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1	A bill to be entitled
2	An act relating to cancer centers; amending s. 20.435,
3	F.S.; authorizing funds in the Biomedical Research
4	Trust Fund to be used for the Florida Consortium of
5	National Cancer Institute Centers Program; amending s.
6	215.5602, F.S.; revising the distribution of certain
7	funds deposited into the Biomedical Research Trust
8	Fund; creating s. 381.915, F.S.; providing a short
9	title; establishing the Florida Consortium of National
10	Cancer Institute Centers Program; providing purpose;
11	requiring the Department of Health to distribute
12	funding to certain cancer centers; providing a formula
13	for determination of allocations; providing
14	definitions; providing criteria for designation of
15	tiers for cancer centers; requiring reports; providing
16	that funding is subject to annual appropriation;
17	providing rulemaking authority; providing an effective
18	date.
19	
20	Be It Enacted by the Legislature of the State of Florida:
21	
22	Section 1. Paragraph (a) of subsection (8) of section
23	20.435, Florida Statutes, is amended to read:
24	20.435 Department of Health; trust fundsThe following
25	trust funds shall be administered by the Department of Health:
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(8) Biomedical Research Trust Fund.

27 (a) Funds to be credited to the trust fund shall consist of funds deposited pursuant to s. 215.5601 and any other funds 28 29 appropriated by the Legislature. Funds shall be used for the 30 purposes of the James and Esther King Biomedical Research 31 Program, the Florida Consortium of National Cancer Institute 32 Centers Program, and the William G. "Bill" Bankhead, Jr., and 33 David Coley Cancer Research Program as specified in ss. 34 215.5602, 288.955, 381.915, and 381.922. The trust fund is 35 exempt from the service charges imposed by s. 215.20.

36 Section 2. Paragraph (a) of subsection (12) of section 37 215.5602, Florida Statutes, is amended to read:

38 215.5602 James and Esther King Biomedical Research 39 Program.-

40 (12) (a) Beginning in the 2011-2012 fiscal year and 41 thereafter, \$25 million from the revenue deposited into the 42 Health Care Trust Fund pursuant to ss. 210.011(9) and 210.276(7) 43 shall be reserved for research of tobacco-related or cancer-44 related illnesses. Of the revenue deposited in the Health Care Trust Fund pursuant to this section, \$25 million shall be 45 transferred to the Biomedical Research Trust Fund within the 46 47 Department of Health. Subject to annual appropriations in the General Appropriations Act, \$5 million shall be appropriated to 48 49 the James and Esther King Biomedical Research Program, \$5 50 million shall be appropriated to the William G. "Bill" Bankhead,

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51 Jr., and David Coley Cancer Research Program created under s. 52 381.922, \$5 million shall be appropriated to the H. Lee Moffitt Cancer Center and Research Institute established under s. 53 54 1004.43, \$5 million shall be appropriated to the Sylvester 55 Comprehensive Cancer Center of the University of Miami, and \$5 56 million shall be appropriated to the Shands Cancer Hospital. Section 3. Section 381.915, Florida Statutes, is created 57 58 to read: 59 381.915 Florida Consortium of National Cancer Institute 60 Centers Program.-61 (1) This section may be cited as the "Florida NCI Cancer 62 Centers Act." (2) The Florida Consortium of National Cancer Institute 63 Centers Program is established to enhance the quality and 64 65 competitiveness of cancer care in this state, further a 66 statewide biomedical research strategy directly responsive to 67 the health needs of Florida's citizens, and capitalize on the 68 potential educational opportunities available to its students. 69 The department shall make payments to Florida-based cancer centers recognized by the National Cancer Institute (NCI) at the 70 71 National Institutes of Health as NCI-designated cancer centers 72 or NCI-designated comprehensive cancer centers, and cancer 73 centers working toward achieving NCI designation. The department 74 shall distribute funds to participating cancer centers on a 75 quarterly basis during each fiscal year for which an

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Shall calculate an allocation fraction to be used fordistributing funds to participating cancer centers. On or beforethe final business day of each quarter of the state fiscal yearthe department shall distribute to each participating cancercenter one-fourth of that cancer center's annual allocationcalculated under subsection (6). The allocation fraction foreach participating cancer center is based on the cancer center'tier-designated weight under subsection (4) multiplied by eachof the following allocation factors: number of reportable casespeer-review costs, and biomedical education and training. Asused in this section, the term:(a) "Biomedical education and training" means instructionthat is offered to a student who is enrolled in a biomedicalresearch program at an affiliated university as a medicalstudent or a student in a master's or doctoral degree program,or who is a resident physician trainee or postdoctoral traineeprogram must be accredited or approved by a nationallyrecognized agency and offered through an institution accreditedby the Commission on Colleges of the Southern Association ofColleges and Schools. Full-time equivalency for trainees shall	76	appropriation is made.
distributing funds to participating cancer centers. On or before the final business day of each quarter of the state fiscal years the department shall distribute to each participating cancer center one-fourth of that cancer center's annual allocation calculated under subsection (6). The allocation fraction for each participating cancer center is based on the cancer center's tier-designated weight under subsection (4) multiplied by each of the following allocation factors: number of reportable cases peer-review costs, and biomedical education and training. As used in this section, the term: (a) "Biomedical education and training" means instruction that is offered to a student who is enrolled in a biomedical student or a student in a master's or doctoral degree program, or who is a resident physician trainee or postdoctoral trainee in such program. An affiliated university biomedical research program must be accredited or approved by a nationally recognized agency and offered through an institution accredited by the Commission on Colleges of the Southern Association of Colleges and Schools. Full-time equivalency for trainees shall	77	(3) On or before September 15 of each year, the department
the final business day of each quarter of the state fiscal year the department shall distribute to each participating cancer center one-fourth of that cancer center's annual allocation calculated under subsection (6). The allocation fraction for each participating cancer center is based on the cancer center' tier-designated weight under subsection (4) multiplied by each of the following allocation factors: number of reportable cases peer-review costs, and biomedical education and training. As used in this section, the term: (a) "Biomedical education and training" means instruction that is offered to a student who is enrolled in a biomedical student or a student in a master's or doctoral degree program, or who is a resident physician trainee or postdoctoral trainee in such program. An affiliated university biomedical research program must be accredited or approved by a nationally recognized agency and offered through an institution accredited by the Commission on Colleges of the Southern Association of Colleges and Schools. Full-time equivalency for trainees shall	78	shall calculate an allocation fraction to be used for
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87 peer-review costs, and biomedical education and training. As 88 used in this section, the term: 89 (a) "Biomedical education and training" means instruction 90 that is offered to a student who is enrolled in a biomedical 91 research program at an affiliated university as a medical 92 student or a student in a master's or doctoral degree program, 93 or who is a resident physician trainee or postdoctoral trainee 94 in such program. An affiliated university biomedical research 95 program must be accredited or approved by a nationally 96 recognized agency and offered through an institution accredited 97 by the Commission on Colleges of the Southern Association of 98 Colleges and Schools. Full-time equivalency for trainees shall	85	tier-designated weight under subsection (4) multiplied by each
88 <u>used in this section, the term:</u> 89 <u>(a) "Biomedical education and training" means instruction</u> 90 <u>that is offered to a student who is enrolled in a biomedical</u> 91 <u>research program at an affiliated university as a medical</u> 92 <u>student or a student in a master's or doctoral degree program,</u> 93 <u>or who is a resident physician trainee or postdoctoral trainee</u> 94 <u>in such program. An affiliated university biomedical research</u> 95 <u>program must be accredited or approved by a nationally</u> 96 <u>recognized agency and offered through an institution accredited</u> 97 <u>by the Commission on Colleges of the Southern Association of</u> 98 <u>Colleges and Schools. Full-time equivalency for trainees shall</u>	86	of the following allocation factors: number of reportable cases,
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92 92 <u>student or a student in a master's or doctoral degree program,</u> 93 <u>or who is a resident physician trainee or postdoctoral trainee</u> 94 <u>in such program. An affiliated university biomedical research</u> 95 <u>program must be accredited or approved by a nationally</u> 96 <u>recognized agency and offered through an institution accredited</u> 97 <u>by the Commission on Colleges of the Southern Association of</u> 98 <u>Colleges and Schools. Full-time equivalency for trainees shall</u>	90	that is offered to a student who is enrolled in a biomedical
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95 program must be accredited or approved by a nationally 96 recognized agency and offered through an institution accredited 97 by the Commission on Colleges of the Southern Association of 98 Colleges and Schools. Full-time equivalency for trainees shall	93	or who is a resident physician trainee or postdoctoral trainee
96 <u>recognized agency and offered through an institution accredited</u> 97 <u>by the Commission on Colleges of the Southern Association of</u> 98 <u>Colleges and Schools. Full-time equivalency for trainees shall</u>	94	in such program. An affiliated university biomedical research
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98 <u>Colleges and Schools. Full-time equivalency for trainees shall</u>	96	recognized agency and offered through an institution accredited
	97	by the Commission on Colleges of the Southern Association of
	98	Colleges and Schools. Full-time equivalency for trainees shall
99 be prorated for training received in oncologic sciences and	99	be prorated for training received in oncologic sciences and
100 <u>oncologic medicine.</u>	100	oncologic medicine.

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101	(b) "Cancer center" means a freestanding center, a center
102	situated within an academic institution, or a formal research-
103	based consortium under centralized leadership that has achieved
104	NCI designation or is prepared to achieve NCI designation by
105	July 1, 2019.
106	(c) "Florida-based" means that a cancer center's actual or
107	sought designated status is or would be recognized by the NCI as
108	primarily located in Florida and not in another state.
109	(d) "Peer-review costs" means the total annual direct
110	costs for peer-reviewed cancer-related research projects,
111	consistent with reporting guidelines provided by the NCI, for
112	the most recent annual reporting period available.
113	(e) "Reportable cases" means cases of cancer in which a
114	cancer center is involved in the diagnosis, evaluation of the
115	diagnosis, evaluation of the extent of cancer spread at the time
116	of diagnosis, or administration of all or any part of the first
117	course of therapy for the most recent annual reporting period
118	available. Cases relating to patients enrolled in institutional
119	or investigator-initiated interventional clinical trials shall
120	be weighted at 1.2 relative to other cases weighted at 1.0.
121	Determination of institutional or investigator-initiated
122	interventional clinical trials must be consistent with reporting
123	guidelines provided by the NCI.
124	(4) Tier designations and corresponding weights within the
125	Florida Consortium of National Cancer Institute Centers Program
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126 are as follows: 127 (a) Tier 1: Florida-based NCI-designated comprehensive cancer centers, which shall be weighted at 1.5. 128 129 (b) Tier 2: Florida-based NCI-designated cancer centers, 130 which shall be weighted at 1.25. 131 (c) Tier 3: Florida-based cancer centers seeking 132 designation as either a NCI-designated cancer center or NCI-133 designated comprehensive cancer center, which shall be weighted 134 at 1.0. 135 1. A cancer center shall meet the following minimum criteria to be considered eligible for Tier 3 designation in any 136 137 given fiscal year: 138 a. Conducting cancer-related basic scientific research and 139 cancer-related population scientific research; 140 b. Offering and providing the full range of diagnostic and 141 treatment services on site, as determined by the Commission on Cancer of the American College of Surgeons; 142 143 c. Hosting or conducting cancer-related interventional 144 clinical trials that are registered with the NCI's Clinical 145 Trials Reporting Program; 146 d. Offering degree-granting programs or affiliating with 147 universities through degree-granting programs accredited or 148 approved by a nationally recognized agency and offered through 149 the center or through the center in conjunction with another institution accredited by the Commission on Colleges of the 150

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151 Southern Association of Colleges and Schools; 152 e. Providing training to clinical trainees, medical 153 trainees accredited by the Accreditation Council for Graduate 154 Medical Education or the American Osteopathic Association, and 155 postdoctoral fellows recently awarded a doctorate degree; and 156 f. Having more than \$5 million in annual direct costs 157 associated with their total NCI peer-reviewed grant funding. 158 2. The General Appropriations Act or accompanying 159 legislation may limit the number of cancer centers which shall 160 receive Tier 3 designations or provide additional criteria for 161 such designation. 162 3. A cancer center's participation in Tier 3 shall be 163 limited to 5 years. 164 4. A cancer center that qualifies as a designated Tier 3 165 center under the criteria provided in subparagraph 1. by July, 166 1, 2014, is authorized to pursue NCI designation as a cancer 167 center or a comprehensive cancer center for 5 years after 168 qualification. 169 (5) The department shall use the following formula to calculate a participating cancer center's allocation fraction: 170 171 172 $CAF = [0.4 \times (CRC \div TCRC)] + [0.3 \times (CPC \div TCPC)] + [0.3 \times (CBE \div TCBE)]$ 173 174 Where: 175 CAF=A cancer center's allocation fraction. Page 7 of 10

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176 CRC=A cancer center's tier-weighted reportable cases. 177 TCRC=The total tier-weighted reportable cases for all 178 cancer centers. 179 CPC=A cancer center's tier-weighted peer-review costs. 180 TCPC=The total tier-weighted peer-review costs for all 181 cancer centers. CBE=A cancer center's tier-weighted biomedical education 182 183 and training. 184 TCBE=The total tier-weighted biomedical education and 185 training for all cancer centers. 186 187 (6) A cancer center's annual allocation shall be calculated by multiplying the funds appropriated for the Florida 188 189 Consortium of National Cancer Institute Centers Program in the 190 General Appropriations Act by that cancer center's allocation 191 fraction. If the calculation results in an annual allocation that is less than \$16 million, that cancer center's annual 192 193 allocation shall be increased to a sum equaling \$16 million, 194 with the additional funds being provided proportionally from the 195 annual allocations calculated for the other participating cancer 196 centers. 197 (7) Beginning July 1, 2017, and every 3 years thereafter, 198 the department, in conjunction with participating cancer 199 centers, shall submit a report to the Cancer Control and Research Advisory Council on specific metrics relating to cancer 200

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mortality and external funding for cancer-related research in

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202 the state. If a cancer center does not endorse this report or 203 produce an equivalent independent report, the cancer center 204 shall be suspended from the program for 1 year. The report must 205 include: 206 (a) An analysis of trending age-adjusted cancer mortality 207 rates in the state, which must include, at a minimum, overall 208 age-adjusted mortality rates for cancer statewide and age-209 adjusted mortality rates by age group, geographic region, and type of cancer, which must include, at a minimum: 210 211 1. Lung cancer. 212 2. Pancreatic cancer. 213 3. Sarcoma. 214 4. Melanoma. 215 5. Leukemia and myelodysplastic syndromes. 216 6. Brain cancer. 217 (b) Identification of trends in overall federal funding, broken down by institutional source, for cancer-related research 218 219 in the state. 220 (c) A list and narrative description of collaborative 221 grants and interinstitutional collaboration among participating 222 cancer centers, a comparison of collaborative grants in 223 proportion to the grant totals for each cancer center, a 224 catalogue of retreats and progress seed grants using state 225 funds, and targets for collaboration in the future and reports

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226	on progress regarding such targets where appropriate.
227	(8) This section is subject to annual appropriation by the
228	Legislature.
229	(9) The department may adopt rules to administer this
230	section.
231	Section 4. This act shall take effect July 1, 2014.

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