



April 08, 2024

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

The Honorable Robert Aderholt
Chair
House Appropriations Committee & Subcommittee on
Labor, Health and Human Services, Education,
and Related Agencies
Washington, DC 20510

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

The Honorable Rosa DeLauro
Ranking Member
House Appropriations Subcommittee on
Labor, Health and Human Services, Education
and Related Agencies
Washington, DC 20510

Dear Chair Aderholt, Chair Baldwin, Ranking Member Capito, and Ranking Member DeLauro:

Thank you for your ongoing bipartisan, bicameral, and steadfast leadership in support of cancer research and prevention programs. As members of One Voice Against Cancer (OVAC), a broad coalition of over 50 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 in the Fiscal Year 2025 Labor, Health and Human Services, and Education Appropriations bill.

OVAC Requests for the National Cancer Institute (NCI), the National Institutes of Health (NIH), and the Advanced Research Projects Agency for Health (ARPA-H)

NCI: \$7.934 billion, or \$710 million over the FY24 funding level. This investment would allow NCI's base budget to keep up with the biomedical research and development price index (BRDPI) and allow meaningful growth of roughly 5%. The NCI is experiencing a demand for research funding that is far beyond that of any other Institute or Center (IC). Between FY13 and FY22, the number of unique R01/R37 grant applicants to NCI rose by 45%, compared to 20% at all other ICs. This 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 to accelerate progress. As a result, 5 out of 6 potentially promising research projects go unfunded. NCI needs predictable and robust funding to be able to fund the groundbreaking ideas researchers are proposing and prevent losing a generation of young investigators.

With increased funding, NCI can advance the Cancer Moonshot goal of reducing the death rate from cancer by 50% over the next 25 years by funding hundreds of more research proposals; enrolling more people in clinical trials; and seizing opportunities for progress in key areas of research like unraveling the complexity of cancer

metastasis, harnessing the power of cancer data, and improving patients' lives through symptom science research.

NIH: \$51.3 billion, a \$4.2 billion increase over the comparable FY24 level, which would allow NIH's base budget to keep pace with the biomedical research and development price index (BRDPI) and allow for meaningful growth. Significant growth beyond the rate of inflation is central to making tangible progress against a wide range of diseases and conditions facing families in our nation, including cancer. NIH's world class research is also an economic driver across the nation and is key to maintaining our competitiveness in the global economy.

ARPA-H: at least \$1.5 billion, or continued funding at the FY24 level, to advance ARPA-H's unique focus on "high potential, high impact" research and potential for transformative breakthroughs in cancer and other diseases. Importantly, funding for the agency should be in addition to and not at the expense of robust increases for the NCI and other core NIH research programs.

Requests for the Centers for Disease Control and Prevention

Division of Cancer Prevention and Control (DCPC): \$472.4 million, a \$62.3 million increase over FY24. At least 42% of newly diagnosed cancers in the U.S. are potentially preventable, and the substantial costs of treating advanced disease could be reduced, using evidence-based strategies, many of which are supported by DCPC. Unfortunately, in sharp contrast to funding for the NIH, federal funding for CDC cancer programs has fallen short for many years. Excluding funding for the WISEWOMAN heart disease program, which is housed within the DCPC, the FY10-FY23 increase for DCPC programs was just \$25.4 million or 7%. That's more than \$100 million less than if DCPC funding had merely kept up with inflation.

The DCPC provides key resources to states and communities to promote effective cancer prevention and control practices. CDC's cancer programs help ensure access to life-saving cancer screenings particularly for individuals with limited income or who are uninsured or underinsured.

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

- National Comprehensive Cancer Control Program: **\$32 million**
- National Program of Cancer Registries: **\$63.4 million**
- National Breast and Cervical Cancer Early Detection Program: **\$265 million overall, \$230 million** not counting WISEWOMAN
- Colorectal Cancer Control Program: **\$51 million**
- National Skin Cancer Prevention Education Program: **\$6 million**
- Prostate Cancer Awareness Campaign: **\$20 million**
- Ovarian Cancer Control Initiative: **\$20 million**
- Gynecologic Cancer and Education and Awareness (Johanna's Law): **\$15 million**
- Cancer Survivorship Resource Center: **\$1.5 million**
- Breast Cancer for Young Woman: **\$9 million**

If you have questions, please contact Julie Nickson, Director, Federal Relations, American Cancer Society Cancer Action Network and Chair, One Voice Against Cancer at Julie.Nickson@cancer.org. Once again, thank you for your continued leadership on funding issues important in the fight against cancer.

Sincerely,

American Association for Cancer Research
American Cancer Society Cancer Action Network
American College of Surgeons
American Society for Radiation Oncology
Association for Clinical Oncology

American Urological Association
Association of American Cancer Institutes
Bladder Cancer Advocacy Network
Brem Foundation to Defeat Breast Cancer
Cancer Support Community
Children's Cancer Cause
Deadliest Cancers Coalition
Debbie's Dream Foundation: Curing Stomach Cancer
Esophageal Cancer Action Network
Fight Colorectal Cancer
Friends of Cancer Research
GO2 for Lung Cancer
Hematology/Oncology Pharmacy Association
Hope for Stomach Cancer
Intercultural Cancer Council Coalition
International Myeloma Foundation
KidneyCAN
Life Raft Group
LIVESTRONG Foundation
LUNgevity Foundation
Melanoma Research 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, Inc.
Oncology Nursing Society
Ovarian Cancer Research Fund Alliance
Patient Empowerment Network
Pancreatic Cancer Action Network
Pennsylvania Prostate Cancer Coalition
Prevent Cancer Foundation
Prostate Conditions Education Council
Sarcoma Foundation of America
Society for Immunotherapy of Cancer
Society of Gynecologic Oncology
St. Baldrick's Foundation
Stomach Cancer Action Network
Susan G. Komen
The Leukemia & Lymphoma Society
Triage Cancer
ZERO - The End of Prostate Cancer