

Amendment No.

CHAMBER ACTION

Senate

House

.

The Conference Committee on HB 5203 offered the following:

Conference Committee Amendment (with title amendment)

Remove everything after the enacting clause and insert:

Section 1. Paragraph (a) of subsection (8) of section 20.435, Florida Statutes, is amended to read:

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

(8) Biomedical Research Trust Fund.

(a) Funds to be credited to the trust fund shall consist of funds deposited pursuant to s. 215.5601 and any other funds appropriated by the Legislature. Funds shall be used for the purposes of the James and Esther King Biomedical Research Program, the Florida Consortium of National Cancer Institute

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

15 Centers Program, and the William G. "Bill" Bankhead, Jr., and
16 David Coley Cancer Research Program as specified in ss.
17 215.5602, 288.955, 381.915, and 381.922. The trust fund is
18 exempt from the service charges imposed by s. 215.20.

19 Section 2. Paragraph (a) of subsection (12) of section
20 215.5602, Florida Statutes, is amended to read:

21 215.5602 James and Esther King Biomedical Research
22 Program.—

23 (12) (a) Beginning in the 2011-2012 fiscal year and
24 thereafter, \$25 million from the revenue deposited into the
25 Health Care Trust Fund pursuant to ss. 210.011(9) and 210.276(7)
26 shall be reserved for research of tobacco-related or cancer-
27 related illnesses. Of the revenue deposited in the Health Care
28 Trust Fund pursuant to this section, \$25 million shall be
29 transferred to the Biomedical Research Trust Fund within the
30 Department of Health. Subject to annual appropriations in the
31 General Appropriations Act, \$5 million shall be appropriated to
32 the James and Esther King Biomedical Research Program, \$5
33 million shall be appropriated to the William G. "Bill" Bankhead,
34 Jr., and David Coley Cancer Research Program created under s.
35 381.922, ~~\$5 million shall be appropriated to the H. Lee Moffitt~~
36 ~~Cancer Center and Research Institute established under s.~~
37 ~~1004.43, \$5 million shall be appropriated to the Sylvester~~
38 ~~Comprehensive Cancer Center of the University of Miami, and \$5~~
39 ~~million shall be appropriated to the Shands Cancer Hospital.~~

40 Section 3. Section 381.915, Florida Statutes, is created

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

41 to read:

42 381.915 Florida Consortium of National Cancer Institute
43 Centers Program.—

44 (1) This section may be cited as the "Florida NCI Cancer
45 Centers Act."

46 (2) The Florida Consortium of National Cancer Institute
47 Centers Program is established to enhance the quality and
48 competitiveness of cancer care in this state, further a
49 statewide biomedical research strategy directly responsive to
50 the health needs of Florida's citizens, and capitalize on the
51 potential educational opportunities available to its students.
52 The department shall make payments to Florida-based cancer
53 centers recognized by the National Cancer Institute (NCI) at the
54 National Institutes of Health as NCI-designated cancer centers
55 or NCI-designated comprehensive cancer centers, and cancer
56 centers working toward achieving NCI designation. The department
57 shall distribute funds to participating cancer centers on a
58 quarterly basis during each fiscal year for which an
59 appropriation is made.

60 (3) On or before September 15 of each year, the department
61 shall calculate an allocation fraction to be used for
62 distributing funds to participating cancer centers. On or before
63 the final business day of each quarter of the state fiscal year,
64 the department shall distribute to each participating cancer
65 center one-fourth of that cancer center's annual allocation
66 calculated under subsection (6). The allocation fraction for

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

67 each participating cancer center is based on the cancer center's
68 tier-designated weight under subsection (4) multiplied by each
69 of the following allocation factors: number of reportable cases,
70 peer-review costs, and biomedical education and training. As
71 used in this section, the term:

72 (a) "Biomedical education and training" means instruction
73 that is offered to a student who is enrolled in a biomedical
74 research program at an affiliated university as a medical
75 student or a student in a master's or doctoral degree program,
76 or who is a resident physician trainee or postdoctoral trainee
77 in such program. An affiliated university biomedical research
78 program must be accredited or approved by a nationally
79 recognized agency and offered through an institution accredited
80 by the Commission on Colleges of the Southern Association of
81 Colleges and Schools. Full-time equivalency for trainees shall
82 be prorated for training received in oncologic sciences and
83 oncologic medicine.

84 (b) "Cancer center" means a freestanding center, a center
85 situated within an academic institution, or a formal research-
86 based consortium under centralized leadership that has achieved
87 NCI designation or is prepared to achieve NCI designation by
88 July 1, 2019.

89 (c) "Florida-based" means that a cancer center's actual or
90 sought designated status is or would be recognized by the NCI as
91 primarily located in Florida and not in another state.

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

92 (d) "Peer-review costs" means the total annual direct
93 costs for peer-reviewed cancer-related research projects,
94 consistent with reporting guidelines provided by the NCI, for
95 the most recent annual reporting period available.

96 (e) "Reportable cases" means cases of cancer in which a
97 cancer center is involved in the diagnosis, evaluation of the
98 diagnosis, evaluation of the extent of cancer spread at the time
99 of diagnosis, or administration of all or any part of the first
100 course of therapy for the most recent annual reporting period
101 available. Cases relating to patients enrolled in institutional
102 or investigator-initiated interventional clinical trials shall
103 be weighted at 1.2 relative to other cases weighted at 1.0.
104 Determination of institutional or investigator-initiated
105 interventional clinical trials must be consistent with reporting
106 guidelines provided by the NCI.

107 (4) Tier designations and corresponding weights within the
108 Florida Consortium of National Cancer Institute Centers Program
109 are as follows:

110 (a) Tier 1: Florida-based NCI-designated comprehensive
111 cancer centers, which shall be weighted at 1.5.

112 (b) Tier 2: Florida-based NCI-designated cancer centers,
113 which shall be weighted at 1.25.

114 (c) Tier 3: Florida-based cancer centers seeking
115 designation as either a NCI-designated cancer center or NCI-
116 designated comprehensive cancer center, which shall be weighted
117 at 1.0.

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

118 1. A cancer center shall meet the following minimum
119 criteria to be considered eligible for Tier 3 designation in any
120 given fiscal year:

121 a. Conducting cancer-related basic scientific research and
122 cancer-related population scientific research;

123 b. Offering and providing the full range of diagnostic and
124 treatment services on site, as determined by the Commission on
125 Cancer of the American College of Surgeons;

126 c. Hosting or conducting cancer-related interventional
127 clinical trials that are registered with the NCI's Clinical
128 Trials Reporting Program;

129 d. Offering degree-granting programs or affiliating with
130 universities through degree-granting programs accredited or
131 approved by a nationally recognized agency and offered through
132 the center or through the center in conjunction with another
133 institution accredited by the Commission on Colleges of the
134 Southern Association of Colleges and Schools;

135 e. Providing training to clinical trainees, medical
136 trainees accredited by the Accreditation Council for Graduate
137 Medical Education or the American Osteopathic Association, and
138 postdoctoral fellows recently awarded a doctorate degree; and

139 f. Having more than \$5 million in annual direct costs
140 associated with their total NCI peer-reviewed grant funding.

141 2. The General Appropriations Act or accompanying
142 legislation may limit the number of cancer centers which shall

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

143 receive Tier 3 designations or provide additional criteria for
144 such designation.

145 3. A cancer center's participation in Tier 3 shall be
146 limited to 5 years.

147 4. A cancer center that qualifies as a designated Tier 3
148 center under the criteria provided in subparagraph 1. by July,
149 1, 2014, is authorized to pursue NCI designation as a cancer
150 center or a comprehensive cancer center for 5 years after
151 qualification.

152 (5) The department shall use the following formula to
153 calculate a participating cancer center's allocation fraction:

154
155
$$\text{CAF} = [0.4 \times (\text{CRC} \div \text{TCRC})] + [0.3 \times (\text{CPC} \div \text{TCPC})] + [0.3 \times (\text{CBE} \div \text{TCBE})]$$

156
157 Where:

158 CAF=A cancer center's allocation fraction.

159 CRC=A cancer center's tier-weighted reportable cases.

160 TCRC=The total tier-weighted reportable cases for all
161 cancer centers.

162 CPC=A cancer center's tier-weighted peer-review costs.

163 TCPC=The total tier-weighted peer-review costs for all
164 cancer centers.

165 CBE=A cancer center's tier-weighted biomedical education
166 and training.

167 TCBE=The total tier-weighted biomedical education and
168 training for all cancer centers.

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

169
170 (6) A cancer center's annual allocation shall be
171 calculated by multiplying the funds appropriated for the Florida
172 Consortium of National Cancer Institute Centers Program in the
173 General Appropriations Act by that cancer center's allocation
174 fraction. If the calculation results in an annual allocation
175 that is less than \$16 million, that cancer center's annual
176 allocation shall be increased to a sum equaling \$16 million,
177 with the additional funds being provided proportionally from the
178 annual allocations calculated for the other participating cancer
179 centers.

180 (7) Beginning July 1, 2017, and every 3 years thereafter,
181 the department, in conjunction with participating cancer
182 centers, shall submit a report to the Cancer Control and
183 Research Advisory Council on specific metrics relating to cancer
184 mortality and external funding for cancer-related research in
185 the state. If a cancer center does not endorse this report or
186 produce an equivalent independent report, the cancer center
187 shall be suspended from the program for 1 year. The report must
188 include:

189 (a) An analysis of trending age-adjusted cancer mortality
190 rates in the state, which must include, at a minimum, overall
191 age-adjusted mortality rates for cancer statewide and age-
192 adjusted mortality rates by age group, geographic region, and
193 type of cancer, which must include, at a minimum:

194 1. Lung cancer.

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

195 2. Pancreatic cancer.

196 3. Sarcoma.

197 4. Melanoma.

198 5. Leukemia and myelodysplastic syndromes.

199 6. Brain cancer.

200 (b) Identification of trends in overall federal funding,
201 broken down by institutional source, for cancer-related research
202 in the state.

203 (c) A list and narrative description of collaborative
204 grants and interinstitutional collaboration among participating
205 cancer centers, a comparison of collaborative grants in
206 proportion to the grant totals for each cancer center, a
207 catalogue of retreats and progress seed grants using state
208 funds, and targets for collaboration in the future and reports
209 on progress regarding such targets where appropriate.

210 (8) This section is subject to annual appropriation by the
211 Legislature.

212 (9) The department may adopt rules to administer this
213 section.

214 Section 4. This act shall take effect July 1, 2014.

215

216 -----

217 **T I T L E A M E N D M E N T**

218 Remove everything before the enacting clause and insert:

219 A bill to be entitled

643063

Approved For Filing: 4/30/2014 7:36:33 PM

Amendment No.

220 An act relating to cancer centers; amending s. 20.435,
221 F.S.; authorizing funds in the Biomedical Research
222 Trust Fund to be used for the Florida Consortium of
223 National Cancer Institute Centers Program; amending s.
224 215.5602, F.S.; revising the distribution of certain
225 funds deposited into the Biomedical Research Trust
226 Fund; creating s. 381.915, F.S.; providing a short
227 title; establishing the Florida Consortium of National
228 Cancer Institute Centers Program; providing purpose;
229 requiring the Department of Health to distribute
230 funding to certain cancer centers; providing a formula
231 for determination of allocations; providing
232 definitions; providing criteria for designation of
233 tiers for cancer centers; requiring reports; providing
234 that funding is subject to annual appropriation;
235 providing rulemaking authority; providing an effective
236 date.

643063

Approved For Filing: 4/30/2014 7:36:33 PM