

112TH CONGRESS
2D SESSION

S. 3345

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

IN THE SENATE OF THE UNITED STATES

JUNE 27, 2012

Mrs. BOXER (for herself and Mr. KERRY) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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-
10 retary”), acting through the Director of the National In-

stitutes of Health, shall establish an advisory council on prostate cancer (referred to in this Act as the “advisory council”) to draft a plan for the development and validation of an accurate test or tests, such as biomarkers or imaging, to detect and diagnose prostate cancer.

(b) ADVISORY COUNCIL.—

(1) MEMBERSHIP.—

(A) FEDERAL MEMBERS.—The advisory council shall be comprised of the following experts:

(i) A designee of the Centers for Disease Control and Prevention.

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

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

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

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

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

1 (vii) A designee of the Director of the
2 National Institute on Minority Health and
3 Health Disparities.

4 (viii) A designee of the Office of the
5 Director of the National Institutes of
6 Health.

7 (ix) A designee of the Food and Drug
8 Administration.

9 (x) A designee of the Agency for
10 Healthcare Research and Quality.

11 (xi) A designee of the Director of the
12 Telemedicine and Advanced Technology
13 Research Center of the Department of De-
14 fense.

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

21 (i) 2 prostate cancer patient advo-
22 cates;

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

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

4 (2) MEETINGS.—The advisory council shall
5 meet quarterly and such meetings shall be open to
6 the public.

7 (3) ADVICE.—The advisory council shall advise
8 the Secretary, or the Secretary's designee.

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

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

18 (B) a plan for the development and valida-
19 tion of a reliable test or tests for the detection
20 and accurate diagnosis of prostate cancer; and

21 (C) a set of standards for prostate cancer
22 screening, developed in coordination with the
23 United States Preventive Services Task Force,
24 to ensure that any tools for screening, detec-
25 tion, and diagnosis developed in accordance

1 with the plan under subparagraph (B) will meet
2 the requirements of the Task Force for rec-
3 ommendation as a proven preventive or diag-
4 nostic service.

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

7 (c) FUNDING.—The Secretary may make available
8 \$1,000,000 from amounts appropriated to the National
9 Institutes of Health for each of fiscal years 2013 through
10 2017 to carry out this section.

11 **SEC. 3. COORDINATION AND INTENSIFICATION OF PROS-**
12 **TATE CANCER RESEARCH.**

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

22 (b) FUNDING.—The Secretary may make available
23 \$30,000,000 from amounts appropriated to the National
24 Institutes of Health for each of fiscal years 2014 through
25 2018 to carry out this section.

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

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

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

10 (1) roles for the National Cancer Institute, the
11 National Institute on Minority Health and Health
12 Disparities, the Office on Minority Health of the De-
13 partment of Health and Human Services, and the
14 Office of Minority Health of the Centers for Disease
15 Control and Prevention; and

16 (2) the development and distribution of written
17 educational materials, and the development and
18 placing of public service announcements, that are in-
19 tended to encourage men to seek prostate cancer
20 screening when symptoms are present, when they
21 have a family history of prostate cancer, or if they
22 belong to a high-risk population.

23 (c) RACIAL DISPARITIES.—In developing the national
24 campaign under subsection (a), the Secretary shall recog-
25 nize and address—

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

4 (2) any barriers in access to patient care and
5 participation in clinical trials that are specific to ra-
6 cial minorities.

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

12 (e) AUTHORIZATION OF APPROPRIATIONS.—There is
13 authorized to be appropriated to carry out this section,
14 \$5,000,000 for each of fiscal years 2013 through 2017.

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