

TO: Chairwoman Carolyn McGinn
Members of the Senate Ways and Means Committee

FROM: Peggy Johnson, Executive Director and COO, Wichita Medical
Research and Education Foundation, Cancer Survivor

RE: SB 255

DATE: January 30, 2020

Chairwoman McGinn and members of the Senate Ways and Means Committee, I appreciate your time today and the opportunity to provide you with testimony in support of SB 255. My name is Peggy Johnson, I live in Wichita and serve as the Executive Director and COO of the Wichita Medical Research and Education Foundation located in Wichita. I am a 30-year cancer and access-to-care advocate having served in several national roles, including National Chair of the Susan G. Komen Board of Directors. In Kansas, I have been active with Susan G. Komen, served as co-chair of the Kansas Cancer Partnership, the community arm of the KDHE's Comprehensive Cancer plan, and others. I am a Founding member of PIVOT, The University of Kansas Cancer Center's patient research advocacy program and serve as the Chair of the Masonic Cancer Alliance Community Advisory Board for the cancer center's cancer outreach program. I am an eight-year breast cancer survivor.

As a Komen volunteer I review breast cancer research proposals for funding. I also review proposals for the Department of Defense's breast cancer research program. As a result of my background, when I was diagnosed eight years ago with triple-negative breast cancer, an especially aggressive subtype of breast cancer, I knew I would need a specialized treatment plan. Not a cookie cutter treatment plan, but one for me. Without hesitation, I called The University of Kansas Cancer Center and asked for help. My oncologist, Dr. Qamar Kahn, was helpful, explained everything to me and allowed me to make some decisions. Dr. Khan was trained in treating breast cancer, and especially this specific subtype – and that meant a tailored treatment plan just for me. Traveling to Kansas City was the right decision for me, but not everyone has the insurance or support system to travel to Kansas City.

KU Cancer Center has 150 disease-specific oncologists, physicians and surgeons, trained in all aspects of cancer care. Patients treated at NCI centers have a 25 percent greater chance of survival. Through Dr. Jensen's leadership and the many new researchers and oncologists, as well as a robust clinical trial portfolio, the cancer center offers new treatments before they are widely available. Kansans no longer must travel outside the state to receive leading-edge care. Just a note about clinical trials. Many people don't really understand

the importance of clinical trials, thinking them to be ‘experimental medicine.’”

On the contrary, they are the path to new medicines and cures. Without clinical trials, the doctors who develop them and the cancer patients willing to participate, we wouldn’t have new and more effective treatments. We should thank them all. KU Cancer Center’s portfolio of clinical trials includes working with those who have cancer, people at high risk for developing cancer, preventing cancer and through survivorship by developing methods to support cancer patients after treatment.

KU Cancer Center’s impact on our economy continues to grow. Dr. Jensen’s ability to recruit new cancer researchers has been outstanding. Recruiting top cancer researchers throughout the U.S. has not only brought the researcher and their talent to Kansas, but their cancer grant dollars come to Kansas, too, often times including their research staff. That’s new research money to KU Cancer Center and to Kansas. But the viability of the center still depends on its own support. This funding request is important for the viability of the cancer center and gives them the ability to attract and retain more world-renowned cancer experts, like my doctor, Dr. Khan.

Let me talk just a minute about rural Kansas. I was raised on a family farm in Butler County, my brother and I still own our family farm today. Rural health has always been a concern for me. Living in Butler County, I could easily get to Wichita for any medical needs. But my work with the Kansas Cancer Partnership and the Masonic Cancer Alliance Community Board reminds me much of Kansas still lacks critical medical care. There are no oncologists west of Hays. None. The cancer center, through their outreach network, the Masonic Cancer Alliance, is providing cancer care to rural parts of Kansas, connecting cancer center experts with local healthcare providers. As Kansans, we must remember our farming roots and provide those living in rural communities the support necessary to continue to live and be productive. Masonic Cancer Alliance is bridging those needs for cancer patients.

This increased funding request is important for the viability of the cancer center to continue to recruit and retain the best of the best in cancer research and treatment. Kansas is fortunate to have an NCI-Designated Cancer Center. We are one of the lucky ones. I am one of the lucky ones. Over the next decade, the number of cancer diagnoses are predicted to increase 45 to 50 percent: 1 in 2 men and 1 in 3 women will be diagnosed with cancer in their

lifetime. We are an aging population. Look around you, think of your family, we never expect to hear the word 'cancer'.

Our state needs to be ready. We are positioned to develop the cures; KU Cancer Center is already providing new information and treatments. With additional funding, the cancer center will have expanded resources to conduct more research and more clinical trials, saving more lives.

Thank you for your time.

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