

**CHARLENE MIERS FOUNDATION FOR CANCER RESEARCH
PROPOSED LEGISLATION**

Collaborative Urgent Research Effort (CURE) for Cancer Act of 2010

**111th CONGRESS
2nd Session**

S. _____

To modernize, promote, advance and increase collaboration on cancer research, provide more concentrated and rapid discovery of the cause, prevention, diagnosis, treatment and cure of cancer and for other purposes.

IN THE SENATE OF THE UNITED STATES

_____, 2010

_____ introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To modernize, promote, advance and increase collaboration on cancer research, provide more concentrated and rapid discovery of the cause, prevention, diagnosis, treatment and cure of cancer and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Collaborative Urgent Research Effort (CURE) for Cancer Act of 2010”.

SEC. 2. FINDINGS AND PURPOSE.

(a) Findings- Congress makes the following findings:

(1) One in 2 men and one in 3 women are expected to develop cancer in their lifetimes.

(2)The National Institutes of Health estimate that more than 560,000 Americans now die of cancer each year.

(3) The Director of the National Cancer Institute has observed that the cancer death rate means that one American dies of cancer every minute.

(4) The National Institutes of Health estimates that the overall cost of cancer to the United States was more than \$220,000,000,000.

(5) Biomedical research enterprise has made considerable advances in the knowledge required to determine and understand the causes of, and prevent, diagnose, and treat cancer; however, it still takes many years, on average, to translate these discoveries into viable treatment options.

(6) The National Cancer Act of 1971 (Public Law 92-218) advanced the ability of the United States to develop new scientific leads and help increase the rate of cancer survivorship.

(7) Yet in the period of over 38 years since the national declaration of the War on Cancer, the age adjusted mortality rate for cancer is still extraordinarily high. Eight forms of cancer have a 5-year survival rate of less than 50 percent (pancreatic, liver, lung, esophageal, stomach, brain, multiple myeloma, and ovarian).

(8) While there have been substantial achievements since the crusade began, we are far from winning the War on Cancer.

(b) Purposes- The purposes of this Act are as follows:

(1) To reauthorize the National Cancer Institute and National Cancer Program in order to enhance and improve the cancer research conducted and supported by the National Cancer Institute and the National Cancer Program in order to control and cure cancer and benefit cancer patients, their families and employers.

(2) To enhance the administration and operation of the National Cancer Program and provide new and stronger support of the National Cancer Institute in its leading the conduct of the National Cancer Program.

(3) To provide for long range strategic planning and funding of the National Cancer Program, and regular and consistent annual evaluation and reporting of progress in achieving the objectives and purposes of the Program.

(4) To recognize that with an increased understanding of the complexity of the disease of cancer, which involves numerous genetic and molecular variations, there is a need for increased coordination and collaboration in conducting cancer research.

(5) To support the National Cancer Institute in establishing relationships and scientific study and programs, including collaborative public-private partnership and effort, which will further the development of advanced technologies that will improve the

determination of the causes of, and the prevention, diagnosis, treatment and cure of cancer.

SEC. 3. ADVANCEMENT OF THE NATIONAL CANCER PROGRAM.

Section 411 of the Public Health Service Act (42 U.S.C. 285a) is amended to read as follows:

“SEC. 411. NATIONAL CANCER PROGRAM.

(a) In General- There shall be established a National Cancer Program (referred to in this section as the “Program”) that shall consist of--

(1) an expanded, intensified, coordinated and collaborative cancer research program encompassing the research programs conducted and supported by the Institute and the related research programs of the other national research institutes, including an expanded and intensified research program for the prevention of cancer caused by occupational or environmental exposure to carcinogens; and

(2) the other programs and activities of the Institute.

(b) Collaboration- In carrying out the Program--

1) the Secretary, the Director of the Institute and the National Cancer Commission shall identify relevant Federal agencies that shall collaborate with respect to activities conducted under the Program (including the Institute, the other Institutes and Centers of the National Institutes of Health, the Office of the Director of the National Institutes of Health, the Food and Drug Administration, the Centers for Medicare & Medicaid Services, the Centers for Disease Control and Prevention, the Department of Defense, the Department of Energy, the Agency for Healthcare Research and Quality, the Office for Human Research Protections, the Health Resources and Services Administration, and the Office for Human Research Protections); and

2) the Secretary shall ensure that the policies related to the promotion of cancer research of all agencies within the Department of Health and Human Services (including the Institute, the Food and Drug Administration, and the Centers for Medicare & Medicaid Services) are harmonized, and shall ensure that such agencies collaborate with regard to cancer research and development.

3) The Secretary and the Director, with the assistance of the National Cancer Commission, the advisory council to the Institute, and other persons or organizations selected by the Director, shall identify, define, classify, and maintain a complete description of the “National Cancer Program” and publish the meaning, scope, and constituent parts or elements of it, to include all purposes, features, functions, activities,

agencies, persons and organizations in the public and private sector, and other relevant things that it includes or involves.

4) the Secretary and the Director of the Institute shall establish a policy and program under which the Institute provides direct and continuing input of information and assistance to all persons in the United States that commence and conduct research on the cause, prevention, diagnosis, treatment and cure of cancer to implement, foster and further a collaborative and coordinated national effort to achieve the objectives of the Program in the most efficient and expeditious way.

(c) Transparency and Efficiency-

(1) PLANNING, BUDGETING- In carrying out the Program, the Director of the Institute and the National Cancer Commission shall, in preparing and submitting to the President the annual budget estimate for the Program and other reports--

(A) develop the budgetary needs of the entire Program and submit the budget estimate relating to such needs to the National Cancer Commission for review prior to submitting such estimate to the President;

(B) take into account and fully consider the continuing appropriation established pursuant to section 411A of the Act and determine if another amount should be appropriated; and

(C) submit such budget estimate to the Committee on the Budget and the Committee on Appropriations of the Senate and the Committee on the Budget and Committee on Appropriations of the House of Representatives at the same time that such estimate is submitted to the President.

(2) NATIONAL CANCER COMMISSION- In establishing the priorities of the Program, the National Cancer Commission shall provide for increased coordination by increasing the participation and sharing of information of and by representatives (to the extent practicable, representatives who have appropriate decision making authority) of appropriate Federal agencies, and other persons, including--

(A) the Centers for Medicare & Medicaid Services;

B) the Health Resources and Services Administration;

(C) the Centers for Disease Control and Prevention; and

(D) the Agency for Healthcare Research and Quality.

(E) other governmental, institutional or business entities and organizations.

SEC. 4. APPROPRIATIONS FOR NATIONAL CANCER PROGRAM

Part C of title IV of the Public Health Service Act (42 U.S.C. 285 et seq.) is amended by adding a section 411A as follows:

“SEC. 411A. APPROPRIATIONS AUTHORIZED FOR NATIONAL CANCER PROGRAM.

(a) Authorization of appropriations; determination of sums for program; reports of expenditures.

(1) To carry out this chapter, there are authorized to be appropriated such sums as are necessary for each of the fiscal years 2011 through 2026, as determined pursuant to paragraph (a)(2).

(2) The sums necessary for each fiscal year shall be determined by the Director to accomplish the National Cancer Strategic Plan and the Program, as approved by the National Cancer Commission upon application and request of the Director, pursuant to Section 417G(b) and (c) of the Act.

(3) The sum appropriated for any fiscal year during the period described in subsection (1) shall not exceed \$22,500,000,000; and such amount shall be appropriated for all years during and within that period for which an other amount is not determined by the Director and approved by National Cancer Commission pursuant to Section 417G(b) and (c) of the Act.

(4) The Congress may appropriate such other amounts for the National Cancer Institute and Program as it determines from time to time, upon request of the Director, or otherwise for any year.

(5) The funds authorized to be appropriated under this section shall be paid and utilized as determined and directed by the Director to be in furtherance of the National Cancer Program.

(b) Reports of Director

The Director shall at least annually, or more frequently at his discretion, report to the President and appropriate committees of Congress on the results of the programs, grants and other activities in the National Cancer Program that are funded by the appropriations made pursuant to this section.”

SEC. 5. SPECIAL AUTHORITIES OF DIRECTOR OF NATIONAL CANCER INSTITUTE

Section 413 of the Public Health Service Act (42 USC 285a-2) is amended to read:

“SEC. 413. SPECIAL AUTHORITIES OF DIRECTOR.

(a) (1) The Director of the Institute shall establish an information and education program to collect, identify, analyze, and disseminate on a timely basis, through publications and other appropriate means, to cancer patients and their families, physicians and other health professionals, and the general public, information on cancer research, diagnosis, prevention, and treatment (including information respecting nutrition programs for cancer patients and the relationship between nutrition and cancer). The Director of the Institute may take such action as may be necessary to insure that all channels for the dissemination and exchange of scientific knowledge and information are maintained between the Institute and the public and between the Institute and other scientific, medical, and biomedical disciplines and organizations nationally and internationally.

(2) In carrying out paragraph (1), the Director of the Institute shall—

(A) provide public and patient information and education programs, providing information that will help individuals take personal steps to reduce their risk of cancer, to make them aware of early detection techniques and to motivate appropriate utilization of those techniques, to help individuals deal with cancer if it strikes, and to provide information to improve long-term survival;

(B) with the assistance of and in consultation with the National Cancer Commission, establish and maintain a registry, record, listing, catalogue, data bank and/or portfolio that identifies and describes all cancer research programs initiated and conducted in the United States, including those that are reported to the National Cancer Commission pursuant to sections 417G and 417H of the Act;

(C) with the assistance of and in consultation with the National Cancer Commission and advisory council for the Institute, establish and maintain a program for to enhance and improve the continuing collaboration with all persons, firms and organizations in accomplishing coordinated cancer research in the United States to most efficiently and expeditiously achieve the objectives of the National Cancer Strategic Plan and further the National Cancer Program.

(D) continue and expand programs to provide physicians and the public with state-of-the-art information on the treatment of particular forms of cancers, and to identify those clinical trials that might benefit patients while advancing knowledge of cancer treatment;

(E) assess the incorporation of state-of-the-art cancer treatments into clinical practice and the extent to which cancer patients receive such treatments and include the results of such assessments in the biennial reports required under section 284b [1] of this title;

(F) maintain and operate the International Cancer Research Data Bank, which shall collect, catalog, store, and disseminate insofar as feasible the results of cancer research and treatment undertaken in any country for the use of any person involved in cancer research and treatment in any country; and

(G to the extent practicable, in disseminating the results of such cancer research and treatment, utilize information systems available to the public.

(b) The Director of the Institute in carrying out the National Cancer Program—

(1) shall establish or support the large-scale production or distribution of specialized biological materials and other therapeutic substances for cancer research and set standards of safety and care for persons using such materials;

(2) shall, in consultation with the National Cancer Commission and advisory council for the Institute, support (A) research in the cancer field outside the United States by highly qualified foreign nationals which can be expected to benefit the American people, (B) collaborative research involving American and foreign participants, and (C) the training of American scientists abroad and foreign scientists in the United States;

(3) shall, in consultation with the National Cancer Commission and advisory council for the Institute, support appropriate programs of education and training (including continuing education and laboratory and clinical research training);

(4) shall encourage and coordinate cancer research by industrial concerns where such concerns evidence a particular capability for such research;

(5) may obtain (after consultation with the National Cancer Commission and advisory council for the Institute and in accordance with section 3109 of title 5, but without regard to the limitation in such section on the period of service) the services of not more than one hundred and fifty-one experts or consultants who have scientific or professional qualifications;

(6) (A) may, in consultation with the National Cancer Commission and advisory council for the Institute, acquire, construct, improve, repair, operate, and maintain laboratories, other research facilities, equipment, and such other real or personal property as the Director determines necessary;

(B) may, in consultation with the National Cancer Commission and advisory council for the Institute, make grants for construction or renovation of facilities; and

(C) may, in consultation with the National Cancer Commission and advisory council for the Institute, acquire, without regard to section 8141 of title 40, by lease or otherwise through the Administrator of General Services, buildings or parts of buildings in the District of Columbia or communities located adjacent to the District of Columbia for the use of the Institute for a period not to exceed ten years;

(7) may, in consultation with the National Cancer Commission and advisory council for the Institute, appoint one or more advisory committees composed of such private citizens

and officials of Federal, State, and local governments to advise the Director with respect to the Director's functions;

(8) may, subject to section 284 (b)(2) of this title and without regard to section 3324 of title 31 and section 5 of title 41, enter into such contracts, leases, cooperative agreements, as may be necessary in the conduct of functions of the Director, with any public agency, or with any person, firm, association, corporation, or educational institution; and

(9) shall, notwithstanding section 284 (a) of this title, prepare and submit, directly to the President for review and transmittal to Congress, an annual budget estimate (including an estimate of the number and type of personnel needs for the Institute) for the National Cancer Program, after reasonable opportunity for comment (but without change) by the Secretary, the Director of NIH, the National Cancer Commission, and the Institute's advisory council.

Except as otherwise provided, experts and consultants whose services are obtained under paragraph (5) shall be paid or reimbursed, in accordance with title 5 for their travel to and from their place of service and for other expenses associated with their assignment. Such expenses shall not be allowed in connection with the assignment of an expert or consultant whose services are obtained under paragraph (5) unless the expert or consultant has agreed in writing to complete the entire period of the assignment or one year of the assignment, whichever is shorter, unless separated or reassigned for reasons which are beyond the control of the expert or consultant and which are acceptable to the Director of the Institute. If the expert or consultant violates the agreement, the money spent by the United States for such expenses is recoverable from the expert or consultant as a debt due the United States. The Secretary may waive in whole or in part a right of recovery under the preceding sentence.

(c)(1) Expansion and coordination of activities

The Director of the National Cancer Institute shall expand, intensify, and coordinate the activities of the Institute with respect to research on the development of preclinical models to evaluate which therapies are likely to be effective for treating pediatric cancer.

(2) Coordination with other institutes

The Director of the Institute shall coordinate the activities under paragraph (1) with similar activities conducted by other national research institutes and agencies of the National Institutes of Health to the extent that those Institutes and agencies have responsibilities that are related to pediatric cancer.

(d) Collaborative Cancer Research Conference

The Director of the National Cancer Institute shall convene and conduct an annual forum and conference on the National Cancer Program each fiscal year. The forum and conference shall focus upon the National Cancer Strategic Plan and ways to improve and more rapidly accomplish achievement of the objectives of the Plan through increased or

more effective collaboration of and coordination with all governmental agencies, private industry and other organizations involved cancer research that involves or affects the National Cancer Program.”

SEC. 6. NATIONAL CANCER COMMISSION

Section 415 of the Public Health Service Act (42 USC 285a-4) is amended to read

“SEC. 415. NATIONAL CANCER COMMISSION

(a) Organization.— The National Cancer Commission is an independent establishment of the United States Government.

(b) Appointment of Members.— The National Cancer Commission (hereinafter in this section referred to as “Commission”) is composed of 5 members appointed by the President, by and with the advice and consent of the Senate. Not more than 3 members may be appointed from the same political party. At least 3 members shall be appointed on the basis of scientific qualification, professional standing, and demonstrated knowledge in biomedical research and related employment of human, financial and other resources.

(c) Terms of Office and Removal.— The term of office of each member is 5 years. An individual appointed to fill a vacancy occurring before the expiration of the term for which the predecessor of that individual was appointed, is appointed for the remainder of that term. When the term of office of a member ends, the member may continue to serve until a successor is appointed and qualified. The President may remove a member for inefficiency, neglect of duty, or malfeasance in office.

(d) Chairman and Vice Chairman.— The President shall designate, by and with the advice and consent of the Senate, a Chairman of the Commission. The President also shall designate a Vice Chairman of the Commission. The terms of office of both the Chairman and Vice Chairman are 2 years. When the Chairman is absent or unable to serve or when the position of Chairman is vacant, the Vice Chairman acts as Chairman.

(e) Duties and Powers of Chairman.— The Chairman is the chief executive and administrative officer of the Commission. Subject to the general policies and decisions of the Commission, the Chairman shall—

(1) appoint and supervise officers and employees, other than regular and full-time employees in the immediate offices of another member, necessary to carry out this chapter;

(2) fix the pay of officers and employees necessary to carry out this chapter;

(3) distribute activities and business of the Commission among the officers, employees, and administrative units of the Commission; and

(4) supervise the expenditures of the Commission.

(f) Quorum.— Three members of the Commission are a quorum in carrying out duties and powers of the Commission.

(g) Offices, Bureaus, and Divisions.— The Commission shall establish offices necessary to carry out including an office to conduct oversight and implementation of the National Cancer Program and National Cancer Strategic Plan in connection with the National Cancer Institute. The Commission shall establish distinct and appropriately staffed bureaus, divisions, or offices to investigate and report on all aspects of the Program.

(h) Chief Financial Officer.— The Chairman shall designate an officer or employee of the Commission as the Chief Financial Officer. The Chief Financial Officer shall—

(1) report directly to the Chairman on financial management and budget execution;

(2) direct, manage, and provide policy guidance and oversight on financial management and property and inventory control; and

(3) review the fees, rents, and other charges imposed by the Commission for services and things of value it provides, and suggest appropriate revisions to those charges to reflect costs incurred by the Commission in providing those services and things of value.

(i) Commission Member Staff.— Each member of the Commission shall select and supervise regular and full-time employees in his or her immediate office as long as any such employee has been approved for employment by the designated agency ethics official under the same guidelines that apply to all employees of the Commission.

(j) Seal.— The Commission shall have a seal that shall be judicially recognized.”

SEC. 7. NATIONAL CANCER COMMISSION; AUTHORITY, FUNCTIONS, ADMINISTRATION

Part C of title IV of the Public Health Service Act (42 U.S.C. 285 et seq.) is amended by adding a section 415A as follows

“SEC. 415A. NATIONAL CANCER COMMISSION; AUTHORITY, FUNCTIONS; ADMINISTRATION

(a) General Authority of Commission.—

(1) The National Cancer Commission (referred to in this section as the “Commission”), and when authorized by it, a member of the Commission, an administrative law judge employed by or assigned to the Commission, or an officer or employee designated by the

Chairman of the Commission, may conduct hearings to carry out this chapter, administer oaths, and require, by subpoena or otherwise, necessary witnesses and evidence.

(2) A witness or evidence in a hearing under paragraph (1) of this subsection may be summoned or required to be produced from any place in the United States to the designated place of the hearing. A witness summoned under this subsection is entitled to the same fee and mileage the witness would have been paid in a court of the United States.

(3) A subpoena shall be issued under the signature of the Chairman or the Chairman's delegate but may be served by any person designated by the Chairman.

(4) If a person disobeys a subpoena, order, or inspection notice of the Commission, the Commission may bring a civil action in a district court of the United States to enforce the subpoena, order, or notice. An action under this paragraph may be brought in the judicial district in which the person against whom the action is brought resides, is found, or does business. The court may punish a failure to obey an order of the court to comply with the subpoena, order, or notice as a contempt of court.

(b) Special Authority, Reports to President, Administration of National Cancer Program--
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(1) In addition to its other powers, authority and duties, the Commission shall monitor the development and execution of the National Cancer Program, and shall report directly to the President with respect to it. The Commission shall immediately report any delays or blockages in rapid execution of the Program to the President. The Commission shall submit to the President periodic progress reports on the National Cancer Program and shall submit to the President, the Secretary and the Congress an annual evaluation of the efficacy of the Program and suggestions for improvements, which may include or be provided in the form of the National Cancer Program Annual Report authorized and made pursuant to section 417G of the Act. The Commission shall submit to the President such other reports as the President may direct.

(2) In addition to its other powers, authority and duties, the Commission may take administrative actions it determines at the request of and in order to assist the Director of the Institute and the Institute in accomplishment of the National Cancer Program, obtaining information or actions necessary to formulate and prepare the National Cancer Strategic Plan and National Cancer Program Annual Reports, and otherwise in achieving objectives of the National Cancer Strategic Plan.

(c) Additional Powers.—

1) The Commission may—

(A) procure the temporary or intermittent services of experts or consultants under section 3109 of title 5;

(B) make agreements and other transactions necessary to carry out this chapter without regard to section 3709 of the Revised Statutes (41 U.S.C. 5);

(C) use, when appropriate, available services, equipment, personnel, and facilities of a department, agency, or instrumentality of the United States Government on a reimbursable or other basis;

(D) confer with employees and use services, records, and facilities of State and local governmental authorities;

(E) appoint advisory committees composed of qualified private citizens and officials of the Government and State and local governments as appropriate;

(F) accept voluntary and uncompensated services notwithstanding another law;

(G) accept gifts of money and other property;

(H) make contracts with nonprofit entities to carry out studies related to duties and powers of the Commission; and

(I) negotiate and enter into agreements with individuals and private entities and departments, agencies, and instrumentalities of the Government, State and local governments, and governments of foreign countries for the provision of facilities, accident-related and technical services or training in accident investigation theory and techniques, and require that such entities provide appropriate consideration for the reasonable costs of any facilities, goods, services, or training provided by the Commission.

(2) The Commission shall deposit in the Treasury amounts received under this section to be credited as offsetting collections to the appropriation of the Commission. The Commission shall maintain an annual record of collections received under this section.

(d) Submission of Certain Copies to Congress.— When the Commission submits to the President or the Director of the Office of Management and Budget a budget estimate, budget request, supplemental budget estimate, other budget information, a legislative recommendation, prepared testimony for congressional hearings, or comments on legislation, the Commission must submit a copy to Congress at the same time. An officer, department, agency, or instrumentality of the Government may not require the Commission to submit the estimate, request, information, recommendation, testimony, or comments to another officer, department, agency, or instrumentality of the Government for approval, comment, or review before being submitted to Congress. The Commission shall develop and approve a process for the Commission's review and comment or approval of documents submitted to the President, Director of the Office of Management and Budget, or Congress under this subsection.

(e) Liaison Committees.— The Chairman may determine the number of committees that are appropriate to maintain effective liaison with other departments, agencies, and instrumentalities of the Government, State and local governmental authorities, and independent standard-setting authorities that carry out programs and activities related to cancer and the National Cancer Program. The Commission may designate representatives to serve on or assist those committees.

(f) Inquiries.— The Commission, or an officer or employee of the Commission designated by the Chairman, may conduct an inquiry to obtain information related to cancer, the National Cancer Program and the National Cancer Strategic Plan after publishing notice of the inquiry in the Federal Register. The Commission or designated officer or employee may require by order a department, agency, or instrumentality of the Government, a State or local governmental authority, or a person transporting individuals or property in commerce to submit to the Commission a written report and answers to requests and questions related to a duty or power of the Commission. The Commission may prescribe the time within which the report and answers must be given to the Commission or to the designated officer or employee. Copies of the report and answers shall be made available for public inspection.

(g) Regulations.— The Commission may prescribe regulations to carry out this chapter.

(h) Information—

(1) In general.

(A) Except as provided in subsections (b), (c), (d), and (f) of this section, a copy of a record, information, or investigation submitted or received by the National Cancer Commission, or a member or employee of the National Cancer Commission, shall be made available to the public on identifiable request and at reasonable cost. This subsection does not require the release of information described by section 552 (b) of title 5 or protected from disclosure by another law of the United States.

(B) The Commission shall deposit in the Treasury amounts received under this subsection to be credited to the appropriation of the Commission as offsetting collections.

(2) Trade Secrets.—

(A) The Commission may disclose information related to a trade secret referred to in section 1905 of title 18 only—

(i) to another department, agency, or instrumentality of the United States Government when requested for official use;

(B) to a committee of Congress having jurisdiction over the subject matter to which the information is related, when requested by that committee;

(C) in a judicial proceeding under a court order that preserves the confidentiality of the information without impairing the proceeding; and

(D) to the public to protect health after giving notice to any interested person to whom the information is related and an opportunity for that person to comment in writing, or orally in closed session, on the proposed disclosure, if the delay resulting from notice and opportunity for comment would not be detrimental to health.

(B) Information disclosed under paragraph (1) of this subsection may be disclosed only in a way designed to preserve its confidentiality.

(C) Protection of Voluntary Submission of Information.— Notwithstanding any other provision of law, neither the Commission, nor any agency receiving information from the Commission, shall disclose voluntarily provided cancer-related information if that information is not related to the exercise of the Commission’s authority under this chapter and if the Commission finds that the disclosure of the information would inhibit the voluntary provision of that type of information.

(i) Reports

(1) The National Cancer Commission shall report periodically to Congress, departments, agencies, and instrumentalities of the United States Government and State and local governmental authorities concerned with cancer, the National Cancer Program and National Cancer Strategic Plan, and other interested persons. The report shall—

(A) state a narrative, statistical and analytical summary of the status of the National Cancer Program during the prior calendar year, which may include any or all of the information contained in the National Cancer Program Annual Report authorized and described in section 417B;

(B) state a survey and summary of recommendations made by the Commission to accomplish the National Cancer Program and National Cancer Strategic Plan together with the observed response to each recommendation;

(C) give a description of the activities and operations of the National Cancer Commission during the prior calendar year;

(D) provide a list of ongoing studies, investigations or programs that have exceeded the expected time allotted for completion by Commission and an explanation for the additional time required to complete each such matter.

(E) advocate meaningful responses to promote and advance the National Cancer Program and National Cancer Strategic Plan; and

(F) propose action to accomplish the purposes of the National Cancer Program, including the National Cancer Strategic Plan.

(2) Studies, Investigations, and Other Reports.— The Commission also shall—

(A) carry out special studies and investigations about cancer,

(B) examine the conduct and progress of the National Cancer Program and National Cancer Strategic Plan and periodically publish recommended activities, plans and efforts;

(C) prescribe requirements for persons involved with activity under authority of the Commission and the National Cancer Program and National Cancer Strategic Plan--

(i) may be investigated by the Commission under this chapter; or

(ii) involve activity, research, programs or other matters related to the National Cancer Program and National Cancer Strategic Plan.

(D) evaluate, examine the effectiveness of, and publish the findings of the Commission about the cancer. and the activity involving the National Cancer Program and National Cancer Strategic Plan of departments, agencies, and instrumentalities of the Government and their effectiveness; and

(E) evaluate the National Cancer Program and the performance of other departments, agencies, and instrumentalities of the Government responsible for cancer research and other activities related to cancer and the National Cancer Program and National Cancer Strategic Plan.

(j) Appropriations

(1) General.-- There are authorized to be appropriated for the purposes of the National Cancer Commission chapter \$200,000,000 for fiscal years 2011 through 2026. Such sums shall be in addition to other amounts appropriated for the National Cancer Institute and Program, and remain available until expended.

(2) Fees, Refunds, and Reimbursements.—

(A) In general.— The Commission may impose and collect such fees, refunds, and reimbursements as it determines to be appropriate for services provided by or through the Commission.

(B) Receipts credited as offsetting collections.— Notwithstanding section 3302 of title 31, any fee, refund, or reimbursement collected under this subsection—

(i) shall be credited as offsetting collections to the account that finances the activities and services for which the fee is imposed or with which the refund or reimbursement is associated;

(i) shall be available for expenditure only to pay the costs of activities and services for which the fee is imposed or with which the refund or reimbursement is associated; and

(iii) shall remain available until expended.

(C) Refunds.— The Commission may refund any fee paid by mistake or any amount paid in excess of that required.”

SEC. 8. ENHANCED CANCER RESEARCH STRATEGIC PLANNING AND REPORTING

Part C of title IV of the Public Health Service Act (42 U.S.C. 285 et seq.) is amended by inserting after section 417F the following:

“SEC. 417G. STRATEGIC PLANNING AND REPORTING OF CANCER RESEARCH

(a) (1) The Secretary and the Director of the National Cancer Institute shall by January 1, 2011 prepare and deliver to the President, the Secretary, and the Congress a National Cancer Strategic Plan (referred to in this section as the “Plan”).

(2) The National Cancer Strategic Plan shall include specific listed near term and long-term strategic objectives of the National Cancer Program to win the war on cancer, to include scientific, medical, health, educational, information sharing and transmission, infrastructure, technical, and fiscal and funding goals, objectives and standards, the recommended means to achieve those objectives, and how progress and achievement of them shall be measured and reported.

(3) The guiding principal of the Plan shall be the conquest of cancer at the earliest possible date.

(b) The Plan shall include, without limitation, a strategic plan and related information regarding conduct of cancer research, and the prevention, diagnosis, treatment and the cure of cancer, with respect to—

(i) Scientific research on tumors, cells, related subjects.

(ii) Scientific research on metastasis of cancer.

(iii) Scientific research on infectious disease and cancer and vaccines.

(iv) Scientific research on genetics and cancer.

(v) Scientific research on carcinogen and environmental and other causes of cancer.

(vi) Delivery and effective application of scientific research findings to patients and health care providers.

(vii) Cancer prevention and avoidance.

(viii) Cancer detection.

(ix) Access to cancer prevention, detection, diagnosis and treatment.

(x) Drug and cancer treatment.

(xi) Reduction of mortality in cancers that result in a 5-year survival rate of less than 50 percent.

(xii) Coordination and collaboration of cancer research being conducted in all sectors of the effort.

(xiii) Development and retention of scientists and facilities to find a cure for cancer.

(xiv) Education of the public about cancer, preventive actions, and the need for support for research and access to treatment.

(xv) Funding of cancer research and the National Cancer Program.

(c) (1) The Plan shall include the amount of continuing annual appropriations necessary to accomplish all elements and parts of the Plan during the period beginning in 2011 and ending in 2026.

(2) The amount shall be determined by the National Cancer Commission upon application of the Director which shall be supported by requests for specific elements of the Plan.

(3) The National Cancer Commission may request, obtain, receive and consider information and recommendations from other persons, organizations and groups in order to make its determination of the annual appropriations amounts.

(d) (1) The Secretary and the Director of the National Cancer Institute, with the assistance of the National Cancer Commission, shall regularly and continuously monitor and evaluate the short and long-term needs and opportunities of federally funded cancer programs and make recommendations on how to better integrate and coordinate these activities in furtherance of advancing progress in the war on cancer.

(2) The Secretary and the Director of the National Cancer Institute, with the assistance of the National Cancer Commission, shall periodically and at least annually review, modify and update the Plan.

(e) (1) The Secretary and Director, with the assistance of the National Cancer Commission, shall cause a detailed annual independent report and evaluation to be prepared and completed as to the progress and remaining objectives to be achieved under the Plan.

(2) The independent annual independent report shall be entitled and known as the National Cancer Program Annual Report (hereinafter referred to in this section as the “NCP Annual Report”), which will include an evaluation of the efficacy of the Program, accomplishment of the Plan, and include suggestions for improvements for the Plan and the Program.

(3) The independent NCP Annual Report for each year shall be submitted in a standardized form and contain updated information and evaluations in substantially the same order and terms as the independent NCP Annual Reports that have been made and delivered in prior years so as to allow comparison of pertinent information from year to year.

(f) The Secretary and Director of the Institute, with the assistance of the National Cancer Commission, shall have the independent NCP Annual Report independently prepared, completed and made by the Institute of Medicine, or some other institution or entity with comparable qualifications and ability to independently evaluate the efficacy of the Program, and make recommendations with respect to the Plan and the Program.

(g) (1) The independent NCP Annual Report shall be submitted to the President, the National Cancer Commission and Congress on the same date that the annual budget estimate described in section 413(b)(9) is submitted to the President.

(2) Other reports of the Director or Institute concerning the Program and the Plan shall be prepared and furnished to the President and the National Cancer Commission as they may request from time to time.”

SEC. 9. NATIONAL CANCER INSTITUTE INCENTIVE COMPENSATION PLAN

Part C of title IV of the Public Health Service Act (42 U.S.C. 285 et seq.) is amended by inserting a Section 414A after section 414, as follows::

“SEC. 414. NCI INCENTIVE COMPENSATION PLAN

(a) The Secretary shall establish and maintain an incentive compensation plan under which the Director of the National Cancer Institute, and other officers, administrators, scientists and persons who are employees of the National Cancer Institute shall be made eligible to receive cash bonus incentive compensation awards for achievements, discoveries and exemplary and productive performance of services for the Institute,

achieving the objectives of the National Cancer Strategic Plan, and furthering of the National Cancer Program.

(b) The incentive compensation plan established and maintained under this section shall not be subject to or limited by the provisions, conditions or limitations governing or affecting compensation in title 5 or any other law or regulations that would otherwise limit the compensation provided under such plan.

(c) The Secretary shall appoint and confer with a committee of individuals from the Department of Health and Human Services, scientific and academic institutions, private industry and such other entities and organizations that the Secretary determines are qualified and have appropriate expertise in determining the nature, basis and qualifications for, and amounts of such cash bonus incentive compensation awards that are paid under the plan that is established.

(d) (1) The cash bonus incentive compensation awards for a calendar year may be paid to the Director or such other persons in the amounts the Secretary, after consultation with receiving advice and recommendations by the committee, shall determine, for achievements, discoveries and service in that year, in an aggregate amount of up to \$10,000,000 for all such awards paid for the year.

(2) The determination and payment of such awards shall be discretionary and is not required to be for any particular year, unless it is found to be appropriate and advantageous to advancing the functions, plans, programs, goals and objectives of the National Cancer Institute, National Cancer Program and National Cancer Strategic Plan.

(3) The Secretary may determine and direct that such an award be paid in a particular year for achievements, discoveries and service that have involved more than one year or the present and prior years.

(e) An appropriation is made for the amount of such compensation stated in subsection (d), which shall be made each year for the National Cancer Institute. To the extent the amount appropriated is not utilized to pay cash bonus incentive compensation awards under the plan in a particular year, it shall be considered to remain appropriated for future years until used in making awards.”

SEC.10. ENHANCED COLLABORATION; CANCER RESEARCH REPORTING

Part C of title IV of the Public Health Service Act (42 U.S.C. 285 et seq.) is amended by adding a section 417G as follows:

“SEC. 417H. REGISTRATION, REPORTING OF CANCER RESEARCH PROGRAMS; REPORTS BY INSITUTE

(a) (1) Any cancer research study, investigation, project or program (hereinafter in this section referred to as “cancer research program”) in the United States begun by any person, firm, corporation, organization, group or entity (hereinafter in this section referred to as “cancer researcher”) shall be registered with and reported to the National Cancer Commission (hereinafter in this section referred to as “Commission”) by filing a statement which shall be entitled and known as a Cancer Research Report, in such form and manner and to such extent as the Commission shall prescribe, which shall be signed by the cancer researcher or its principal executive officer or officers.

(2) A Cancer Research Report shall be filed with the Commission by a cancer researcher that begins a cancer research program in the United States within six months after the date such cancer research program begins.

(3) The Commission, after consultation with the Director, the National Cancer Institute, and advisory council of the Institute, shall prescribe by regulation the definition of a cancer research program that shall be required to be registered and reported by filing of a Cancer Research Report with the Commission under subsection(a), and otherwise in accordance with this section.

(3) The Cancer Research Report shall be in written form and contain a brief, concise and definitive statement of such information about the cancer research program being registered and reported as the Commission may determine and prescribe, to include, without limitation, the nature and purpose of the research program, principal researchers, scientists and investigators, the intended or expected research activities and findings, and the time period within which the research program is expected to be conducted. The Commission shall be authorized to obtain additional and clarifying information from a cancer researcher with respect to the Cancer Research Report filed.

(4) Each cancer researcher that registers and reports a cancer research program by filing an initial Cancer Research Program Report shall thereafter annually file a supplemental or updated Cancer Research Report with the Commission in such form as the Commission shall prescribe until the completion or termination of the cancer research program. Such annual report shall provide updated and current information about the status of the cancer research program previously registered and reported as specified by the Commission.

(5) The Department of Health and Human Services shall pay to each researcher that begins and conducts a cancer research program a reasonable amount for reimbursement of its costs of preparing and filing each complete Cancer Research Report that is filed by such researcher with the Commission pursuant to this section.

(6) Every person or researcher that is required to file a Cancer Research Report pursuant to this section and fails to do so shall pay to the Commission \$1,000 for each initial failure to file, and \$100 for each day thereafter such person or researcher fails to file. No payment shall be required to be paid under this subsection with respect to any failure to file if it is shown that such failure is due to reasonable cause.

(2) The Director of the Institute, with the assistance of the Commission, shall periodically, and at least annually, furnish to each researcher that has filed a Cancer Research Report, a report or other statement of the Institute that includes the National Cancer Strategic Plan, most recent National Cancer Program Annual Report, and other information that the Director and Commission determine may be of particular importance or relevance with respect to the cancer research program that has been reported by the researcher, and that may enhance the coordination and collaboration of such research program with the other cancer research studies, programs and efforts involved in or related to the National Cancer Strategy and National Cancer Program and National Cancer Strategic Plan.”