The Panel shall monitor the development and execution of the activities of the National Cancer Program, and shall report directly to the President.

Any delays or blockages in the rapid execution of the Program shall immediately be brought to the attention of the President.

Authority: 42 U.S.C. 285a 4; Sec. 415 of the Public Health Service Act, as amended
Members

Barbara K. Rimer, DrPH
Univ. of North Carolina at Chapel Hill

Hill Harper, JD
Cancer Survivor, Actor, and Best-Selling Author

Owen N. Witte, MD
University of California Los Angeles
Overview

2012-2013 Report to the President
Accelerating HPV Vaccine Uptake: Urgency for Action to Prevent Cancer

Upcoming Report to the President
Improving Cancer-Related Outcomes with Connected Health*

2016-2017 Series
Ensuring Patients’ Access to High-Value Cancer Drugs

*Still in draft
Accelerating HPV Vaccine Uptake: Urgency for Action to Prevent Cancer

Human papillomaviruses (HPV) cause most cases of cervical cancer and large proportions of vaginal, vulvar, anal, penile, and oropharyngeal cancers. HPV also causes genital warts and recurrent respiratory papillomatosis. HPV vaccines could dramatically reduce the incidence of HPV-associated cancers and other conditions among both females and males, but uptake of the vaccines has fallen short of target levels. The President’s Cancer Panel finds underuse of HPV vaccines a serious but correctable threat to progress against cancer. In this report, the Panel presents four goals to increase HPV vaccine uptake: three of these focus on the United States and the fourth addresses ways the United States can help to increase global uptake of the vaccines. Several high-priority research questions related to HPV and HPV vaccines also are identified.

Click below to read more.

HOW TO ACCELERATE HPV VACCINE UPTAKE IN THE U.S.

- Increase Global HPV Vaccination
- Conduct High-Priority Research
- Increase Parents’, Caregivers’, and Adolescents’ Acceptance of HPV Vaccines
- Maximize Access to HPV Vaccination Services
NCQA Updated Quality Measures for HEDIS 2017: HPV vaccination for both males & females will be reported in a single measure, along with other adolescent vaccines (meningococcal and Tdap).

69 NCI-Designated Cancer Centers released statement urging greater uptake of HPV vaccination for cancer prevention.

HPV Summit gathered NCI Cancer Centers, NCI, CDC, & ACS on June 30.

* Of course, none of these activities are due to the report alone.
ASCO released statement urging aggressive efforts to increase HPV vaccination to prevent HPV-related cancers.

National HPV Vaccination Roundtable 2016 meeting was held August 30-31, 2016.

Advisory Committee on Immunization Practices is reviewing evidence for 2-dose schedule with 9-valent HPV vaccine.
2014-2015 Series

Improving Cancer-Related Outcomes with Connected Health
David K. Ahern, PhD
- Director, Program in Behavioral Informatics and eHealth, Brigham and Women’s Hospital
- Special Advisor, Division of Cancer Control and Population Sciences, National Cancer Institute

Bradford W. Hesse, PhD
- Chief, Health Communication and Informatics Research Branch, Division of Cancer Control and Population Sciences, National Cancer Institute
- Content is being finalized.
- External review by multiple partners, including:
  - Office of the National Coordinator for Health Information Technology (ONC)
  - American Society of Clinical Oncology (ASCO)
  - Federal Communications Commission (FCC)
  - National Cancer Institute (NCI)
  - Centers for Disease Control and Prevention (CDC)
  - Other content experts
- Draft was sent to White House Liaison; excellent feedback received.
- Report will be released later this fall.
Panel will make recommendations on topic areas important to connected health and cancer, including:

- Enabling development of tools to support individuals’ health management and providers’ provision of care;
- Encouraging health information flow between health institutions, patients, and their caregivers; &
- Strengthening health IT infrastructure.

*Encouraging information flow between people and institutions*
Ensuring Patients’ Access to High-Value Cancer Drugs
Innovations in cancer therapy can transform treatment.

Accessing needed drugs is increasingly difficult for some patients.

Drug costs & access are creating challenges for patients, providers, healthcare systems, & payers.

Panel will examine: factors influencing drug cost and pricing, use of rational pricing models, rising prices of cancer therapies (esp. combination therapies), & streamlining clinical development processes.
Participants

Gary Gilliland, MD, PhD (Series Co-Chair)
- President and Director, Fred Hutchinson Cancer Research Center

Ann Geiger, PhD, MPH (DCCPS Liaison)
- Associate Director (Acting), Healthcare Delivery Research Program, DCCPS, NCI

Other sectors represented
- Oncologists and oncology organizations (ASCO); potentially, other providers
- Patients and patient advocacy organizations
- Pharmaceutical and biotechnology companies
- Health economists
- Academic researchers
- Payers
- Federal agencies (FDA, CMS, NIH/NCI)
Panel will convene thought leaders from industry, academic institutions, foundations, government, & advocacy.

Agenda planning underway

Panel’s goal is to identify key actions that could:

- Streamline drug development & approval process.
- Lower research & development costs.
- Ensure patients’ access to high-value cancer drugs.
Upcoming Workshops

- **Workshop #3: Rational Pricing Models (March, 2017)**
  - **Key topics:**
    - Value-based frameworks and their influence on pricing
    - Establishing pricing and coverage transparency
    - Supporting competition among drug makers

- **Workshop #4: Rational Payment Models (Summer, 2017)**
  - **Key topics:**
    - Identifying needed changes to existing payment models
    - Developing outcome- and indication-based new payment models
    - Establishing policies for how much patients should expect to pay out-of-pocket
President’s Cancer Panel

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