



November 15, 2021

The Honorable Patty Murray
Chair
Senate Appropriations Subcommittee on
Labor, Health and Human Services, Education,
and Related Agencies
Washington, DC 20510

The Honorable Rosa DeLauro
Chair
House Appropriations Subcommittee on Labor,
Health and Human Services, Education, and
Related Agencies
Washington, DC 20515

The Honorable Roy Blunt
Ranking Member
Senate Appropriations Subcommittee on
Labor, Health and Human Services, Education,
and Related Agencies
Washington, DC 20510

The Honorable Tom Cole
Ranking Member
House Appropriations Subcommittee on Labor,
Health and Human Services, Education, and
Related Agencies
Washington, DC 20515

Dear Chair Murray, Chair DeLauro, Ranking Member Blunt, and Ranking Member Cole:

As members of One Voice Against Cancer (OVAC), a broad coalition of public interest groups representing millions of cancer patients, researchers, providers, survivors, and their families, we urge you to prioritize funding for cancer research and prevention during your negotiations over the Fiscal Year 2022 Labor, Health and Human Services, and Education Appropriations bill. We remain deeply grateful for your bipartisan, bicameral leadership, especially this year, the 50th anniversary of the passage of the National Cancer Act.

OVAC Requests for the National Cancer Institute and National Institutes of Health

NCI: \$7.609 billion, the amount recommended by NCI in its FY 2022 professional judgment budget, or at least the House-passed level of \$6.992 billion

NIH: \$51.733 billion, the amount requested in the President's budget, or at least the House-passed level of \$49.434 billion

Thanks to the subcommittees you lead, Congress has increased funding for NIH by \$12.9 billion over the past six years. We are especially grateful that you have dedicated funding to address the precipitous decline in the success rate for Research Project Grant applications at NCI. As you know,



the NCI is experiencing a demand for research funding that is far beyond that of any other Institute or Center (IC). Between FY 2013 and FY 2019, the most recent year for which data are available, the number of R01 grant applications to NCI rose by 50.6 percent. For all other ICs during that time, the number of R01 applications rose by just 5.6 percent.

As a result, the RPG success rate at NCI dropped from 13.7 percent in FY 2013 to 11.6 percent in FY 2019. This is a situation unique to NCI, at a time when cancer researchers are making historic advances in new treatments and therapies. The success rate for NIH overall during that same period rose from 16.8 percent to 21.2 percent. The demand for NCI funding reflects the extraordinary progress that is being made in many areas of cancer research, the lack of progress for some cancers, and the potential for new breakthroughs. We urge you to take these factors into account when allocating NIH funding.

OVAC supports the creation of the proposed Advanced Research Projects Agency-Health (ARPA-H) and has provided [recommendations](#) for its design and implementation. Funding for the new agency should not prevent robust increases for the NCI and other core NIH research programs.

OVAC Requests for the Centers for Disease Control and Prevention

Division of Cancer Prevention and Control (DCPC): \$559 million

About half of the over 600,000 cancer deaths that will occur this year could be averted through the application of existing cancer control interventions. Unfortunately, in sharp contrast to funding for the NIH, federal funding for CDC cancer programs has remained almost flat for many years. Between FY 2010 and FY 2021, funding for the DCPC increased by just \$15.4 million, or 4.2 percent, from \$370.3 million to \$385.8 million.

The DCPC provides key resources to states and communities to prevent cancer by ensuring that at-risk, low-income communities have access to vital cancer prevention programs. However, information about the benefits of early education and access to potentially lifesaving screenings is not always equitable, creating significant disparities in cancer outcomes. The consequence of such disparities is that cancer is more often diagnosed at later stages when options for treatment may be limited and the odds for survival are lower. Additionally, job losses resulting from the pandemic have left many Americans without health insurance, increasing the need for robust cancer screening programs at the CDC.

Below please find OVAC's requests for key programs within the DCPC:

- National Comprehensive Cancer Control Program: **\$50 million**
- National Program of Cancer Registries: **\$70 million**
- National Breast and Cervical Cancer Early Detection Program: **\$275 million**
- Colorectal Cancer Control Program: **\$70 million**



- National Skin Cancer Prevention Education Program: ***\$5 million***
- Prostate Cancer Awareness Campaign: ***\$35 million***
- Ovarian Cancer Control Initiative: ***\$14 million***
- Gynecologic Cancer and Education and Awareness (Johanna's Law): ***\$15 million***
- Cancer Survivorship Resource Center: ***\$900,000***

If you have questions, please contact Lisa Lacasse, president of the American Cancer Society Cancer Action Network, at lisa.lacasse@cancer.org. Once again, thank you for your continued leadership on funding issues important in the fight against cancer.

Sincerely,

American Academy of Dermatology Association
American Association for Cancer Research
American Cancer Society Cancer Action Network
American College of Surgeons Commission on Cancer
American Institute for Cancer Research
American Society for Radiation Oncology
American Society of Clinical Oncology
American Urological Association
Association of American Cancer Institutes
Bladder Cancer Advocacy Network
Cancer Support Community
Charlene Miers Foundation for Cancer Research
Children's Cancer Cause
Deadliest Cancers Coalition
Debbie's Dream Foundation: Curing Stomach Cancer
Dermatology Nurses' Association
Esophageal Cancer Action Network
Fight Colorectal Cancer
Friends of Cancer Research
GO2 Foundation for Lung Cancer
Hematology/Oncology Pharmacy Association
Intercultural Cancer Council
International Myeloma Foundation
KidneyCAN
Leukemia & Lymphoma Society
LIVESTRONG Foundation
LUNgevity Foundation



Men's Health Network
Mesothelioma Applied Research Foundation
National Alliance of State Prostate Cancer Coalitions
National Association of Chronic Disease Directors
National Brain Tumor Society
National Cancer Registrars Association
North American Association of Central Cancer Registries
Oncology Nursing Society
Ovarian Cancer Research Fund Alliance
Pancreatic Cancer Action Network
Pennsylvania Prostate Cancer Coalition
Prevent Cancer Foundation
Prostate Cancer Foundation
Prostate Conditions Education Council
Sarcoma Foundation of America
Society for Immunotherapy of Cancer
Society of Gynecologic Oncology
St. Baldrick's Foundation
Susan G. Komen
The Life Raft Group
Triage Cancer
Us TOO International
ZERO - The End of Prostate Cancer