

A bill to be entitled

An act relating to cancer centers; amending s. 20.435, F.S.; authorizing funds in the Biomedical Research Trust Fund to be used for the Florida Consortium of National Cancer Institute Centers Program; amending ss. 210.20 and 215.5602, F.S.; revising the distribution of certain funds deposited into the Biomedical Research Trust Fund; creating s. 381.915, F.S.; providing a short title; establishing the Florida Consortium of National Cancer Institute Centers Program; providing purpose; requiring the Department of Health to distribute funding to certain cancer centers; providing a formula for determination of allocations; providing definitions; providing criteria for designation of tiers for cancer centers; requiring reports; providing that funding is subject to annual appropriation; providing rulemaking authority; providing an effective date.

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

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.

27 (a) Funds to be credited to the trust fund shall consist  
 28 of funds deposited pursuant to s. 215.5601 and any other funds  
 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 (c) of subsection (2) of section  
 37 210.20, Florida Statutes, is amended to read:

38 210.20 Employees and assistants; distribution of funds.—

39 (2) As collections are received by the division from such  
 40 cigarette taxes, it shall pay the same into a trust fund in the  
 41 State Treasury designated "Cigarette Tax Collection Trust Fund"  
 42 which shall be paid and distributed as follows:

43 (c) Beginning July 1, 2013, and continuing through June  
 44 30, 2033, the division shall from month to month certify to the  
 45 Chief Financial Officer the amount derived from the cigarette  
 46 tax imposed by s. 210.02, less the service charges provided for  
 47 in s. 215.20 and less 0.9 percent of the amount derived from the  
 48 cigarette tax imposed by s. 210.02, which shall be deposited  
 49 into the Alcoholic Beverage and Tobacco Trust Fund, specifying  
 50 an amount equal to 1 percent of the net collections, and that  
 51 amount shall be deposited into the Biomedical Research Trust  
 52 Fund in the Department of Health. ~~These funds are appropriated~~

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2014

53 ~~annually in an amount not to exceed \$3 million from the~~  
54 ~~Biomedical Research Trust Fund for the Department of Health and~~  
55 ~~the Sanford-Burnham Medical Research Institute to work in~~  
56 ~~conjunction for the purpose of establishing activities and grant~~  
57 ~~opportunities in relation to biomedical research.~~

58 Section 3. Paragraph (a) of subsection (12) of section  
59 215.5602, Florida Statutes, is amended to read:

60 215.5602 James and Esther King Biomedical Research  
61 Program.—

62 (12) (a) Beginning in the 2011-2012 fiscal year and  
63 thereafter, \$25 million from the revenue deposited into the  
64 Health Care Trust Fund pursuant to ss. 210.011(9) and 210.276(7)  
65 shall be reserved for research of tobacco-related or cancer-  
66 related illnesses. Of the revenue deposited in the Health Care  
67 Trust Fund pursuant to this section, \$25 million shall be  
68 transferred to the Biomedical Research Trust Fund within the  
69 Department of Health. Subject to annual appropriations in the  
70 General Appropriations Act, \$5 million shall be appropriated to  
71 the James and Esther King Biomedical Research Program, \$5  
72 million shall be appropriated to the William G. "Bill" Bankhead,  
73 Jr., and David Coley Cancer Research Program created under s.  
74 381.922, ~~\$5 million shall be appropriated to the H. Lee Moffitt~~  
75 ~~Cancer Center and Research Institute established under s.~~  
76 ~~1004.43, \$5 million shall be appropriated to the Sylvester~~  
77 ~~Comprehensive Cancer Center of the University of Miami, and \$5~~  
78 ~~million shall be appropriated to the Shands Cancer Hospital.~~

79 Section 4. Section 381.915, Florida Statutes, is created  
80 to read:

81 381.915 Florida Consortium of National Cancer Institute  
82 Centers Program.—

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

85 (2) The Florida Consortium of National Cancer Institute  
86 Centers Program is established to enhance the quality and  
87 competitiveness of cancer care in this state, further a  
88 statewide biomedical research strategy directly responsive to  
89 the health needs of Florida's citizens, and capitalize on the  
90 potential educational opportunities available to its students.  
91 The department shall make payments to Florida-based cancer  
92 centers recognized by the National Cancer Institute (NCI) at the  
93 National Institutes of Health as NCI-designated cancer centers  
94 or NCI-designated comprehensive cancer centers, and cancer  
95 centers working toward achieving NCI designation. The department  
96 shall distribute funds to participating cancer centers on a  
97 quarterly basis during each fiscal year for which an  
98 appropriation is made.

99 (3) On or before September 15 of each year, the department  
100 shall calculate an allocation fraction to be used for  
101 distributing funds to participating cancer centers. On or before  
102 the final business day of each quarter of the state fiscal year,  
103 the department shall distribute to each participating cancer  
104 center one-fourth of that cancer center's annual allocation

105 calculated under subsection (6). The allocation fraction for  
106 each participating cancer center is based on the cancer center's  
107 tier-designated weight under subsection (4) multiplied by each  
108 of the following allocation factors: number of reportable cases,  
109 peer-review costs, and biomedical education and training costs.  
110 As used in this section, the term:

111 (a) "Biomedical education and training" means instruction  
112 that is offered to a student who is enrolled in a biomedical  
113 research program at an affiliated university as a medical  
114 student or a student in a master's or doctoral degree program,  
115 or who is a resident physician trainee or postdoctoral trainee  
116 in such program. An affiliated university biomedical research  
117 program must be accredited or approved by a nationally  
118 recognized agency and offered through an institution accredited  
119 by the Commission on Colleges of the Southern Association of  
120 Colleges and Schools. Full-time equivalency for trainees shall  
121 be prorated for training received in oncologic sciences and  
122 oncologic medicine.

123 (b) "Cancer center" means a freestanding center, a center  
124 situated within an academic institution, or a formal research-  
125 based consortium under centralized leadership that has achieved  
126 NCI designation or is prepared to achieve NCI designation by  
127 July 1, 2019.

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

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

135 (e) "Reportable cases" means cases of cancer in which a  
136 cancer center is involved in the diagnosis, evaluation of the  
137 diagnosis, evaluation of the extent of cancer spread at the time  
138 of diagnosis, or administration of all or any part of the first  
139 course of therapy for the most recent annual reporting period  
140 available. Cases relating to patients enrolled in institutional  
141 or investigator-initiated interventional clinical trials shall  
142 be weighted at 1.2 relative to other cases weighted at 1.0.  
143 Determination of institutional or investigator-initiated  
144 interventional clinical trials must be consistent with reporting  
145 guidelines provided by the NCI.

146 (4) Tier designations and corresponding weights within the  
147 Florida Consortium of National Cancer Institute Centers Program  
148 are as follows:

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

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

153 (c) Tier 3: Florida-based cancer centers seeking  
154 designation as either a NCI-designated cancer center or NCI-  
155 designated comprehensive cancer center, which shall be weighted  
156 at 1.0.

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

160 a. Conducting cancer-related basic scientific research and  
161 cancer-related population scientific research;

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

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

168 d. Offering degree-granting programs or affiliating with  
169 universities through degree-granting programs accredited or  
170 approved by a nationally recognized agency and offered through  
171 the center or through the center in conjunction with another  
172 institution accredited by the Commission on Colleges of the  
173 Southern Association of Colleges and Schools;

174 e. Providing training to clinical trainees, medical  
175 trainees accredited by the Accreditation Council for Graduate  
176 Medical Education or the American Osteopathic Association, and  
177 postdoctoral fellows recently awarded a doctorate degree; and

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

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

182 receive Tier 3 designations or provide additional criteria for  
 183 such designation.

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

186 4. A cancer center that qualifies as a designated Tier 3  
 187 center under the criteria provided in subparagraph 1. by July,  
 188 1, 2014, is authorized to pursue NCI designation as a cancer  
 189 center or a comprehensive cancer center for 5 years after  
 190 qualification.

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

194 CAF=[0.4×(CRC÷TCRC)]+[0.3×(CPC÷TCPC)]+[0.3×(CBE÷TCBE)]

196 Where:

197 CAF=A cancer center's allocation fraction.

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

199 TCRC=The total tier-weighted reportable cases for all  
 200 cancer centers.

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

202 TCPC=The total tier-weighted peer-review costs for all cancer  
 203 centers.

204 CBE=A cancer center's tier-weighted biomedical education  
 205 and training.

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



208  
209       (6) A cancer center's annual allocation shall be  
210 calculated by multiplying the funds appropriated for the Florida  
211 Consortium of National Cancer Institute Centers Program in the  
212 General Appropriations Act by that cancer center's allocation  
213 fraction. If the calculation results in an annual allocation  
214 that is less than \$16 million, that cancer center's annual  
215 allocation shall be increased to a sum equaling \$16 million,  
216 with the additional funds being provided proportionally from the  
217 annual allocations calculated for the other participating cancer  
218 centers.

219       (7) Beginning July 1, 2017, and every 3 years thereafter,  
220 the department, in conjunction with participating cancer  
221 centers, shall submit a report to the Cancer Control and  
222 Research Advisory Council on specific metrics relating to cancer  
223 mortality and external funding for cancer-related research in  
224 the state. If a cancer center does not endorse this report or  
225 produce an equivalent independent report, the cancer center  
226 shall be suspended from the program for 1 year. The report must  
227 include:

228       (a) An analysis of trending age-adjusted cancer mortality  
229 rates in the state, which must include, at a minimum, overall  
230 age-adjusted mortality rates for cancer statewide and age-  
231 adjusted mortality rates by age group, geographic region, and  
232 type of cancer, which must include, at a minimum:

233       1. Lung cancer.

234 2. Pancreatic cancer.

235 3. Sarcoma.

236 4. Melanoma.

237 5. Leukemia and myelodysplastic syndromes.

238 6. Brain cancer.

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

242 (c) A list and narrative description of collaborative  
 243 grants and interinstitutional collaboration among participating  
 244 cancer centers, a comparison of collaborative grants in  
 245 proportion to the grant totals for each cancer center, a  
 246 catalogue of retreats and progress seed grants using state  
 247 funds, and targets for collaboration in the future and reports  
 248 on progress regarding such targets where appropriate.

249 (8) This section is subject to annual appropriation by the  
 250 Legislature.

251 (9) The department may adopt rules to administer this  
 252 section.

253 Section 5. This act shall take effect July 1, 2014.