April 9, 2024

Dear ASCO Advocate:

We can’t wait to see you at ASCO’s Advocacy Summit in Washington, D.C. Advancing our priorities on Capitol Hill depends on your efforts to educate lawmakers and maintain relationships with them.

This year’s Advocacy Summit includes nearly 175 volunteers from 48 states, Washington D.C., and Puerto Rico. As practicing physicians, researchers, and constituents, you are well equipped to share firsthand stories on how timely health policy issues impact you and your patients.

Before you arrive, please review the materials in this ebinder, which are also available on the Advocacy Summit webpage and in the AdvocacyDay mobile app. If this is your first ASCO Advocacy Summit, be sure to view the Advocacy 101 training for what to expect.

This two-day event will prepare you for your Hill meetings by reviewing our legislative asks for lawmakers, holding an advocacy training with colleagues from your state, hearing from an engaging keynote speaker, and providing ample opportunity to network.

Your congressional meeting schedules will be available on the AdvocacyDay mobile app prior to the Summit. Visit the app frequently for real time updates.

Lastly, the ASCO Association PAC is hosting a special reception for PAC contributors featuring multiple members of Congress who are cancer care champions. This exclusive event is open to current PAC contributors. For more information regarding the PAC, email Anthony Perez at ASCOAssociationPAC@asco.org.

Please contact ASCO staff at AdvocacySummit@asco.org with any questions. See you soon!

Sincerely,

Everett E. Vokes, MD, FASCO
Chair of the Board, Association for Clinical Oncology
Table of Contents

- Welcome Letter from Dr. Everett Vokes; Chair of the Association Board
  - Table of Contents
  - Schedule of Events
  - Accessing the Summit App
- ASCO’s Legislative Messages for Congress
  - Drug Shortages Face Sheet
    - Drug Shortages Leave Behind
  - Cancer Research Funding Face Sheet
    - Cancer Research Funding Leave Behind
  - Telemedicine Face Sheet
    - Telemedicine Leave Behind
- Advocacy Summit Logistical Information
  - Know Before You Go
  - How to Get Around Capitol Hill
  - Capitol Hill Eateries
- Social Media Guide
- Speaker Biographies
  - Biography for Dr. Will Flanary (Dr. Glaucomflecken)
  - Biography for Senators Tammy Baldwin (D-WI) & Shelley Moore Capito (R-WV); Corecipients of ASCO’s Congressional Champion for Cancer Care Award
- ASCO Advocates
  - 2024 Advocacy Summit Attendee List
  - 2023 Advocate of the Year
- ASCO Association PAC
  - ASCO Association PAC Infographic
  - ASCO Association PAC 2023 Successes
  - ASCO Association PAC Reception Congressional Guests
- Volunteer Expense Report
**Tuesday, April 16, 2024**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:45 am – 4:05 pm</td>
<td>Capitol Hill Legislative Training (Lunch provided beginning at 11:15 am)</td>
<td>JW Marriott Washington, D.C.: 1331 Pennsylvania Ave, NW, Washington, D.C. 20004</td>
</tr>
<tr>
<td></td>
<td>Presentation of ASCO’s Congressional Champion Award</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Capitol Hill Training: Prepare for Success</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Building Relationships with Your Lawmakers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Keynote Session</td>
<td></td>
</tr>
<tr>
<td>5:30 – 7:00 pm</td>
<td>ASCO Association PAC Reception with Members of Congress*</td>
<td>Renwick Gallery: 1661 Pennsylvania Ave, NW, Washington, D.C. 20006</td>
</tr>
<tr>
<td></td>
<td>*For PAC Contributors Only</td>
<td></td>
</tr>
<tr>
<td>7:00 - 8:50 pm</td>
<td>Networking Dinner</td>
<td>Renwick Gallery: 1661 Pennsylvania Ave, NW, Washington, D.C. 20006</td>
</tr>
<tr>
<td></td>
<td>Shaping Our Future</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Presentation of ASCO’s Advocate of the Year</td>
<td></td>
</tr>
</tbody>
</table>

**Wednesday, April 17, 2024**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:30 - 8:45 am</td>
<td>Breakfast Briefing</td>
<td>JW Marriott Washington, DC: 1331 Pennsylvania Ave, NW, Washington, D.C. 20004</td>
</tr>
<tr>
<td></td>
<td>Hill Day Kick-Off</td>
<td></td>
</tr>
<tr>
<td>8:45 am</td>
<td>Bus Transportation to Reserve Organization of America</td>
<td>Reserve Organization of America (ROA): 1 Constitution Ave NE, Washington, D.C. 20002</td>
</tr>
<tr>
<td></td>
<td>Once a majority of the group has arrived, we will pause for a brief photo in front of the Capitol</td>
<td></td>
</tr>
<tr>
<td>10:00 am – 5:00 pm</td>
<td>Congressional Meetings</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Prescheduled meetings with your Members of Congress and their staff</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Individual schedules will be provided</td>
<td></td>
</tr>
<tr>
<td></td>
<td>We will have secure luggage storage at ROA</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lunch on your own</td>
<td></td>
</tr>
</tbody>
</table>
How to Access Your Congressional Meetings Schedule

Personalized Congressional meeting schedules will be available on the AdvocacyDay app. Schedules frequently update, so please check your schedule often. If urgent changes or cancellations occur the day of the meetings, the app will update, and we will contact you directly via email. Staff will be available on-site to address any scheduling concerns. If you have any issues with the app or accessing your schedule, please contact AdvocacySummit@asco.org.

**How to Download the App:**

- In your device’s app store, search for “AdvocacyDay” (all one word) and press download.
- Select “Allow” for notifications.
- Select “Allow While Using App” for location setting.
- When you open the app, select “Choose Your Group” and look for ASCO.
- If you have used the AdvocacyDay app with this email address previously, log in with the credentials you created. You may need to reset your password.
- If you are a new user, click the “Sign Up” button and follow the steps to create your account.
- Use the email address you provided when you registered for the Advocacy Summit.
  - If you are unsure which email address you provided, please contact AdvocacySummit@asco.org.
- After you sign up, you will receive a verification code via email.

**What You Will See on the Home Screen (pictured above):**

- **Your Schedule** – lists confirmed and pending Congressional meetings (noted as “TBD”). For more information on each meeting, tap on that lawmaker’s name.
Individual Meeting (pictured on the right):

- **“Member of Congress”** – at the top of the meeting is a photo and the name of the official. This will be listed for every meeting, even if you are meeting with staff. You can access more information on each member, including biography, sponsored bills, committee assignments and more, by clicking on their name.
- **“Meeting Time”** – the time for each meeting will be noted below the name of the Congressional member.
- **“Meeting With”** – directly below the meeting time is the name of the staffer with whom you may be meeting. The name of the Member of Congress will be listed in this field if they are expected to join.
- **“Attendees”** – attendees in each of your meetings.
- **“Talking Points”** – list of our key talking points. If the lawmaker is a member of a key health care committee or has cosponsored a bill for which we are advocating, that is noted here.
- **“Documents”** – link to the legislative messages for Congress document and additional background information.
- **“Meeting Report Form”** – please provide feedback from each of your meetings in this form to help ASCO staff follow up with offices.
- **“Send Thank You Email”** – a pre-populated, editable email thank you note to send to the staffer from each of your meetings.
- **“Member Attended/Only Staff Attended”** – note if the Member of Congress or staff attended.

**Toolbar:**

- **“Legislators”** – additional information for each lawmaker, including biography, relevant bills, recent news mentions, and committee assignments.
- **“Messages”** – if your meetings have changed, you will see a message with the change here.
- **“Directory”** – list of ASCO advocates participating in Congressional meetings.
- **“More”** – additional resources, such as event feedback and support.
  - **“Support”** – contact support with your questions regarding the app, your schedule, or to provide other feedback. This will be the best way to get questions on these items quickly on April 17.
Cancer Drug Shortages

**ASK: Work with Your Colleagues on a Comprehensive Solution to End Drug Shortages**

- The ongoing shortages of critical oncology drugs are impacting patients and their care teams.
- The lack of predictability in the generic cancer drug supply chain is negatively impacting patients with cancer, including disruptions or delays in treatment, potentially leading to irreversible disease progression.
- ASCO urges Congress to mitigate drug shortages by taking the following actions:
  - **Address** economic factors that drive generic manufacturers out of the market and consider stabilizing the market with long-term contracts and guaranteed prices.
  - **Reward** reliable U.S. manufacturing of critical and supportive medications through price stabilization and investment in continuous manufacturing or other advanced manufacturing.
  - **Recognize** potential shortages earlier by increasing the FDA’s visibility into the supply chain so the agency can predict and respond to potential shortages earlier.
  - **Relay** information about potential shortages to health systems and providers to help them prepare for and mitigate possible supply challenges.

Cancer Research Funding

**ASK: Support robust funding for the NIH, NCI, and ARPA-H in FY2025, specifically $51.303 billion for the NIH, $7.934 billion for NCI, and at least $1.5 billion for ARPA-H**

- Much of the nation’s oncology research is federally funded – and these trials are the primary drivers in the development of new cancer therapies, including for rare and pediatric cancers.
- The NCI’s funding has not kept up with scientific opportunity. The NCI has seen a staggering increase in research grant applications (R01) over the last few years. Unfortunately, the NCI is only able to fund a small percentage of these applications, leaving a lot of promising science unfunded.
- The requested funding levels would enable the NIH and NCI’s budgets to keep pace with biomedical inflation and provide meaningful growth for the agencies.
- ARPA-H will help to realize many patient-centric, real-world opportunities by pairing NCI’s basic and translational research expertise with ARPA-H’s capability to foster rapid innovation at an unprecedented scale.
- Funding for ARPA-H should *supplement*, not supplant, funding for NIH and NCI.

Telemedicine

**ASK: Cosponsor the CONNECT for Health Act (S. 2016 / H.R. 4189)**

*If already a cosponsor: Thank you*

- The telehealth flexibilities granted by HHS during the COVID-19 public health emergency allowed expanded use of telehealth for Medicare beneficiaries and providers. While these flexibilities were extended through the end of 2024, without additional Congressional action, the restrictions will return in 2025.
- Telemedicine in oncology has improved documentation, supported continuity of care, enhanced communication between patient and provider, increased treatment compliance, and contributed to high patient satisfaction.
- The increased use of telehealth, when appropriate, has also helped providers reach historically underserved populations.
- Congress should ensure that patients are able to access telehealth services regardless of their location by permanently removing geographic and originating site restrictions which require a patient live in a rural area and use telehealth at a doctor’s office or clinic.
- The *CONNECT for Health Act* would permanently extend telehealth flexibilities for Medicare beneficiaries.
Address Oncology Drug Shortages

Background:

For more than a decade, the oncology community has experienced cancer drug shortages. These shortages are caused by many factors, including quality issues, manufacturer business decisions, disruptions to raw ingredients and excipient supplies, and natural disasters. Most oncology drugs in shortage are old, generic sterile injectables, many of which do not have alternatives, and impact both the pediatric and adult populations. The lack of predictability in the generic cancer drug supply chain can have negative impacts on patients with cancer, including disruptions or delays in treatment, potentially leading to irreversible disease progression. Both Congress and the Administration need to intervene to secure the pharmaceutical pipeline and address drug shortages. Oncology drug shortages have reached a critical juncture, necessitating immediate action from all stakeholders. ASCO believes a multi-faceted approach is necessary to tackle the oncology drug shortage crisis effectively and remains committed to working with policymakers, regulatory bodies, drug manufacturers and the health care community to identify solutions to ensure long-term stability and preserve patient access to lifesaving and life-prolonging oncology treatments.

Almost all the policy proposals being considered would require Congressional action. Agencies are limited by their existing authority in their response to drug shortages and lack the tools to address what is essentially a failure of the market. The Administration, in its President’s FY 2025 Budget, proposed a number of legislative initiatives, and in early April the Department of Health and Human Services (HHS) released a White Paper outlining a potential public-private partnership but acknowledged additional Congressional funding would be needed.

Noteworthy Congressional Activities:

- The Senate Homeland Security and Governmental Affairs Committee held a hearing in March 2023 on the impact of drug shortages on national security. ASCO provided guidance as the Committee developed legislation around mapping the pharmaceutical supply chain and separately a bill on identifying and mitigating supply chain risk.
- The House Energy and Commerce Committee has held several hearings, requested stakeholder input, and released a legislative discussion draft on drug shortages. ASCO has been engaged in each of these activities, including providing a witness at a hearing in June 2023.
- The Senate Health, Education, Labor and Pensions Committee included provisions to address drug shortages in its pandemic preparedness reauthorization bill. ASCO is supportive of these provisions.
- The House Ways & Means Committee hosted a hearing in February 2024. ASCO provided a witness to testify on the impact of drug shortages on cancer patients. The Committee is also interested in addressing tax and trade implications as it works to address drug shortages.
- The Senate Finance Committee is developing more comprehensive legislation to address the underlying economic factors driving shortages. ASCO provided a witness at a December 2023 hearing, provided input on a white paper outlining policy recommendations, offered guidance on draft policy proposals and continues to engage with the committee as they draft legislation.
- Other legislative vehicles have included attempts to mitigate current shortages, such as the National Defense Authorization Act and Appropriations bills. Several members of Congress have also introduced stand-alone bills addressing components of the supply chain.

ASCO continues to work with all lawmakers who are interested in legislative solutions to address elements of the oncology drug supply chain. As such, ASCO has endorsed several bills which would take steps to address issues causing shortages. Components of each of these bills should be included in a legislative package to address drug shortages.
Message to Congress:

ASCO urges Congress to pass comprehensive legislation to mitigate existing drug shortages and prevent future shortages of lifesaving and life-prolonging cancer drugs. A comprehensive approach would:

- **Address** economic factors that drive generic manufacturers out of the market and consider stabilizing the market with long-term contracts and guaranteed prices.
- **Reward** reliable U.S. manufacturing of critical and supportive medications and raw materials through price stabilization and investment in continuous manufacturing or other advanced manufacturing for critical drugs and active pharmaceutical ingredients (APIs).
- **Recognize** potential shortages earlier by increasing the Food and Drug Administration’s (FDA) visibility into the supply chain so the agency can predict and respond to potential shortages earlier.
- **Relay** information about potential shortages to health systems and providers to help them prepare for and mitigate possible supply challenges.

Impossible Choices Campaign:

As a supplement to the legislative actions detailed above, ASCO is leading a new awareness campaign to end drug shortages. Doctors from across the U.S. are lending their voices to the effort by signing an open letter to policymakers to make clear the impact of drug shortages on cancer care and urge legislative action. Already nearly 500 oncology professionals have signed the letter.

The effort also features a new **video campaign** that shares the experiences of several oncologists, starkly reminding policymakers of the real and significant impact shortages have on patient care and the impossible choices facing cancer doctors as a result. The letter and the videos are available at [asco.org/ImpossibleChoices](http://asco.org/ImpossibleChoices).

Additional Resources:

For more information, please visit [ASCO.org/drug-shortages](http://ASCO.org/drug-shortages).

- February 6, 2024: ASCO CMO Dr. Julie Gralow’s Testimony Before the House Committee on Ways and Means
- January 4, 2024: A Call to Action to from Health-Related Organizations to Mitigate and Prevent Drug Shortages
- December 5, 2023: ASCO Government Relations Committee Past Chair Dr. Jason Westin’s Testimony Before the Senate Committee on Finance
- September 14, 2023: ASCO Statement for the Record for the House Energy and Commerce Committee, Health Subcommittee Drug Shortages Hearing
- August 25, 2023: ASCO Response to House Energy and Commerce Committee Chair Cathy McMorris Rodgers (R-WA) on the Stop Drug Shortages Act Discussion Draft
- July 7, 2023: ASCO Response to Drug Shortages Request for Information (RFI) from House Energy and Commerce Committee Chair Cathy McMorris Rodgers (R-WA) and Senate Finance Committee Ranking Member Mike Crapo (R-ID)
- June 13, 2023: ASCO CMO Dr. Julie Gralow’s Testimony Before the House Energy And Commerce Committee PAHPA Hearing
- May 11, 2023: ASCO Statement for the Record for the House Energy and Commerce Committee, Oversight and
Investigations Subcommittee Drug Shortages Hearing

- May 11, 2023: ASCO Statement for the Record for the House Energy and Commerce Committee PAHPA Hearing
- April 10, 2023: ASCO Testimony to the House Appropriations Committee Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Subcommittee
- March 22, 2023: ASCO Statement for the Record for Senate Homeland Security and Government Affairs Committee Hearing
Address Oncology Drug Shortages

Background

For more than a decade, the oncology community has experienced cancer drug shortages. These shortages are caused by a multitude of factors, including quality issues, manufacturer business decisions, disruptions to raw ingredients and excipient supplies, and natural disasters. Most oncology drugs in shortage are old, generic sterile injectables, many of which do not have alternatives, and impact both the pediatric and adult populations. The lack of predictability in the generic cancer drug supply chain can have negative impacts on patients with cancer, including disruptions or delays in treatment, potentially leading to irreversible disease progression. Both Congress and the Administration need to intervene to secure the pharmaceutical pipeline and address drug shortages.

Policy Recommendations

Oncology drug shortages have reached a critical juncture, necessitating immediate action from all stakeholders. ASCO believes a multi-faceted approach is necessary to tackle the oncology drug shortage crisis effectively and remains committed to working with policymakers, regulatory bodies, drug manufacturers and the health care community to identify solutions to ensure long-term stability and preserve patient access to lifesaving and life-prolonging oncology treatments.

To that end, ASCO has endorsed several bills which would take steps to address different issues causing shortages. Components of each of these bills should be included in a comprehensive legislative package to address drug shortages. For more information, please visit ASCO.org/drug-shortages.

We urge policymakers to:

- **Address** economic factors that drive generic manufacturers out of the market and consider stabilizing the market with long-term contracts and guaranteed prices.

- **Reward** reliable U.S. manufacturing of critical and supportive medications and raw materials through price stabilization and investment in continuous manufacturing or other advanced manufacturing for critical drugs and active pharmaceutical ingredients (APIs).

- **Recognize** potential shortages earlier by increasing the Food and Drug Administration’s (FDA) visibility into the supply chain so the agency can predict and respond to potential shortages earlier.

- **Relay** information about potential shortages to health systems and providers to help them prepare for and mitigate possible supply challenges.

ASCO urges Congress to pass comprehensive legislation to mitigate existing drug shortages and prevent future shortages of lifesaving and life-prolonging cancer drugs.
Support Cancer Research

Background:

The House and Senate Appropriations Committees each have 12 subcommittees responsible for writing bills that allocate yearly funding for federal agencies and programs. Each year, ASCO submits funding requests that prioritize the National Institutes of Health (NIH) and, within the NIH, the National Cancer Institute (NCI) and the Advanced Research Projects Agency for Health (ARPA-H).

In the Fiscal Year (FY) 2024 appropriations bill, Congress provided a $300 million increase to NIH’s base budget, and a $120 million increase to NCI. However, due to the expiration of dedicated Cancer Moonshot funding in FY 2023, this resulted in a net decrease of $378 million for NIH and $96 million for NCI in terms of total funding levels. These programs ultimately did better than many others given FY24 was an extremely difficult budget year, and Congress did demonstrate that funding for cancer research remains a bipartisan priority. During our congressional meetings we will thank Congress for continuing to make cancer research a priority, and communicate that continued investment is needed.

FY25 Funding Request:

ASCO worked with the biomedical research community and cancer research community to collectively develop the NIH, NCI, and ARPA-H FY25 funding requests. For the NIH, the request is $51.3 billion, which will help the NIH keep pace with biomedical inflation plus provide a meaningful growth rate. ASCO is requesting $7.934 billion for the NCI, a percentage increase that matches our request for the NIH. Finally, ASCO is requesting $1.5 billion for ARPA-H, a sustained amount from the FY24 budget to allow the agency to continue to recruit talent and identify opportunities for revolutionary solutions. Essential to our ARPA-H request is that the agency’s funding be additive and not come at the expense of robust, predictable funding for the NIH, NCI, and other existing research agencies.

The NCI is the largest funder of cancer research in the world, but its funding has not kept pace with opportunities for cutting edge research. In recent years, R01 grant applications to NCI have accounted for almost one-fifth of all R01 applications received by NIH, but the NCI can fund only 12% of these grants. Apart from these missed opportunities, we will lose early career investigators who may choose other careers if their grant submissions are not funded, disrupting the research workforce pipeline.

As oncology professionals, telling your personal story is more impactful than any of the talking points provided. During your meetings, please share how funding for biomedical and cancer research has impacted your work.

Message to Congress:

Provide sustainable, long-term funding for cancer research. ASCO urges Congress to pass a FY25 spending bill that includes at least:

- $51.3 billion for NIH,
- $7.934 billion for the NCI, and
- An additional $1.5 billion dedicated to ARPA-H.

1 https://www.cancer.gov/research/leading-progress/budget-proposal
Support Cancer Research

Over the last 50 years, research funded by the National Institutes of Health (NIH) and National Cancer Institute (NCI) has played a role in every major advancement related to cancer prevention, detection, and treatment. The Advanced Research Projects Agency for Health (ARPA-H) joins these agencies with the potential for transformative health breakthroughs for cancer care and other diseases. Funding for research remains critical in FY2025.

- **Cancer incidence is on the rise.** In 2024, for the first time, there will be over 2 million new cancer cases in the U.S. Older Americans are most likely to be diagnosed with cancer, but this trend is shifting. The number of people aged 50 to 64 with cancer is growing, and both colorectal cancer and cervical cancer diagnoses are increasing in even younger populations. Exact reasons are unknown, and funding is needed for researchers to study the causes.

- **Good science is going unfunded.** NCI’s research buying power is $1.1 billion less than 20 years ago. In recent years, research grant applications to NCI have accounted for almost one-fifth of all R01 applications received by NIH, but the NCI can fund only 12% of these applications. Continued investment will ensure that clinical research is adequately supported, the workforce pipeline is not disrupted, and scientific knowledge is leveraged to increase treatment options for patients.

- **Ending cancer as we know it.** The National Cancer Plan, released by the NCI in April 2023, provides a whole-of-society framework for reducing cancer deaths by 50% over the next 25 years. The plan encompasses the entire cancer continuum from cancer prevention and early detection through improved treatments, greater access to clinical trials, and better overall care delivery. Achieving the Cancer Moonshot goals relies on support and resources from the federal government.

- **Research funding saves lives.** A 2022 study found that over the last 40 years, clinical trials performed within the NCI’s National Clinical Trials Network prolonged the lives of patients with cancer by at least 14.2 million life-years and cost approximately just $326 in federal investment per each life-year added.ii

- **Provide transformative solutions with ARPA-H.** Sustained funding will allow ARPA-H to identify opportunities for the revolutionary solutions that have characterized the agency upon which it is modeled, the Defense Advanced Research Projects Agency. Funding for ARPA-H should supplement, not supplant, funding for NIH and NCI.

- **NIH creates jobs and economic growth.** In FY2023, the NIH provided $37.81 billion in research funding to scientists in all 50 states and the District of Columbia, supporting more than 412,000 jobs and generating $92.89 billion in economic activity. Sustainable funding remains critical to maintaining the research workforce pipeline.

ASCOT urges Congress to pass a FY2025 spending bill that includes at least:

- $51.3 billion for NIH,
- $7.934 billion for the NCI, and
- $1.5 billion for ARPA-H, supplemental to the NIH base budget.

---

Extend Telehealth Flexibilities

Background:

Telemedicine, also commonly referred to as telehealth, can increase access to care for patients with cancer while reducing treatment burden and disruption to patients. Providers who use telemedicine have reported that its benefits include decreased travel time for patients, immediate access to care, early detection of health issues and complications, increased patient autonomy, reduced caregiver burden, and increased patient satisfaction with healthcare. Additionally, virtual visits can provide effective follow-up and enhanced convenience for patients compared with traditional office visits. Telehealth interventions in chronic disease management have been shown to lead to a decline in hospital admissions and re-admissions, length of hospital stays, emergency department visits, and a reduction in mortality.

During the COVID-19 Public Health Emergency (PHE), the Department of Health and Human Services (HHS) waived certain restrictions in Medicare and Medicaid programs and allowed for the modification of telemedicine practice regulations that were previously in place. An important flexibility granted in the telehealth space was the temporary lifting of geographic and originating site restrictions in Medicare. These restrictions had previously meant telehealth services were only covered for patients in rural areas at eligible sites (doctor’s office/clinic).

Originally set to expire with the end of the PHE, the Consolidated Appropriations Act of 2023, passed in December 2022, extending the flexibilities through the end of 2024. Without further Congressional action these flexibilities will expire in 2025.

The Creating Opportunities Now for Necessary and Effective Care Technologies (CONNECT) for Health Act of 2023 (H.R. 4189/S. 2016) would make the COVID-era telehealth flexibilities permanent and further strengthen current telehealth education, reporting, and oversight. The CONNECT for Health Act would permanently remove the geographic and originating site restrictions, permit remote patient monitoring, allow use of telehealth in community health centers and rural health clinics, and provide reimbursement for those services. The bill is led in the House by Reps. Mike Thompson (D-CA-5), Doris Matsui (D-CA-7), Bill Johnson (R-OH-6), and David Schweikert (R-AZ-1), and in the Senate by Sens. Brian Schatz (D-HI), Roger Wicker (R-MS), Ben Cardin (D-MD), John Thune (R-SD), Mark Warner (D-VA) and Cindy Hyde-Smith (R-MS).

The House Energy & Commerce Committee hosted a hearing on April 10, 2024 on legislative proposals to support patient access to telehealth services. The hearing included ASCO-endorsed bills such as the CONNECT for Health Act and Telehealth Modernization Act among a series of other bills.

There are several other bills that would address components of telemedicine, but the CONNECT for Health Act is the most comprehensive bill and garners the most support on Capitol Hill and the House of Medicine.

Message to Congress:

- Please cosponsor the CONNECT for Health Act (S. 2016/H.R. 4189) to make telehealth flexibilities permanent.
  - If already cosponsoring (noted in AdvocacyDay App): Thank you!

Additional Resources:

- ASCO Telemedicine in Cancer Care Position Statement
- ASCO Telemedicine Cross-State Licensure Position Statement
Cosponsor the CONNECT for Health Act (H.R. 4189 / S. 2016)

Background

Since telehealth flexibilities were put in place at the start of the COVID-19 Public Health Emergency (PHE), there has been a dramatic increase in the use of telehealth. Its use has proven beneficial to providers and patients by increasing access to care for patients with cancer while reducing treatment burden and disruption to patients’ lives.

- Providers and patients have reported many benefits from the use of telemedicine, which include decreasing travel time for patients, potentially eliminating the need to take time off from work or find childcare, providing immediate access to care, which can lead to early detection of health issues and complications, supporting continuity of care, increasing patient autonomy, reducing caregiver burden, and increasing patient satisfaction.

- Telehealth interventions in chronic disease management demonstrate better patient outcomes and can lead to a decline in hospital admissions/re-admissions, length of hospital stays, emergency department visits, and a reduction in mortality. Virtual visits can also provide effective follow-up and enhanced convenience and communication compared with traditional office visits.

- Geographic and originating site restrictions severely limited telehealth utilization pre-pandemic and required a Medicare patient to live in a rural area and use telehealth services in limited health care settings for coverage.

- Telehealth restrictions that prevent access will resume in 2025. The Consolidated Appropriations Act of 2023 extended these flexibilities through 2024, but without further congressional action Medicare patients and providers will soon lose the ability to utilize telehealth as easily.

Policy Recommendations

The Creating Opportunities Now for Necessary and Effective Care Technologies (CONNECT) for Health Act of 2023 (H.R. 4189/S. 2016) would make the COVID-era telehealth flexibilities permanent and further strengthen current telehealth education, reporting, and oversight.

- H.R. 4189/S. 2016 would permanently remove the geographic and originating site restrictions, permit remote patient monitoring, allow use of telehealth in community health centers and rural health clinics, and provide reimbursement for those services.

- If passed, this bill would give the Secretary of Health and Human Services the authority to waive telehealth restrictions, including during public health emergencies. It would mandate studies of how telehealth has been used during the COVID-19 pandemic and the effectiveness of telehealth waivers and encourage the Center for Medicare and Medicaid Innovation to test payment models that include telehealth.

- This bill is led by Reps. Mike Thompson (D-CA-5), Doris Matsui (D-CA-7), Bill Johnson (R-OH-6), David Schweikert (R-AZ-1), and Sens. Brian Schatz (D-HI), Roger Wicker (R-MS), Ben Cardin (D-MD), John Thune (R-SD), Mark Warner (D-VA) and Cindy Hyde-Smith (R-MS).

ASCO urges Congress to pass the CONNECT for Health Act (H.R. 4189/S. 2016) and make telehealth flexibilities permanent to support patient access to care.
Key Logistics

First Time Attendee?

If this is your first time attending the ASCO Advocacy Summit, please view the Advocacy 101 training prior to your arrival for what to expect. It is also a good refresher for past attendees.

Arriving in Washington, D.C.:

- Upon arriving take a taxi/rideshare service or metro to the JW Marriott Washington, D.C., located at 1331 Pennsylvania Ave NW, Washington, DC 20004.
- The closest Metro station is Metro Center on the Red Line, approximately 3 blocks away.
- A hotel room was reserved for you and confirmation numbers were provided via email from AdvocacySummit@asco.org. For any hotel questions, please contact Ryan Strandlund (571-483-1417) or Zoe Betancourt (571-483-1619).
- Check-in is at 4:00 pm and check-out is at 12:00 pm.
  - For those arriving the morning of April 16, the Bell Stand will hold your luggage until check-in.
- If you are driving and require parking, please use the hotel’s self-parking garage entrance located on the F Street side of the building.
- Please keep all receipts to receive reimbursement per ASCO’s expense policy.

Tuesday, April 16: Advocacy Summit Training (11:45 am – 4:05 pm, JW Marriott Washington, D.C.)

- The training will be hosted in Grand Ballroom - Salons I & II, located on the Ballroom level.
- 10:30 am - Registration will take place in the Grand Foyer, outside of Salon II.
- 11:15 am - Lunch will be provided.
- 11:45 am - Summit Training will begin.

Tuesday, April 16: ASCO Association PAC Reception for PAC Contributors followed by a Networking Dinner for Summit Attendees (5:10 pm – 8:50 pm, Renwick Gallery of the Smithsonian American Art Museum)

- The Renwick Gallery is a 15-minute walk from the JW Marriott and groups will be walking with ASCO staff.
- Shuttles will be provided for those who do not want to walk or in case of rain. Please find ASCO staff if you would like to take the shuttle, located at the Pennsylvania Ave entrance of the hotel.
- Please leave unnecessary bags in your hotel room to ensure fast entry through security.
- At the end of dinner, shuttles will depart the Renwick Gallery for the JW Marriott Washington, D.C.

Wednesday, April 17: Congressional Meetings (JW Marriott and Capitol Hill)

- 7:30 am - Breakfast will be available beginning in Grand Ballroom - Salons I & II.
- 8:45 am - Shuttles will depart from the Pennsylvania Ave entrance of the JW Marriott for the Reserve Organization of America (ROA) on Capitol Hill where you may store your luggage for the day.
- 9:30 am - A group photo will be taken in front of the Capitol across the street from the ROA.
• Luggage should be dropped at the ROA prior to the group photo. ASCO staff will direct you to the photo location.
• Depart for your congressional meetings after the group photo. Meeting times and locations will be provided through the AdvocacyDay App.

**Departing Washington, D.C.:**

• For those departing directly after meetings on April 17, please plan to store luggage at the ROA. Please note that this location has staff monitoring the room all day.
• **All luggage must be picked up by 6:00 pm when the ROA closes.**
Capitol Hill: How to Get Around

Security: You are required to pass through security to enter Congressional office buildings. Do not carry any prohibited items. Food and drinks are permitted, except in the Capitol Building and the Capitol Visitors Center (CVC).

Getting Around: You will visit several House and Senate office buildings during the Advocacy Summit. Most meeting groups will have an ASCO staff member who can guide you to meetings. Maps and signs are located on each floor of the buildings near the entrances and elevators.

= Luggage Storage
= Public entrance
= Group photo location

U.S. Capitol Map

[Map of U.S. Capitol with various locations marked]
## Eateries in the Office Buildings

<table>
<thead>
<tr>
<th>Office Building</th>
<th>Cafeteria/Bakery</th>
<th>Location</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rayburn House Office Building</td>
<td>Cafeteria (Basement)</td>
<td>U.S. Capitol Visitor Center, First St SE, Washington, DC 20515</td>
<td>9:00 AM – 4:30 PM</td>
</tr>
<tr>
<td></td>
<td>Subway 11:00 AM – 5:00 PM (Room 2063)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>&amp;Pizza 11:00 AM – 5:00 PM (Room 2073)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Longworth House Office Building</td>
<td>Cafeteria (Basement)</td>
<td>Madison Memorial Building, 101 Independence Ave, Washington, DC 20540</td>
<td>7:00 AM – 3:30 PM</td>
</tr>
<tr>
<td>Cannon House Office Building</td>
<td>Au Bon Pain (Room 192)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Coffee Cart (Cannon Rotunda)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Russell Senate Office Building</td>
<td>Cups &amp; Co. 7:00 AM – 4:00 PM (Basement)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dirksen Senate Office Building</td>
<td>Cafeteria 7:30 AM - 2:30 PM (Basement)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Inside Scoop Open 24 hours (located in the Dirksen/Hart Ground Floor Connecting Corridor)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Coffee Shop 8:00 AM - 2:30 PM (located in the Dirksen Basement South)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hart Senate Office Building</td>
<td>Inside Scoop Open 24 hours (located in the Dirksen/Hart Ground Floor Connecting Corridor)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Eateries Around the Capitol

<table>
<thead>
<tr>
<th>Eatery</th>
<th>Location</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. Capitol Café</td>
<td>U.S. Capitol Visitor Center, First St SE, Washington, DC 20515</td>
<td>9:00 AM – 4:30 PM</td>
</tr>
<tr>
<td>Madison Café at the Library of Congress (Food Court)</td>
<td>Madison Memorial Building, 101 Independence Ave, Washington, DC 20540</td>
<td>7:00 AM – 3:30 PM</td>
</tr>
<tr>
<td>Good Stuff Eatery</td>
<td>303 Pennsylvania Ave SE, Washington, DC 20003</td>
<td>11:00 AM – 10:00 PM</td>
</tr>
<tr>
<td>Pete's Diner</td>
<td>212 2nd St SE, Washington, DC 20003</td>
<td>6:00 AM – 3:00 PM</td>
</tr>
<tr>
<td>Sweetgreen</td>
<td>221 Pennsylvania Ave SE, Washington, DC 20003</td>
<td>10:30 AM – 8:00 PM</td>
</tr>
<tr>
<td>Burrito Brothers of Capitol Hill</td>
<td>205 Pennsylvania Ave SE, Washington, DC 20003</td>
<td>8:00 AM – 8:45 PM</td>
</tr>
<tr>
<td>Bullfeathers on the Hill</td>
<td>410 First St SE, Washington, DC 20003</td>
<td>11:00 AM – 10:00 PM</td>
</tr>
<tr>
<td>Le Bon Café</td>
<td>210 2nd St SE, Washington, DC 20003</td>
<td>8:00 AM – 3:00 PM</td>
</tr>
<tr>
<td>Union Pub</td>
<td>201 Massachusetts Ave NE, Washington, DC 20002</td>
<td>11:00 AM – 12:00 AM</td>
</tr>
<tr>
<td>Starbucks</td>
<td>237 Pennsylvania Avenue SE, Washington, DC 20003</td>
<td>6:00 AM – 8:00 PM (tip: order ahead via mobile app)</td>
</tr>
</tbody>
</table>
Advocating Through Social Media

Nearly all Congressional offices use social media to connect with constituents and engage on important issues in the district/state.

- Below are example posts as well as a participant badge. You can also access the badge here. Feel free to use these as a template or create your own and use your own photos or videos from the day.

ASCO is a non-partisan organization. Consider this when presenting your message.

Example Tweets
Tag us! @ASCO twitter.com/asco

<table>
<thead>
<tr>
<th>General Tweet:</th>
<th>Issue Specific Tweet:</th>
</tr>
</thead>
<tbody>
<tr>
<td>I’m with team [insert state name] at the #ASCOAdvocacySummit! We are advocating for:</td>
<td>The #DrugShortage crisis forces impossible choices on cancer care providers about which patients will receive the best possible treatment. I’m on Capitol Hill with #ASCOAdvocacySummit to ask [insert lawmaker] to end drug shortages. Join me:</td>
</tr>
<tr>
<td>→ Action to mitigate drug shortages</td>
<td><a href="https://asco.quorum.us/campaign/48178/">https://asco.quorum.us/campaign/48178/</a></td>
</tr>
<tr>
<td>→ Continuation of telehealth flexibilities</td>
<td></td>
</tr>
<tr>
<td>→ Robust cancer research funding</td>
<td></td>
</tr>
<tr>
<td>Join us virtually and add your voice!</td>
<td></td>
</tr>
<tr>
<td><a href="https://asco.quorum.us/action_center/">https://asco.quorum.us/action_center/</a></td>
<td></td>
</tr>
</tbody>
</table>

Example Instagram Posts
Tag us! @ASCOCancerinstagram.com/ascocancer

| On Capitol Hill today with @ASCOCancer to talk to @Rep'sName about legislation that impacts the quality of oncology care and research. Join us virtually! asco.org/ACTNetwork #ASCOAdvocacySummit | In Washington, DC with @ASCOCancer to meet with my representatives about policies impacting cancer care and research. Add your voice virtually! asco.org/ACTNetwork #ASCOAdvocacySummit |

Example LinkedIn Post
Tag us! @American Society of Clinical Oncology (ASCO) linkedin.com/company/american-society-of-clinical-oncology/

Thank you, Representative/Senator Last Name, for meeting with me and team State Name during the #ASCOAdvocacySummit!

I came to Capitol Hill to speak for the oncology community. We discussed the continuing impact of drug shortages, and the need for continued telehealth flexibilities, and robust cancer research funding.

Add your voice! asco.org/ACTNetwork
Reshare Copy:
*If resharing an ASCO post about drug shortages, feel free to use the below:

I signed the Open Letter to end drug shortages because… [Share why you are joining the campaign with ASCO.]

Because of cancer drug shortages… [Share how drug shortages have negatively affected you/your practice/patients.]

Example Post:

Recent cancer drug shortages have affected generic, essential medicines that should be widely available to all. Our patients deserve more. That’s why I urge you to join me and @ASCO in asking our lawmakers to find solutions to this crisis: asco.org/impossiblechoices #ASCOAdvocacy

Shortages of critical cancer drugs leave [oncologists/nurses/doctors] like me facing impossible choices about patient care. That’s why I signed @ASCO’s Open Letter to end cancer drug shortages and hope you will too: asco.org/impossiblechoices #ASCOAdvocacy

Tips and Tricks

- **Follow your lawmakers** so you can tag them in tweets.
  - Visit: asco.quorum.us/officials to find your lawmakers’ Twitter handles.
- **Tag @ASCO and your lawmaker.**
- **Use #ASCOAdvocacySummit** in your social media posts.
- **Be specific, clear, and concise** about the issue you’re referencing and your ask.
- **Make it personal** by sharing why the issue is important to you and your patients. Emotional resonance is extremely powerful in storytelling.
- **Retweet, reply, and tag** others to elevate and build on a conversation.
- **Give credit** by linking/tagging your sources.
Keynote Speaker

Dr. Glaucomflecken

[pronounced: Glau-come-fleck-in]

Dr. Glaucomflecken, the comedic alter ego of Dr. Will Flanary, was born from the intersection of a medical career and stand-up ambitions. Starting in the humble open mics of Houston, TX, eventually weaving his way through the halls of the Geisel School of Medicine at Dartmouth, the stage remained a constant companion for Dr. Flanary, providing a respite from the stress of medical school. Turning adversity into humor, Dr. Flanary utilized the power of jokes to navigate the complexities of being a cancer patient in his 20s, as well as a survivor of a sudden cardiac arrest.

As his medical career progressed, the creative outlet of “Dr. Glaucomflecken” continued to grow in popularity, expanding from ophthalmology jokes to satire of the U.S. healthcare system. Dr. Flanary’s unique approach to comedy brings awareness to the barriers of the U.S. healthcare system from both the patient and provider perspective. From its roots as a personal outlet to entertain, Dr. Glaucomflecken has grown into a global online sensation, delivering laughter and insights to millions while navigating the unexpected twists of life and health.
Co-Recipients of ASCO’s 2024 Congressional Champion for Cancer Care Award: Senator Tammy Baldwin (D-WI) & Senator Shelley Moore Capito (R-WV)

Every year, ASCO presents its Congressional Champion Award to Members of Congress who advance policies that support healthcare practices and equitable access to quality cancer care for patients. Senators Tammy Baldwin (D-WI) and Shelley Moore Capito (R-WV) have been instrumental in strengthening our healthcare system and have proven that they are committed to improving quality of care. In addition to their significant efforts on cancer care legislation during the current 118th Congress, Senators Baldwin and Capito have led the charge to support cancer research funding for the National Institutes of Health (NIH) and National Cancer Institute (NCI) through their leadership on the Senate Appropriations Committee Subcommittee on Labor, Health and Human Services, Education, and Related Agencies. Additionally, they introduced the Palliative Care and Hospice Education and Training Act (PCHETA) (S. 2243), which will increase the palliative care and hospice workforce and strengthen investments in training, education, and research.

Senator Tammy Baldwin is currently serving her second term in the Senate representing Wisconsin. Growing up, Senator Baldwin and her family navigated healthcare disparities, which has fueled her drive to improve the healthcare system for all Americans. She serves on the Senate Committee on Health, Education, Labor and Pensions (HELP) and is the Chair of the Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies. In addition to her committee duties, Senator Baldwin also serves on the Congressional Biomedical Research Caucus, Children’s Health Care Caucus, Community Health Center Caucus, Senate NIH Caucus, and the Medical Technology Caucus. This Congress, Senator Baldwin is a co-sponsor for two ASCO advocacy priorities – cancer drug parity and patient access to care.

Senator Shelley Moore Capito is serving her second term as Senator for West Virginia. As a passionate advocate for rural healthcare and a supporter of strengthening medical resources, Senator Capito has made progress towards creating sustainable change in the U.S. health care system. This Congress, she serves as Ranking Member on the Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies. Senator Capito has been very active in supporting several ASCO advocacy priorities, including pediatric cancer research, Pharmacy Benefit Manager (PBM) transparency, patient access to care, telemedicine, cancer drug parity, copay accumulators, and step therapy.
2024 Advocacy Summit Attendees

Inas Abuali, MD, FACP
Trainee Council Volunteer Corp
Cambridge, MA
@inas_md

Maysa Abu-Khalaf, MD, MBA
Social Determinants of Health Task Force
Philadelphia, PA

Neeraj Agarwal, MD, FASCO
Clinical Practice Committee
Holladay, UT
2023 Advocacy Champion
@neerajaiims

Imran Ali, MD, MS, MPH
ASCO Advocate
Trumbull, CT

Anas Al-Janadi, MD
ASCO Advocate
Grand Rapids, MI
2023 Advocacy Champion
@aljanadiAnas

Holly Almond, FNP-AOCNP
State Affiliate Council
Corvallis, OR

Edward Balaban, DO, FACP, FASCO
Political Action Committee Advisory Council
Penllyn, PA
2023 Advocacy Champion
ASCO Association PAC Contributor

Alan Baltz, MD
ASCO Advocate
North Little Rock, AR
2023 Advocacy Champion
ASCO Association PAC Contributor
@ABaltzMD

Annabel Barber, MD, FACS
State Affiliate Council
Las Vegas, NV

Justin Barnes, MD, MS
ASCO Advocate
St. Louis, MO
@Barnes_j_m

Chiara Battelli, MD
Clinical Practice Committee
Scarborough, ME

Shaalan Beg, MD, MBA, FASCO
Leadership Development Program Alumni
Coppel, TX
@ShaalanBeg

Eric Bernicker, MD
Climate Change Task Force Alumni
Denver, CO
2023 Advocacy Champion
ASCO Association PAC Contributor
@EricBernicker

Tithi Biswas, MD
Research Committee Alumni
Solon, OH

Charles Blanke, MD, FASCO, FAWM
ASCO Board of Directors Alumni
Portland, OR

Leanne Budde, MD
ASCO Advocate
Cincinnati, OH
ASCO Association PAC Contributor

Leticia Campoverde, MD
Trainee Council Volunteer Corp
Miami, FL
@LetyCampoverde
Daniel Carrizosa, MD, MS
Oncology Training Programs
Waxhaw, NC
2023 Advocacy Champion
ASCO Association PAC Contributor
@DCarrizosaMD

Paul Celano, MD, FACP, FASCO
State Affiliate Council
Baltimore, MD
2023 Advocacy Champion

Sunandana Chandra, MD, MS
Oncology Training Programs
Chicago, IL
@MunTheLoon

Mark Chang, DO
ASCO AMA Delegate
Charlotte, NC
2023 Advocacy Champion
ASCO Association PAC Contributor
@markchangDO

Vijay Chaudhary, MD, MPH, MBA
Measures Steering Group
Raleigh, NC
@VjChaudharyMD

Ronald Chen, MD, MPH
Cancer Survivorship Task Force
Overland Park, KS
@RonaldChenMD

Anne Chiang, MD, PHD, FASCO
Government Relations Committee
Hamden, CT
@AnneChiangMD

Alexander Chin, MD, MBA
Coverage and Reimbursement Steering Group
Mountain View, CA

Fumiko Chino, MD
Cancer Communications Committee
New York, NY
2023 Advocacy Champion
ASCO Association PAC Contributor
@fumikochino

Liz Cleland
State Affiliate Council
Camas, WA

Julia Close, MD
ASCO Advocate
Gainesville, FL

Gary Cohen, MD, FASCO
ASCO Advocate
Palm Beach Gardens, FL
2023 Advocacy Champion
ASCO Association PAC Contributor

James Cohen, MD
ASCO Advocate
Reno, NV

Mehmet Copur, MD, FACP
ASCO Advocate
Hastings, NE
2023 Advocacy Champion
ASCO Association PAC Contributor

John Cox, DO, MBA
Joint Certifications Committee
Dallas, TX
2023 Advocacy Champion
ASCO Association PAC Contributor
@jvcox

Robert Daly, MD, MBA
Government Relations Committee
New York, NY
2023 Advocacy Champion
ASCO Association PAC Contributor
Devika Das, MD, MSHQS
Joint Certifications Committee
Vestavia, AL
2023 Advocacy Champion
ASCO Association PAC Contributor
@devikadasMD

Zoniddy Dayao, MD
Clinical Practice Committee
Albuquerque, NM

John Deeken, MD
Government Relations Committee Alumni
McLean, VA

Asha Dhanarajan, MD
ASCO Advocate
Chicago, IL

Fernando Diaz, MD
Trainee Council Volunteer Corp
Graham, NC
2023 Advocacy Champion
ASCO Association PAC Contributor
@FernandoDiazMD1

Natalie Dickson, MD, MMHC, FASCO, FACP
Cancer Care Delivery Council
Nashville, TN
2023 Advocacy Champion
ASCO Association PAC Contributor

Sanford E Jeames, DHA, FASCO
Health Equity and Outcomes Committee
Austin, TX
@JeamesSailor

Nichole East, CAE
State Affiliate Council
Hesperia, CA

Susan Escudier, MD, FACP
ASCO Advocate
Houston, TX
2023 Advocacy Champion
ASCO Association PAC Contributor

Courtney Flookes
State Affiliate Council
Napa, CA
@ANCO_News

Narjust Florez, MD
Health Equity and Outcomes Committee
Boston, MA
@NarjustFlorezMD

Annette Fontaine, MD
ASCO Advocate
Albuquerque, NM

Laura Goff, MD, MSCI, MMHC
ASCO Advocate
Nashville, TN
2023 Advocacy Champion
ASCO Association PAC Contributor
@drlauragoff

Richard Goldberg, MD, FASCO, FACP
Political Action Committee Advisory Council
Morgantown, WV
2023 Advocacy Champion
ASCO Association PAC Contributor

Stephanie Graff, MD, FACP
Leadership Development Program Alumni
Barrington, RI
2023 Advocacy Champion
ASCO Association PAC Contributor
@DrSGraff
Julie Gralow, MD, FACP, FASCO  
ASCO Chief Medical Officer  
Seattle, WA  
ASCO Association PAC Contributor  
@jrgralow

R Donald Harvey, PharmD  
Research Committee Alumni  
Avondale Estates, GA  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@DrDonaldHarvey

Jessica Hawley, MD, MS  
ASCO Advocate  
Mercer Island, WA  
2023 Advocacy Champion  
@JessicaHawleyMD

Daniel Hayes, MD, FASCO, FACP  
Research Committee  
Ann Arbor, MI  
@hoosierdfh

Arielle Heeke, MD  
ASCO Advocate  
Charlotte, NC  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@HeekeMd

Marilyn Heine, MD, FACP, FACEP, FCPP  
Government Relations Committee Alumni  
Dresher, PA  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@marilynheinemd

Mark Henderson, MD  
State Affiliate Council  
Columbus, IN  
2023 Advocacy Champion  
ASCO Association PAC Contributor  

Carolyn Hendricks, MD  
Board of Directors  
Clearville, PA  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@Carolyn01392093

Jack Hensold, MD  
Clinical Practice Committee  
Bozeman, MT

Paul Hesketh, MD, FASCO  
ASCO Advocate  
Westwood, MA  
2023 Advocacy Champion  
ASCO Association PAC Contributor

John Hill, Jr., MD  
ASCO Advocate  
Hanover, NH

Fay Hlubocky, PhD, MA, FASCO  
Well-Being Task Force  
Chicago, IL

Clifford Hudis, MD, FASCO, FACP  
ASCO Chief Executive Officer  
New York, NY  
ASCO Association PAC Contributor  
@CliffordHudis

Sakeer Hussain, MD  
State Affiliate Council  
Omaha, NE  
ASCO Association PAC Contributor

Syed Hussaini, MD, MS  
ASCO Advocate  
Birmingham, AL  
@QasimHussainiMD
Blair Irwin, MD, MBA  
State Affiliate Council  
Gig Harbor, WA

Karan Jatwani, MBBS  
Trainee Council Volunteer Corp  
Buffalo, NY  
2023 Advocacy Champion  
@jatwanikaran

Bruce Johnson, MD  
Former ASCO President  
Boston, MA  
ASCO Association PAC Contributor

Elizabeth Johnson, PhD, MS-CRM, RN  
ASCO Advocate  
Bozeman, MT  
@ElizabethJRN

Maitri Kalra, MD  
ASCO Advocate  
Stevenson, MD  
ASCO Association PAC Contributor

Aparna Kalyan, MD  
ASCO Advocate  
Evanston, IL

Jasmine Kamboj, MD  
Government Relations Committee  
Woodbury, MN  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@jasminekambojMD

Sameer Keole, MD  
Political Action Committee Advisory Council  
Scottsdale, AZ  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@SameerKeoleMD

Sharad Khurana, MD, MSc  
State Affiliate Council  
Tucson, AZ  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Yelena Kier, DO  
ASCO Advocate  
Traverse City, MI

Mary Klix, MD, FACP  
State Affiliate Council  
Eagle River, AK  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@MaryMegKmd

Miriam Knoll, MD  
ASCO Advocate  
Cedarhurst, NY  
2023 Advocacy Champion  
@mknoll_md

Michael Kosty, MD, FACP, FASCO  
Board of Directors Alumni  
Carlsbad, CA

Angela Ladner, MA  
State Affiliate Council  
Jackson, MS  
@MissOncoSociety

Ashkan Lashkari, MD  
State Affiliate Council  
Santa Monica, CA

Brandon Lawrence  
State Affiliate Council  
Tigard, OR
Steve Lee, MD  
ASCO AMA Delegate  
Orinda, CA  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@steveleeyc

Inga Lennes, MD, MPH, MBA  
Quality of Care Council  
Auburndale, MA  
@ilennes

Michael Link, MD  
Former ASCO President  
West Menlo Park, CA  
2023 Advocacy Champion

Arturo Loaiza-Bonilla, MD, MSEd, FACP  
Government Relations Committee  
Philadelphia, PA  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@DrBonillaOnc

Noelle LoConte, MD, FASCO  
ASCO Advocate  
Madison, WI  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@loconte

Christi Long  
State Affiliate Council  
Montgomery, AL

Ana Maria Lopez, MD, MPH  
Education Council  
Philadelphia, PA  
2023 Advocacy Champion

Jay Lopez, MD  
State Affiliate Council  
Seattle, WA  
ASCO Association PAC Contributor

Sam Makhoul, MD  
Joint Certifications Committee  
Little Rock, AR  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@SamCART12023

Joshua Mammen, MD, PhD  
Leadership Development Program Alumni  
Omaha, NE  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@joshuamammen

Rami Manochakian, MD, FASCO  
Oncology Training Programs  
Jacksonville, FL  
2023 Advocacy Champion

Thomas Marsland, MD  
Political Action Committee Advisory Council  
Petaluma, CA  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Khalid Matin, MD, FACP  
Research Committee  
Richmond, VA  
2023 Advocacy Champion  
@DrKMatin125873

Julia Maues  
ASCO Advocate  
Washington, DC  
ASCO Association PAC Contributor  
@itsnot_pink

Barbara McAneny, MD, MACP, FASCO  
ASCO AMA Delegate  
Albuquerque, NM  
2023 Advocacy Champion  
ASCO Association PAC Contributor
Anthony Mega, MD  
Oncology Training Programs  
Providence, RI

Caroline Merritt, BA, MA  
State Affiliate Council  
Boise, ID

Charles Miller, MD, FACP, FASCO  
State Affiliate Council  
Honolulu, HI  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Nisha Mohindra, MD  
ASCO Advocate  
Chicago, IL

Mary Muscato, MD  
ASCO Advocate  
Columbia, MO  
ASCO Association PAC Contributor  
@jmsuscato

Joseph Muscato, MD  
State Affiliate Council  
Columbia, MO  
2023 Advocacy Champion  
ASCO Association PAC Contributor

J. Eugenio Najera, MD  
State Affiliate Council  
Lawton, OK

Abdul Rafeh Naqash, MD  
Social Media Work Group  
Oklahoma City, OK  
@thenasheffect

Burton Needles, MD  
ASCO Advocate  
St. Louis, MO

Amanda Nizam, MD  
Trainee Council Volunteer Corp  
Cleveland, OH  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@AmandaNizamMD

Kristina Novick, MD  
ASCO AMA Delegate  
Rose Valley, PA

Matthew Obinna Nwaneri, MD, MBA  
ASCO Advocate  
Iowa City, IA

Lauren Nye, MD  
Health Equity and Outcomes Committee  
Leawood, KS  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@DrLaurenNye

Kurt Oettel, MD, MBA, FACP  
Political Action Committee Advisory Council  
LaCrosse, WI  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Coral Olazagasti, MD  
ASCO Advocate  
Coral Gables, FL  
@COlazagasti

Ahmad Ozair, MD  
Trainee Council Volunteer Corp  
Baltimore, MD  
@NeuroAhmad

Sukhmani Padda, MD  
Government Relations Committee  
Philadelphia, PA  
ASCO Association PAC Contributor
Ray Page, DO, PhD, FASCO  
ASCO AMA Delegate  
Aledo, TX  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@raypagedophd

Alejandra Perez, MD  
ASCO Advocate  
Plantation, FL  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@atperez_md

Martin Palmeri, MD, MBA  
Government Relations Committee  
Arden, NC  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Brian Persing, MD  
State Affiliate Council  
Ocean Springs, MS  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@DrBrianPersing

Laeton Pang, MD, MPH, FACR, FACRO, FACCC, FASTRO  
ASCO Advocate  
Honolulu, HI

Todd Pickard, MMSc, PA-C, FASCO  
Clinical Practice Committee  
Houston, TX  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Su Park, MD  
State Affiliate Council  
Philadelphia, PA

Jennifer Pierce, MD, MPH  
Health Equity and Outcomes Committee  
Mobile, AL  
2023 Advocacy Champion

Julia Parrish, MD  
ASCO Advocate  
Fargo, ND  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Andrew Pierson, MD  
State Affiliate Council  
Boise, ID  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Manali Patel, MD, MPH, MS, FASCO  
Government Relations Committee  
Palo Alto, CA  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@manalipatelmd

Sonam Puri, MD  
Evidence Based Medicine Committee  
Salt Lake City, UT

Chad Pedersen, MD  
State Affiliate Council  
Sidney, MT

Camille Puronen, MD, MPH  
ASCO Advocate  
Seattle, WA

Meera Ragavan, MD, MPH  
ASCO Editorial Fellow - JCO OP  
Millbrae, CA  
@meera_ragavan
Ivy Riano, MD  
State Affiliate Council  
Lebanon, NH  
@IvyLorena_Md

Trevor Royce, MD, MS, MPH  
Leadership Development Program Alumni  
Chapel Hill, NC  
@tjroycemd

Jimmy Ruiz, MD  
ASCO Advocate  
Winston Salem, NC

John Salsman, PhD  
Scientific Program Committee  
Winston Salem, NC  
@JohnMSalsmanPhD

Joel Saltzman, MD, FASCO  
Clinical Practice Committee  
Beachwood, OH  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Joan Schiller, MD  
Leadership Development Program Alumni  
Oregon, WI  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@joan_schiller

Ilana Schlam, MD  
Trainee Council Volunteer Corp  
Brookline, MA  
@IlanaSchlam

Jerome Seid, MD, FACP  
ASCO Advocate  
Warren, MI  
2023 Advocacy Champion

Carole Seigel, MBA  
ASCO Advocate  
Brookline, MA  
ASCO Association PAC Contributor

Jocelyn Serrano, BAC  
State Affiliate Council  
Arecibo, PR

Dhaval Shah, MBBS, MD, MBA  
Clinical Practice Committee  
Newark, DE

Melanie Sheen, MD  
ASCO Advocate  
New Orleans, LA  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Eugene Shenderov, MD, PhD, FACP  
Government Relations Committee Alumni  
Baltimore, MD  
@DocEShenderov

Katherine Smith, MD  
ASCO Advocate  
Rochester, MN

Blair Smith, MD  
ASCO Advocate  
Kansas City, MO

Heloisa Soares, MD  
ASCO Advocate  
Salt Lake City, UT  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@helops79
Piyush Srivastava, MD  
Government Relations Committee  
Moraga, CA  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Ishwaria Subbiah, MD, MS, FASCO  
ASCO Advocate  
Nashville, TN  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@ishwariaMD

Latha Subramanian, MD, FACP  
Evidence Based Medicine  
Anchorage, AK  
2023 Advocacy Champion

Ashley Sumrall, MD, FACP, FASCO  
Government Relations Committee  
Charlotte, NC  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@AshleySumrallMD

Wade Swenson, MD, MPH, MBA  
ASCO Advocate  
Fergus Falls, MN  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@wadeswenson

Masood Pasha Syed, MBBS, MD  
Oncology Training Programs  
Beachwood, OH  
@MasoodPashaSyed

Banu Symington, MD, MACP  
State Affiliate Council  
Rock Springs, WY  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Tammy Thiel  
State Affiliate Council  
Wasilla, AK

Alexandra Thomas, MD, FACP  
Government Relations Committee Alumni  
Hillsborough, NC  
2023 Advocacy Champion  
ASCO Association PAC Contributor

Mylin Torres, MD  
Leadership Development Program  
Atlanta, GA  
@MylinTorres

Patricia Troy, IOM, CAE  
State Affiliate Council  
Severna Park, MD  
@PatTroy

Ana Velazquez Manana, MD, MSc  
Research Committee  
Brisbane, CA  
2023 Advocacy Champion  
ASCO Association PAC Contributor  
@AnaVManana

Vamsi Velcheti, MD, MBA, FACP, FCCP  
Leadership Development Program  
Scarsdale, NY  
@vamsivelcheti

Rashmi Verma, MD, FACP  
ASCO Advocate  
Rancho Cordova, CA

Gregory Vidal, MD, PhD  
Research Committee  
Germantown, TN

Praveen Vikas, MD, FACP, FASCO  
Evidence Based Medicine  
Iowa City, IA  
@Killthecancer
Gina Villani, MD, MPH  
Education Council  
Bayside, NY

**Everett Vokes, MD**  
Association Chair of the Board  
Chicago, IL  
2023 Advocacy Champion  
ASCO Association PAC Contributor

**Harold James Wallace, MD**  
ASCO Advocate  
Saint George, VT  
2023 Advocacy Champion  
ASCO Association PAC Contributor

**Mark Walshauser, MD, FACP**  
Government Relations Committee  
Ladue, MO  
2023 Advocacy Champion  
ASCO Association PAC Contributor

**Jeremy Warner, MD, MS, FAMIA, FASCO**  
Evidence Based Medicine  
Providence, RI  
2023 Advocacy Champion  
ASCO Association PAC Contributor

**Jason Westin, MD**  
Government Relations Committee  
Houston, TX  
2023 Advocate of the Year  
ASCO Association PAC Contributor

**Jerome Winegarden, MD**  
State Affiliate Council  
Ann Arbor, MI

Karen Winkfield, MD, PhD  
Board of Directors  
Winston-Salem, NC  
2023 Advocacy Champion  
ASCO Association PAC Contributor

**John Winters, MD**  
ASCO Advocate  
Cape Elizabeth, ME

**Xiaocao Xu, MD**  
Oncology Training Programs  
Burlington, VT

**Joanna Yang, MD, MPH**  
Government Relations Committee  
St. Louis, MO  
2023 Advocacy Champion  
ASCO Association PAC Contributor

**Peter Yu, MD**  
Political Action Committee Advisory Council  
West Hartford, CT  
2023 Advocacy Champion  
ASCO Association PAC Contributor

**Ruiling Yuan, MD**  
ASCO Advocate  
Ninety Six, SC  
2023 Advocacy Champion  
ASCO Association PAC Contributor

**Lauren Zion, PharmD**  
ASCO Advocate  
South Lake Tahoe, CA

**Robin Zon, MD, FACP, FASCO**  
ASCO President-Elect  
Niles, MI  
2023 Advocacy Champion  
ASCO Association PAC Contributor
ASCO's Advocacy Activities

ASCO members have numerous opportunities to advocate at the federal and state level on behalf of patients with cancer. These activities include grassroots advocacy; direct advocacy; engaging in grasstops advocacy; speaking on behalf of ASCO at Congressional briefings or hearings; and contributing to the ASCO Association Political Action Committee (PAC). We are pleased to recognize the following ASCO volunteer who exemplified cancer care advocacy in 2023.

- **Grassroots Advocacy**: Actions taken by a group to contact elected officials online, on the phone, or by mail.
- **Direct Advocacy**: Actions include face-to-face meetings with elected officials or their staff.
- **Grasstops Advocacy**: Utilizing pre-existing relationships with lawmakers to advance ASCO’s priorities.

Advocate of the Year: Jason Westin, MD, MS, FACP

Dr. Westin has served ASCO as an invaluable advocate for cancer care professionals and their patients. His run for Congress in 2017, his service on and leadership of the ASCO Government Relations Committee during the past 5 years, and his role as an inaugural member of the ASCO Association PAC Advisory Council demonstrate his dedication to advocacy. In 2023, Dr. Westin represented oncology professionals from around the country in his testimony before the Senate Finance Committee on the ongoing drug shortages crisis. He has become a trusted resource for lawmakers and their staff in communicating how policies will impact cancer patients in their districts and states. In addition to Congressional testimony, Dr. Westin contacted his lawmakers via the ACT Network, participated in the Advocacy Summit and federal agency meetings, actively engaged on social media, and contributed to the ASCO Association PAC — all underscoring his commitment to advancing cancer policies through advocacy. He currently serves as Past Chair of ASCO’s Government Relations Committee.

Dr. Westin is the Director of the Lymphoma Clinical Research Program, Section Chief for Aggressive Lymphoma, and Professor of Medicine at the University of Texas MD Anderson Cancer Center in the Department of Lymphoma and Myeloma. He earned his medical degree from the University of Florida, completed his residency at the University of North Carolina, and his fellowship at MD Anderson Cancer Center in Houston, Texas.
The Association for Clinical Oncology (ASCO) is a nonpartisan, nationally leading organization supporting high-quality cancer care, cancer-focused research, and the cancer care delivery team. The ASCO Association Political Action Committee (PAC) helps us influence positive change on Capitol Hill for the cancer care community. The PAC provides us with a collective voice in the political arena by allowing us to support the campaigns of candidates who understand the importance of our work in oncology and how it impacts the patients we treat.

Eligible members make voluntary contributions to the PAC. All Association member contributions are pooled together. The PAC Advisory Council, made up of a diverse set of our members, reviews and approves candidates based on a strict list of guidelines to ensure only champions for cancer research and high-quality cancer care receive our support.

Candidates receive our PAC contribution and those elected will make an impact on health care policy decisions that affect the future of cancer care and the important work we do on behalf of our patients.

Now is the time to make your voice heard. Help us create positive change for cancer care.

Scan here to join!
pac.ascoassociation.org

Contributions to ASCO Association PAC are not tax deductible for federal income tax purposes. Contributions are used for political purposes and are strictly voluntary. You may refuse to contribute without reprisal. The guidelines are merely suggestions. You are free to contribute more or less than the guidelines suggest and the association will not favor or disadvantage you by reason of the amount contributed or the decision not to contribute. Federal law requires ASCO Association PAC to use our best efforts to collect and report the name, mailing address, occupation and the name of the employer of individuals whose contributions exceed $200 in a calendar year. You must be a U.S. citizen or permanent resident (green card holder) in order to contribute.
# 2023 ASCO Political Action Committee: Year in Review

## A Record Braking Year!
- **Members of Congress Supported for reelection**: 35
- **Meetings with Members of Congress and First Time Candidates**: 49
- **Senate Races**: 4
- **House Races**: 31
- **Events hosted with members of Congress on key committees**: 2
- **Fundraised**: $73k+ from 144 contributors

## PAC Firsts
- Supported an [ASCO Member](#) running for Congress
- Hosted **in-person** event at the Advocacy Summit
- Created a PAC informational video garnering 14,000 impressions
Influence positive change on Capitol Hill for the cancer care community through a collective voice in the political arena.

Visit pac.ascoassociation.org
ASCO Association PAC Reception Invited Guests

Rep. Lisa Blunt Rochester (D-DE-At Large)  
Energy and Commerce Committee  
[Official Bio](#)

Rep. Andy Harris, MD (R-MD-1)  
Appropriations Committee  
[Official Bio](#)

Rep. Brian Fitzpatrick (R-PA-1)  
Ways and Means Committee  
[Official Bio](#)

Rep. John Joyce, MD (R-PA-13)  
Energy and Commerce Committee  
[Official Bio](#)
Rep. Raul Ruiz, MD (D-CA-25)
Energy and Commerce Committee
[Official Bio](#)

Appropriations Committee
[Official Bio](#)

Rep. Kim Schrier, MD (D-WA-8)
Energy and Commerce Committee
[Official Bio](#)

Candidate Prasanth Reddy, MD (R-KS-3)
ASCO Member
[Official Bio](#)
Name: ____________________________________________________________

Home address: _____________________________________________________________________________________________________

Phone: ___________________________ E-Mail: __________________________________________________________

Meeting: _______________________________________________________________________________________________________

Location of Meeting: ____________________________ Date of Meeting: ____________

***Estimate of hours spent preparing for and attending this meeting: ________________

Expense Items (attach __________ Original receipts):

<table>
<thead>
<tr>
<th>Item Code</th>
<th>Description</th>
<th>Paid by YOU</th>
<th>Prepaid/Charged to ASCO</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>(7610)</td>
<td>Volunteer Hotel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7611)</td>
<td>Volunteer Travel Fares</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7612)</td>
<td>Volunteer Meals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7614)</td>
<td>Volunteer Ground Transportation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7614)</td>
<td>Volunteer Personal Auto Mileage (67 cents/mile)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

TOTAL: $__________ $__________ $__________

(Note: Tips should be included with the total of hotel, meals, taxis, etc. Please note amount of each on receipt.)

Signature: ___________________________________________ Date: __________

ASCO Expense Policy
ASCO will be responsible for the following expenses incurred for attendance at the above-mentioned meeting: travel to and from meeting location, hotel room, meals, and transportation to and from your home.

>Email completed form and receipts to:

volunteer@asco.org

OFFICE USE ONLY

Reviewed by: ___________________________ Date: ___________ Cost Center: _______
Section 1. Limitation and Restrictions on Covered Expenses

Section 1.1 Airfare. In order for ASCO to best support volunteer travelers and manage its travel program, we recommend the use of our corporate travel agent, Direct Travel. Volunteers lowest available economy airfare for

- Domestic flights; and
- International flights of less than 6 hours of scheduled flight time.

International flights over 6 hours of flight time will be covered for business class travel. ASCO will cover airline checked bag fees for one regular-sized (non-oversized) bag. ASCO will not cover fees associated with voluntary schedule changes, new ticket purchases, or standby travel. Where possible, flights should be booked at least 21 days in advance of the travel in order to take advantage of available discounts. Higher expenses due to stopovers before or after the ASCO meeting are not covered. Airfare for spouses or guests is not covered.

Section 1.2 Ground Transfers. ASCO will cover costs related to public transportation (cabs, rideshares such as Uber and Lyft, subways, buses) to and from the airport in departure city and destination city. Please note that ASCO will not cover the cost of luxury transportation, including limousine or black car services, Uber Comfort or UberBlack, Lyft Comfort, Lyft Black, or their equivalents.

Section 1.3 Parking and Tolls. ASCO will cover parking fees for travel days and day(s) of meeting (examples include parking at rail stations, airports, and meeting site); and road and bridge toll charges. ASCO will not cover the cost of valet parking at airports.

Section 1.4 Personal Auto. ASCO will cover use of personal auto at the then-current IRS standard mileage rate. Personal auto expenses cannot exceed the amount of economy train or airfare.

Section 1.5 Meals. ASCO will cover meals limited to the following amounts per person, including beverages, tax, and tip, per meal:

- Dinner $100.00 and 1 alcoholic beverage
- Lunch $45.00
- Breakfast $30.00