Data from the outbreak indicates that cancer patients are at greater risk of contracting COVID-19 and have poorer outcomes once infected. Therefore, the virus is dramatically impacting the mission of radiation oncology clinics to successfully treat patients and will continue to do so for the foreseeable future. ASTRO is hearing from both large and small freestanding centers and hospital-based clinics that the burden of the COVID-19 is simultaneously resulting in lower treatment volumes and overwhelming clinic capacity, as staff become ill or reassigned. Many radiation oncology practices are small businesses, with just 2-3 radiation oncologists and support staff, and we are hearing from these smaller practices that they are at significant risk of being unable to continue providing treatments.

On April 18, ASTRO launched a national survey to assess the impact of COVID 19 among radiation oncologists. The radiation oncology medical directors that responded represent the diverse geographic

¹ *ASTRO members are medical professionals, who practice at hospitals and cancer treatment centers in the United States and around the globe and make up the radiation therapy treatment teams that are critical in the fight against cancer. These teams often include radiation oncologists, medical physicists, medical dosimetrists, radiation therapists, oncology nurses, nutritionists and social workers, and treat more than one million cancer patients each year. We believe this multi-disciplinary membership makes us uniquely qualified to provide input on the inherently complex issues related to Medicare payment policy and coding for radiation oncology services.*

and practice-type landscape of specialty. A summary of preliminary findings from respondents of interest to policymakers follows:

- **87% of respondents report a decline in patient volumes;**
 - **On average, treatment volumes have declined 31%;**
- **92% report financial revenue declines of greater than 10%;**
 - **63% report revenue declines of greater than 20%**
 - **13% report revenue declines of greater than 50%;**
- **47% report reduced staffing due to the decline in patient volumes;**
 - **12% report radiation oncology staff being transferred to other clinical areas;**
 - **10% report reduced staffing due to staff illness; and**
- **69% report experiencing shortages of personal protective equipment (PPE).**

While this picture of radiation oncology is bleak now, there are indications the financial and clinical threats will worsen before improving. Marked decrease of diagnostic and therapeutic oncology surgical procedures, decreased medical oncology office hours, social distancing rules, and patients deciding to avoid care has necessitated significant declines in cancer screening and diagnosis, will result in significant reductions in radiation oncology referrals from cancer surgeons and other cancer specialists for several months ahead. Consistent with this, radiation oncologists overwhelmingly report growing decline in new patient consults, which invariably leads to fewer patients on treatment.

The economics of a radiation oncology practice, particularly those in smaller and rural communities that already have lower patient volumes, makes matters worse. More so than any other physician practice, radiation oncology practices have exceedingly high fixed costs for equipment and overhead due to the multimillion-dollar radiation treatment devices and highly skilled clinical staff needed to deliver safe and accurate radiation therapy. Any drop in revenue can jeopardize a radiation oncology practices' ability to pay off loans for this expensive equipment and cover their high payroll costs. Radiation oncologists already have reported closing their doors in some communities. Congress must act further to support radiation oncology practices, other providers across the cancer continuum, and of course, patients.

ASTRO strongly supports the policy requests of the physician community articulated in the April 15 letter to Congress. Building off existing COVID-19 relief legislation, ASTRO supports continued financial aid in the form of direct payments, grants and interest free loans to health care providers, including radiation oncologists. Specifically, ASTRO supports:

- **Additional funding through the Public Health and Social Services Emergency Fund.** This direct injection of funds without administrative hurdles has been invaluable to radiation oncology practices and should be applied beyond COVID-19 cases given the broad impact on practices. We support continued direct cash infusions in line with past expenditures to support physicians nationwide as well as funding focused on those providers in communities, including rural communities, facing the greatest need.
- **Additional loans through the Payroll Protection Program (PPP) and other Small Business Administration programs.** Congress must ensure that physician practices of all sizes have prioritized access to small business loans, as practices struggle to serve the dual roles of treating cancer patients and responding to COVID-19.
- **Congress also must make 501(c)6 organizations eligible for PPP loans to allow groups, such as ASTRO, to continue supporting physicians with essential clinical and educational resources.** Nonprofit medical specialty societies are playing a critical role in meeting the needs of their physician members during the crisis and are essential to recovery. The cancellation of

educational meetings and other major revenue losses are decimating these nonprofits and the benefits they provide to members and the public.

- **Stable Medicare Physician Payments.** In addition to efforts to address the financial hole created by the COVID-19 pandemic, Congress must also take this opportunity to stabilize Medicare payments in a manner that at minimum matches increasing costs for practices. Congress should provide positive physician payment updates for 2020-2025, filling the gap left by the Medicare Access and CHIP Reauthorization Act. Congress should also extend lifting the sequester through the end of 2021 to provide relief from payment cuts. In addition, Congress should waive budget neutrality for the Medicare payment changes for evaluation and management (E/M) services that will be implemented on January 1, 2021, as well as protect against payment cuts through the Medicare physician fee schedule, hospital outpatient provider payment system or the implementation of the Radiation Oncology Alternative Payment Model.
- **Reforms to Accelerated and Advance Payments.** ASTRO also appreciates the funding support provided by Medicare advance payments, but we urge Congress to make improvements to the program suggested by the physician community. Reforms include postponing recoupment until 365 days after the advance payment is issued; removing the 10.25% interest rate on these payments, reducing the per-claim recoupment amount from 100% to 25%; extending the repayment period for physicians to at least two years; and waiving the interest that accrues during the extended payment period.

ASTRO is hopeful that the nation's response to the COVID-19 pandemic will ultimately result in a return to normalcy, and radiation oncologists can again focus entirely in serving the needs of cancer patients. Unfortunately, there are very concerning signs that things will not be the same, at least not for quite some time. There is little doubt that the unavoidable delays will result in poorer outcomes for cancer patients. In addition, millions of Americans, including cancer patients, have lost their jobs and health insurance as a direct result of COVID-19. ASTRO agrees with the cancer patient community that Congress must intervene to ensure that cancer treatment is not negatively impacted by coverage disruptions. Congress should rely on a mix of public and private insurance approaches, including support for out-of-pocket costs, to ensure that cancer patients can receive life-saving treatment and supportive services during and after the pandemic. In addition, Congress must address the serious impact of COVID-19 on the research enterprise, including the disruption to patients on clinical trials. Aggressive measures in flexibility and funding are needed to support researchers to accelerate progress toward cures of cancer and viruses.

During this crisis, patients also need to receive timely care without the hassles and anxiety associated with prior authorization for health care services. Yet, radiation oncologists and patients continue to report wasted time and effort responding to prior authorization requirements, distracting them from fighting cancer and COVID-19. In fact, some radiation oncologists report longer wait times than usual. Physicians and staff have much more important issues to focus on than burdensome prior authorization requirements, and ASTRO urges Congress to grant the Centers for Medicare and Medicaid Services the authority to suspend all federally-funded payer prior authorization requirements during the outbreak. Such a move would strengthen actions by the Administration to waive prior authorization requirements under Medicaid and Medicare Advantage, although radiation oncologists report no meaningful improvement thus far.

Finally, ASTRO also agrees with the broader health care community that Congress must continue to take steps to provide protective supplies and equipment. As identified in ASTRO's survey above, the lack of PPE and added stress this puts on providers and patients must be resolved definitively and

comprehensively. ASTRO also urges Congress to provide hazard pay to health care workers, including physicians and clinic staff, during the public health emergency.

Despite the unprecedented challenges to cancer treatment since the outbreak began, the radiation oncology community is tremendously proud of its role in fighting against COVID-19. With cancer screening and treatments, such as surgery and chemotherapy, falling off dramatically, radiation oncologists have innovated care to provide safe, convenient, and effective treatments to tens of thousands of cancer patients during the crisis. As one New York radiation oncologist said: “Radiation oncology remains extremely resilient through this whole crisis, and our ability to treat without compromise really says something special about what we have to offer.”

ASTRO and the radiation oncology community commend the bipartisan action of Congress to address the COVID-19 crisis, and we look forward to working with you to support American patients and providers through the pandemic and recovery. Please contact Dave Adler, ASTRO’s Vice President of Advocacy, at 703-839-7362 or dave.adler@astro.org with any questions.

Sincerely,

A handwritten signature in cursive script that reads "Laura Thevenot".

Laura I. Thevenot
Chief Executive Officer