THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 801

Session of 2005

INTRODUCED BY HARHART, BALDWIN, BEBKO-JONES, BELARDI, BISHOP, CALTAGIRONE, CAPPELLI, CAWLEY, CRAHALLA, CREIGHTON, CURRY, DeWEESE, FRANKEL, GOOD, GOODMAN, GRUCELA, HARPER, HENNESSEY, HERMAN, JOSEPHS, KIRKLAND, LEDERER, MANN, McILHATTAN, McILHINNEY, MELIO, MYERS, O'NEILL, PHILLIPS, READSHAW, REICHLEY, SAINATO, SAYLOR, SCHRODER, STERN, E. Z. TAYLOR, TIGUE, WATSON, WHEATLEY, YOUNGBLOOD, GEIST, R. STEVENSON, PICKETT, S. MILLER, STABACK, FREEMAN, DENLINGER, LEACH, B. SMITH, DeLUCA, THOMAS, MAJOR, HESS, GEORGE, FABRIZIO, MILLARD, PALLONE, ALLEN, SAMUELSON, COSTA, BROWNE AND NAILOR, MARCH 14, 2005

SENATOR WENGER, APPROPRIATIONS, IN SENATE, RE-REPORTED AS AMENDED, JUNE 19, 2006

AN ACT

1 2 3 4	Authorizing and directing the Department of Health to establish a Cervical Cancer Task Force to evaluate and make recommendations for education, prevention and detection AND PREVENTION of cervical cancer.	<
5	The General Assembly finds and declares as follows:	
6	(1) According to Federal statistics, cervical cancer is	
7	the third most commonly diagnosed gynecological cancer among	
8	American women.	
9	(2) In 2003, the Centers for Disease Control reported	<
10	that an estimated 12,200 new cases of cervical cancer were	
11	diagnosed and an estimated 4,100 women would die of this	
12	disease.	
13	(3) In Pennsylvania, the rate of cervical cancer is	

1	slightly lower than the national average.
2	(4) Cervical cancer disproportionately affects minority
3	women and women with lower incomes because they are less
4	likely to have access to routine screening.
5	(5) Human papillomavirus (HPV) is a primary cause of
6	cervical cancer.
7	(6) Each year more than 5 million people acquire human
8	papillomavirus, which is linked to cervical cancer in high-
9	risk cases.
10	(7) With regular and accurate screening, cervical cancer
11	is highly preventable.
12	(8) When found early, cervical cancer is highly curable,
13	but testing is required for early detection.
14	(9) Approximately half of all cervical cancer cases are
15	in women who have never been screened and 10% of cases are in
16	women who have not been screened within five years.
17	(10) Cervical cancer cases in the United States are
18	generally attributed to a lack of education, a reduction of
19	access available to regular cervical cancer screening and a
20	lack of screening accuracy.
21	(11) The public's widespread recognition of breast
22	cancer can overshadow the significance of cervical cancer.
23	(2) PENNSYLVANIA HAS THE SIXTH HIGHEST RATE OF CERVICAL <-
24	CANCER IN THE NATION.
25	(3) CERVICAL CANCER DISPROPORTIONATELY AFFECTS MINORITY
26	WOMEN AND WOMEN WITH LOWER INCOMES BECAUSE THEY ARE LESS
27	LIKELY TO HAVE ACCESS TO ROUTINE SCREENING.
28	(4) ACCORDING TO THE AMERICAN CANCER SOCIETY HUMAN

CERVICAL CANCER.

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PAPILLOMAVIRUS (HPV) IS RECOGNIZED AS THE PRIMARY CAUSE OF

- 1 (5) EACH YEAR MORE THAN 5 MILLION PEOPLE ACQUIRE HUMAN
- 2 PAPILLOMAVIRUS, WHICH IS LINKED TO CERVICAL CANCER IN HIGH-
- 3 RISK CASES.
- 4 (6) WITH REGULAR AND ACCURATE SCREENING, CERVICAL CANCER
- 5 IS HIGHLY PREVENTABLE.
- 6 (7) WHEN FOUND EARLY, CERVICAL CANCER IS HIGHLY CURABLE.
- 7 (8) APPROXIMATELY HALF OF ALL CERVICAL CANCER CASES ARE
- 8 IN WOMEN WHO HAVE NEVER BEEN SCREENED AND 10% OF CASES ARE IN

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- 9 WOMEN WHO HAVE NOT BEEN SCREENED WITHIN FIVE YEARS.
- 10 The General Assembly of the Commonwealth of Pennsylvania
- 11 hereby enacts as follows:
- 12 Section 1. Short title.
- 13 This act shall be known and may be cited as the Cervical
- 14 Cancer Education, Prevention and Detection Act.
- 15 Section 2. Legislative intent.
- 16 The purpose of this act is to provide for education,
- 17 detection and treatment of cervical cancer separate from breast
- 18 cancer.
- 19 Section 3. Definitions.
- 20 The following words and phrases when used in this act shall
- 21 have the meanings given to them in this section unless the
- 22 context clearly indicates otherwise:
- 23 "Department." The Department of Health of the Commonwealth.
- 24 "Plan." The Cervical Cancer Education, Prevention and
- 25 Detection Plan.
- 26 "Task force." The Cervical Cancer Task Force established
- 27 under section 4 (relating to Cervical Cancer Task Force.
- 28 Section 4. Cervical Cancer Task Force.
- 29 (a) Establishment. The Cervical Cancer Task Force is
- 30 established in the department.

- 1 (b) Composition. The task force shall be determined by the
- 2 department and shall include individuals with expertise in
- 3 women's health, including, but not limited to, gynecological
- 4 oncology, epidemiology, social services and outreach to women
- 5 and minorities, and shall also include a representative of the
- 6 department's Healthy Women Project and a representative of the
- 7 Department of Public Welfare's Breast and Cervical Cancer
- 8 Treatment Project. The task force shall reflect the composition
- 9 of the State population with regard to ethnicity, race and age.
- 10 Section 5. Meetings.
- 11 The task force shall convene within 90 days after the
- 12 appointments are made and published and meet at least quarterly.
- 13 Section 6. Compensation and expenses.
- 14 The members of the task force shall receive no compensation
- 15 for their services but shall be allowed their actual and
- 16 necessary expenses incurred in performance of their duties. Such
- 17 reimbursement shall be provided for through the department.
- 18 Section 7. Duties.
- 19 The task force shall have the following duties:
- 20 (1) To obtain from the department statistical and
- 21 qualitative data on the prevalence and incidence of cervical
- 22 cancer.
- 23 (2) In collaboration with the department, to raise
- 24 public awareness on the causes and nature of cervical cancer,
- 25 personal risk factors, value of prevention, early detection,
- options for testing, treatment costs, new technology, medical
- 27 care reimbursement and health provider.
- 28 (3) To identify priority strategies and new
- 29 technologies, including newly introduced diagnostics and
- 30 preventive therapies that are effective in preventing and

1 controlling the risk of cervical cancer.

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(4) To identify and examine the limitations of existing laws, regulations, programs and services with regard to coverage and awareness issues for cervical cancer.

- (5) In consultation with the department and the Pennsylvania Cancer Control Consortium, to develop a Statewide comprehensive Cervical Cancer Education, Prevention and Detection Plan and develop strategies for implementing and promoting the plan to the general public, State and local elected officials and various public and private organizations, associations, businesses, industries and agencies.
- (6) To identify strategies to facilitate specific commitments to help implement the plan from the entities listed in paragraph (8).
- (7) To facilitate coordination of and communication among State and local agencies and organizations regarding current or future involvement in achieving the aims of the plan.
- 20 (8) To receive and consider reports and testimony from individuals, local health departments, community based 21 22 organizations, voluntary health organizations and other 23 public and private organizations Statewide to learn more 2.4 about their contributions to cervical cancer diagnosis, 25 prevention and treatment and their ideas for improving 26 cervical cancer prevention, diagnosis and treatment in this 27 Commonwealth.
- 28 Section 8. Report.
- 29 Beginning November 30, 2005, and on November 30 each year
- 30 thereafter, the task force shall present a report to the

- 1 chairman of the Public Health and Welfare Committee of the
- 2 Senate and the chairman of the Health and Human Services
- 3 Committee of the House of Representatives. The annual report
- 4 shall present its findings and recommendations including:
- 5 (1) The anticipated time frame for completion of the
- 6 plan.
- 7 (2) Recommendations on human and financial resources
- 8 required to implement the plan.
- 9 (3) Recommended strategies or actions to reduce the
- 10 occurrence of cervical cancer in women in this Commonwealth.
- 11 (4) Recommended strategies or actions to reduce the
- 12 costs of cervical cancer.
- 13 (5) Progress being made in fulfilling the duties of the
- 14 task force and in developing and implementing the plan.
- 15 Section 9. Expiration.
- 16 The task force shall expire November 30, 2009, or upon
- 17 submission of the task force's final report to the General
- 18 Assembly.
- 19 Section 10. Effective date.
- 20 This act shall take effect in 30 days.
- 21 SECTION 1. SHORT TITLE.
- 22 THIS ACT SHALL BE KNOWN AND MAY BE CITED AS THE CERVICAL

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- 23 CANCER EDUCATION AND PREVENTION ACT.
- 24 SECTION 2. LEGISLATIVE INTENT.
- 25 THE PURPOSE OF THIS ACT IS TO PROVIDE FOR EDUCATION AND
- 26 PREVENTION OF CERVICAL CANCER.
- 27 SECTION 3. DEFINITIONS.
- THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS ACT SHALL
- 29 HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
- 30 CONTEXT CLEARLY INDICATES OTHERWISE:

- 1 "DEPARTMENT." THE DEPARTMENT OF HEALTH OF THE COMMONWEALTH.
- 2 "PLAN." THE CERVICAL CANCER EDUCATION AND PREVENTION PLAN.
- 3 "TASK FORCE." THE CERVICAL CANCER TASK FORCE ESTABLISHED
- 4 UNDER SECTION 4.
- 5 SECTION 4. CERVICAL CANCER TASK FORCE.
- 6 (A) ESTABLISHMENT.--THE CERVICAL CANCER TASK FORCE IS
- 7 ESTABLISHED IN THE DEPARTMENT.
- 8 (B) COMPOSITION.--THE SECRETARY OF HEALTH OR A DESIGNEE
- 9 SHALL SERVE AS CHAIRPERSON OF THE TASK FORCE. THE SECRETARY OF
- 10 HEALTH SHALL APPOINT THE FOLLOWING MEMBERS:
- 11 (1) A REPRESENTATIVE OF THE HEALTHY WOMEN PROJECT IN THE
- 12 DEPARTMENT.
- 13 (2) A REPRESENTATIVE OF THE BREAST AND CERVICAL CANCER
- 14 TREATMENT PROGRAM IN THE DEPARTMENT OF PUBLIC WELFARE.
- 15 (3) A GYNECOLOGY ONCOLOGIST.
- 16 (4) AN EPIDEMIOLOGIST.
- 17 (5) A PUBLIC HEALTH PROFESSIONAL.
- 18 (6) TWO REPRESENTATIVES OF WOMEN'S COMMUNITY HEALTH
- 19 SERVICES.
- 20 (7) TWO REPRESENTATIVES OF WOMEN'S OUTREACH AND SOCIAL
- 21 SERVICES.
- 22 (8) TWO REPRESENTATIVES OF HEALTH CONCERNS OF MINORITY
- WOMEN.
- 24 SECTION 5. MEETINGS.
- 25 THE TASK FORCE SHALL CONVENE WITHIN 90 DAYS AFTER THE
- 26 APPOINTMENTS ARE MADE AND PUBLISHED AND MEET AT THE DISCRETION
- 27 OF THE CHAIRPERSON.
- 28 SECTION 6. COMPENSATION AND EXPENSES.
- THE MEMBERS OF THE TASK FORCE SHALL RECEIVE NO COMPENSATION
- 30 FOR THEIR SERVICES BUT SHALL BE ALLOWED THEIR ACTUAL AND

- 1 NECESSARY EXPENSES INCURRED IN PERFORMANCE OF THEIR DUTIES. SUCH
- 2 REIMBURSEMENT SHALL BE PROVIDED FOR THROUGH THE DEPARTMENT.
- 3 SECTION 7. DUTIES.
- 4 THE TASK FORCE SHALL HAVE THE FOLLOWING DUTIES:
- 5 (1) TO DEVELOP, USING EXISTING RESOURCES, A PLAN TO
- 6 RAISE PUBLIC AWARENESS AND EDUCATE WOMEN ON THE PREVENTION,
- 7 EARLY SCREENING AND DETECTION OF CERVICAL CANCER AND ITS
- 8 RELATION TO HUMAN PAPILLOMAVIRUS (HPV).
- 9 (2) TO IDENTIFY NEW TECHNOLOGIES, INCLUDING NEWLY
- 10 INTRODUCED DIAGNOSTICS AND PREVENTIVE THERAPIES THAT ARE
- 11 EFFECTIVE IN PREVENTING AND CONTROLLING THE RISK OF CERVICAL
- 12 CANCER.
- 13 (3) TO MAKE RECOMMENDATIONS CONCERNING EXISTING LAWS,
- 14 REGULATIONS, PROGRAMS AND SERVICES RELATING TO CERVICAL
- 15 CANCER.
- 16 (4) TO RECEIVE AND CONSIDER REPORTS AND TESTIMONY FROM
- 17 INDIVIDUALS, LOCAL HEALTH DEPARTMENTS, COMMUNITY-BASED
- 18 ORGANIZATIONS, VOLUNTARY HEALTH ORGANIZATIONS AND OTHER
- 19 PUBLIC AND PRIVATE ORGANIZATIONS STATEWIDE REGARDING
- 20 EDUCATION AND PREVENTION OF CERVICAL CANCER, TO LEARN MORE
- 21 ABOUT THEIR CONTRIBUTIONS TO CERVICAL CANCER DIAGNOSIS,
- 22 PREVENTION AND TREATMENT AND THEIR IDEAS FOR IMPROVING
- 23 CERVICAL CANCER PREVENTION, DIAGNOSIS AND TREATMENT IN THIS
- 24 COMMONWEALTH.
- 25 (5) TO FACILITATE COORDINATION OF AND COMMUNICATION
- 26 AMONG STATE AND LOCAL AGENCIES AND ORGANIZATIONS TO PROMOTE
- 27 EDUCATION AND PREVENTION OF CERVICAL CANCER.
- 28 SECTION 8. REPORT.
- 29 ON OR BEFORE NOVEMBER 30, 2007, THE TASK FORCE SHALL PRESENT
- 30 A REPORT TO THE CHAIRMAN OF THE PUBLIC HEALTH AND WELFARE

- 1 COMMITTEE OF THE SENATE AND THE CHAIRMAN OF THE HEALTH AND HUMAN
- 2 SERVICES COMMITTEE OF THE HOUSE OF REPRESENTATIVES. THE REPORT
- 3 SHALL PRESENT ITS FINDINGS AND RECOMMENDATIONS, INCLUDING, BUT
- 4 NOT LIMITED TO:
- 5 (1) RECOMMENDATIONS TO RAISE PUBLIC AWARENESS ON THE
- 6 PREVENTION, EARLY SCREENING AND DETECTION OF CERVICAL CANCER.
- 7 (2) RECOMMENDATIONS TO REDUCE THE OCCURRENCE OF CERVICAL
- 8 CANCER IN WOMEN IN THIS COMMONWEALTH.
- 9 SECTION 9. EXPIRATION.
- THIS ACT SHALL EXPIRE NOVEMBER 30, 2007. 10
- 11 SECTION 10. EFFECTIVE DATE.
- 12 THIS ACT SHALL TAKE EFFECT IN 60 DAYS.