

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 AND DeLUCA, MARCH 14, 2005

REFERRED TO COMMITTEE ON HEALTH AND HUMAN SERVICES,
MARCH 14, 2005

AN ACT

1 Authorizing and directing the Department of Health to establish
2 a Cervical Cancer Task Force to evaluate and make
3 recommendations for education, prevention and detection of
4 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
14 slightly lower than the national average.

15 (4) Cervical cancer disproportionately affects minority

1 women and women with lower incomes because they are less
2 likely to have access to routine screening.

3 (5) Human papillomavirus (HPV) is a primary cause of
4 cervical cancer.

5 (6) Each year more than 5 million people acquire human
6 papillomavirus, which is linked to cervical cancer in high-
7 risk cases.

8 (7) With regular and accurate screening, cervical cancer
9 is highly preventable.

10 (8) When found early, cervical cancer is highly curable,
11 but testing is required for early detection.

12 (9) Approximately half of all cervical cancer cases are
13 in women who have never been screened and 10% of cases are in
14 women who have not been screened within five years.

15 (10) Cervical cancer cases in the United States are
16 generally attributed to a lack of education, a reduction of
17 access available to regular cervical cancer screening and a
18 lack of screening accuracy.

19 (11) The public's widespread recognition of breast
20 cancer can overshadow the significance of cervical cancer.

21 The General Assembly of the Commonwealth of Pennsylvania
22 hereby enacts as follows:

23 Section 1. Short title.

24 This act shall be known and may be cited as the Cervical
25 Cancer Education, Prevention and Detection Act.

26 Section 2. Legislative intent.

27 The purpose of this act is to provide for education,
28 detection and treatment of cervical cancer separate from breast
29 cancer.

30 Section 3. Definitions.

1 The following words and phrases when used in this act shall
2 have the meanings given to them in this section unless the
3 context clearly indicates otherwise:

4 "Department." The Department of Health of the Commonwealth.

5 "Plan." The Cervical Cancer Education, Prevention and
6 Detection Plan.

7 "Task force." The Cervical Cancer Task Force established
8 under section 4 (relating to Cervical Cancer Task Force.
9 Section 4. Cervical Cancer Task Force.

10 (a) Establishment.--The Cervical Cancer Task Force is
11 established in the department.

12 (b) Composition.--The task force shall be determined by the
13 department and shall include individuals with expertise in
14 women's health, including, but not limited to, gynecological
15 oncology, epidemiology, social services and outreach to women
16 and minorities, and shall also include a representative of the
17 department's Healthy Women Project and a representative of the
18 Department of Public Welfare's Breast and Cervical Cancer
19 Treatment Project. The task force shall reflect the composition
20 of the State population with regard to ethnicity, race and age.

21 Section 5. Meetings.

22 The task force shall convene within 90 days after the
23 appointments are made and published and meet at least quarterly.

24 Section 6. Compensation and expenses.

25 The members of the task force shall receive no compensation
26 for their services but shall be allowed their actual and
27 necessary expenses incurred in performance of their duties. Such
28 reimbursement shall be provided for through the department.

29 Section 7. Duties.

30 The task force shall have the following duties:

1 (1) To obtain from the department statistical and
2 qualitative data on the prevalence and incidence of cervical
3 cancer.

4 (2) In collaboration with the department, to raise
5 public awareness on the causes and nature of cervical cancer,
6 personal risk factors, value of prevention, early detection,
7 options for testing, treatment costs, new technology, medical
8 care reimbursement and health provider.

9 (3) To identify priority strategies and new
10 technologies, including newly introduced diagnostics and
11 preventive therapies that are effective in preventing and
12 controlling the risk of cervical cancer.

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

16 (5) In consultation with the department and the
17 Pennsylvania Cancer Control Consortium, to develop a
18 Statewide comprehensive Cervical Cancer Education, Prevention
19 and Detection Plan and develop strategies for implementing
20 and promoting the plan to the general public, State and local
21 elected officials and various public and private
22 organizations, associations, businesses, industries and
23 agencies.

24 (6) To identify strategies to facilitate specific
25 commitments to help implement the plan from the entities
26 listed in paragraph (8).

27 (7) To facilitate coordination of and communication
28 among State and local agencies and organizations regarding
29 current or future involvement in achieving the aims of the
30 plan.

1 (8) To receive and consider reports and testimony from
2 individuals, local health departments, community-based
3 organizations, voluntary health organizations and other
4 public and private organizations Statewide to learn more
5 about their contributions to cervical cancer diagnosis,
6 prevention and treatment and their ideas for improving
7 cervical cancer prevention, diagnosis and treatment in this
8 Commonwealth.

9 Section 8. Report.

10 Beginning November 30, 2005, and on November 30 each year
11 thereafter, the task force shall present a report to the
12 chairman of the Public Health and Welfare Committee of the
13 Senate and the chairman of the Health and Human Services
14 Committee of the House of Representatives. The annual report
15 shall present its findings and recommendations including:

16 (1) The anticipated time frame for completion of the
17 plan.

18 (2) Recommendations on human and financial resources
19 required to implement the plan.

20 (3) Recommended strategies or actions to reduce the
21 occurrence of cervical cancer in women in this Commonwealth.

22 (4) Recommended strategies or actions to reduce the
23 costs of cervical cancer.

24 (5) Progress being made in fulfilling the duties of the
25 task force and in developing and implementing the plan.

26 Section 9. Expiration.

27 The task force shall expire November 30, 2009, or upon
28 submission of the task force's final report to the General
29 Assembly.

30 Section 10. Effective date.

1 This act shall take effect in 30 days.