



April 27, 2021

Chair Prusak, Members of the House Health Committee,

Since the introduction of SB 2 we have been working with Senator Hansel to find an agreeable path forward on language that meets his goals and also reflects the general guidance that the independent National Comprehensive Cancer Network (NCCN) gives on the use of Proton Beam therapy. The NCCN is the main guideline organization for Cancer Treatment.

For most cancers, NCCN doesn't recommend proton specifically but instead includes a statement indicating that advanced conformal radiation techniques, including protons, may be used in certain clinical situations to improve the therapeutic ratio or spare important organs at risk.

Regarding treatment of prostate cancer, NCCN says "Photon or proton EBRT are both effective at achieving highly conformal radiotherapy with acceptable and similar biochemical control and long-term side effect profiles." They further state, "The costs associated with proton beam facility construction and proton beam treatment are high compared with the expense of building and using the more common photon linear accelerator-based practice," and "The NCCN panel believes no clear evidence supports a benefit or decrement to proton therapy over IMRT for either treatment efficacy or long-term toxicity.

Below is a link to our full review of this therapy that we post publicly online. The most current review was done in October of last year and is scheduled to be reviewed again later this year.-

<http://blue.regence.com/trgmedpol/medicine/med49.pdf>

Sincerely,  
Vince Porter  
Director of Government Affairs