Community Oncology Alliance Urges Congress to Ensure Health Coverage Delivers Timely, Affordable Cancer Care

Calls for stronger patient protections, fewer treatment delays, and sustained access to independent community oncology outlined in Senate Finance RFI response

WASHINGTON, DC, DC, UNITED STATES, September 28, 2026 /EINPresswire.com/ -- The Community Oncology Alliance (COA) today urged Congress to advance health insurance reforms that help patients with cancer afford their treatment, reach the specialists they need, and receive care without unnecessary delays. In comments submitted to Senate Finance Committee Ranking Member Ron Wyden (D-OR), COA outlined concrete steps to hold insurers accountable and protect access to high-quality cancer care in patients' own communities.

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> *Johnetta Blakely, MD, MS, MMHC, COA CMO*

"Coverage is not meaningful if a patient cannot afford to use it or cannot find an oncologist in their network," said Johnetta Blakely, MD, MS, MMHC, chief medical officer of COA and a practicing oncologist. "Patients with cancer cannot afford to wait while an insurer second-guesses their treating physician or discover after treatment that the insurer will not pay for their care."

COA's comment letter responds to Wyden's "Health Coverage That Works for Everyone" request for information (RFI), which seeks proposals to improve access to quality and affordable health coverage. Those goals align directly with COA's mission to ensure that patients can receive quality, affordable cancer care close to where they live and work.

COA urged lawmakers to measure reform by whether patients can actually obtain and afford care. Lower premiums alone offer little relief if patients face unaffordable deductibles, mounting coinsurance, or networks that exclude their oncology team. Likewise, coverage cannot deliver on its promise when administrative barriers delay physician-recommended treatment.

Remove Barriers That Delay Treatment and Safeguard Affordability

Drawing on its COA Prescription for Health Care Reform 2.0 released in April, the organization recommended that Congress:
> Make cancer treatment affordable. Replace percentage-based coinsurance for guideline-supported active cancer treatment with predictable, affordable cost-sharing or no cost-sharing for designated high-value services and establish out-of-pocket limits that reflect families' financial resources.
> Remove barriers that delay treatment. Prohibit prior authorization for FDA-approved, guideline-supported cancer treatment ordered by an in-network oncologist, including appropriate guideline-supported off-label uses. Require a qualified oncology review of adverse decisions and prohibit denials based solely on artificial intelligence or algorithms.
> Keep patients connected to their care teams. Strengthen oncology networks and prevent mid-treatment changes to insurance networks, drug coverage, or pharmacy requirements from interrupting care.
> Hold insurers accountable for denials and delayed payments. Require clear explanations, timely independent appeals, and enforceable payment deadlines so patients and practices can resolve disputes without prolonged administrative battles.
> Protect independent community care. Prohibit steering to insurer-owned practices and pharmacies based on ownership rather than patient interests, expose financial transfers among affiliated companies, and prevent discriminatory payment practices that pressure independent practices to sell.

COA supports the RFI's focus on affordability and insurer accountability while opposing a single-payer system and Medicare buy-in proposals. The letter also cautions against building a federal public option on inadequate Medicare physician payment rates or mandatory physician participation, warning that such approaches could undermine the community practices patients rely on.

"Health insurance should pay for medically necessary care and protect patients from devastating financial costs," said Dr. Blakely. "It should not delay treatment, steer patients to an insurer's own businesses, or force independent practices to finance care while they wait for payment. For patients with cancer, getting these policies right means starting treatment on time, staying with the physician who knows their case, and receiving care close to home."

Read COA's full comment letter at https://mycoa.communityoncology.org/publications/comment-letters/coa-comments-on-senate-finance-committee-request-for-information-health-coverage-that-works-for-everyone

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About the Community Oncology Alliance: The Community Oncology Alliance (COA) is a nonprofit organization dedicated to ensuring that patients have access to the highest-quality, most affordable, cutting-edge cancer care close to home. COA is the only national organization focused exclusively on community oncology, where the majority of Americans with cancer

receive treatment. Through policy, advocacy, and community, COA works to support independent community oncology practices and advance access to high-quality cancer care for patients nationwide. Learn more at www.communityoncology.org.

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COA News

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