

117TH CONGRESS
2D SESSION

H. R. 7630

To maximize discovery, and accelerate development and availability, of promising childhood cancer treatments, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 28, 2022

Mr. McCAUL (for himself, Ms. SPEIER, Mr. BUTTERFIELD, and Mr. KELLY of Pennsylvania) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To maximize discovery, and accelerate development and availability, of promising childhood cancer treatments, and for other purposes.

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 “Childhood Cancer Sur-
5 vivorship, Treatment, Access, and Research Reauthoriza-
6 tion Act of 2022” or the “Childhood Cancer STAR Reau-
7 thorization Act of 2022”.

1 **SEC. 2. REAUTHORIZING AND IMPROVING THE CHILDHOOD**
2 **STAR ACT.**

3 (a) CHILDREN’S CANCER BIOREPOSITORIES.—Sec-
4 tion 417E of the Public Health Service Act (42 U.S.C.
5 285a–11) is amended—

6 (1) in subsection (a)—

7 (A) in paragraph (2)(A), by inserting be-
8 fore the period at the end of the second sen-
9 tence the following: “, and providing sample col-
10 lection incentives for both solid tumor cancer
11 and paired tissues for all pediatric cancers”;

12 (B) in paragraph (9), by striking “Child-
13 hood Cancer Survivorship, Treatment, Access,
14 and Research Act of 2018” and inserting
15 “Childhood Cancer Survivorship, Treatment,
16 Access, and Research Reauthorization Act of
17 2022”;

18 (C) by redesignating paragraph (10) as
19 paragraph (11); and

20 (D) by inserting after paragraph (9) the
21 following:

22 “(10) REPORT ON RESEARCHER ACCESS TO
23 CHILDREN’S CANCER BIOREPOSITORY SAMPLES.—
24 The Director of NIH shall, not later than 2 years
25 after the date of enactment of the Childhood Cancer
26 Survivorship, Treatment, Access, and Research Re-

1 authorization Act of 2022, submit to Congress a re-
2 port on policy changes that would facilitate stream-
3 lining the approval process for researcher access to
4 children’s cancer biorepository samples, with a spe-
5 cial focus on lowering the regulatory burden before
6 samples can be sent to investigators.”; and

7 (2) in subsection (d), by striking “2019 through
8 2023” and inserting “2024 through 2028”.

9 (b) CANCER SURVIVORSHIP PROGRAMS.—Section
10 201 of the Childhood Cancer Survivorship, Treatment, Ac-
11 cess, and Research Act of 2018 (Public Law 115–180)
12 is amended—

13 (1) in subsection (a)—

14 (A) in paragraph (1), by striking “may
15 make awards” and inserting “shall make
16 awards”; and

17 (B) by adding at the end the following:

18 “(4) CONSIDERATION.—In developing, studying,
19 and evaluating model systems pursuant to this sub-
20 section, recipients of awards under this subsection
21 shall give particular consideration to the report
22 issued by the Agency for Healthcare Research and
23 Quality in February 2022, titled ‘Models of Care
24 That Include Primary Care for Adult Survivors of
25 Childhood Cancer: A Realist Review’.”; and

1 (2) in subsection (b), in paragraphs (1) and
2 (2), by striking “date of enactment of this Act” each
3 place it appears and inserting “date of enactment of
4 the Childhood Cancer Survivorship, Treatment, Ac-
5 cess, and Research Reauthorization Act of 2022”.

6 (c) SURVIVORSHIP ELECTRONIC HEALTH
7 RECORDS.—The Secretary of Health and Human Services
8 shall coordinate with the Office of the National Coordi-
9 nator for Health Information to prepare a report on the
10 role that tailored survivorship electronic health records
11 can play in life-long health care for childhood cancer sur-
12 vivors, with a special focus on survivors who face unique
13 lifelong health needs and late effects as they transition to
14 primary care. Such report shall be submitted to Congress
15 not later than 2 years after the date of enactment of this
16 Act.

17 (d) SENSE OF CONGRESS REGARDING THE CRE-
18 ATION OF A CHILDHOOD CANCER MEDICAL CODE.—It is
19 the sense of Congress that the National Center for Health
20 Statistics at the Centers for Disease Control and Preven-
21 tion and the Centers for Medicare & Medicaid Services
22 should consider adding a new Childhood Cancer Code to
23 the International Classification of Diseases (ICD) system
24 for the purpose of facilitating access to existing insurance

- 1 coverage of childhood cancer patients and survivors, as ap-
- 2 propriate.

