

119TH CONGRESS
2D SESSION

S. 4993

To direct the Secretary of Veterans Affairs to establish a precision oncology program for cancer of the prostate at the Department of Veterans Affairs, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JULY 15, 2026

Mr. MORAN introduced the following bill; which was read twice and referred to the Committee on Veterans' Affairs

A BILL

To direct the Secretary of Veterans Affairs to establish a precision oncology program for cancer of the prostate at the Department of Veterans Affairs, 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 “Precision Oncology
5 Program for Cancer of the Prostate Authorization Act of
6 2026” or the “POPCaP Act of 2026”.

1 **SEC. 2. ESTABLISHMENT OF PRECISION ONCOLOGY PRO-**
 2 **GRAM FOR CANCER OF THE PROSTATE.**

3 (a) ESTABLISHMENT OF PROGRAM.—

4 (1) IN GENERAL.—Subchapter II of chapter 73
 5 of title 38, United States Code, is amended by add-
 6 ing at the end the following new section:

7 **“§ 7330E. Precision oncology program for cancer of**
 8 **the prostate**

9 “(a) ESTABLISHMENT.—The Secretary shall estab-
 10 lish within the Department a precision oncology program
 11 for cancer of the prostate in accordance with this section
 12 (in this section referred to as the ‘Program’).

13 “(b) ELIGIBILITY.—A veteran is eligible to partici-
 14 pate in the Program if the veteran has a diagnosis of pros-
 15 tate cancer.

16 “(c) CENTERS OF EXCELLENCE.—

17 “(1) DESIGNATION OF CENTERS.—Effective on
 18 the date of the enactment of this section, the Sec-
 19 retary shall designate the following medical facilities
 20 of the Department as provisional centers of excel-
 21 lence for the Program:

22 “(A) The Seattle VA Medical Center, Se-
 23 attle, Washington.

24 “(B) The James J. Peters VA Medical
 25 Center, Bronx, New York.

1 “(C) The Lieutenant Colonel Charles S.
2 Kettles VA Medical Center, Ann Arbor, Michi-
3 gan.

4 “(D) The Margaret Cochran Corbin Man-
5 hattan VA Medical Center, Manhattan, New
6 York.

7 “(E) The Jesse Brown Department of Vet-
8 erans Affairs Medical Center, Chicago, Illinois.

9 “(F) The West Los Angeles VA Medical
10 Center, Los Angeles, California.

11 “(G) The Corporal Michael J. Crescenz VA
12 Medical Center, Philadelphia, Pennsylvania.

13 “(H) The Durham VA Medical Center,
14 Durham, North Carolina.

15 “(I) The Washington DC VA Medical Cen-
16 ter, Washington, District of Columbia.

17 “(J) The James A. Haley Veterans Hos-
18 pital, Tampa, Florida.

19 “(K) The Portland VA Medical Center,
20 Portland, Oregon.

21 “(L) The Jamaica Plain VA Medical Cen-
22 ter, Boston, Massachusetts.

23 “(M) The San Francisco VA Medical Cen-
24 ter, San Francisco, California.

1 “(N) The Michael E. DeBakey Depart-
2 ment of Veterans Affairs Medical Center, Hous-
3 ton, Texas.

4 “(O) The Rocky Mountain Regional VA
5 Medical Center, Aurora, Colorado.

6 “(P) The John J. Cochran Veterans Hos-
7 pital, St. Louis, Missouri.

8 “(Q) The Kansas City VA Medical Center,
9 Kansas City, Missouri.

10 “(R) The Joseph Maxwell Cleland Atlanta
11 VA Medical Center, Decatur, Georgia.

12 “(S) The Ralph H. Johnson VA Medical
13 Center, Charleston, South Carolina.

14 “(T) The Orlando VA Medical Center, Or-
15 lando, Florida.

16 “(U) The Baltimore VA Medical Center,
17 Baltimore, Maryland.

18 “(V) The John L. McClellan Memorial
19 Veterans’ Hospital, Little Rock, Arkansas.

20 “(W) The William S. Middleton Memorial
21 Veterans Hospital, Madison, Wisconsin.

22 “(X) The Minneapolis VA Medical Center,
23 Minneapolis, Minnesota.

1 “(Y) The George E. Wahlen Department
2 of Veterans Affairs Medical Center, Salt Lake
3 City, Utah.

4 “(Z) The Carl T. Hayden Veterans’ Ad-
5 ministration Medical Center, Phoenix, Arizona.

6 “(AA) The Dallas VA Medical Center, Dal-
7 las, Texas.

8 “(BB) The Malcom Randall Department of
9 Veterans Affairs Medical Center, Gainesville,
10 Florida.

11 “(2) OPERATIONAL REQUIREMENTS.—

12 “(A) MINIMUM NUMBER OF CENTERS.—

13 The Secretary shall ensure that, at all times,
14 not fewer than 21 medical facilities of the De-
15 partment are designated and operating as cen-
16 ters of excellence under the Program, with not
17 fewer than one center maintained in each Vet-
18 erans Integrated Service Network.

19 “(B) DURATION OF SECRETARIAL DES-
20 IGNATION.—Subject to paragraph (3), each cen-
21 ter designated under this section shall be so
22 designated for a period of not less than five
23 years.

24 “(3) ADDITIONAL DESIGNATIONS.—

1 “(A) IN GENERAL.—The Secretary may
2 designate medical facilities as centers of excel-
3 lence in addition to those designated under
4 paragraph (1).

5 “(B) PROTECTION OF INITIAL CENTERS.—
6 For purposes of complying with the minimum
7 number of designated centers of excellence re-
8 quirement under paragraph (2), the Secretary
9 shall count toward such minimum number any
10 medical facilities designated pursuant to para-
11 graph (1) and not terminated under paragraph
12 (4).

13 “(4) TERMINATION OF DESIGNATION.—

14 “(A) IN GENERAL.—Beginning not earlier
15 than January 1, 2030, the Secretary may ter-
16 minate the designation of a medical facility as
17 a center of excellence under the Program if the
18 Secretary determines the facility is failing to
19 serve the purposes of the Program required by
20 this section.

21 “(B) PROCESS.—The Secretary—

22 “(i) before terminating a designation
23 under subparagraph (A), shall submit to
24 the Committee on Veterans’ Affairs and
25 the Committee on Appropriations of the

Senate and the Committee on Veterans' Affairs and the Committee on Appropriations of the House of Representatives a notice of the intent to terminate the designation; and

“(ii) may not terminate the designation until the date that is 60 days after the date of the submission of such notice.

“(5) PERFORMANCE REVIEWS.—

“(A) IN GENERAL.—Beginning in 2030, the Secretary shall conduct reviews of the performance of the centers of excellence designated under the Program.

“(B) ROLLING CYCLE.—In carrying out subparagraph (A), the Secretary shall ensure that—

“(i) in 2030 and each year thereafter, the Secretary reviews and makes a determination on not more than seven centers;

“(ii) the centers selected for review in any given year constitute a class of centers distinct from the classes reviewed in the preceding four years; and

“(iii) not later than the date of the submission of the fifth annual report under

1 subsection (f) following the initial conduct
2 of reviews under this paragraph, and not
3 later than every fifth year thereafter, every
4 center operating under the Program has
5 been reviewed.

6 “(C) SCOPE OF REVIEW.—Each review of
7 a center under this paragraph shall assess
8 whether the performance of the center in pro-
9 viding the services required under this section is
10 adequate to justify the continued designation of
11 the center as a center of excellence under the
12 Program.

13 “(d) ACTIVITIES AND STAFFING OF CENTERS.—

14 “(1) ACTIVITIES.—Each center designated
15 under subsection (c) shall carry out the following ac-
16 tivities:

17 “(A) Establishing a program of genetic se-
18 quencing for veterans with advanced prostate
19 cancer.

20 “(B) Instituting a uniform genetic se-
21 quencing platform to allow for coordination
22 across all centers.

23 “(C) Participating in the telemedicine
24 tumor board of the Program.

1 “(D) Participating in the registry study of
2 the Program to track mutations.

3 “(E) Providing travel support to veterans
4 with mutations to facilitate access to studies.

5 “(F) Developing clinical trials that are bio-
6 marker specific.

7 “(G) Participating in industry-sponsored
8 precision oncology studies.

9 “(H) Participating in monthly calls and
10 not less than three in-person meetings per year
11 with the Program Leadership team established
12 under subsection (e) to assess progress.

13 “(I) Providing ongoing reporting to the
14 Program Leadership team regarding trial ac-
15 cruals and research conducted by investigators
16 of the Department with limited experience who
17 are undergoing mentorship.

18 “(J) Establishing metastasis biopsy capa-
19 bility.

20 “(K) Extending resources to affiliated cen-
21 ters in the Veterans Integrated Service Network
22 in which the center is located.

23 “(2) STAFFING.—The Secretary shall ensure
24 that each center designated under subsection (c) em-
25 ploys, at a minimum—

1 “(A) a medical oncologist;
 2 “(B) an interventional radiologist;
 3 “(C) a urologist;
 4 “(D) a radiation oncologist;
 5 “(E) a pathologist; and
 6 “(F) two full-time equivalent research staff
 7 members.

8 “(e) PROGRAM LEADERSHIP.—

9 “(1) IN GENERAL.—The Secretary shall estab-
 10 lish a Program Leadership team located at the med-
 11 ical facility designated under subsection (c)(1)(A)
 12 (in this section referred to as the ‘Program Leader-
 13 ship team’).

14 “(2) COMPOSITION.—The Program Leadership
 15 team shall include, at a minimum, an Executive Di-
 16 rector, a Clinical Director, and a Research Director.

17 “(3) DUTIES.—The Program Leadership team
 18 shall be responsible for—

19 “(A) providing strategic liaison services
 20 with industry to ensure engagement by the De-
 21 partment with study design and participation;

22 “(B) coordinating participation by the De-
 23 partment in prostate cancer group studies spon-
 24 sored by the National Cancer Institute;

1 “(C) facilitating the development of study
2 concepts, design, and start-up with investiga-
3 tors of the Department with limited experience
4 who are undergoing mentorship;

5 “(D) creating and executing a model for
6 hybrid decentralized clinical trials, including re-
7 mote research coordination, regulatory start-up
8 and maintenance, data management, and ap-
9 proval by an institutional review board;

10 “(E) creating and maintaining a prostate
11 cancer registry and data repository of the De-
12 partment; and

13 “(F) maintaining relevant working groups
14 to bring together expertise of the Department
15 from across the country.

16 “(4) SPECIFIC RESPONSIBILITIES.—

17 “(A) EXECUTIVE DIRECTOR.—The Execu-
18 tive Director of the Program Leadership team
19 shall—

20 “(i) provide administrative leadership
21 to the Program network in partnership
22 with the Clinical Director;

23 “(ii) maintain responsibility for the
24 development, execution, and monitoring of

1 the national strategic plan of the Program;
2 and

3 “(iii) serve as the liaison to the execu-
4 tive steering committee and other leader-
5 ship of the Department and centers of ex-
6 cellence.

7 “(B) CLINICAL DIRECTOR.—The Clinical
8 Director of the Program Leadership team
9 shall—

10 “(i) oversee the Program network to
11 ensure eligible veterans receive access to
12 care based on the latest research;

13 “(ii) maintain responsibility for the
14 development and implementation of strate-
15 gies for program growth, quality improve-
16 ment, and patient satisfaction;

17 “(iii) serve on the review committee of
18 the Program for clinical trials to ensure
19 studies are conducted ethically and effi-
20 ciently; and

21 “(iv) serve as the liaison with stake-
22 holders to integrate clinical services and
23 research.

1 “(C) RESEARCH DIRECTOR.—The Re-
2 search Director of the Program Leadership
3 team shall—

4 “(i) provide leadership on national re-
5 search objectives;

6 “(ii) serve on committees to review
7 new research concepts and projects in the
8 Program network;

9 “(iii) maintain a deep understanding
10 of current research and emerging tech-
11 nologies in prostate cancer; and

12 “(iv) interact with stakeholders, in-
13 cluding regulatory agencies, industry part-
14 ners, and research institutions, to improve
15 prostate cancer research within the De-
16 partment.

17 “(f) ANNUAL REPORT.—

18 “(1) IN GENERAL.—Not later than March 1 of
19 each year, the Secretary shall submit to the Com-
20 mittee on Veterans’ Affairs and the Committee on
21 Appropriations of the Senate and the Committee on
22 Veterans’ Affairs and the Committee on Appropria-
23 tions of the House of Representatives a report on
24 the Program.

1 “(2) ELEMENTS.—Each report submitted under
2 paragraph (1) shall include, with respect to the pe-
3 riod covered by the report, the following:

4 “(A) The funding levels for each center of
5 excellent designated under the Program;

6 “(B) The number of veterans served by the
7 Program;

8 “(C) The number of investigators and pro-
9 viders participating in the Program network;

10 “(D) The number of publications by pro-
11 viders of the Department relating to prostate
12 cancer;

13 “(E) The number of clinical research stud-
14 ies supported by the network;

15 “(F) The number of veterans enrolled in
16 such clinical research studies;

17 “(G) The five-year survival rate of vet-
18 erans enrolled in clinical research studies of the
19 Program compared to other veterans and civil-
20 ians with prostate cancer; and

21 “(H) The outcomes and survival data for
22 veterans served at dedicated genitourinary cen-
23 ters under the Program compared to that of
24 other veterans and civilians served at other cen-
25 ters of excellence under the Program.

1 “(3) COMPREHENSIVE PLAN.—The Secretary
 2 shall include in the report submitted under para-
 3 graph (1) in 2029, a comprehensive plan for the des-
 4 ignation and operation of the centers of excellence
 5 under subsection (c)(2)(A), including a timeline for
 6 center evaluations, performance criteria to be uti-
 7 lized in evaluations, and center selection process.

8 “(4) PERFORMANCE REVIEW FINDINGS.—Be-
 9 ginning with the report submitted under paragraph
 10 (1) in 2031, and all subsequent such reports, the
 11 Secretary shall include results of the performance
 12 reviews conducted pursuant to subsection (c)(5), in-
 13 cluding a determination by the Secretary regarding
 14 whether the results of such review for each center
 15 justifies continued designation as a center of excel-
 16 lence.

17 “(5) FORECAST.—Each report submitted under
 18 paragraph (1) shall include forecasts of the matter
 19 described in paragraph (1)(A) for the upcoming re-
 20 view period.”.

21 (2) CLERICAL AMENDMENT.—The table of sec-
 22 tions at the beginning of such chapter is amended
 23 by inserting after the item relating to section 7330D
 24 the following new item:

“7330E. Precision oncology program for cancer of the prostate.”.

1 (b) ESTABLISHMENT, DESIGNATION, AND OPER-
2 ATION.—

3 (1) IN GENERAL.—The Secretary of Veterans
4 Affairs shall establish the program required under
5 section 7330E of title 38, United States Code, as
6 added by subsection (a)(1), including the designation
7 of program leadership under subsection (e) of such
8 section and the designation and operation of the cen-
9 ters of excellence under subsection (c) of such sec-
10 tion, by not later than January 1, 2027.

11 (2) TERMS AND CONDITIONS.—The designation
12 and operation of the centers of excellence described
13 in paragraph (1) shall be conducted under the same
14 terms and conditions and in the same manner as
15 those centers were designated and operated on Janu-
16 ary 1, 2023.

17 (c) IMPLEMENTATION PLAN.—

18 (1) IN GENERAL.—Not later than 180 days
19 after the date of the enactment of this Act, the Sec-
20 retary of Veterans Affairs shall submit to the Com-
21 mittee on Veterans' Affairs and the Committee on
22 Appropriations of the Senate and the Committee on
23 Veterans' Affairs and the Committee on Appropria-
24 tions of the House of Representatives a plan for the

1 implementation of section 7330E of title 38, United
 2 States Code, as added by subsection (a)(1).

3 (2) ELEMENTS.—The plan required by para-
 4 graph (1) shall include—

5 (A) an assessment of staffing required at
 6 each center of excellence designated under sec-
 7 tion 7330E(c) of title 38, United States Code,
 8 as added by subsection (a)(1);

9 (B) an identification of contracting re-
 10 quirements;

11 (C) a plan for sequencing platform selec-
 12 tion;

13 (D) a plan for registry creation;

14 (E) a plan for coordination with a central
 15 institutional review board; and

16 (F) an identification of anticipated funding
 17 levels for the 10-year period beginning on the
 18 date of the submittal of the plan.

19 (d) AUTHORIZATION OF APPROPRIATIONS.—There is
 20 authorized to be appropriated to the Secretary of Veterans
 21 Affairs to carry out section 7330E of title 38, United
 22 States Code, as added by subsection (a)(1), \$15,500,000
 23 for each of fiscal years 2027 through 2029.

○