



December 16, 2022

The Honorable Shalanda Young
The Office of Management and Budget
725 17th Street, NW
Washington, DC 20503

Dear Director Young:

We write today to thank the Administration for continuing support of cancer early detection. As the Administration drafts the fiscal year (FY) 2024 budget, the Cancer Early Detection Alliance (CEDA) urges the Office of Management and Budget (OMB) to provide an increase of at least \$11.5 million, for a total of \$23 million for the Agency for Healthcare Research and Quality (AHRQ) to support and staff the U.S. Preventive Services Task Force (USPSTF).

CEDA consists of national organizations representing a diverse group of stakeholders, including patient advocacy organizations, healthcare professional societies, and industry leaders, all with significant expertise in cancer care and early detection. CEDA's mission is to promote and expand access to quality, equitable early cancer detection and care, with a specific focus on reaching underserved communities and addressing racial and ethnic disparities.

As you know, USPSTF operates as an independent, volunteer panel of national experts that issue evidence-based recommendations for clinical preventive services Americans should receive. Under the Affordable Care Act (ACA) all individual and group health plans must cover clinical preventive services that receive an A or B rating from the USPSTF with \$0 cost-sharing for patients.

The USPSTF plays a critical role in the accessibility of early cancer screening for individuals in the United States. The USPSTF's timely review of new cancer screening data, and recommendations for coverage, are essential to detect cancer early and begin life-saving interventions. Due to level funding over the past decade, however, the USPSTF has consistently been under-resourced and unable to adequately respond to new research and new technologies in a timely manner. Under current law, the USPSTF is required to comply with a five-year review cycle for issuing recommendation updates, but they often fail to meet this timeline. While other guideline developers have shifted toward more frequent real-time updates, the slower cadence of USPSTF updates does not keep pace with scientific and clinical

innovation. Ultimately, this delay means patients do not have access to the best early cancer screening resources, as most insurance does not cover them without the USPSTF rating.

Additionally, USPSTF does not publicly respond to comments. While stakeholders can submit comments on draft research plans and evidence reviews, these are not made public and the agency only responds in generalities. Robust stakeholder engagement is critical to achieving equity while ensuring that experts in the field are engaged in the process. USPSTF has the authority to update their comment processes and publicly respond to input they receive.

AHRQ and USPSTF need more staff and resources to review more topics in a year and respond publicly to comments thereby more effectively engaging with the public and key stakeholders. As AHRQ noted in their FY 2023 Congressional Budget Justification, the cost to evidence reviews has grown over the years, and level funding will mean fewer reviews than the current 8-12 that they currently conduct in a year. Furthermore, a public commenting process will require additional staff time and more resources than are currently available to USPSTF.

In the interest of increasing access to improved or innovative cancer early detection tools with USPSTF recommendations that are responsive to historically underrepresented communities, we request that the Administration double the USPSTF budget, an increase of \$11.5 million. As the Administration relaunches Cancer Moonshot and looks to significantly reduce cancer deaths, the USPSTF can play a critical role in improving access to early cancer screening. Now is the time to support USPSTF to conduct more timely reviews and respond to public input of cancer screening recommendations.

We look forward to working with you as you finalize the Administration's Budget for FY 2024. Please contact Peggy Tighe at Peggy.Tighe@PowersLaw.com or Taryn Couture at Taryn.Couture@PowersLaw.com if you have any questions.

Sincerely,
CEDA

CC:

Xavier Becerra, Secretary of the Department of Health and Human Services (HHS)
Robert Otto Valdez, Ph.D., M.H.S.A., Director of the Agency for Healthcare Research and Quality (AHRQ)

◆ *American Osteopathic Association* ◆ *American Urological Association*
◆ *Colon Cancer Coalition* ◆ *Freenome* ◆ *Guardant Health*
◆ *Prevent Cancer Foundation* ◆ *ZERO - The End of Prostate Cancer*