

107TH CONGRESS
2^D SESSION

H. R. 3910

To amend title XVIII of the Social Security Act to provide for coverage under the Medicare Program of certain tests to screen for ovarian cancer upon certification by the Director of the National Institutes of Health that such tests are effective.

IN THE HOUSE OF REPRESENTATIVES

MARCH 7, 2002

Mr. ISRAEL introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title XVIII of the Social Security Act to provide for coverage under the Medicare Program of certain tests to screen for ovarian cancer upon certification by the Director of the National Institutes of Health that such tests are effective.

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 “Protect Our Women
5 From Ovarian Cancer Act of 2002”.

1 **SEC. 2. FINDINGS.**

2 (1) Ovarian cancer is a serious and underrecog-
3 nized threat to women's health.

4 (2) Ovarian cancer, the deadliest of the
5 gynecologic cancers, is the fourth leading cause of
6 cancer death among women in the United States.

7 (3) Ovarian cancer occurs in 1 out of 57 women
8 in the United States.

9 (4) Approximately 50 percent of the women in
10 the United States diagnosed with ovarian cancer die
11 as a result of the cancer within 5 years; among Afri-
12 can-American women, only about 48 percent survive
13 5 years or more.

14 (5) Ovarian cancer is readily treatable when it
15 is detected in the beginning stages before it has
16 spread beyond the ovaries, but the vast majority of
17 cases are not diagnosed until the advanced stages
18 when the cancer has spread beyond the ovaries.

19 (6) In cases where ovarian cancer is detected in
20 the beginning stages, more than 90 percent of
21 women survive longer than 5 years.

22 (7) Only 25 percent of ovarian cancer cases in
23 the United States are diagnosed in the beginning
24 stages.

1 (8) In cases where ovarian cancer is diagnosed
2 in the advanced stages, the chance of 5-year survival
3 is only about 25 percent.

4 (9) Ovarian cancer may be difficult to diagnose
5 because symptoms are easily confused with other
6 diseases and because there is no reliable, easy-to-ad-
7 minister screening tool.

8 **SEC. 3. MEDICARE PREVENTIVE BENEFIT EXPANSION TO**
9 **INCLUDE CERTAIN SCREENING TESTS FOR**
10 **OVARIAN CANCER.**

11 (a) IN GENERAL.—

12 (1) COVERAGE.—Section 1861 of the Social Se-
13 curity Act (42 U.S.C. 1395x) is amended—

14 (A) in subsection (s)(2)—

15 (i) by striking “and” at the end of
16 subparagraphs (U);

17 (ii) by adding “and” at the end of
18 subparagraph (V); and

19 (iii) by inserting after subparagraph
20 (V) the following new subparagraph:

21 “(W) qualified ovarian cancer screening tests
22 (as defined in subsection (ww)); and”; and

23 (2) by adding at the end the following new sub-
24 section:

1 “Qualified Ovarian Cancer Screening Tests

2 “(ww)(1) The term ‘qualified ovarian cancer screen-
3 ing test’ means a test that consists of any (or all) of the
4 procedures described in paragraph (2) provided for the
5 purpose of early detection of ovarian cancer to a woman
6 over 50 years of age who has not had such a test during
7 the preceding year.

8 “(2) The procedures described in this paragraph are
9 as follows:

10 “(A) A proteomic pattern blood test to identify
11 ovarian cancer.

12 “(B) Such other procedures as the Secretary
13 finds appropriate for the purpose of early detection
14 of ovarian cancer, taking into account changes in
15 technology and standards of medical practice, avail-
16 ability, effectiveness, costs, and such other factors as
17 the Secretary considers appropriate.”.

18 (2) PAYMENT FOR PROTEOMIC PATTERN BLOOD
19 TEST UNDER CLINICAL DIAGNOSTIC LABORATORY
20 TEST FEE SCHEDULES.—

21 (A) IN GENERAL.—Section 1833(h)(1)(A)
22 of such Act (42 U.S.C. 1395l(h)(1)(A)) is
23 amended by inserting after “(including prostate
24 cancer screening tests under section 1861(o))
25 consisting of prostate-specific antigen blood

1 tests” the following: “, and including ovarian
2 cancer screening tests under section
3 1861(ww)(2)(A) consisting of proteomic pattern
4 blood tests”.

5 (B) PAYMENT RATE.—Section 1833(h)(7)
6 of such Act (42 U.S.C. 1395l(h)(7) is amended
7 by inserting after “a primary screening method
8 for detection of cervical cancer)” the following:
9 “and qualified ovarian cancer screening tests
10 under section 1861(ww)(2)(A)”.

11 (3) CONFORMING AMENDMENTS.—Section
12 1862(a) of such Act (42 U.S.C. 1395y(a)) is
13 amended—

14 (A) in paragraph (1)—

15 (i) in subparagraph (H), by striking
16 “and” at the end,

17 (ii) in subparagraph (I), by striking
18 the semicolon at the end and inserting “,
19 and”, and

20 (iii) by adding at the end the fol-
21 lowing new subparagraph:

22 “(J) in the case of qualified ovarian cancer
23 screening tests (as defined in section 1861(ww)),
24 which are performed more frequently than is covered
25 under such section;”; and

1 (B) in paragraph (7), by striking “or (H)”
2 and inserting “(H), or (J)”.

3 (b) CONTINGENT EFFECTIVE DATE.—(1) The
4 amendments made subsection (a) shall become effective (if
5 at all) in accordance with paragraph (2).

6 (2)(A) The Secretary of Health and Human Services
7 shall submit to Congress the report required under section
8 4(b) containing the results of the evaluation conducted
9 under section 4(a) analyzing the effectiveness of using
10 proteomic patterns in blood serum to identify ovarian can-
11 cer, including the effectiveness of so using proteomic pat-
12 terns in combination with other screening methods for
13 ovarian cancer.

14 (B) The amendments made by subsection (a) shall
15 become effective, on the date that is the first day of the
16 first calendar quarter that begins after the Secretary sub-
17 mits the report referred to in subparagraph (A), unless
18 the Secretary includes in that report a finding that use
19 of such technique is not sufficiently effective, reliable, or
20 cost effective for use in detecting ovarian cancer in medi-
21 care beneficiaries.

1 **SEC. 4. RESEARCH AND REPORT ON EFFECTIVENESS OF**
2 **USE OF PROTEOMIC PATTERNS IN IDENTI-**
3 **FYING OVARIAN CANCER.**

4 (a) RESEARCH.—The Secretary of Health and
5 Human Services, acting through the Director of the Na-
6 tional Institutes of Health, shall conduct or support re-
7 search on the effectiveness of the medical screening tech-
8 nique of using proteomic patterns in blood serum to iden-
9 tify ovarian cancer, including the effectiveness of so using
10 proteomic patterns in combination with other screening
11 methods for ovarian cancer.

12 (b) REPORT.—The Secretary shall submit to Con-
13 gress a report on the research conducted under subsection
14 (a), and shall include an evaluation of such research that
15 analyses the effectiveness of such medical screening tech-
16 nique.

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