



ASTRO is the **leading society** for radiation oncologists in the U.S.



We have more than 10,000 members, including doctors in **every state**.



Radiation therapy is a **safe, effective choice** for the most common cancers.



2 in 5 Americans will develop cancer. **More than half** will be prescribed radiation therapy.



Our doctors **treat >1 million people** with cancer each year.

## *Fast Facts*

# 2024 advocacy priorities:



## **Cosponsor The ROCR Act (S.4330/H.R.8404)**

- The Radiation Oncology Case Rate (ROCR) Value-Based Payment Program Act



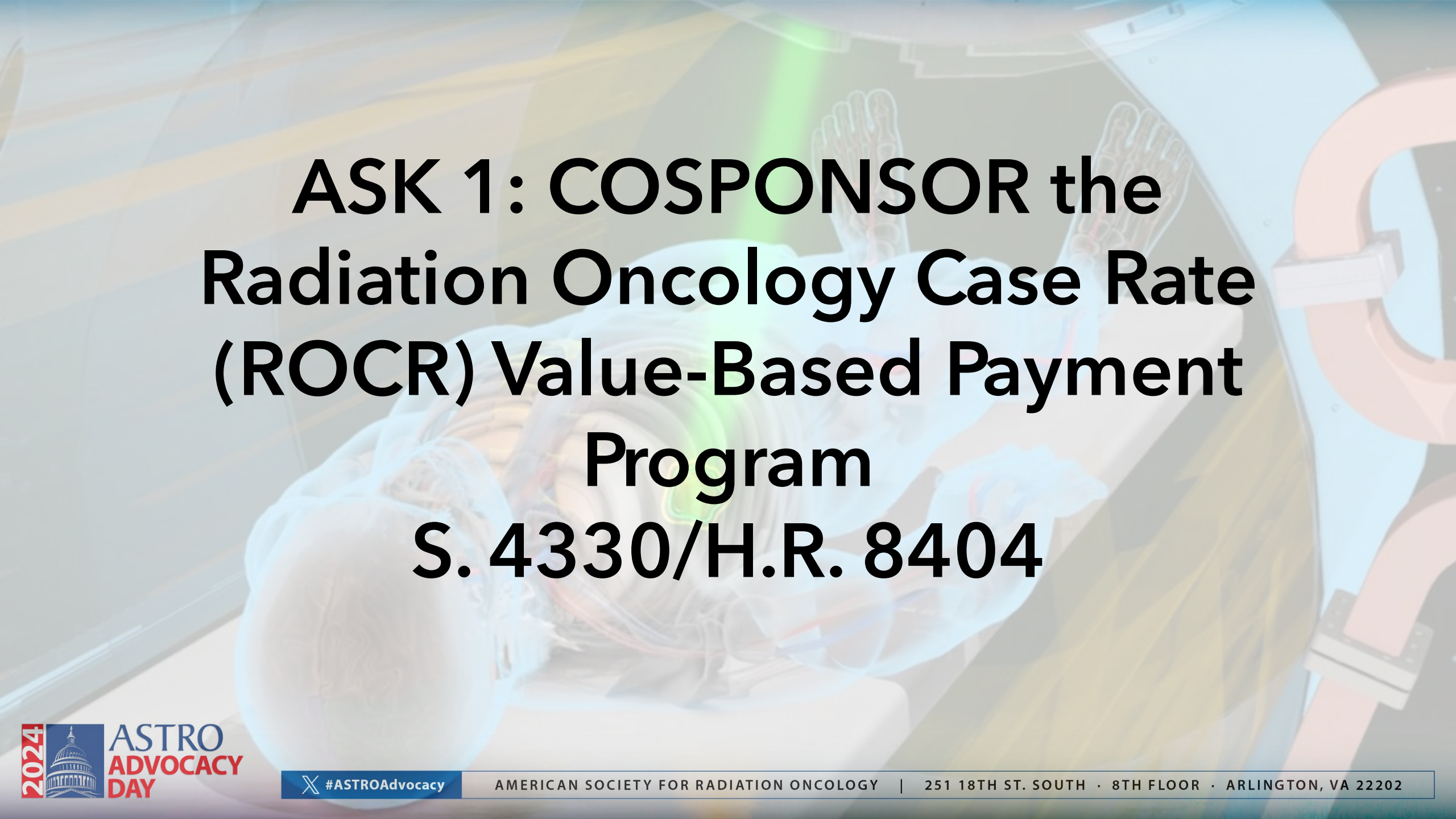
## **Cosponsor the Improving Seniors' Timely Access to Care Act**

- Prior Auth champions will be reintroducing June 2024!



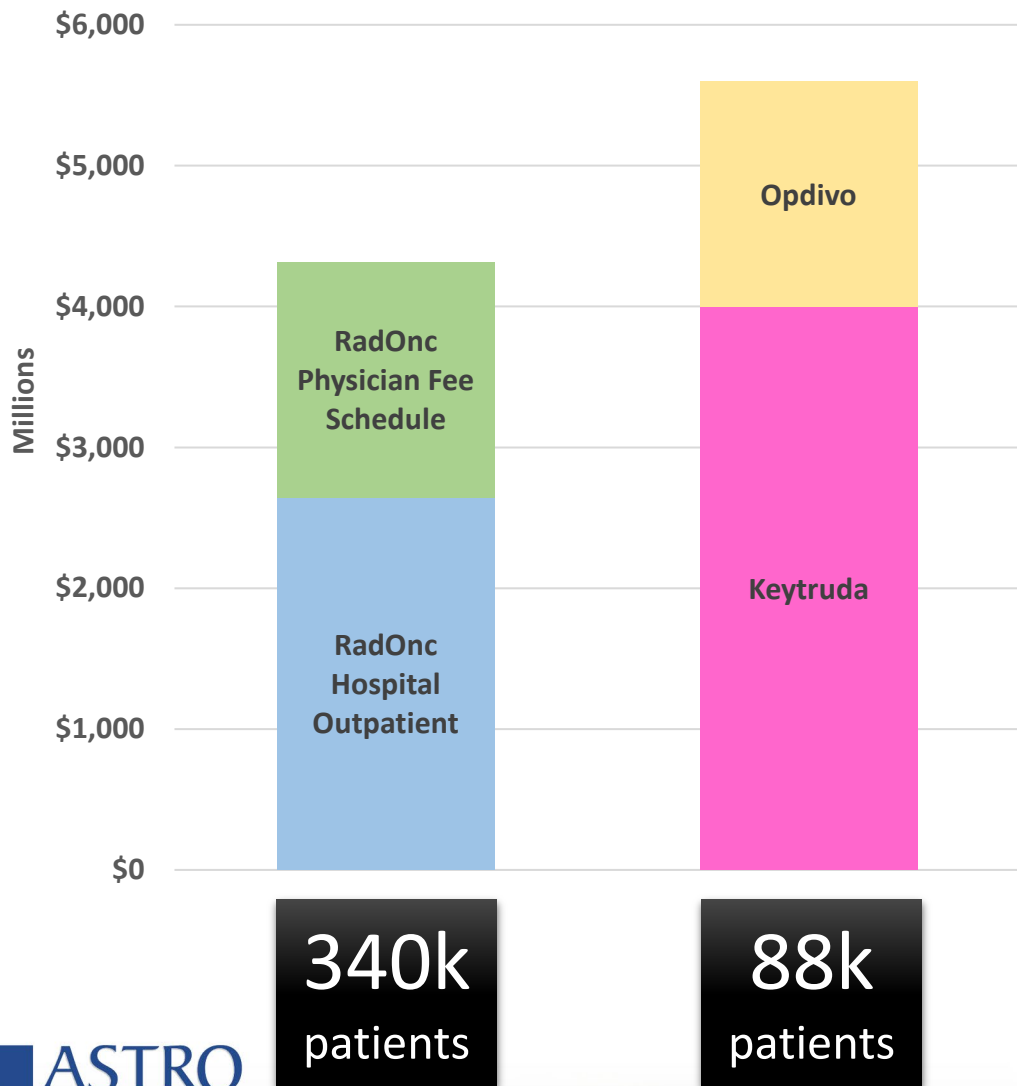
## **Support robust federal cancer research investments**

- Cancer research saves lives

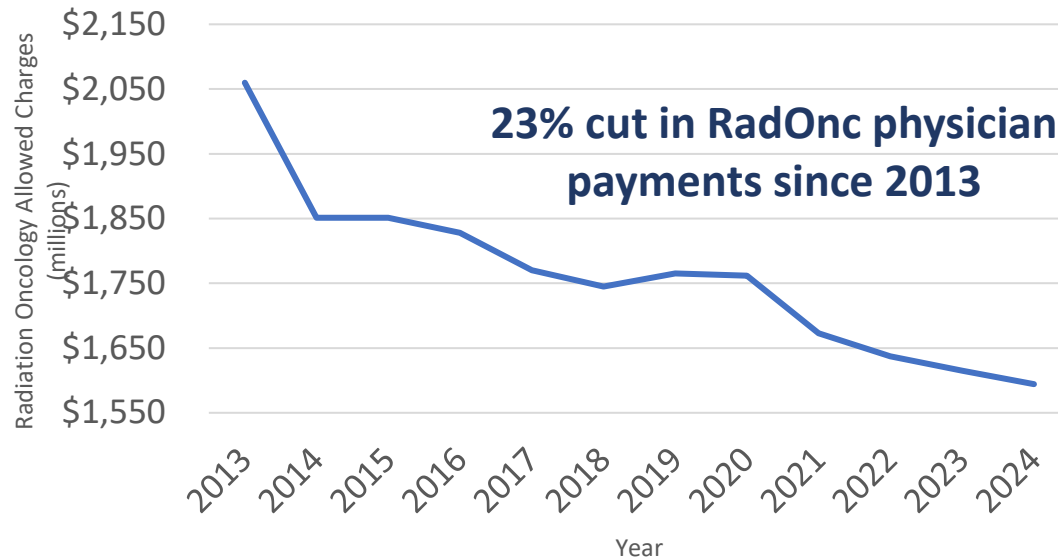


**ASK 1: COSPONSOR the  
Radiation Oncology Case Rate  
(ROCR) Value-Based Payment  
Program  
S. 4330/H.R. 8404**

Medicare Part B Spending 2021:  
Radiation Oncology vs. Top 2 Cancer Drugs



**Without stable payments, access to care and quality suffer**



**Reimbursements Declining**  
**Practice Costs Rising**  
**Payment Reform Needed**



# Radiation Oncology Case Rate (ROCR) Value-Based Payment Program

## Goals:

- Increase patient access to care
- Improve quality of cancer treatments
- Reduce disparities for rural and underserved patients
- Lower Medicare spending and patient costs.





# Who's In, What's In

- Nearly all radiation oncology freestanding and hospital-based practices
- 85% of all radiation therapy services.
- New tech and innovative services paid fee-for-service
  - Eligible for ROCR in future years



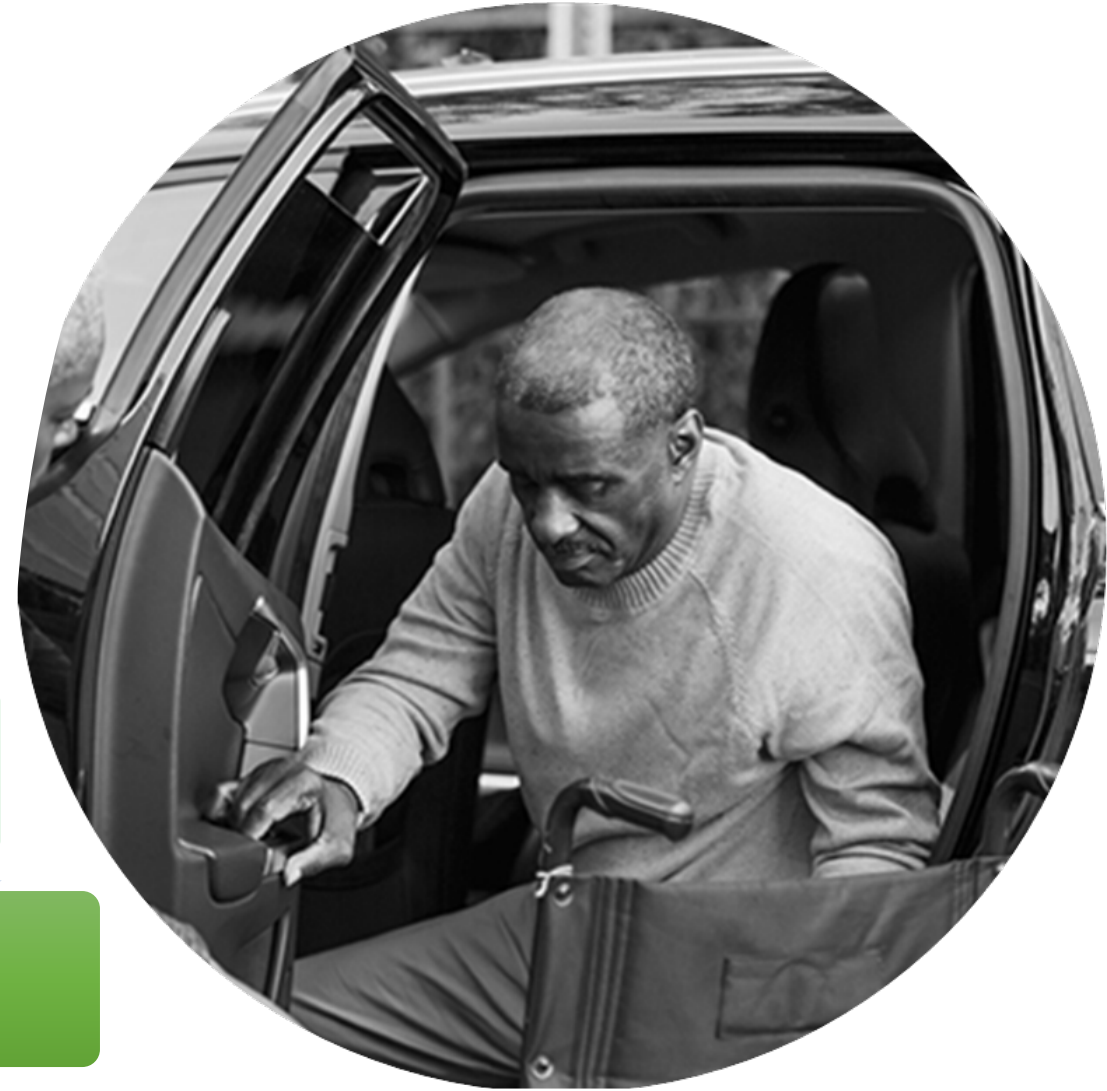
# How ROCR Works

Base payment rates published by Medicare for 15 common cancer types

Applies annual inflation update and savings adjustment

Incentive payment for practice accreditation to ensure quality

Additional HEART payment to cover transportation services for eligible rural/underserved patients



# ROCR For Patients



**Addresses instability of current payment systems**



**Aligns financial incentives with clinical guidelines, supporting use of shorter treatments**



**Ensures use of quality assurance and improvement standards**



**Provides unified payment to level playing field across settings**



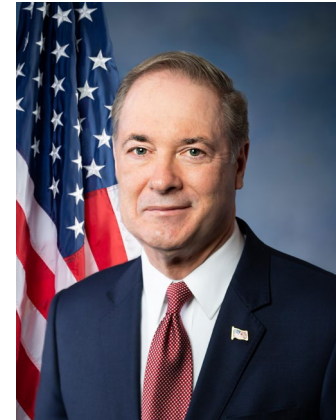
**Updates payments annually based on inflation, supporting access to state-of-the-art care close to home**



**Reduces disparities among underserved patients**



# ROCR BIPARTISAN CHAMPIONS AND SUPPORTERS



American Association of Medical Dosimetrists (AAMD)  
American Association of Physicists in Medicine (AAPM)  
American College of Radiology (ACR)  
BAMF Health  
Baptist Health South Florida  
Baptist Hospitals of Southeast Texas  
Baylor College Of Medicine  
Birmingham Radiological Group  
Cancer Care of Hattiesburg, PLLC  
Carolina Regional Cancer Center  
Cedars-Sinai Medical Center  
Connecticut Radiation Oncology  
Corewell Health  
Gamma West Cancer Services

GenesisCare  
Generations Radiotherapy & Oncology PC  
Hackensack University Medical Center  
Las Vegas Prostate Cancer Center  
Loyola Medicine  
Maryland Oncology Hematology  
Northeast Radiation Oncology  
Northwestern Medicine - Department of Radiation Oncology  
Penn Medicine Dept. of Radiation Oncology and Proton Therapy  
Prostate Cancer Institute of Arizona  
Providence  
Radiation Oncology Associates  
Radiation Oncology Physicians Inc.  
Saint Francis Hospital and Medical Center  
SERO  
Society for Radiation Oncology Administrators (SROA)

Tennessee Oncology  
Texas Radiotherapy  
Thomas Jefferson University  
Trinity Mid-Atlantic  
University of Arkansas for Medical Science  
University of Iowa Hospitals and Clinics  
University of Kansas - Dept of Radiation Oncology  
University of Louisville  
University of Maryland  
University of Michigan  
University of Rochester Medical Center  
US Oncology Network  
Washington University  
Willis-Knighton Health System  
WVU Cancer Institute at Wheeling Hospital  
*...and growing...!*

# COSPONSOR the ROCR Value-Based Payment Program Act (S.4330 / H.R.8404)

Medicare payment for radiation oncology is **broken**.

Improve access, enhance **quality**, reduce **disparities**, and lower **costs**.

ROCR is **patient-centered** and **outcomes-focused**.



*GO DEEPER:* Visit ASTRO's ROCR resource page for more!

# ASK 2: Cosponsor Prior Auth Reform bill





Ensure Patients & their Physicians Make Treatment Decisions...  
**Cosponsor the Improving Seniors' Timely Access to  
Care Act!**



RO is subject to prior auth barriers **more than other medical specialties.**



Prior auth consistently ranked **#1 challenge** at RO clinics



For cancer patients receiving RT, prior auth restrictions can **delay care** for *days or weeks*



...ultimately **harming patients**, and **wasting resources** despite a universal goal to manage health care utilization and control costs



# ASK 3: Increase Cancer Research Funding

- **18.1 million** cancer survivors in the United States
- Since 1991, cancer research and innovation has contributed to a **33% drop in cancer mortality**, or more than 3.8 million deaths from cancer averted.
- In FY 2022, NIH research funding supported nearly **570,000 jobs** and produced more than **\$96 billion** in economic output nationwide.
- Unfortunately, scientific demand has far outpaced NCI's budget, leaving **5 out of every 6 proposals unfunded** every year.
- **Research saves lives**, and *we need your support* for robust federal investments in cancer research funding.

# Will you support cancer research investments at these levels...?





# Can we count on you...?

- Cosponsor the Radiation Oncology Case Rate (**ROCR**) Value-Based Payment Program Act (**S.4330 / H.R.8404**)
- Support **prior auth reform** by cosponsoring the Improving Seniors' Timely Access to Care Act (coming June 2024!)
- Support robust federal **investments in cancer research** at the NIH, NCI, and ARPA-H.