
THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 609 Session of
2015

INTRODUCED BY MENSCH, FONTANA, GREENLEAF, ARGALL, SMITH,
RAFFERTY, SCARNATI AND COSTA, MARCH 6, 2015

REFERRED TO PUBLIC HEALTH AND WELFARE, MARCH 6, 2015

AN ACT

1 Establishing a task force on prostate cancer and related chronic
2 prostate conditions; and providing for powers and duties of
3 the task force, the Department of Health, the Insurance
4 Department, the Department of Aging and the Department of
5 Human Services, and for prevention and education strategies.

6 The General Assembly of the Commonwealth of Pennsylvania
7 hereby enacts as follows:

8 Section 1. Short title.

9 This act shall be known and may be cited as the Prostate
10 Cancer Surveillance, Education, Detection and Treatment Act.

11 Section 2. Findings.

12 The General Assembly finds that:

13 (1) Prostate cancer is the most common type of cancer
14 diagnosed in men in this Commonwealth.

15 (2) African-American men are 61% more likely than
16 Caucasian men to be diagnosed with prostate cancer and twice
17 as likely to die from it.

18 (3) One in six men will be diagnosed with prostate
19 cancer in their lifetime.

1 (4) In 2011, approximately 10,240 men were diagnosed
2 with prostate cancer in Pennsylvania. In that same year,
3 nearly 1,300 men died from prostate cancer.

4 (5) As of 2014, Pennsylvania does not provide or
5 disseminate prostate cancer information as part of a public
6 health campaign or message.

7 (6) Currently, a lack of consensus regarding prostate
8 cancer screening guidelines creates an environment of
9 confusion leading to inconsistent screening rates across the
10 Commonwealth.

11 (7) When diagnosed at an early stage, prostate cancer
12 survival rates are very high.

13 Section 3. Legislative Intent.

14 It is the intent of the General Assembly:

15 (1) To provide the public with information and education
16 to create greater public awareness of the prevalence of and
17 measures available to detect, diagnose and treat prostate
18 cancer and related chronic prostate conditions.

19 (2) To ensure that:

20 (i) Medical professionals, insurers, patients and
21 governmental agencies are educated about risk factors and
22 screening guidelines.

23 (ii) Medical professionals provide patients with
24 sufficient information about treatment options to enable
25 patients to make an informed choice as part of informed
26 consent and to respect the autonomy of that choice.

27 (iii) Pennsylvania government agencies provide
28 unbiased information regarding screening, diagnosis and
29 treatment options.

30 (iv) Uniform screening guidelines are established

1 for prostate cancer in Pennsylvania.

2 Section 4. Definitions.

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

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

7 "Health care professional." A licensed physician, physician
8 assistant, certified registered nurse practitioner or other
9 licensed health care professional.

10 "Prostate cancer." Cancer that forms in the tissue of the
11 prostate.

12 "Related chronic prostate condition." Conditions that
13 include prostaticitis, which is inflammation of the prostate, and
14 an enlarged prostate. The term does not include prostate cancer.

15 "Secretary." The Secretary of Health of the Commonwealth.

16 "State officials." The term includes the Secretary of
17 Environmental Protection of the Commonwealth.

18 "Task force." The task force established by this act.

19 Section 5. Task force.

20 (a) Establishment.--The department shall establish a task
21 force on prostate cancer and related chronic prostate
22 conditions.

23 (b) Purpose.--The task force shall investigate and make
24 recommendations to the department regarding:

25 (1) The prevalence of and measures available to detect,
26 diagnose and treat prostate cancer and related chronic
27 prostate conditions in this Commonwealth.

28 (2) Raising awareness about the long-term effects caused
29 by a lack of public policy and education about prostate
30 cancer risk factors and screening guidelines.

1 (3) Development of a program of information and
2 education regarding prostate cancer which shall include a
3 uniform set of screening guidelines and the broad spectrum of
4 scientific and treatment options regarding all stages of
5 prostate cancer and related chronic prostate conditions.

6 (4) Development of a program to ensure access to
7 prostate cancer screening for all male residents of this
8 Commonwealth, regardless of insurance coverage.

9 (5) Cooperation with the Insurance Department,
10 Department of Aging, and the Department of Human Services to
11 disseminate the information required under paragraph (3) to
12 the general public.

13 (c) Composition.--The task force shall be composed of the
14 following individuals:

15 (1) The secretary or a designee.

16 (2) The Secretary of the Commonwealth or a designee.

17 (3) The Insurance Commissioner or a designee.

18 (4) The Secretary of Aging or a designee.

19 (5) The Secretary of Human Services or a designee.

20 (6) Two members of the Public Health and Welfare
21 Committee of the Senate or designees.

22 (7) Two members of the Health Committee of the House of
23 Representatives or designees.

24 (8) Two physicians licensed in this Commonwealth who are
25 knowledgeable concerning treatment of prostate cancer and
26 related chronic prostate conditions and who are board
27 certified in urology.

28 (9) Two physicians licensed in this Commonwealth who are
29 knowledgeable concerning treatment of prostate cancer and
30 related chronic prostate conditions and who are practicing

1 radiation oncologists treating prostate cancer.

2 (10) An epidemiologist licensed in this Commonwealth who
3 has expertise in prostate cancer.

4 (11) Two individuals who represent prostate cancer
5 patient groups, either of whom may be a prostate cancer
6 patient or a family member of a prostate cancer patient.

7 (12) One individual who is a prostate cancer patient or
8 family member of a prostate cancer patient.

9 (13) Two registered nurses licensed in this
10 Commonwealth, one of whom is a certified registered nurse
11 practitioner and both of whom are knowledgeable concerning
12 prostate cancer and related chronic prostate conditions.

13 (d) Meetings.--

14 (1) Within 45 days of the effective date of this
15 section, the secretary shall appoint the members and a
16 chairperson of the task force.

17 (2) The task force shall convene within 90 days of the
18 effective date of this section and shall meet at least
19 quarterly. When necessary, some task force members may
20 participate in meetings via teleconference.

21 (3) The task force shall issue a report with
22 recommendations to the secretary within one year of its first
23 meeting. The report shall be transmitted to the Public Health
24 and Welfare Committee of the Senate and the Health Committee
25 of the House of Representatives.

26 (4) Nothing in this act shall be construed to prohibit
27 the task force from making interim reports or taking interim
28 actions.

29 (e) Compensation and expenses.--The members of the task
30 force shall receive no compensation for their services, but

1 shall be allowed their actual and necessary expenses incurred in
2 performance of their duties. Reimbursement shall be provided by
3 the department.

4 (f) Duties of department.--The department shall:

5 (1) Develop a program of information and education
6 regarding prostate cancer which shall include a uniform set
7 of screening guidelines and the broad spectrum of scientific
8 and treatment options regarding all stages of prostate cancer
9 and related chronic prostate conditions.

10 (2) Develop a program to ensure access to prostate
11 cancer screening for all male residents of this Commonwealth,
12 regardless of insurance coverage.

13 (3) Cooperate with the Insurance Department, Department
14 of Aging and the Department of Human Services to disseminate
15 the information required under paragraph (1) to medical
16 professionals and the general public.

17 (4) Cooperate with professional associations of health
18 care professionals to provide the education program for
19 professionals required under paragraph (1).

20 (5) Identify and apply for public and private grants and
21 funding in order to carry out the provisions of this act.

22 Section 6. Effective date.

23 This act shall take effect immediately.