2011

1	A bill to be entitled
2	An act relating to cancer research and control; amending
3	s. 20.435, F.S.; changing the carryforward period of
4	certain funds of the Biomedical Research Trust Fund;
5	amending s. 215.5602, F.S.; modifying the terms and
6	membership and establishing a staggered membership for
7	appointed members of the Biomedical Research Advisory
8	Council; authorizing the council to recommend a portion of
9	the allocation for the James and Esther King Biomedical
10	Research Program for specified purposes and to develop a
11	grant application and review mechanism; prohibiting any
12	member of the council from participating in council or
13	peer-review panel discussions or decisions regarding
14	certain proposals; authorizing the Department of Health to
15	accept and use gifts for awards under the program;
16	amending s. 381.922, F.S.; revising the purpose of the
17	William G. "Bill" Bankhead, Jr., and David Coley Cancer
18	Research Program; revising the types of applications
19	considered for funding; authorizing the Biomedical
20	Research Advisory Council to recommend a portion of the
21	allocation for the program for specified purposes and to
22	develop a grant application and review mechanism;
23	prohibiting any member of the council from participating
24	in council or panel discussions or decisions regarding
25	certain proposals; requiring the department to submit to
26	the Governor and Legislature a report by a specified date;
27	authorizing the Department of Health to accept and use
28	gifts for awards under the program; creating s. 381.923,
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F.S.; creating the Florida Comprehensive Cancer Control Act; providing legislative intent; providing definitions; creating the Florida Cancer Control and Resource Advisory Council; providing membership of the council; providing the composition of the executive committee of the council; providing for terms of the council and meetings; providing for reimbursement for per diem and travel expenses; prohibiting a member of the council from participating in any discussion or decision to recommend any type of award or contract to any qualified nonprofit association or to any agency of this state or a political subdivision of the state with which the member is associated as an employee or as a member of the governing body or with which the member has entered into a contractual arrangement; providing the duties and responsibilities of the council; requiring the council to report findings and recommendations to the Governor, the Legislature, and the State Surgeon General; requiring the council to develop or purchase written summaries regarding medically viable treatment alternatives for the management of breast cancer and prostate cancer; providing requirements for the written summaries; requiring the council to develop and implement education programs regarding early detection and treatment of breast cancer and prostate cancer; requiring that the H. Lee Moffitt Cancer Center and Research Institute, Inc., provide an executive director for the council; authorizing the Department of Health to adopt rules to administer s. 381.923, F.S.; requiring the

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57	department to produce the Florida Cancer Plan in
58	consultation with the council; creating the Cancer Control
59	Collaborative Program within the Department of Health;
60	providing the responsibility and mission of the program;
61	requiring the department to appoint a director; providing
62	duties for each regional cancer control collaborative;
63	requiring the collaborative program to submit to the
64	council an annual report by a specified date; requiring
65	the program to serve as the infrastructure for expansion
66	or adaption as federal programs or other opportunities
67	arise for future cancer control initiatives; amending ss.
68	458.324 and 459.0125, F.S.; conforming cross-references;
69	repealing s. 1004.435, F.S., relating to cancer control
70	and research; providing an effective date.
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72	Be It Enacted by the Legislature of the State of Florida:
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74	Section 1. Paragraph (c) of subsection (8) of section
75	20.435, Florida Statutes, is amended to read:
76	20.435 Department of Health; trust fundsThe following
77	trust funds shall be administered by the Department of Health:
78	(8) Biomedical Research Trust Fund.
79	(c) Notwithstanding s. 216.301 and pursuant to s. 216.351,
80	any balance of any appropriation from the Biomedical Research
81	Trust Fund which is not disbursed but which is obligated
82	pursuant to contract or committed to be expended may be carried
83	forward for up to $5 - 3$ years <u>after</u> following the effective date
84	of the original appropriation.
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85 Section 2. Subsections (2), (3), (5), and (7) of section 86 215.5602, Florida Statutes, are amended, and subsection (13) is 87 added to that section, to read:

88 215.5602 James and Esther King Biomedical Research89 Program.-

90 Funds appropriated for the James and Esther King (2) 91 Biomedical Research Program shall be used exclusively for the 92 award of grants and fellowships as established in this section; 93 for research relating to the prevention, diagnosis, treatment, 94 and cure of diseases related to tobacco use, including cancer, 95 cardiovascular disease, stroke, and pulmonary disease; and for expenses incurred in the administration of this section; and as 96 provided in subsection (5). Priority shall be granted to 97 98 research designed to prevent or cure disease.

99 (3) There is created within the Department of Health the100 Biomedical Research Advisory Council.

101 The council shall consist of 12 11 members, including: (a) 102 the chief executive officer of the Florida Division of the 103 American Cancer Society, or a designee; the chief executive 104 officer of the Greater Southeast Florida/Puerto Rico Affiliate 105 of the American Heart Association, or a designee; and the chief 106 executive officer of the American Lung Association of Florida, 107 or a designee; and the chief executive officer of BioFlorida, or a designee. The remaining 8 members of the council shall be 108 appointed as follows: 109

110 1. The Governor shall appoint four members, two members 111 with expertise in the field of biomedical research, one member 112 from a research university in the state, and one member

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113 representing the general population of the state.

114 2. The President of the Senate shall appoint two members, 115 one member with expertise in the field of behavioral or social 116 research and one representative from a cancer program approved 117 by the American College of Surgeons.

3. The Speaker of the House of Representatives shall appoint two members, one member from a professional medical organization and one representative from a cancer program approved by the American College of Surgeons.

In making these appointments, the Governor, the President of the 123 124 Senate, and the Speaker of the House of Representatives shall 125 select primarily, but not exclusively, Floridians with 126 biomedical and lay expertise in the general areas of cancer, 127 cardiovascular disease, stroke, and pulmonary disease. The 128 appointments shall be for 4-year staggered terms a 3-year term 129 and shall reflect the diversity of the state's population. An 130 appointed member may not serve more than two consecutive terms. 131 The first two appointments by the Governor and the first 132 appointment by the President of the Senate and the Speaker of 133 the House of Representatives on or after July 1, 2011, shall be 134 for a term of 2 years each.

(b) The council shall adopt internal organizationalprocedures as necessary for its efficient organization.

137 (c) The department shall provide such staff, information,
138 and other assistance as is reasonably necessary to assist the
139 council in carrying out its responsibilities.

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(d)

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Members of the council shall serve without

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141 compensation, but may receive reimbursement as provided in s. 112.061 for travel and other necessary expenses incurred in the 142 143 performance of their official duties.

144 Applications for biomedical research funding under (5)(a) 145 the program may be submitted from any university or established 146 research institute in the state. All qualified investigators in 147 the state, regardless of institution affiliation, shall have 148 equal access and opportunity to compete for the research 149 funding.

150 Grants and fellowships shall be awarded by the State (b) 151 Surgeon General, after consultation with the council, on the 152 basis of scientific merit, as determined by an open competitive 153 peer review process that ensures objectivity, consistency, and 154 high quality. The following types of applications shall be 155 considered for funding:

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1. Investigator-initiated research grants.

Institutional research and training grants. 2.

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Predoctoral and postdoctoral research fellowships. 3.

(c) For any given year, the council may also recommend up 160 to one-third of the allocation for the program for the 161 recruitment of cancer, heart, or lung disease researchers and 162 research teams to institutions in the state; for operational 163 start-up grants for newly recruited cancer, heart, or lung disease research teams; and for equipment expenditures related 164 to the expansion of cancer, heart, or lung disease research and 165 166 treatment capacity in the state. For the purposes of implementing this paragraph, the council may develop a grant 167 application and review mechanism other than the process for 168

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169	reviewing research proposals prescribed in subsection (6);
170	however, such mechanism must ensure a fair and rigorous analysis
171	of the merit of any proposals considered under this paragraph.
172	(7) The council and the peer review panel shall establish
173	and follow rigorous guidelines for ethical conduct and adhere to
174	a strict policy with regard to conflict of interest. A member of
175	the council or panel may not participate in any <u>council or panel</u>
176	discussion or decision with respect to a research proposal, or
177	any proposal related to those projects contemplated in paragraph
178	(5)(c), by any firm, entity, or agency with which the member is
179	associated as a member of the governing body or as an employee,
180	or with which the member has entered into a contractual
181	arrangement. Meetings of the council and the peer review panels
182	shall be subject to the provisions of chapter 119, s. 286.011,
183	and s. 24, Art. I of the State Constitution.
184	(13) The Department of Health may accept gifts made
185	unconditionally by will or otherwise, deposit them into the
186	Biomedical Research Trust Fund, and use them for grant or
187	fellowship awards in the program. Any gift made under conditions
188	that, in the judgment of the department, upon consultation with
189	the council, are proper and consistent with this section, the
190	laws of the United States, and state law, may be accepted and
191	shall be held, invested, reinvested, and used in accordance with
192	the conditions of the gift.
193	Section 3. Section 381.922, Florida Statutes, is amended
194	to read:
195	381.922 William G. "Bill" Bankhead, Jr., and David Coley
196	Cancer Research Program.—

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(1) The William G. "Bill" Bankhead, Jr., and David Coley
Cancer Research Program, which may be otherwise cited as the
"Bankhead-Coley Program," is created within the Department of
Health. The purpose of the program shall be to advance progress
towards cures for cancer <u>using through</u> grants awarded through a
peer-reviewed, competitive process <u>and to expand cancer research</u>
and treatment capacity in this state.

204 The program shall provide grants for cancer research, (2) 205 including cancer clinical trials projects as provided in this 206 section, to further the search for cures for cancer; for 207 recruiting cancer researchers and research teams to institutions 208 in the state; for operational start-up grants for newly 209 recruited cancer researchers and research teams; or for 210 equipment expenditures related to the expansion of cancer 211 research and treatment capacity in the state.

(a) Emphasis shall be given to the following goals, asthose goals support the advancement of such cures:

214 1. Efforts to significantly expand cancer research
 215 capacity in the state by:

a. Identifying ways to attract new research talent and
attendant national grant-producing researchers to cancer
research facilities in this state;

b. Implementing a peer-reviewed, competitive process to identify and fund the best proposals to expand cancer research institutes in this state;

222 c. Funding through available resources for those proposals 223 that demonstrate the greatest opportunity to attract federal 224 research grants and private financial support;

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d. Encouraging the employment of bioinformatics in order
to create a cancer informatics infrastructure that enhances
information and resource exchange and integration through
researchers working in diverse disciplines, to facilitate the
full spectrum of cancer investigations;

e. Facilitating the technical coordination, business
development, and support of intellectual property as it relates
to the advancement of cancer research; and

f. Aiding in other multidisciplinary research-supportactivities as they inure to the advancement of cancer research.

235 2. Efforts to improve both research and treatment through236 greater participation in clinical trials networks by:

a. Identifying ways to increase adult enrollment in cancerclinical trials;

b. Supporting public and private professional education
programs designed to increase the awareness and knowledge about
cancer clinical trials;

242 c. Providing tools to cancer patients and community-based 243 oncologists to aid in the identification of cancer clinical 244 trials available in the state; and

d. Creating opportunities for the state's academic cancer
centers to collaborate with community-based oncologists in
cancer clinical trials networks.

248 3. Efforts to reduce the impact of cancer on disparate 249 groups by:

a. Identifying those cancers that disproportionatelyimpact certain demographic groups; and

b. Building collaborations designed to reduce health

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253 disparities as they relate to cancer.

254 (b) Preference may be given to grant proposals that foster 255 collaborations among institutions, researchers, and community 256 practitioners, as such proposals support the advancement of 257 cures through basic or applied research, including clinical 258 trials involving cancer patients and related networks and the 259 transfer of knowledge gained from research into the practice of 260 community practitioners.

(3) (a) Applications for funding for cancer research may be 261 262 submitted by any university or established research institute in the state. All qualified investigators in the state, regardless 263 264 of institutional affiliation, shall have equal access and opportunity to compete for the research funding. Collaborative 265 266 proposals, including those that advance the program's goals enumerated in subsection (2), may be given preference. Grants 267 268 shall be awarded by the State Surgeon General, after 269 consultation with the Biomedical Research Advisory Council 270 established under s. 215.5602, on the basis of scientific merit, 271 as determined by an open, competitive peer review process that 272 ensures objectivity, consistency, and high quality. The 273 following types of applications shall be considered for funding:

274

1. Investigator-initiated research grants.

275

276

2.

Institutional research and training grants.

3. Predoctoral and postdoctoral research fellowships.

277 4.3. Collaborative research grants, including those that advance the finding of cures through basic or applied research. 278

5. Clinical trial project grants, particularly those 279 280 projects such as matching services that identify prospective

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281 clinical trials treatment options for cancer patients in this 282 state or those projects that otherwise foster greater rates of 283 participation in trials. At least one such grant shall be 284 awarded in any given year if a meritorious proposal or proposals 285 are received. Such project grant proposals are not required to 286 be posed as a research question in order to qualify for an 287 award. 288 (b) For any given year, the council may recommend up to 289 one-third of the allocation for grants by the program for the recruitment of cancer researchers and research teams to 290 291 institutions in the state, for operational start-up grants for 292 newly recruited cancer researchers and research teams, or for 293 equipment expenditures related to the expansion of cancer 294 research and treatment capacity in the state. For the purposes of implementing this paragraph, the council may develop a grant 295 296 application and review mechanism other than the process for 297 reviewing research proposals prescribed in paragraph (c); 298 however, such mechanism shall ensure a fair and rigorous 299 analysis of the merit of any proposals considered under this 300 paragraph.

301 (c) (b) In order to ensure that all proposals for research 302 funding are appropriate and are evaluated fairly on the basis of scientific merit, the State Surgeon General, in consultation 303 304 with the council, shall appoint a peer review panel of 305 independent, scientifically qualified individuals to review the scientific content of each proposal and establish its priority 306 score. The priority scores shall be forwarded to the council and 307 308 must be considered in determining which proposals shall be

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309 recommended for funding.

310 (d) (c) The council and the peer review panel shall establish and follow rigorous guidelines for ethical conduct and 311 312 adhere to a strict policy with regard to conflicts of interest. 313 A member of the council or panel may not participate in any 314 council or panel discussion or decision with respect to a 315 research proposal, or any proposal related to those projects contemplated in paragraph (b), by any firm, entity, or agency 316 317 with which the member is associated as a member of the governing 318 body or as an employee or with which the member has entered into 319 a contractual arrangement. Meetings of the council and the peer review panels are subject to chapter 119, s. 286.011, and s. 24, 320 Art. I of the State Constitution. 321

322 (4) By <u>February 1</u> December 15 of each year, the <u>council</u>
323 Department of Health shall submit to the Governor, the President
324 of the Senate, and the Speaker of the House of Representatives a
325 report indicating progress towards the program's mission and
326 making recommendations that further its purpose.

327 (5) The William G. "Bill" Bankhead, Jr., and David Coley Cancer Research program is funded pursuant to s. 215.5602(12). 328 Funds appropriated for the William G. "Bill" Bankhead, Jr., and 329 330 David Coley Cancer Research program shall be distributed 331 pursuant to this section to provide grants to researchers 332 seeking cures for cancer and cancer-related illnesses, with 333 emphasis given to the goals enumerated in this section. From the 334 total funds appropriated, an amount of up to 10 percent may be used for administrative expenses. From funds appropriated to 335 336 accomplish the goals of this section, up to \$250,000 shall be

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337 available for the operating costs of the Florida Center for 338 Universal Research to Eradicate Disease. 339 The Department of Health may accept gifts made (6) 340 unconditionally by will or otherwise, deposit them into the 341 Biomedical Research Trust Fund, and use them for grant or 342 fellowship awards in the program. Any gift made under conditions 343 that, in the judgment of the department, upon consultation with 344 the council, are proper and consistent with this section, the 345 laws of the United States, and state law, may be accepted and shall be held, invested, reinvested, and used in accordance with 346 347 the conditions of the gift. 348 Section 4. Section 381.923, Florida Statutes, is created 349 to read: 350 381.923 Comprehensive Cancer Control.-351 (1) SHORT TITLE.-This section may be cited as the "Florida 352 Comprehensive Cancer Control Act." 353 LEGISLATIVE INTENT.-It is the finding of the (2) 354 Legislature that: 355 (a) Advances in scientific knowledge have led to 356 prevention, early detection, and therapeutic capabilities in the 357 control of cancer. Such knowledge, screening technologies, and 358 therapies must be made available to all residents of this state. 359 Research shows that certain lifestyles and exposures, (b) 360 such as tobacco use, exposure to ultraviolet radiation from the 361 sun, and exposure to occupational and environmental carcinogens, 362 contribute to the risk for many types of cancer and that certain 363 screening tests are effective in diagnosing cancer early when it 364 is more treatable. The role of diet, exercise, and other healthy

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365 lifestyles are also important in cancer prevention and control. 366 Proven causes of cancer and methods for early detection should 367 be publicized and be the subject of linguistically and 368 culturally appropriate educational and awareness programs for 369 the prevention of cancer. 370 (c) An effective cancer control program would mobilize the 371 scientific, educational, and medical resources that presently 372 exist into an intense attack against this dreaded disease, with 373 the primary goal to reduce the cancer burden for the residents 374 of this state. 375 (3) DEFINITIONS.—As used in this section, the term: 376 (a) "Cancer" means all malignant neoplasms, regardless of 377 the tissue of origin, including lymphoma and leukemia. 378 (b) "Council" means the Florida Cancer Control and 379 Resource Advisory Council. (c) "Department" means the Department of Health. 380 381 (d) "Plan" means the Florida Cancer Plan. 382 "Program" means the Florida Cancer Control (e) 383 Collaborative Program. 384 "Qualified nonprofit association" means any (f) 385 association, incorporated or unincorporated, which has received 386 tax-exempt status from the Internal Revenue Service. 387 (4) FLORIDA CANCER CONTROL AND RESOURCE ADVISORY COUNCIL; 388 CREATION; COMPOSITION.-389 There is created within the H. Lee Moffitt Cancer (a) Center and Research Institute, Inc., the Florida Cancer Control 390 and Resource Advisory Council, which is an advisory body 391 392 appointed to function on a continuing basis to recommend

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393	solutions and policy alternatives to the Governor, members of
394	the Legislature, the State Surgeon General, and other
395	policymakers. The council shall consist of cancer organizational
396	representation and cancer control stakeholders, with a
397	chairperson elected by the council membership for a term of 2
398	years. Each council member must be a resident of this state. The
399	Governor shall appoint three members representing the general
400	public, with the initial appointments being for terms of 1 year,
401	2 years, and 3 years, respectively, beginning July 1, 2012.
402	Thereafter, gubernatorial appointments to the council shall be
403	for terms of 3 years. The President of the Senate and the
404	Speaker of the House of Representatives shall each appoint one
405	member from his or her legislative body to serve on the council
406	at any given time. Each of the following organizations shall
407	designate a representative to serve on the council:
408	1. H. Lee Moffitt Cancer Center and Research Institute,
409	Inc.
410	2. University of Florida Shands Cancer Center.
411	3. University of Miami Sylvester Comprehensive Cancer
412	Center.
413	4. Mayo Clinic, Florida.
414	5. M.D. Anderson Cancer Center, Florida.
415	6. American Cancer Society, Florida Division.
416	7. American Lung Association of the Southeast.
417	8. American Association for Retired Persons.
418	9. Department of Health.
419	10. Department of Education.
420	11. Florida Tumor Registrars Association.
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421	12. Florida Cancer Data System.
422	13. Florida Society of Oncology Social Workers.
423	14. Florida Oncology Nurses Society.
424	15. Florida Society of Clinical Oncology.
425	16. Florida Association of Pediatric Tumor Programs, Inc.
426	17. Florida Medical Association.
427	18. Florida Hospital Association.
428	19. Florida Nursing Association.
429	20. Florida Dental Association.
430	21. Florida Osteopathic Association.
431	22. University of Florida College of Medicine.
432	23. Florida Academy of Family Physicians.
433	24. University of Miami College of Medicine.
434	25. University of South Florida College of Medicine.
435	26. Florida State University College of Medicine.
436	27. University of Central Florida College of Medicine.
437	28. Nova Southeastern College of Osteopathic Medicine.
438	29. Florida International University College of Medicine.
439	30. Lake Erie School of Osteopathic Medicine.
440	31. Biomedical Research Advisory Council.
441	32. Center for Universal Research to Eradicate Disease.
442	33. A representative from each of the regional cancer
443	control collaboratives.
444	(b) An executive committee, which shall be responsible for
445	coordinating the activities and planning the direction of the
446	full council, shall be comprised of the council's elected
447	chairperson, one at-large member elected by the full council,
448	and the members representing the Department of Health, the
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449 American Cancer Society, the H. Lee Moffitt Cancer Center and 450 Research Institute, Inc., the University of Florida Shands 451 Cancer Center, and the University of Miami Sylvester 452 Comprehensive Cancer Center, as well as the appointee of the 453 President of the Senate, the appointee of the Speaker of the 454 House of Representatives, and one of the gubernatorial 455 appointees, who shall be designated by the council's 456 chairperson. If the council chairperson is a designee of one of 457 the entities named in this paragraph, the full council shall 458 elect a second at-large position to serve on the executive 459 committee. The elected positions on the executive committee 460 shall be for terms of 2 years. 461 The council shall meet at least semiannually. A (C) 462 majority of members shall constitute a quorum for the purpose of 463 exercising all of the powers of the council. 464 (d) The council members shall serve without compensation, 465 but are entitled to reimbursement for per diem and travel 466 expenses as provided in s. 112.061. 467 (e) A member of the council may not participate in any 468 council discussion or decision to recommend any type of award or 469 contract to any qualified nonprofit association or to any agency 470 of this state or a political subdivision of the state with which 471 the member is associated as an employee or as a member of the governing body or with which the member has entered into a 472 473 contractual arrangement. The council may prescribe, amend, and repeal bylaws 474 (f) 475 governing the manner in which the business of the council is 476 conducted.

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477 (q) The council shall advise the Governor, the 478 Legislature, the State Surgeon General, and other state 479 policymakers with respect to cancer control and resources in 480 this state. 481 The council shall approve a plan for cancer control, (h) 482 to be known as the "Florida Cancer Control Plan," which shall be 483 consistent to the extent possible with other cancer or health-484 related state plans and integrated and coordinated with existing 485 programs in this state. The council shall review and approve the 486 plan at least every 2 years. 487 The council shall formulate and recommend to the (i) 488 Governor, the Legislature, the State Surgeon General, and other 489 state policymakers a plan for the prevention and early detection 490 of cancer which is evidence-based and consistent with standards 491 of practice and supported by evidence-based medicine. The State 492 Surgeon General and other state policymakers shall consider the 493 plan in developing departmental priorities and funding 494 priorities and standards under chapter 385. 495 The council shall provide expertise, input, and (j) 496 recommendations regarding the content and development of the 497 Florida Cancer Plan and the coordination and integration of 498 other state plans concerning cancer control. 499 The council may establish committees to develop (k) 500 strategies for taking action regarding: 501 1. Cancer plan evaluation, including the creation of a 502 tumor registry, data retrieval systems, and the epidemiology of 503 cancer in the state. 504 2. Cancer prevention.

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505 3. Cancer detection. 506 4. Cancer treatments. 507 5. Support services for cancer patients and caregivers. 508 6. Cancer education for laypersons and professionals. 509 7. Other cancer-control-related topics. 510 The council shall advise the State Surgeon General on (1) 511 methods of enforcing and implementing laws already enacted that 512 relate to cancer control. 513 (m) The council may recommend to the State Surgeon General 514 rules consistent with law as it may deem necessary for the 515 performance of its duties and the proper administration of this 516 section. 517 The council shall be physically located at the H. Lee (n) 518 Moffitt Cancer Center and Research Institute, Inc. 519 By December 1 of each year, the council shall report (0) 520 its findings and recommendations to the Governor, the President 521 of the Senate, the Speaker of the House of Representatives, and 522 the State Surgeon General. 523 Subject to specific appropriations by the Legislature, (p) 524 the council shall develop or purchase standardized written 525 summaries, written in language easily understood by the average 526 adult, to inform persons who have or who are at high risk of 527 being diagnosed with breast cancer or who have prostate cancer 528 or are considering prostate cancer screening of the medically 529 viable treatment alternatives available to effectively manage 530 breast cancer or prostate cancer; describe treatment options; and explain the advantages, disadvantages, and risks associated 531 532 with each treatment option. The summaries shall be printed in

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533 the form of a pamphlet or booklet and made continuously 534 available to physicians and surgeons in the state for their use 535 in accordance with s. 458.324 and to osteopathic physicians in 536 this state for their use in accordance with s. 459.0125. The 537 council shall periodically update both summaries to reflect 538 current standards of medical practice in the treatment of breast 539 cancer and prostate cancer. 540 (q) Subject to specific appropriations by the Legislature, the council shall develop and implement educational programs, 541 542 including distribution of the summaries developed or purchased under paragraph (p), to inform citizen groups, associations, and 543 544 voluntary organizations about early detection and treatment of 545 breast cancer and prostate cancer. 546 (5) RESPONSIBILITIES OF THE H. LEE MOFFITT CANCER CENTER 547 AND RESEARCH INSTITUTE, INC., AND THE DEPARTMENT OF HEALTH.-548 (a) The H. Lee Moffitt Cancer Center and Research 549 Institute, Inc., shall provide a full-time executive director to 550 coordinate, facilitate, and communicate the mission and 551 responsibilities of the council. Additional administrative 552 support, information, and other assistance shall also be 553 provided as reasonably necessary for the completion of the responsibilities of the council. 554 555 The Department of Health, after consultation with the (b) 556 council, may adopt rules necessary to administer this section. 557 The Florida Cancer Plan is established within the (C) 558 Department of Health. The department shall consult with the 559 council in developing the plan, prioritizing goals, and 560 allocating resources.

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561 (6) FLORIDA CANCER CONTROL COLLABORATIVE PROGRAM; 562 CREATION; COMPOSITION.-563 (a) The Cancer Control Collaborative Program is 564 established within the Department of Health and resides within 565 the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program. The program is responsible for overseeing and 566 567 providing infrastructure for the state cancer collaborative 568 network. The primary mission of the program is to implement the plan's initiatives and identify and facilitate the local 569 570 development of solutions to cancer control needs of the 571 populations served by the regional cancer control 572 collaboratives. The program shall prioritize programs and 573 resources to reduce the burden of cancer in this state, 574 consistent with the plan. 575 The department shall appoint a director, who is (b) 576 responsible for supervising the program, and provide, at a 577 minimum, centralized organization, communications, information 578 technology, shared resources, and cancer control expertise to 579 the regional cancer control collaboratives. 580 Each regional cancer control collaborative shall bring (C) 581 together local cancer stakeholders, develop bylaws, identify and 582 prioritize cancer control needs of its region, and develop 583 solutions to solve problems, consistent with the plan and the 584 goal of reducing the burden of cancer in this state. Each 585 collaborative shall meet at least semiannually and send 586 representation to the council meetings. 587 (d) By October 15 of each year, the program shall submit 588 an annual report to the council. The council shall have input

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589 into the prioritization of programs and proposed allocation of 590 resources in the program consistent with the plan. 591 (e) The program shall serve as the infrastructure for 592 expansion or adaptation as federal programs or other 593 opportunities arise for future cancer control initiatives. The 594 development of the infrastructure for local cancer control 595 collaboratives, to the extent possible, shall be designed to 596 leverage opportunities for funding from the United States 597 Centers for Disease Control and Prevention or other federal 598 sources. 599 Section 5. Subsection (1) and paragraph (a) of subsection 600 (2) of section 458.324, Florida Statutes, are amended to read: 601 458.324 Breast cancer; information on treatment 602 alternatives.-603 (1)DEFINITION.-As used in this section, the term 604 "medically viable," as applied to treatment alternatives, means 605 modes of treatment generally considered by the medical 606 profession to be within the scope of current, acceptable standards, including treatment alternatives described in the 607 608 written summary prepared by the Florida Cancer Control and 609 Resource Research Advisory Council in accordance with s. 610 381.923(4)(o) 1004.435(4)(m). 611 (2)COMMUNICATION OF TREATMENT ALTERNATIVES.-Each 612 physician treating a patient who is, or in the judgment of the 613 physician is at high risk of being, diagnosed as having breast cancer shall inform such patient of the medically viable 614 treatment alternatives available to such patient; shall describe 615 such treatment alternatives; and shall explain the relative 616 Page 22 of 25

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617 advantages, disadvantages, and risks associated with the 618 treatment alternatives to the extent deemed necessary to allow 619 the patient to make a prudent decision regarding such treatment 620 options. In compliance with this subsection:

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(a) The physician may, in his or her discretion:

622 1. Orally communicate such information directly to the623 patient or the patient's legal representative;

624 2. Provide the patient or the patient's legal 625 representative with a copy of the written summary prepared in 626 accordance with s. <u>381.923(4)(o)</u> 1004.435(4)(m) and express a 627 willingness to discuss the summary with the patient or the 628 patient's legal representative; or

3. Both communicate such information directly and provide
a copy of the written summary to the patient or the patient's
legal representative for further consideration and possible
later discussion.

Nothing in this subsection shall reduce other provisions of lawregarding informed consent.

636Section 6. Subsection (1) and paragraph (a) of subsection637(2) of section 459.0125, Florida Statutes, are amended to read:

638 459.0125 Breast cancer; information on treatment
639 alternatives.-

(1) DEFINITION.—As used in this section, the term
"medically viable," as applied to treatment alternatives, means
modes of treatment generally considered by the medical
profession to be within the scope of current, acceptable
standards, including treatment alternatives described in the

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645 written summary prepared by the Florida Cancer Control and 646 <u>Resource Research</u> Advisory Council in accordance with s. 647 381.923(4)(o) 1004.435(4)(m).

648 COMMUNICATION OF TREATMENT ALTERNATIVES.--It is the (2) 649 obligation of every physician treating a patient who is, or in 650 the judgment of the physician is at high risk of being, 651 diagnosed as having breast cancer to inform such patient of the 652 medically viable treatment alternatives available to such 653 patient; to describe such treatment alternatives; and to explain 654 the relative advantages, disadvantages, and risks associated 655 with the treatment alternatives to the extent deemed necessary 656 to allow the patient to make a prudent decision regarding such 657 treatment options. In compliance with this subsection:

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(a) The physician may, in her or his discretion:

659 1. Orally communicate such information directly to the660 patient or the patient's legal representative;

661 2. Provide the patient or the patient's legal 662 representative with a copy of the written summary prepared in 663 accordance with s. <u>381.923(4)(o)</u> 1004.435(4)(m) and express her 664 or his willingness to discuss the summary with the patient or 665 the patient's legal representative; or

3. Both communicate such information directly and provide
a copy of the written summary to the patient or the patient's
legal representative for further consideration and possible
later discussion.

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Nothing in this subsection shall reduce other provisions of lawregarding informed consent.

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673	Section	7.	Sect	ion 1	1004.43	35, FI	lorida S	Statut	ces,	is	
674	repealed.										
675		8.	This	act	shall	take	effect	July	1,	2011.	