

By Senator Gaetz

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1                                   A bill to be entitled  
2       An act relating to cancer research and control;  
3       amending s. 20.435, F.S.; changing the carryforward  
4       period of certain funds of the Biomedical Research  
5       Trust Fund; amending s. 215.5602, F.S.; modifying the  
6       terms and membership and establishing a staggered  
7       membership for appointed members of the Biomedical  
8       Research Advisory Council; authorizing the council to  
9       recommend a portion of the allocation for the James  
10      and Esther King Biomedical Research Program for  
11      specified purposes and to develop a grant application  
12      and review mechanism; prohibiting any member of the  
13      council from participating in council or peer-review  
14      panel discussions or decisions regarding certain  
15      proposals; authorizing the Department of Health to  
16      accept and use gifts for awards under the program;  
17      amending s. 381.922, F.S.; revising the purpose of the  
18      William G. "Bill" Bankhead, Jr., and David Coley  
19      Cancer Research Program; revising the types of  
20      applications considered for funding; authorizing the  
21      Biomedical Research Advisory Council to recommend a  
22      portion of the allocation for the program for  
23      specified purposes and to develop a grant application  
24      and review mechanism; prohibiting any member of the  
25      council from participating in council or panel  
26      discussions or decisions regarding certain proposals;  
27      requiring the department to submit to the Governor and  
28      Legislature a report by a specified date; authorizing  
29      the Department of Health to accept and use gifts for

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30 awards under the program; creating s. 381.923, F.S.;

31 creating the Florida Comprehensive Cancer Control Act;

32 providing legislative intent; providing definitions;

33 creating the Florida Cancer Control and Resource

34 Advisory Council; providing membership of the council;

35 providing the composition of the executive committee

36 of the council; providing for terms of the council and

37 meetings; providing for reimbursement for per diem and

38 travel expenses; prohibiting a member of the council

39 from participating in any discussion or decision to

40 recommend any type of award or contract to any

41 qualified nonprofit association or to any agency of

42 this state or a political subdivision of the state

43 with which the member is associated as an employee or

44 as a member of the governing body or with which the

45 member has entered into a contractual arrangement;

46 providing the duties and responsibilities of the

47 council; requiring the council to report findings and

48 recommendations to the Governor, the Legislature, and

49 the State Surgeon General; requiring the council to

50 develop or purchase written summaries regarding

51 medically viable treatment alternatives for the

52 management of breast cancer and prostate cancer;

53 providing requirements for the written summaries;

54 requiring the council to develop and implement

55 education programs regarding early detection and

56 treatment of breast cancer and prostate cancer;

57 requiring that the H. Lee Moffitt Cancer Center and

58 Research Institute, Inc., provide an executive

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59 director for the council; authorizing the Department  
60 of Health to adopt rules to administer s. 381.923,  
61 F.S.; requiring the department to produce the Florida  
62 Cancer Plan in consultation with the council; creating  
63 the Cancer Control Collaborative Program within the  
64 Department of Health; providing the responsibility and  
65 mission of the program; requiring the department to  
66 appoint a director; providing duties for each regional  
67 cancer control collaborative; requiring the  
68 collaborative program to submit to the council an  
69 annual report by a specified date; requiring the  
70 program to serve as the infrastructure for expansion  
71 or adaption as federal programs or other opportunities  
72 arise for future cancer control initiatives; amending  
73 ss. 458.324 and 459.0125, F.S.; conforming cross-  
74 references; repealing s. 1004.435, F.S., relating to  
75 cancer control and research; providing an effective  
76 date.

77  
78 Be It Enacted by the Legislature of the State of Florida:

79  
80 Section 1. Paragraph (c) of subsection (8) of section  
81 20.435, Florida Statutes, is amended to read:

82 20.435 Department of Health; trust funds.—The following  
83 trust funds shall be administered by the Department of Health:

84 (8) Biomedical Research Trust Fund.

85 (c) Notwithstanding s. 216.301 and pursuant to s. 216.351,  
86 any balance of any appropriation from the Biomedical Research  
87 Trust Fund which is not disbursed but which is obligated

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88 pursuant to contract or committed to be expended may be carried  
89 forward for up to 5 ~~3~~ years after ~~following~~ the effective date  
90 of the original appropriation.

91 Section 2. Subsections (2), (3), (5), and (7) of section  
92 215.5602, Florida Statutes, are amended, and subsection (13) is  
93 added to that section, to read:

94 215.5602 James and Esther King Biomedical Research  
95 Program.—

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

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

107 (a) The council shall consist of 12 ~~11~~ members, including:  
108 the chief executive officer of the Florida Division of the  
109 American Cancer Society, or a designee; the chief executive  
110 officer of the Greater Southeast Florida/Puerto Rico Affiliate  
111 of the American Heart Association, or a designee; ~~and~~ the chief  
112 executive officer of the American Lung Association of Florida,  
113 or a designee; and the chief executive officer of BioFlorida, or  
114 a designee. The remaining 8 members of the council shall be  
115 appointed as follows:

116 1. The Governor shall appoint four members, two members

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117 with expertise in the field of biomedical research, one member  
118 from a research university in the state, and one member  
119 representing the general population of the state.

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

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

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

141 (b) The council shall adopt internal organizational  
142 procedures as necessary for its efficient organization.

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

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146 (d) Members of the council shall serve without  
147 compensation, but may receive reimbursement as provided in s.  
148 112.061 for travel and other necessary expenses incurred in the  
149 performance of their official duties.

150 (5) (a) Applications for biomedical research funding under  
151 the program may be submitted from any university or established  
152 research institute in the state. All qualified investigators in  
153 the state, regardless of institution affiliation, shall have  
154 equal access and opportunity to compete for the research  
155 funding.

156 (b) Grants and fellowships shall be awarded by the State  
157 Surgeon General, after consultation with the council, on the  
158 basis of scientific merit, as determined by an open competitive  
159 peer review process that ensures objectivity, consistency, and  
160 high quality. The following types of applications shall be  
161 considered for funding:

- 162 1. Investigator-initiated research grants.
- 163 2. Institutional research and training grants.
- 164 3. Predoctoral and postdoctoral research fellowships.

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

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175 reviewing research proposals prescribed in subsection (6);  
176 however, such mechanism must ensure a fair and rigorous analysis  
177 of the merit of any proposals considered under this paragraph.

178 (7) The council and the peer review panel shall establish  
179 and follow rigorous guidelines for ethical conduct and adhere to  
180 a strict policy with regard to conflict of interest. A member of  
181 the council or panel may not participate in any council or panel  
182 discussion or decision with respect to a research proposal, or  
183 any proposal related to those projects contemplated in paragraph  
184 (5) (c), by any firm, entity, or agency with which the member is  
185 associated as a member of the governing body or as an employee,  
186 or with which the member has entered into a contractual  
187 arrangement. Meetings of the council and the peer review panels  
188 shall be subject to the provisions of chapter 119, s. 286.011,  
189 and s. 24, Art. I of the State Constitution.

190 (13) The Department of Health may accept gifts made  
191 unconditionally by will or otherwise, deposit them into the  
192 Biomedical Research Trust Fund, and use them for grant or  
193 fellowship awards in the program. Any gift made under conditions  
194 that, in the judgment of the department, upon consultation with  
195 the council, are proper and consistent with this section, the  
196 laws of the United States, and state law, may be accepted and  
197 shall be held, invested, reinvested, and used in accordance with  
198 the conditions of the gift.

199 Section 3. Section 381.922, Florida Statutes, is amended to  
200 read:

201 381.922 William G. "Bill" Bankhead, Jr., and David Coley  
202 Cancer Research Program.—

203 (1) The William G. "Bill" Bankhead, Jr., and David Coley

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204 Cancer Research Program, which may be otherwise cited as the  
205 "Bankhead-Coley Program," is created within the Department of  
206 Health. The purpose of the program shall be to advance progress  
207 towards cures for cancer using ~~through~~ grants awarded through a  
208 peer-reviewed, competitive process and to expand cancer research  
209 and treatment capacity in this state.

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

218 (a) Emphasis shall be given to the following goals, as  
219 those goals support the advancement of such cures:

220 1. Efforts to significantly expand cancer research capacity  
221 in the state by:

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

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

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

231 d. Encouraging the employment of bioinformatics in order to  
232 create a cancer informatics infrastructure that enhances



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233 information and resource exchange and integration through  
234 researchers working in diverse disciplines, to facilitate the  
235 full spectrum of cancer investigations;

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

239 f. Aiding in other multidisciplinary research-support  
240 activities as they inure to the advancement of cancer research.

241 2. Efforts to improve both research and treatment through  
242 greater participation in clinical trials networks by:

243 a. Identifying ways to increase adult enrollment in cancer  
244 clinical trials;

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

248 c. Providing tools to cancer patients and community-based  
249 oncologists to aid in the identification of cancer clinical  
250 trials available in the state; and

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

254 3. Efforts to reduce the impact of cancer on disparate  
255 groups by:

256 a. Identifying those cancers that disproportionately impact  
257 certain demographic groups; and

258 b. Building collaborations designed to reduce health  
259 disparities as they relate to cancer.

260 (b) Preference may be given to grant proposals that foster  
261 collaborations among institutions, researchers, and community

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262 practitioners, as such proposals support the advancement of  
263 cures through basic or applied research, including clinical  
264 trials involving cancer patients and related networks and the  
265 transfer of knowledge gained from research into the practice of  
266 community practitioners.

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

280 1. Investigator-initiated research grants.

281 2. Institutional research and training grants.

282 3. Predoctoral and postdoctoral research fellowships.

283 4.3. Collaborative research grants, including those that  
284 advance the finding of cures through basic or applied research.

285 5. Clinical trial project grants, particularly those  
286 projects such as matching services that identify prospective  
287 clinical trials treatment options for cancer patients in this  
288 state or those projects that otherwise foster greater rates of  
289 participation in trials. At least one such grant shall be  
290 awarded in any given year if a meritorious proposal or proposals

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291 are received. Such project grant proposals are not required to  
292 be posed as a research question in order to qualify for an  
293 award.

294 (b) For any given year, the council may recommend up to  
295 one-third of the allocation for grants by the program for the  
296 recruitment of cancer researchers and research teams to  
297 institutions in the state, for operational start-up grants for  
298 newly recruited cancer researchers and research teams, or for  
299 equipment expenditures related to the expansion of cancer  
300 research and treatment capacity in the state. For the purposes  
301 of implementing this paragraph, the council may develop a grant  
302 application and review mechanism other than the process for  
303 reviewing research proposals prescribed in paragraph (c);  
304 however, such mechanism shall ensure a fair and rigorous  
305 analysis of the merit of any proposals considered under this  
306 paragraph.

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

316 (d)~~(e)~~ The council and the peer review panel shall  
317 establish and follow rigorous guidelines for ethical conduct and  
318 adhere to a strict policy with regard to conflicts of interest.  
319 A member of the council or panel may not participate in any

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320 council or panel discussion or decision with respect to a  
321 research proposal, or any proposal related to those projects  
322 contemplated in paragraph (b), by any firm, entity, or agency  
323 with which the member is associated as a member of the governing  
324 body or as an employee or with which the member has entered into  
325 a contractual arrangement. Meetings of the council and the peer  
326 review panels are subject to chapter 119, s. 286.011, and s. 24,  
327 Art. I of the State Constitution.

328 (4) By February 1 ~~December 15~~ of each year, the council  
329 ~~Department of Health~~ shall submit to the Governor, the President  
330 of the Senate, and the Speaker of the House of Representatives a  
331 report indicating progress towards the program's mission and  
332 making recommendations that further its purpose.

333 (5) The ~~William G. "Bill" Bankhead, Jr., and David Coley~~  
334 ~~Cancer Research~~ program is funded pursuant to s. 215.5602(12).  
335 Funds appropriated for the ~~William G. "Bill" Bankhead, Jr., and~~  
336 ~~David Coley Cancer Research~~ program shall be distributed  
337 pursuant to this section to provide grants to researchers  
338 seeking cures for cancer and cancer-related illnesses, with  
339 emphasis given to the goals enumerated in this section. From the  
340 total funds appropriated, an amount of up to 10 percent may be  
341 used for administrative expenses. From funds appropriated to  
342 accomplish the goals of this section, up to \$250,000 shall be  
343 available for the operating costs of the Florida Center for  
344 Universal Research to Eradicate Disease.

345 (6) The Department of Health may accept gifts made  
346 unconditionally by will or otherwise, deposit them into the  
347 Biomedical Research Trust Fund, and use them for grant or  
348 fellowship awards in the program. Any gift made under conditions

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349 that, in the judgment of the department, upon consultation with  
350 the council, are proper and consistent with this section, the  
351 laws of the United States, and state law, may be accepted and  
352 shall be held, invested, reinvested, and used in accordance with  
353 the conditions of the gift.

354 Section 4. Section 381.923, Florida Statutes, is created to  
355 read:

356 381.923 Comprehensive Cancer Control.-

357 (1) SHORT TITLE.-This section may be cited as the "Florida  
358 Comprehensive Cancer Control Act."

359 (2) LEGISLATIVE INTENT.-It is the finding of the  
360 Legislature that:

361 (a) Advances in scientific knowledge have led to  
362 prevention, early detection, and therapeutic capabilities in the  
363 control of cancer. Such knowledge, screening technologies, and  
364 therapies must be made available to all residents of this state.

365 (b) Research shows that certain lifestyles and exposures,  
366 such as tobacco use, exposure to ultraviolet radiation from the  
367 sun, and exposure to occupational and environmental carcinogens,  
368 contribute to the risk for many types of cancer and that certain  
369 screening tests are effective in diagnosing cancer early when it  
370 is more treatable. The role of diet, exercise, and other healthy  
371 lifestyles are also important in cancer prevention and control.  
372 Proven causes of cancer and methods for early detection should  
373 be publicized and be the subject of linguistically and  
374 culturally appropriate educational and awareness programs for  
375 the prevention of cancer.

376 (c) An effective cancer control program would mobilize the  
377 scientific, educational, and medical resources that presently

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378 exist into an intense attack against this dreaded disease, with  
379 the primary goal to reduce the cancer burden for the residents  
380 of this state.

381 (3) DEFINITIONS.—As used in this section, the term:

382 (a) "Cancer" means all malignant neoplasms, regardless of  
383 the tissue of origin, including lymphoma and leukemia.

384 (b) "Council" means the Florida Cancer Control and Resource  
385 Advisory Council.

386 (c) "Department" means the Department of Health.

387 (d) "Plan" means the Florida Cancer Plan.

388 (e) "Program" means the Florida Cancer Control  
389 Collaborative Program.

390 (f) "Qualified nonprofit association" means any  
391 association, incorporated or unincorporated, which has received  
392 tax-exempt status from the Internal Revenue Service.

393 (4) FLORIDA CANCER CONTROL AND RESOURCE ADVISORY COUNCIL;  
394 CREATION; COMPOSITION.—

395 (a) There is created within the H. Lee Moffitt Cancer  
396 Center and Research Institute, Inc., the Florida Cancer Control  
397 and Resource Advisory Council, which is an advisory body  
398 appointed to function on a continuing basis to recommend  
399 solutions and policy alternatives to the Governor, members of  
400 the Legislature, the State Surgeon General, and other  
401 policymakers. The council shall consist of cancer organizational  
402 representation and cancer control stakeholders, with a  
403 chairperson elected by the council membership for a term of 2  
404 years. Each council member must be a resident of this state. The  
405 Governor shall appoint three members representing the general  
406 public, with the initial appointments being for terms of 1 year,

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407 2 years, and 3 years, respectively, beginning July 1, 2012.  
408 Thereafter, gubernatorial appointments to the council shall be  
409 for terms of 3 years. The President of the Senate and the  
410 Speaker of the House of Representatives shall each appoint one  
411 member from his or her legislative body to serve on the council  
412 at any given time. Each of the following organizations shall  
413 designate a representative to serve on the council:

414 1. H. Lee Moffitt Cancer Center and Research Institute,  
415 Inc.

416 2. University of Florida Shands Cancer Center.

417 3. University of Miami Sylvester Comprehensive Cancer  
418 Center.

419 4. Mayo Clinic, Florida.

420 5. M.D. Anderson Cancer Center, Florida.

421 6. American Cancer Society, Florida Division.

422 7. American Lung Association of the Southeast.

423 8. American Association for Retired Persons.

424 9. Department of Health.

425 10. Department of Education.

426 11. Florida Tumor Registrars Association.

427 12. Florida Cancer Data System.

428 13. Florida Society of Oncology Social Workers.

429 14. Florida Oncology Nurses Society.

430 15. Florida Society of Clinical Oncology.

431 16. Florida Association of Pediatric Tumor Programs, Inc.

432 17. Florida Medical Association.

433 18. Florida Hospital Association.

434 19. Florida Nursing Association.

435 20. Florida Dental Association.

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- 436       21. Florida Osteopathic Association.  
437       22. University of Florida College of Medicine.  
438       23. Florida Academy of Family Physicians.  
439       24. University of Miami College of Medicine.  
440       25. University of South Florida College of Medicine.  
441       26. Florida State University College of Medicine.  
442       27. University of Central Florida College of Medicine.  
443       28. Nova Southeastern College of Osteopathic Medicine.  
444       29. Florida International University College of Medicine.  
445       30. Lake Erie School of Osteopathic Medicine.  
446       31. Biomedical Research Advisory Council.  
447       32. Center for Universal Research to Eradicate Disease.  
448       33. A representative from each of the regional cancer  
449 control collaboratives.

450       (b) An executive committee, which shall be responsible for  
451 coordinating the activities and planning the direction of the  
452 full council, shall be comprised of the council's elected  
453 chairperson, one at-large member elected by the full council,  
454 and the members representing the Department of Health, the  
455 American Cancer Society, the H. Lee Moffitt Cancer Center and  
456 Research Institute, Inc., the University of Florida Shands  
457 Cancer Center, and the University of Miami Sylvester  
458 Comprehensive Cancer Center, as well as the appointee of the  
459 President of the Senate, the appointee of the Speaker of the  
460 House of Representatives, and one of the gubernatorial  
461 appointees, who shall be designated by the council's  
462 chairperson. If the council chairperson is a designee of one of  
463 the entities named in this paragraph, the full council shall  
464 elect a second at-large position to serve on the executive



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465 committee. The elected positions on the executive committee  
466 shall be for terms of 2 years.

467 (c) The council shall meet at least semiannually. A  
468 majority of members shall constitute a quorum for the purpose of  
469 exercising all of the powers of the council.

470 (d) The council members shall serve without compensation,  
471 but are entitled to reimbursement for per diem and travel  
472 expenses as provided in s. 112.061.

473 (e) A member of the council may not participate in any  
474 council discussion or decision to recommend any type of award or  
475 contract to any qualified nonprofit association or to any agency  
476 of this state or a political subdivision of the state with which  
477 the member is associated as an employee or as a member of the  
478 governing body or with which the member has entered into a  
479 contractual arrangement.

480 (f) The council may prescribe, amend, and repeal bylaws  
481 governing the manner in which the business of the council is  
482 conducted.

483 (g) The council shall advise the Governor, the Legislature,  
484 the State Surgeon General, and other state policymakers with  
485 respect to cancer control and resources in this state.

486 (h) The council shall approve a plan for cancer control, to  
487 be known as the "Florida Cancer Control Plan," which shall be  
488 consistent to the extent possible with other cancer or health-  
489 related state plans and integrated and coordinated with existing  
490 programs in this state. The council shall review and approve the  
491 plan at least every 2 years.

492 (i) The council shall formulate and recommend to the  
493 Governor, the Legislature, the State Surgeon General, and other

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494 state policymakers a plan for the prevention and early detection  
495 of cancer which is evidence-based and consistent with standards  
496 of practice and supported by evidence-based medicine. The State  
497 Surgeon General and other state policymakers shall consider the  
498 plan in developing departmental priorities and funding  
499 priorities and standards under chapter 385.

500 (j) The council shall provide expertise, input, and  
501 recommendations regarding the content and development of the  
502 Florida Cancer Plan and the coordination and integration of  
503 other state plans concerning cancer control.

504 (k) The council may establish committees to develop  
505 strategies for taking action regarding:

506 1. Cancer plan evaluation, including the creation of a  
507 tumor registry, data retrieval systems, and the epidemiology of  
508 cancer in the state.

509 2. Cancer prevention.

510 3. Cancer detection.

511 4. Cancer treatments.

512 5. Support services for cancer patients and caregivers.

513 6. Cancer education for laypersons and professionals.

514 7. Other cancer-control-related topics.

515 (l) The council shall advise the State Surgeon General on  
516 methods of enforcing and implementing laws already enacted that  
517 relate to cancer control.

518 (m) The council may recommend to the State Surgeon General  
519 rules consistent with law as it may deem necessary for the  
520 performance of its duties and the proper administration of this  
521 section.

522 (n) The council shall be physically located at the H. Lee

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523 Moffitt Cancer Center and Research Institute, Inc.

524 (o) By December 1 of each year, the council shall report  
525 its findings and recommendations to the Governor, the President  
526 of the Senate, the Speaker of the House of Representatives, and  
527 the State Surgeon General.

528 (p) Subject to specific appropriations by the Legislature,  
529 the council shall develop or purchase standardized written  
530 summaries, written in language easily understood by the average  
531 adult, to inform persons who have or who are at high risk of  
532 being diagnosed with breast cancer or who have prostate cancer  
533 or are considering prostate cancer screening of the medically  
534 viable treatment alternatives available to effectively manage  
535 breast cancer or prostate cancer; describe treatment options;  
536 and explain the advantages, disadvantages, and risks associated  
537 with each treatment option. The summaries shall be printed in  
538 the form of a pamphlet or booklet and made continuously  
539 available to physicians and surgeons in the state for their use  
540 in accordance with s. 458.324 and to osteopathic physicians in  
541 this state for their use in accordance with s. 459.0125. The  
542 council shall periodically update both summaries to reflect  
543 current standards of medical practice in the treatment of breast  
544 cancer and prostate cancer.

545 (q) Subject to specific appropriations by the Legislature,  
546 the council shall develop and implement educational programs,  
547 including distribution of the summaries developed or purchased  
548 under paragraph (p), to inform citizen groups, associations, and  
549 voluntary organizations about early detection and treatment of  
550 breast cancer and prostate cancer.

551 (5) RESPONSIBILITIES OF THE H. LEE MOFFITT CANCER CENTER

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552 AND RESEARCH INSTITUTE, INC., AND THE DEPARTMENT OF HEALTH.—

553 (a) The H. Lee Moffitt Cancer Center and Research  
554 Institute, Inc., shall provide a full-time executive director to  
555 coordinate, facilitate, and communicate the mission and  
556 responsibilities of the council. Additional administrative  
557 support, information, and other assistance shall also be  
558 provided as reasonably necessary for the completion of the  
559 responsibilities of the council.

560 (b) The Department of Health, after consultation with the  
561 council, may adopt rules necessary to administer this section.

562 (c) The Florida Cancer Plan is established within the  
563 Department of Health. The department shall consult with the  
564 council in developing the plan, prioritizing goals, and  
565 allocating resources.

566 (6) FLORIDA CANCER CONTROL COLLABORATIVE PROGRAM; CREATION;  
567 COMPOSITION.—

568 (a) The Cancer Control Collaborative Program is established  
569 within the Department of Health and resides within the William  
570 G. "Bill" Bankhead, Jr., and David Coley Cancer Research  
571 Program. The program is responsible for overseeing and providing  
572 infrastructure for the state cancer collaborative network. The  
573 primary mission of the program is to implement the plan's  
574 initiatives and identify and facilitate the local development of  
575 solutions to cancer control needs of the populations served by  
576 the regional cancer control collaboratives. The program shall  
577 prioritize programs and resources to reduce the burden of cancer  
578 in this state, consistent with the plan.

579 (b) The department shall appoint a director, who is  
580 responsible for supervising the program, and provide, at a

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581 minimum, centralized organization, communications, information  
582 technology, shared resources, and cancer control expertise to  
583 the regional cancer control collaboratives.

584 (c) Each regional cancer control collaborative shall bring  
585 together local cancer stakeholders, develop bylaws, identify and  
586 prioritize cancer control needs of its region, and develop  
587 solutions to solve problems, consistent with the plan and the  
588 goal of reducing the burden of cancer in this state. Each  
589 collaborative shall meet at least semiannually and send  
590 representation to the council meetings.

591 (d) By October 15 of each year, the program shall submit an  
592 annual report to the council. The council shall have input into  
593 the prioritization of programs and proposed allocation of  
594 resources in the program consistent with the plan.

595 (e) The program shall serve as the infrastructure for  
596 expansion or adaptation as federal programs or other  
597 opportunities arise for future cancer control initiatives. The  
598 development of the infrastructure for local cancer control  
599 collaboratives, to the extent possible, shall be designed to  
600 leverage opportunities for funding from the United States  
601 Centers for Disease Control and Prevention or other federal  
602 sources.

603 Section 5. Subsection (1) and paragraph (a) of subsection  
604 (2) of section 458.324, Florida Statutes, are amended to read:  
605 458.324 Breast cancer; information on treatment  
606 alternatives.—

607 (1) DEFINITION.—As used in this section, the term  
608 “medically viable,” as applied to treatment alternatives, means  
609 modes of treatment generally considered by the medical

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610 profession to be within the scope of current, acceptable  
611 standards, including treatment alternatives described in the  
612 written summary prepared by the Florida Cancer Control and  
613 Resource ~~Research~~ Advisory Council in accordance with s.  
614 381.923(4)(o) ~~1004.435(4)(m)~~.

615 (2) COMMUNICATION OF TREATMENT ALTERNATIVES.—Each physician  
616 treating a patient who is, or in the judgment of the physician  
617 is at high risk of being, diagnosed as having breast cancer  
618 shall inform such patient of the medically viable treatment  
619 alternatives available to such patient; shall describe such  
620 treatment alternatives; and shall explain the relative  
621 advantages, disadvantages, and risks associated with the  
622 treatment alternatives to the extent deemed necessary to allow  
623 the patient to make a prudent decision regarding such treatment  
624 options. In compliance with this subsection:

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

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

628 2. Provide the patient or the patient's legal  
629 representative with a copy of the written summary prepared in  
630 accordance with s. 381.923(4)(o) ~~1004.435(4)(m)~~ and express a  
631 willingness to discuss the summary with the patient or the  
632 patient's legal representative; or

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

637  
638 Nothing in this subsection shall reduce other provisions of law

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639 regarding informed consent.

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

642 459.0125 Breast cancer; information on treatment  
643 alternatives.—

644 (1) DEFINITION.—As used in this section, the term  
645 “medically viable,” as applied to treatment alternatives, means  
646 modes of treatment generally considered by the medical  
647 profession to be within the scope of current, acceptable  
648 standards, including treatment alternatives described in the  
649 written summary prepared by the Florida Cancer Control and  
650 Resource Research ~~Research~~ Advisory Council in accordance with s.  
651 381.923(4)(o) ~~1004.435(4)(m)~~.

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

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

- 663 1. Orally communicate such information directly to the  
664 patient or the patient’s legal representative;
- 665 2. Provide the patient or the patient’s legal  
666 representative with a copy of the written summary prepared in  
667 accordance with s. 381.923(4)(o) ~~1004.435(4)(m)~~ and express her

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668 or his willingness to discuss the summary with the patient or  
669 the patient's legal representative; or

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

674

675 Nothing in this subsection shall reduce other provisions of law  
676 regarding informed consent.

677 Section 7. Section 1004.435, Florida Statutes, is repealed.

678 Section 8. This act shall take effect July 1, 2011.