



# The National Association for Proton Therapy

August 16, 2023

Michael Hagan, M.D., Ph.D.

Department of Veterans Affairs, Veterans Health Administration

National Radiation Oncology Program (1 OP4H)

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Subject: Request for Implementation of Proton Beam Therapy Coverage Guidelines to Ensure Equitable Access to Cancer Treatment for Veterans

Dear Dr. Hagan:

On behalf of the National Association for Proton Therapy (NAPT), I am writing to urge the Veterans Health Administration (VHA) to update its policy for coverage of proton beam therapy to ensure equitable access to this cutting-edge cancer treatment for our nation's veterans given the favorable evolution in the body of evidence since the VHA last updated its policy. NAPT is an independent nonprofit organization founded in 1990 to educate and increase awareness about the clinical benefits of proton therapy. Its members<sup>1</sup> include 45 of the nation's leading cancer centers, many of which are NCI-designated comprehensive cancer centers and NCCN members. The mission of NAPT is to work collaboratively to raise public awareness of proton therapy, ensure patient choice and access to affordable treatment, and encourage cooperative research and innovation to advance proton therapy's appropriate and cost-effective utilization.

Proton therapy is a radiation treatment modality that has the proven ability to reduce side effects for patients by limiting the amount of normal tissue exposed to radiation.<sup>2 3</sup> Unlike conventional x-ray radiation, which has both entrance and exit doses, proton therapy delivers radiation to the target, with little to no radiation extending beyond the target. In addition to these acute and late toxicity benefits of proton therapy over conventional radiation therapy, proton beam therapy has been shown across multiple disease sites to improve overall survival, either by reducing life-threatening toxicities, being more biologically potent at tumor killing, or allowing for more targeted and escalated doses of irradiation to be delivered directly to the

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<sup>1</sup> Listing of members can be found on the NAPT website, please visit: <http://www.proton-therapy.org>

<sup>2</sup> Baumann BC, Mitra N, Harton JG, et al. Comparative Effectiveness of Proton vs Photon Therapy as Part of Concurrent Chemoradiotherapy for Locally Advanced Cancer. *JAMA Oncol.* 2020;6(2):237-246. doi:10.1001/jamaoncol.2019.4889

<sup>3</sup> Blanchard P, Garden AS, Gunn GB, et al. Intensity-modulated proton beam therapy (IMPT) versus intensity-modulated photon therapy (IMRT) for patients with oropharynx cancer - A case matched analysis. *Radiother Oncol.* 2016;120(1):48-55. doi:10.1016/j.radonc.2016.05.022

tumor. More than 900 publications have validated the efficacy of proton therapy – showing lower tumor recurrence rates, higher survival rates, fewer short-term and late toxicities, and better preservation of patient quality-of-life both during and after treatment.<sup>4</sup> Over the years, there has been substantial evidence-based research demonstrating the effectiveness of proton beam therapy in treating various malignancies, leading to its acceptance as a critical component of comprehensive cancer care for many types of cancer. In light of the evidence base, the Centers for Medicare and Medicaid Services (CMS) currently affords Medicare beneficiaries with equitable access to proton therapy.

The VHA, as America's largest integrated healthcare system, should also provide equitable access to advanced cancer treatments, like proton therapy, to provide the best outcomes for veterans with cancer. Unfortunately, many veterans, depending on the region where they are seeking care, are denied access to proton therapy. The VHA has been known to follow the 2017 American Society for Radiation Oncology (ASTRO) Model Policy for Proton Beam Therapy when authorizing requests for proton therapy. ASTRO recently updated its coverage guidelines in 2023<sup>5</sup>, recognizing the current evidence-based research supporting the use of proton beam therapy for numerous types of cancer. This acknowledgment reinforces the favorable evolution of the evidence base and the importance of this treatment modality and further solidifies its position as a standard-of-care option for a number of cancer patients.

One vital aspect that ASTRO addresses in their updated guidelines is the allowance for coverage with evidence development for Group 2 indications when patients are enrolled in clinical trials or registries. This provision plays a crucial role in advancing our understanding of proton therapy's efficacy and potential applications. By supporting such coverage, we not only foster continuous improvement in treatment outcomes, but also actively contribute to the growth of scientific knowledge surrounding proton beam therapy.

By updating the VHA coverage policy, we can ensure that veterans have access to proton beam therapy when recommended by their physician. Considering these advancements, and the ongoing commitment to providing the highest standard of care to our nation's veterans, we respectfully request the VHA take the necessary steps to promptly implement coverage policy for proton beam therapy recognizing the most current supporting evidence. By adopting such a policy, you would be ensuring that veterans have equal access to this innovative and effective treatment, irrespective of their geographic location or socioeconomic status. Furthermore, we suggest that you consider greater parity and health equity between the VHA and CMS coverage afforded to veterans and Medicare beneficiaries, respectively.

In conclusion, we firmly believe that updating the VHA's policy for proton beam therapy coverage is a significant step towards fulfilling our duty to provide the best possible care for our

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<sup>4</sup> NAPT Model Policy can be found on the NAPT website, please visit: <http://www.proton-therapy.org/wp-content/uploads/2023/07/2023-NAPT-Model-Policy-for-Coverage-of-Proton-Therapy-06.27.23.pdf>

<sup>5</sup> American Society for Radiation Oncology. (2023). ASTRO model policies. *Proton beam therapy (PBT)*, please visit: <https://www.astro.org/ASTRO/media/ASTRO/Daily%20Practice/PDFs/ASTROPBTModelPolicy.pdf>

veterans and, in doing so, also advances our health equity commitment. Thank you for your time and consideration. Our NAPT Physician Advisory Committee is available for a meeting to further discuss these guidelines. Please let us know when we could schedule a time to meet. We look forward to the opportunity to work together to make this life-saving treatment more accessible to the brave men and women who have served our country.

Respectfully submitted,



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