

Patients Against Lymphoma



Non-Profit | Independent | Evidence-based

Founded in 2002

Monday, June 02, 2008

President:

Karl Schwartz, MFA,
Patient Consultant to FDA

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Leonard Rosen, Esq.

Patient Navigators

Carol Lee
Nancy Lewis
Kathy Fry

TO: The Honorable Members of the Committee on Finance, United States Senate

Re: CY2008 CMS-1392-FC - CMS policy on reimbursement for targeted cancer therapies: radioimmunotherapy

Dear Senators:

We are writing to **thank you** for taking action on behalf of cancer patients to reverse a seriously flawed CMS ruling that would have severely limited, or even denied, patient access to radioimmunotherapies; a policy that also threatens the future of related personalized and targeted therapeutic innovations as cited by many experts in the field and respected clinical organizations.

We are also writing to remind you that what prompted the difficult legislative fix of December 2007 - the urgent need - still exists, and that the deadline for the extension you made possible is only weeks away!

A summary of what's at stake for cancer patients, present and future:

- Radioimmunotherapy is proven to reverse the frightening pattern of both diminished response and duration of response to conventional therapy for the treatment of lymphomas, and has also been widely acknowledged as potentially curative.
- These agents are targeted – they bind to tumor cells and spare most normal cells. The doses are also calibrated and individualized based on how fast or slow the drug clears the body as detected by the imaging dose, which also has therapeutic effects.

These revolutionary features ought to be considered exemplary models for the development of future targeted therapies for all cancers and should be fully supported by CMS reimbursement ... and yet, as you have recognized, reimbursement rates for Bexxar and Zevalin, as set forth in CY2008 CMS-1392-FC, were approximately one half their cost.

Though Congress mandated full reimbursement through June 30, 2008, we are concerned that, when the current legislation expires, reimbursement will default to the Final Rule. If that were to happen, we fear that **patients will no longer have access to these drugs which are critical, in some cases, to their very survival.**

Please let us know if you are in need of any background information regarding this issue of deep concern. You might also refer to our background report:

IMPLICATIONS FOR PATIENTS WITH LYMPHOMA AS A RESULT OF CMS-1392-FC
AS IT RELATES TO BEXXAR® Therapeutic Regimen (Tositumomab + Iodine 131
Tositumomab) and ZEVALIN® Therapeutic Regimen (Ibritumomab Tiuxetan)

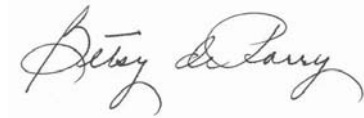
<http://www.lymphomation.org/cms-rep.pdf>

Again, we are truly thankful for all that you've done on our behalf. We hope you can find a way to make your judgment in this matter stand permanently, based on the merits of doing so, and also to avoid the significant and far-reaching harm that will result if we fail to find a permanent solution.

Sincerely,



Karl Schwartz
President and Co-Founder,
Patients Against Lymphoma



Betsy de Parry
Public Policy Advisor