

117TH CONGRESS
1ST SESSION

H. R. 1550

To amend the Public Health Service Act to provide for a public awareness campaign with respect to human papillomavirus, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 3, 2021

Ms. CASTOR of Florida (for herself and Ms. SCHRIER) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to provide for a public awareness campaign with respect to human papillomavirus, and for other purposes.

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 “Promoting Resources
5 to Expand Vaccination, Education and New Treatments
6 for HPV Cancers Act of 2021” or the “PREVENT HPV
7 Cancers Act of 2021”.

8 **SEC. 2. FINDINGS.**

9 Congress finds the following:

1 (1) The human papillomavirus (referred to in
2 this Act as “HPV”) causes six different types of
3 cancer (anal, cervical, oropharynx, penile, vaginal,
4 and vulvar).

5 (2) Almost 35,000 cases of cancer are caused
6 by HPV each year impacting both women and men.

7 (3) About 90 percent of cervical and anal can-
8 cers are thought to be caused by HPV.

9 (4) Black and Hispanic women are more likely
10 to get HPV-associated cervical cancer than women
11 of other races and ethnicities.

12 (5) Approximately 60 to 70 percent of
13 oropharynx cancer is tied to HPV.

14 (6) Most HPV infections that can lead to can-
15 cer can be prevented by vaccines.

16 (7) HPV vaccines can also help prevent recur-
17 rent respiratory papillomatosis, anal and genital
18 warts.

19 (8) Vaccination for HPV is approved for men
20 and women.

21 (9) The vaccines are most effective if adminis-
22 tered when an individual is between the ages of 9
23 and 12.

24 (10) Only about half of adolescents have com-
25 pleted the HPV vaccine series.

1 (11) Certain populations, like adolescents in
 2 rural areas and males are less likely to receive the
 3 HPV vaccine.

4 (12) Health providers' recommendation of the
 5 vaccine is critical to getting adolescents vaccinated

6 **SEC. 3. HPV VACCINE PUBLIC AWARENESS CAMPAIGN.**

7 Section 317 of the Public Health Service Act (42
 8 U.S.C. 247b) is amended by adding at the end the fol-
 9 lowing new subsection:

10 “(o) HPV VACCINE PUBLIC AWARENESS CAM-
 11 PAIGN.—

12 “(1) IN GENERAL.—The Secretary, acting
 13 through the Director of the Centers for Disease
 14 Control and Prevention, shall carry out a national
 15 campaign to—

16 “(A) increase awareness of the importance
 17 of HPV vaccination;

18 “(B) combat misinformation about HPV
 19 vaccination; and

20 “(C) increase HPV vaccination rates and
 21 completion of the vaccine series, especially
 22 among males.

23 “(2) CONSULTATION.—In carrying out the na-
 24 tional campaign required by paragraph (1), the Sec-
 25 retary shall consult with the National Academy of

1 Medicine, including health care providers and public
2 health associations, nonprofit organizations (includ-
3 ing those that represent communities most impacted
4 by HPV-associated cancers and communities with
5 low vaccination rates), State and local public health
6 departments, elementary and secondary education
7 organizations (including student and parent organi-
8 zations), and institutions of higher education, to so-
9 licit advice on evidence-based information for policy
10 development and program development, implementa-
11 tion, and evaluation.

12 “(3) REQUIREMENTS.—The national campaign
13 required by paragraph (1) shall—

14 “(A) include the use of evidence-based
15 media and public engagement;

16 “(B) be carried out through competitive
17 grants or cooperative agreements awarded to
18 one or more private, nonprofit entities with a
19 history developing and implementing similar
20 campaigns;

21 “(C) include the development of culturally
22 and linguistically competent resources that shall
23 be tailored for—

24 “(i) communities with high rates of—

1 “(I) unvaccinated individuals, in-
2 cluding males;

3 “(II) individuals with unique
4 health care needs (such as lesbian,
5 gay, bisexual, transgender, and queer
6 individuals);

7 “(III) individuals with high rates
8 of cervical cancer and other HPV-as-
9 sociated cancers (such as Black and
10 Hispanic women); and

11 “(IV) populations impacted by
12 the increase in oropharynx cancers;

13 “(ii) rural communities; and

14 “(iii) such other communities as the
15 Secretary determines appropriate;

16 “(D) include the dissemination of HPV
17 vaccination information and communication re-
18 sources to health care providers and health care
19 facilities (including primary care providers,
20 community health centers, dentists, obstetri-
21 cians, and gynecologists), and such providers
22 and such facilities for pediatric care, State and
23 local public health departments, elementary and
24 secondary schools, and colleges and universities;

1 “(E) be complementary to, and coordi-
2 nated with, any other Federal efforts with re-
3 spect to HPV vaccination;

4 “(F) include message testing to identify
5 culturally competent and effective messages for
6 behavioral change; and

7 “(G) include the award of grants or coop-
8 erative agreements to State, local, and Tribal
9 public health departments—

10 “(i) to engage with communities speci-
11 fied in subparagraph (C), local education
12 agencies, health care providers, community
13 organizations, or other groups the Sec-
14 retary determines are appropriate to de-
15 velop and deliver effective strategies to in-
16 crease HPV vaccination rates; and

17 “(ii) to disseminate culturally and lin-
18 guistically competent resources on the Na-
19 tional Breast and Cervical Cancer Early
20 Detection Program and where an indi-
21 vidual can access the screenings locally.

22 “(4) OPTIONS FOR DISSEMINATION OF INFOR-
23 MATION.—The national campaign required by para-
24 graph (1) may—

25 “(A) include the use of—

1 “(i) social media, television, radio,
2 print, the internet, and other media;

3 “(ii) in-person or virtual public com-
4 munications; and

5 “(iii) recognized, trusted figures;

6 “(B) be targeted to specific groups and
7 communities specified in paragraph (3)(C); and

8 “(C) include the dissemination of informa-
9 tion highlighting each of the following:

10 “(i) Recommended age range to get
11 the HPV vaccine.

12 “(ii) The benefits of getting vac-
13 cinated against HPV, including the poten-
14 tial to not acquire HPV-associated cancers.

15 “(iii) HPV vaccine safety and the sys-
16 tems in place to monitor such safety.

17 “(5) AUTHORIZATION OF APPROPRIATIONS.—

18 There is authorized to be appropriated to carry out
19 this subsection \$5,000,000 for each of fiscal years
20 2021 through 2025.”.

21 **SEC. 4. STATE IMMUNIZATION INFORMATION SYSTEM EN-**
22 **HANCEMENT.**

23 Section 317(k) of the Public Health Service Act (42
24 U.S.C. 247b(k)) is amended—

25 (1) in paragraph (1)—

1 (A) in subparagraph (C), by striking
2 “and” at the end;

3 (B) in subparagraph (D), by striking the
4 period at the end and inserting “; and”; and

5 (C) by adding at the end the following:

6 “(E) State immunization information sys-
7 tems.”;

8 (2) in paragraph (2)—

9 (A) in subparagraph (C), by striking
10 “and” at the end;

11 (B) in subparagraph (D), by striking the
12 period at the end and inserting “; and”; and

13 (C) by adding at the end the following:

14 “(E) State immunization information sys-
15 tems.”; and

16 (3) by adding at the end the following:

17 “(5) In addition to any funds made available
18 under subsection (j) to carry out this subsection,
19 there are authorized to be appropriated to carry out
20 this subsection \$50,000,000 for each of fiscal years
21 2021 through 2025.”.

1 **SEC. 5. EXPANDING RESEARCH AND EDUCATION WITH RE-**
2 **SPECT TO HPV-ASSOCIATED CANCERS.**

3 Part B of title IV of the Public Health Service Act
4 (42 U.S.C. 284 et seq.) is amended by adding at the end
5 the following new section:

6 **“SEC. 409K. HPV-ASSOCIATED CANCERS.**

7 “(a) IN GENERAL.—The Secretary, acting through
8 the Director of the National Cancer Institute, shall ex-
9 pand, intensify, and coordinate programs to conduct and
10 support research with respect to HPV-associated cancers.

11 “(b) COORDINATION WITH OTHER INSTITUTES.—
12 The Secretary, acting through the Director of the Na-
13 tional Cancer Institute, shall coordinate activities carried
14 out by the Director pursuant to subsection (a) with similar
15 activities carried out by other national research institutes
16 and agencies of the National Institutes of Health to the
17 extent that those Institutes and agencies have responsibil-
18 ities that are related to HPV-associated cancers.

19 “(c) AUTHORIZATION OF APPROPRIATIONS.—For
20 purposes of carrying out this section, there is authorized
21 to be appropriated \$10,000,000 for each of fiscal years
22 2021 through 2025.

23 “(d) HPV-ASSOCIATED CANCER.—In this section,
24 the term ‘HPV-associated cancer’ means cancer associated
25 with the human papillomavirus.”.

1 **SEC. 6. BREAST AND CERVICAL CANCER EARLY DETECTION**
2 **PROGRAM.**

3 (a) IN GENERAL.—Section 1510(a) of the Public
4 Health Service Act (42 U.S.C. 300n–5(a)) is amended by
5 striking “and \$275,000,000 for fiscal year 2012” and in-
6 serting “\$275,000,000 for fiscal year 2012, and
7 \$300,000,000 for each fiscal years 2021 through 2025”.

8 (b) COORDINATING COMMITTEE.—Section 1501(d) of
9 the Public Health Service Act (42 U.S.C. 300k(d)) is
10 amended—

11 (1) in the subsection heading, by striking
12 “2020” and inserting “2030”; and

13 (2) by striking “2020” and inserting “2025”.

14 **SEC. 7. REPORT TO CONGRESS.**

15 Not later than 2025, the Secretary of Health and
16 Human Services shall submit to the Committee on Energy
17 and Commerce of the House of Representatives and the
18 Committee on Health, Education, Labor and Pensions of
19 the Senate a report—

20 (1) that contains a qualitative assessment of
21 the campaign under subsection (o) of section 317 of
22 the Public Health Service Act (42 U.S.C. 247b) and
23 the activities conducted under such campaign; and

24 (2) on, with respect to the impact on cancer as-
25 sociated with human papillomavirus—

1 (A) the activities conducted under sub-
2 section (o) of section 317 of the Public Health
3 Service Act (42 U.S.C. 247b), as added by sec-
4 tion 3;

5 (B) research conducted under subsection
6 (k) of such section, pursuant to the amend-
7 ments made by section 4; and

8 (C) section 409K of the Public Health
9 Service Act, as added by section 5.

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