

113TH CONGRESS  
1ST SESSION

# H. R. 1830

To provide for the establishment of a Commission to Accelerate the End  
of Breast Cancer.

---

## IN THE HOUSE OF REPRESENTATIVES

MAY 6, 2013

Mrs. CAPITO (for herself, Ms. CASTOR of Florida, Ms. BASS, Mrs. BLACKBURN, Mr. LATHAM, Mr. LOEBSACK, Mr. MARKEY, Ms. MOORE, and Mr. TIBERI) introduced the following bill; which was referred to the Committee on Energy and Commerce

---

## A BILL

To provide for the establishment of a Commission to  
Accelerate the End of Breast Cancer.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Accelerating the End  
5 of Breast Cancer Act of 2013”.

6 **SEC. 2. TABLE OF CONTENTS.**

7 The table of contents of this Act is as follows:

- Sec. 1. Short title.
- Sec. 2. Table of contents.
- Sec. 3. Findings.
- Sec. 4. Establishment.
- Sec. 5. Mission; duties.

- Sec. 6. Membership.
- Sec. 7. Chairperson and commissioners.
- Sec. 8. Coordination and nonduplication.
- Sec. 9. Evaluation of the commission.
- Sec. 10. Termination.

1 **SEC. 3. FINDINGS.**

2 The Congress finds the following:

3 (1) In the United States, the chance of a  
4 woman developing breast cancer during her lifetime  
5 has increased from 1 in 11 in 1975 to 1 in 8 today.

6 (2) Worldwide, breast cancer is the most fre-  
7 quently diagnosed cancer in women with 1.3 million  
8 cases each year and the leading cause of cancer  
9 death with more than 500,000 women dying from  
10 the disease in 2010.

11 (3) More than 90 percent of deaths from breast  
12 cancer are caused by metastasis, when breast cancer  
13 has spread to other organs or bone.

14 (4) The National Cancer Institute estimated  
15 that breast cancer care in the United States cost  
16 \$16.5 billion in 2009 and cost the Nation \$12.1 bil-  
17 lion in lost productivity.

18 (5) Very little has improved in terms of breast  
19 cancer incidence, morbidity, and mortality rates over  
20 the past 40 years.

1 **SEC. 4. ESTABLISHMENT.**

2 The President shall establish a commission to be  
3 known as the Commission to Accelerate the End of Breast  
4 Cancer (in this Act referred to as the “the Commission”).

5 **SEC. 5. MISSION; DUTIES.**

6 (a) MISSION.—The mission of the Commission shall  
7 be to help end breast cancer by January 1, 2020.

8 (b) DUTIES.—The Commission shall—

9 (1) identify opportunities and ideas within gov-  
10 ernment and the private sector that are key compo-  
11 nents in achieving the end of breast cancer and  
12 which have been overlooked, yet are ripe for collabo-  
13 ration and investment, and

14 (2) recommend projects to leverage such oppor-  
15 tunities and ideas in the areas of—

16 (A) the primary prevention of breast can-  
17 cer; and

18 (B) the causes and prevention of breast  
19 cancer metastasis.

20 (c) MEANS.—In carrying out the duties described in  
21 subsection (b), the Commission shall—

22 (1) identify revolutionary opportunities and  
23 ideas in fundamental and applied sciences and epide-  
24 miology with a focus on ending breast cancer;

25 (2) identify timely opportunities and scientific  
26 discoveries which can be turned into real world

1 strategies to prevent breast cancer and prevent  
2 breast cancer metastasis and deaths;

3 (3) promote ideas that are intellectually compel-  
4 ling, innovative, and imaginative;

5 (4) accelerate potential transformational sci-  
6 entific advances—

7 (A) not being prioritized within the Fed-  
8 eral Government, but which can help to achieve  
9 the mission described in subsection (a); and

10 (B) unlikely to be achieved by the private  
11 sector due to technical and financial uncer-  
12 tainty;

13 (5) identify promising, underdeveloped areas of  
14 research that would benefit from a cluster of govern-  
15 ment, industry, and academia forming innovation  
16 communities to rapidly advance knowledge into prac-  
17 tice, while creating new opportunities for job cre-  
18 ation and advancement;

19 (6) identify opportunities for transdisciplinary  
20 cross-cutting collaborations; and

21 (7) identify opportunities for seed grants to le-  
22 verage identified opportunities and ideas.

23 (d) STRATEGIC VISION.—Not later than 6 months  
24 after the appointment of the initial members of the Com-  
25 mission, the Commission shall submit to the President and

1 the relevant authorizing and appropriations committees of  
2 the Congress a description of the Commission's strategic  
3 vision for making progress in achieving the mission de-  
4 scribed in subsection (a) by January 1, 2020.

5 (e) ANNUAL REPORTS.—The Commission shall sub-  
6 mit an annual report to the President, the Congress, and  
7 the public describing the Commission's activities under  
8 this section, including its progress in achieving the mission  
9 described in subsection (a).

10 **SEC. 6. MEMBERSHIP.**

11 (a) NUMBER; APPOINTMENT.—The Commission shall  
12 be composed of not more than 10 members, of which—

13 (1) not more than 8 shall be appointed by the  
14 President;

15 (2) 1 shall be appointed by the Speaker of the  
16 House of Representatives; and

17 (3) 1 shall be appointed by the majority leader  
18 of the Senate.

19 (b) COMPOSITION.—

20 (1) IN GENERAL.—Each member of the Com-  
21 mission shall be appointed to represent one of the  
22 following 3 categories:

23 (A) Representatives of varied disciplines  
24 within the biomedical research field.

1 (B) Representatives of varied disciplines  
2 outside of the biomedical research field.

3 (C) Educated patient advocates, meaning  
4 individuals who—

5 (i) represent a patient-led, patient-  
6 centered organization with a patient con-  
7 stituency;

8 (ii) have been personally affected by  
9 breast cancer; and

10 (iii) are trained, knowledgeable, and  
11 prepared to participate in the decision-  
12 making process of science and medicine.

13 (2) REPRESENTATION OF MEMBERSHIP CAT-  
14 EGORIES.—Of the members of the Commission—

15 (A) at least 1 but not more than 3 shall  
16 be appointed to represent the category de-  
17 scribed in paragraph (1)(A);

18 (B) at least 1 but not more than 3 shall  
19 be appointed to represent the category de-  
20 scribed in paragraph (1)(B); and

21 (C) at least 2 but not more than 4 shall  
22 be appointed to represent the category de-  
23 scribed in paragraph (1)(C).

1 (c) INITIAL MEMBERS.—The initial members of the  
2 Commission shall be appointed not later than 60 days  
3 after the date of the enactment of this Act.

4 (d) TERMS.—

5 (1) IN GENERAL.—Each member of the Com-  
6 mission shall be appointed for a term of 3 years and  
7 may be reappointed.

8 (2) VACANCIES.—Any member of the Commis-  
9 sion appointed to fill a vacancy occurring before the  
10 expiration of the term for which the member's pred-  
11 ecessor was appointed shall be appointed only for  
12 the remainder of that term. A member may serve  
13 after the expiration of that member's term until a  
14 successor has taken office. A vacancy in the Com-  
15 mission shall be filled in the manner in which the  
16 original appointment was made.

17 (e) QUORUM.—Three members of the Commission  
18 shall constitute a quorum.

19 **SEC. 7. CHAIRPERSON AND COMMISSIONERS.**

20 (a) CHAIRPERSON.—

21 (1) DESIGNATION.—Of the members of the  
22 Commission appointed under section 6(a), the Presi-  
23 dent shall at the time of appointment, designate one  
24 to serve as Chairperson of the Commission.

1           (2) QUALIFICATIONS.—The Chairperson shall  
2           be an individual who, by reason of professional back-  
3           ground and experience, is especially qualified to  
4           manage areas of study pertaining to ending breast  
5           cancer by January 1, 2020.

6           (3) RESPONSIBILITIES.—The responsibilities of  
7           the Chairperson shall include—

8                   (A) approving all new study projects and  
9                   areas of study of the Commission based on in-  
10                  novation, impact, and scientific and technical  
11                  merit;

12                  (B) developing criteria (including mile-  
13                  stones) for assessing, and overseeing assess-  
14                  ment of, the success of the study projects and  
15                  areas of study of the Commission;

16                  (C) identifying opportunities for seed  
17                  grants and other funding through awards,  
18                  prizes, grants, and contracts to achieve the mis-  
19                  sion described in section 5(a); and

20                  (D) terminating study projects and areas  
21                  of study of the Commission that are not achiev-  
22                  ing the mission described in section 5(a).

23           (b) COMMISSIONERS.—

24                   (1) IN GENERAL.—The Chairperson of the  
25                  Commission may appoint members of the Commis-



1 sion to oversee one or more areas of study of the  
2 Commission.

3 (2) RESPONSIBILITIES.—A member appointed  
4 under paragraph (1) shall, with respect to one or  
5 more areas of study, be responsible for—

6 (A) recommending novel proposals,  
7 projects, and collaborations based on scientific  
8 and technical merit to achieve the mission de-  
9 scribed in section 5(a) with a focus on strate-  
10 gies for the primary prevention of breast can-  
11 cer, and methods to prevent breast cancer me-  
12 tastasis;

13 (B) identifying ideas and opportunities to  
14 achieve the mission described in section 5(a)  
15 that are intellectually compelling, innovative,  
16 and imaginative, including such ideas and op-  
17 portunities not being prioritized for breast can-  
18 cer relevance within Federal agencies or pro-  
19 grams or the private sector;

20 (C) working with other relevant Federal  
21 agencies to identify areas of concurrent inter-  
22 ests in order to maximize Federal investment  
23 and stimulate collaborative projects;

1 (D) identifying opportunities for  
2 transdisciplinary, cross-cutting collaborations;  
3 and

4 (E) monitoring the progress of study  
5 projects and areas of study and recommending  
6 restructure or termination.

7 **SEC. 8. COORDINATION AND NONDUPLICATION.**

8 To the maximum extent practicable, the Commission  
9 shall ensure that the activities of the Commission are co-  
10 ordinated with, and do not duplicate the efforts of, pro-  
11 grams and laboratories of other government agencies.

12 **SEC. 9. EVALUATION OF THE COMMISSION.**

13 (a) IN GENERAL.—The President shall seek to enter  
14 into an agreement with the Institute of Medicine of the  
15 National Academy of Sciences under which the Institute,  
16 after the Commission has been in operation for 3 years,  
17 completes an evaluation of how well the Commission is  
18 making progress towards achieving the mission described  
19 in section 5(a).

20 (b) INCLUSIONS.—The evaluation under subsection  
21 (a) shall include—

22 (1) a recommendation on whether the Commis-  
23 sion should be continued or terminated; and

24 (2) a description of lessons learned from oper-  
25 ation of the Commission.

1           (c) AVAILABILITY.—On completion of the evaluation  
2 under subsection (a), the Commission shall make the eval-  
3 uation available to the Congress and the public.

4 **SEC. 10. TERMINATION.**

5           The Commission shall terminate on June 1, 2020.

○