

112TH CONGRESS
2D SESSION

H. R. 6033

To provide for research and education to improve screening, detection and diagnosis of prostate cancer.

IN THE HOUSE OF REPRESENTATIVES

JUNE 27, 2012

Mr. CUMMINGS (for himself, Mr. BURTON of Indiana, Mr. CARSON of Indiana, Mrs. CHRISTENSEN, Ms. CLARKE of New York, Mr. CLAY, Mr. JACKSON of Illinois, and Mr. RANGEL) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To provide for research and education to improve screening, detection and diagnosis of prostate cancer.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Prostate Cancer Detec-
5 tion Research and Education Act”.

6 **SEC. 2. PLAN TO DEVELOP AND VALIDATE A TEST OR**
7 **TESTS FOR PROSTATE CANCER.**

8 (a) IN GENERAL.—The Secretary of Health and
9 Human Services (referred to in this Act as the “Sec-

1 retary”), acting through the Director of the National In-
2 stitutes of Health, shall establish an advisory council on
3 prostate cancer (referred to in this Act as the “advisory
4 council”) to draft a plan for the development and valida-
5 tion of an accurate test or tests, such as biomarkers or
6 imaging, to detect and diagnose prostate cancer.

7 (b) ADVISORY COUNCIL.—

8 (1) MEMBERSHIP.—

9 (A) FEDERAL MEMBERS.—The advisory
10 council shall be comprised of the following ex-
11 perts:

12 (i) A designee of the Centers for Dis-
13 ease Control and Prevention.

14 (ii) A designee of the Centers for
15 Medicare & Medicaid Services.

16 (iii) A designee of the Office of the
17 Director of the National Cancer Institute.

18 (iv) A designee of the Director of the
19 Department of Defense Congressionally
20 Directed Medical Research Program.

21 (v) A designee of the Director of the
22 National Institute of Biomedical Imaging
23 and Bioengineering.

1 (vi) A designee of the Director of the
2 National Institute of General Medical
3 Sciences.

4 (vii) A designee of the Director of the
5 National Institute on Minority Health and
6 Health Disparities.

7 (viii) A designee of the Office of the
8 Director of the National Institutes of
9 Health.

10 (ix) A designee of the Food and Drug
11 Administration.

12 (x) A designee of the Agency for
13 Healthcare Research and Quality.

14 (xi) A designee of the Director of the
15 Telemedicine and Advanced Technology
16 Research Center of the Department of De-
17 fense.

18 (B) NON-FEDERAL MEMBERS.—In addi-
19 tion to the members described in subparagraph
20 (A), the advisory council shall include 8 expert
21 members from outside the Federal Government
22 to be appointed by the Secretary, which shall
23 include—

24 (i) 2 prostate cancer patient advo-
25 cates;

1 (ii) 2 health care providers with a
2 range of expertise and experience in pros-
3 tate cancer; and

4 (iii) 4 leading researchers with pros-
5 tate cancer-related expertise in a range of
6 clinical disciplines.

7 (2) MEETINGS.—The advisory council shall
8 meet quarterly and such meetings shall be open to
9 the public.

10 (3) ADVICE.—The advisory council shall advise
11 the Secretary, or the Secretary’s designee.

12 (4) ANNUAL REPORT.—Not later than 1 year
13 after the date of enactment of this Act, the advisory
14 council shall provide to the Secretary, or the Sec-
15 retary’s designee and Congress—

16 (A) an initial evaluation of all federally
17 funded efforts in prostate cancer research relat-
18 ing to the development and validation of an ac-
19 curate test or tests to detect and diagnose pros-
20 tate cancer;

21 (B) a plan for the development and valida-
22 tion of a reliable test or tests for the detection
23 and accurate diagnosis of prostate cancer; and

24 (C) a set of standards for prostate cancer
25 screening, developed in coordination with the

1 United States Preventive Services Task Force,
2 to ensure that any tools for screening, detec-
3 tion, and diagnosis developed in accordance
4 with the plan under subparagraph (B) will meet
5 the requirements of the Task Force for rec-
6 ommendation as a proven preventive or diag-
7 nostic service.

8 (5) TERMINATION.—The advisory council shall
9 terminate on December 31, 2016.

10 (c) FUNDING.—The Secretary may make available
11 \$1,000,000 from amounts appropriated to the National
12 Institutes of Health for each of fiscal years 2013 through
13 2017 to carry out this section.

14 **SEC. 3. COORDINATION AND INTENSIFICATION OF PROS-**
15 **TATE CANCER RESEARCH.**

16 (a) IN GENERAL.—The Director of the National In-
17 stitutes of Health, in consultation with the Secretary of
18 Defense, shall coordinate and intensify research in accord-
19 ance with the plan developed under section 2(b)(4)(B),
20 with particular attention provided to leveraging existing
21 research to develop and validate a test or tests, such as
22 biomarkers or imaging, to detect and accurately diagnose
23 prostate cancer in order to improve quality of life for mil-
24 lions of Americans, and decrease health care system costs.

1 (b) FUNDING.—The Secretary may make available
2 \$30,000,000 from amounts appropriated to the National
3 Institutes of Health for each of fiscal years 2014 through
4 2018 to carry out this section.

5 **SEC. 4. PUBLIC AWARENESS AND EDUCATION CAMPAIGN.**

6 (a) NATIONAL CAMPAIGN.—The Secretary, in coordi-
7 nation with the Director of the National Institutes of
8 Health and the Director of the Centers for Disease Con-
9 trol and Prevention, shall carry out a national campaign
10 to increase the awareness and knowledge of prostate can-
11 cer.

12 (b) REQUIREMENTS.—The national campaign con-
13 ducted under subsection (a) shall include—

14 (1) roles for the National Cancer Institute, the
15 National Institute on Minority Health and Health
16 Disparities, the Office on Minority Health of the De-
17 partment of Health and Human Services, and the
18 Office of Minority Health of the Centers for Disease
19 Control and Prevention; and

20 (2) the development and distribution of written
21 educational materials, and the development and
22 placing of public service announcements, that are in-
23 tended to encourage men to seek prostate cancer
24 screening when symptoms are present, when they

1 have a family history of prostate cancer, or if they
2 belong to a high-risk population.

3 (c) RACIAL DISPARITIES.—In developing the national
4 campaign under subsection (a), the Secretary shall recog-
5 nize and address—

6 (1) the racial disparities in the incidences of
7 prostate cancer and mortality rates with respect to
8 such disease; and

9 (2) any barriers in access to patient care and
10 participation in clinical trials that are specific to ra-
11 cial minorities.

12 (d) GRANTS.—The Secretary shall establish a pro-
13 gram to award grants to nonprofit private entities to en-
14 able such entities to test alternative outreach and edu-
15 cation strategies to increase the awareness and knowledge
16 of Americans with respect to prostate cancer.

17 (e) AUTHORIZATION OF APPROPRIATIONS.—There is
18 authorized to be appropriated to carry out this section,
19 \$5,000,000 for each of fiscal years 2013 through 2017.

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