

# From Vision to Action:

*A National Policy Agenda for  
Supportive Cancer Care*



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### **About our agenda**

This national policy agenda outlines a coordinated, actionable roadmap to integrate supportive cancer care across the continuum - from diagnosis through survivorship and end of life. Grounded in a whole-person approach, it aligns federal policy, payment innovation, and clinical practice to ensure patients and families receive high-quality care that addresses a patient's clinical and social needs. Through targeted strategies spanning research, care coordination, workforce development, value-based payment, and caregiver support, this agenda seeks to advance sustainable solutions that reduce disparities and enhance quality of life for all individuals affected by cancer.

### **Mission**

To advance a comprehensive, whole person-centered approach to cancer care that ensures every individual and family has access to the full spectrum of supportive services – from diagnosis through survivorship and end of life. We seek to align policy, payment, and practice to deliver care that addresses physical, emotional, social, and financial needs, reducing suffering and improving quality of life for all people affected by cancer.

### **Vision**

A future where supportive cancer care is an integral and guaranteed part of the cancer experience – accessible to everyone, delivered through coordinated and compassionate teams, supported by sustainable payment models, and recognized as essential to achieving the best outcomes for patients, families, and communities

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## GOAL



## PRIORITY



## STRATEGIES & TACTICS

### Support Research & Innovation in Supportive Care

Advocate for increased funding for supportive / palliative care research and development of patient-reported outcomes

- Coordinate with relevant lawmakers (SCC champions, appropriators, congressional leadership, etc.) to draft, authorize, and fund a study to better illustrate the value – both **economic and clinical** – of SCC, either through standalone legislation that would be incorporated in the EOY package, or via the forthcoming appropriations process (FY27)
- Submit an [Ascent Grant](#) application focused on **intervention-based research** evaluating supportive cancer care models, patient-reported outcomes, and cost-effectiveness across the cancer continuum.
- Promote **cross-disciplinary research collaborations** that integrate oncology with cardiology, gastroenterology, behavioral health, rehabilitation, nutrition, and other specialties to advance whole-person cancer care.
- Conduct targeted outreach to members of the House and Senate Appropriations Committees and Cancer Caucuses to advocate for increased federal investment in supportive cancer care research.
- Coordinate with NCI centers, PCORI stakeholders, professional societies, and technology partners to align research priorities and support development of innovative supportive care interventions.
- Engage **patient and caregiver advisory panels** to inform research priorities and strengthen advocacy and grant proposals.

### Advance Care Coordination & Navigation

Promote adoption of cancer-specific PCMH models, improve EHR interoperability, expand access to telehealth services, and fund navigator certification and mentorship

- Develop congressional briefing materials outlining the quality and cost benefits of **cancer-specific Patient-Centered Medical Home (PCMH) models**, including supportive services such as nutrition, rehabilitation, behavioral health, and survivorship care.
- Convene congressional offices to engage CMS on testing supportive cancer care-specific PCMH models that integrate oncology care with supportive services.
- Advocate for permanent Medicare **telehealth flexibilities** to support delivery of symptom management, behavioral health, and supportive care services.
- Partner with the American Cancer Society to expand access to the [LION](#) **care navigation training program** and integrate navigator certification into broader workforce initiatives.
- Promote improved **EHR interoperability and care coordination** across oncology, primary care, and supportive care providers.
- Include **patient and caregiver stories** in congressional briefings and advocacy materials to highlight the impact of fragmented care.

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## GOAL

### Strengthen and Standardize the Supportive Cancer Care Workforce

### Advance Value-Based Payment and Comprehensive Coverage for Supportive Cancer Care



## PRIORITY

Support policies that expand and sustain the supportive cancer care workforce through passage of PCHETA, expanded Public Service Loan Forgiveness, and funding for palliative care and psycho-oncology fellowships, while establishing standardized training, continuing education, and quality metrics to ensure consistent, high-quality care.

Promote value-based payment models by developing bundled payment demonstrations for cancer care and establishing a continuous care planning code under the Physician Fee Schedule, while strengthening private insurance coverage for palliative care, psychosocial support, and survivorship services and reducing prior authorization burdens.



## STRATEGIES & TACTICS

- Coordinate with congressional offices and coalition partners to advance passage of **PCHETA**, recognizing this may require sustained multi-cycle advocacy.
  - Educate policymakers on workforce shortages across supportive cancer care disciplines, including palliative care, psycho-oncology, oncology nutrition, rehabilitation, and survivorship care.
  - Promote **subspecialty and cross-disciplinary training**, including supportive care education for oncologists and survivorship training for primary care physicians.
  - Support expansion of **loan forgiveness, fellowship funding, and workforce development programs** for supportive cancer care providers.
  - Convene professional societies and academic institutions to establish **standardized workforce competencies and training pathways**.
  - Develop a **consensus framework or white paper** outlining workforce standards and strategies for implementation.
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- Compile evidence demonstrating the cost savings and quality improvements associated with supportive cancer care to inform CMS and CMMI policy development – with the ultimate goal of CMMI implementing a revamped EOM centered around SCC.
  - Advocate for **bundled payment demonstrations** that integrate supportive cancer care services including symptom management, nutrition services, rehabilitation therapies, and psychosocial care.
  - Promote development of a **continuous care planning code under the Physician Fee Schedule** to support longitudinal supportive care planning.
  - Work with ACO stakeholders and CMS innovation models to demonstrate how supportive cancer care integration improves quality outcomes and shared savings.
  - Engage private insurers, Medicare Advantage plans, and employers to expand coverage of supportive services including nutrition, rehabilitation, psychosocial care, and survivorship programs.
  - Coordinate with state policymakers and insurance regulators to reduce **prior authorization barriers** and strengthen coverage of supportive cancer care services.

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## GOAL



## PRIORITY



## STRATEGIES & TACTICS

### Strengthen Family, Caregiver, and Financial Protections for Supportive Cancer Care

Expand caregiver and family support through training, respite programs, access to behavioral health services, peer support grants, and workplace flexibility, while preventing financial hardship for cancer patients by supporting caps on out-of-pocket costs, expanding tax deductions and caregiver credits, and addressing cancer drug shortages.

- Advocate for **expanded caregiver education, training, and respite services**, including reimbursement pathways through Medicare and Medicaid.
- Translate early findings from the **GUIDE Model** into policy recommendations supporting caregiver education and support services.
- Support federal policies that expand caregiver resources, behavioral health services, peer support programs, and workplace flexibility.
- Advance financial protection policies by promoting **caregiver tax credits, expanded deductions for cancer-related expenses, and limits on out-of-pocket costs**.
- Incorporate **patient and caregiver testimony** into congressional outreach and coalition advocacy.
- Highlight the impact of **cancer drug shortages** on patient care and financial hardship through targeted policy engagement

