

JON RUNYAN
3RD DISTRICT, NEW JERSEY

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AND MEMORIAL AFFAIRS
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COMMITTEE ON NATURAL RESOURCES
SUBCOMMITTEE ON FISHERIES, WILDLIFE,
OCEANS AND INSULAR AFFAIRS

Congress of the United States
House of Representatives
Washington, DC 20515-3003

December 21, 2011

The Honorable Eric K. Shinseki
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington, DC 20420

Dear Secretary Shinseki,

Like you, we share your dedication to ensuring that our nation's veterans have access to the best possible health care within the Department of Veterans Affairs Health Care System. We also share your desire to provide veterans with the same quality of care as other federal health care program beneficiaries. However, we are concerned about reports that veterans suffering from late stage prostate cancer are being denied access to specific types of medical treatment – the same treatment that is readily available to non-veteran federal health care beneficiaries through Medicare, Medicaid, and the Department of Defense.

As you are aware, veterans who have been exposed to Agent Orange suffer a higher risk and incidence of prostate cancer than the non-veteran population. Veterans, along with African Americans, and men with a family history of prostate cancer are the three highest at-risk groups for developing prostate cancer. Additionally, these veterans are diagnosed with more aggressive types of prostate cancer, and suffer a greater risk that their cancer will return after preliminary treatment. This often results in a greater probability of dying from prostate cancer. As this specific veteran population ages, the need for access to innovative treatments that fight prostate cancer will only continue to grow.

Veterans exposed to Agent Orange are currently recognized as special class for VA cancer benefits, including prostate cancer benefits. This is a step in the right direction, but the VA must do more to provide adequate access to prostate cancer treatments for veterans. The most effective treatments, especially those already recognized and covered by other federal agencies, should be made available through the Department of Veterans Affairs Health Care System. Specifically, Provenge, a new prostate cancer treatment that is available to non-veteran federal health care beneficiaries, ought to be available to veterans through the VA.

In April 2010, the Food and Drug Administration (FDA) approved Provenge, a new prostate cancer treatment. A month after the FDA's approval, the National Comprehensive Cancer Network issued a Category 1 recommendation for Provenge – the highest level of recommendation – which requires both clear consensus and the presence of the strongest clinical evidence. Additionally, the Department of Defense has approved Provenge and has been using it successfully to treat prostate cancer primarily through its Military Treatment Facility and Tri-care coverage. Furthermore, earlier this year, the Centers for Medicare and Medicaid Services (CMS) issued a coverage decision for Provenge, ensuring access to the drug for older Americans and low-income individuals.

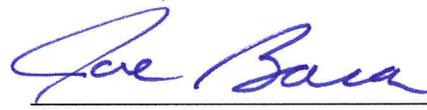
The Department of Veterans Affairs is now one of few government agencies not to provide access to this treatment. We appreciate the work that the VA has already done on prostate cancer, and believe that allowing access to Provenge would be an additional way the VA can help this at-risk population. By fixing this inequity, the VA can continue to provide quality health care to America's veterans.

Your staff may contact Jennifer Shirley with Congressman Jon Runyan's office at Jennifer.shirley@mail.house.gov or at 202-225-4765 if we may be of any additional assistance.

Sincerely,



Jon Runyan
Member of Congress



Joe Baca
Member of Congress



Dan Benishek
Member of Congress



Gus Bilirakis
Member of Congress



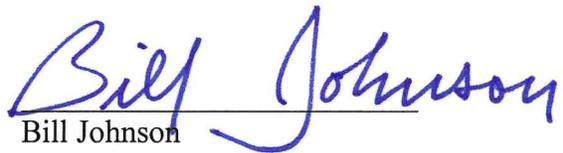
Dan Boren
Member of Congress



Mo Brooks
Member of Congress



Chris Gibson
Member of Congress



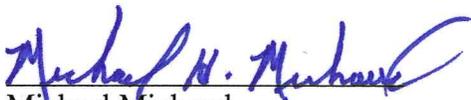
Bill Johnson
Member of Congress



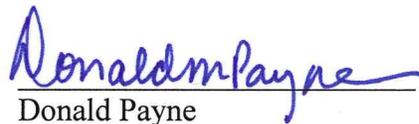
John Kline
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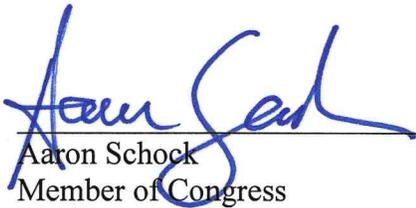
Donald Payne
Member of Congress



Todd Russell Platts
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Bobby Schilling
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Heath Shuler
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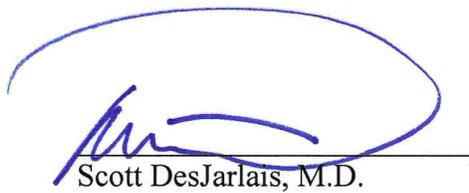
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Phil Roe, M.D.
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