

119TH CONGRESS
2D SESSION

H. R. 8553

To direct the Secretary of Veterans Affairs to establish a precision oncology program for cancer of the prostate, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 28, 2026

Mr. MURPHY (for himself and Mr. CONAWAY) introduced the following bill;
which was referred to the Committee on Veterans' Affairs

A BILL

To direct the Secretary of Veterans Affairs to establish a precision oncology program for cancer of the prostate, 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 “Precision Oncology
5 Program for Cancer of the Prostate Authorization Act of
6 2026” or the “POPCaP Authorization Act of 2026”.

1 **SEC. 2. ESTABLISHMENT OF PRECISION ONCOLOGY PRO-**
2 **GRAM FOR CANCER OF THE PROSTATE.**

3 (a) IN GENERAL.—Subchapter II of chapter 73 of
4 title 38, United States Code, is amended by adding at the
5 end the following new section:

6 **“§ 7330E Precision oncology program for cancer of**
7 **the prostate**

8 “(a) ESTABLISHMENT.—The Secretary shall estab-
9 lish a precision oncology program for cancer of the pros-
10 tate (in this section, referred to as the ‘Program’) at the
11 Department in accordance with this section. In carrying
12 out the Program, the Secretary shall—

13 “(1) shall designate Centers of Excellence in ac-
14 cordance with subsection (d); and

15 “(2) maintain the Program Leadership team
16 under subsection (g).

17 “(b) ELIGIBILITY.—A veteran is eligible to enroll in
18 additional medical services through the Program if such
19 veteran is enrolled in the patient enrollment system under
20 section 1705 of this title and has a diagnosis of prostate
21 cancer or non-prostate genitourinary cancer.

22 “(c) REQUIREMENTS OF CENTERS OF EXCEL-
23 LENCE.—(1) Each Center of Excellence designated under
24 this section shall carry out the following activities:

25 “(A) Establishing a program of genetic se-
26 quencing for veterans with advanced prostate cancer.

1 “(B) Implementing the uniform genetic se-
2 quencing platform developed by the Program Lead-
3 ership under subsection (g)(3)(H) to allow for co-
4 ordination among Centers.

5 “(C) Participating in the Telemedicine Tumor
6 Board of the Program.

7 “(D) Participating in the prostate cancer reg-
8 istry maintained by the Program Leadership under
9 subsection (g)(3)(E) to track relevant genetic
10 mutations.

11 “(E) Providing travel support to eligible vet-
12 erans with such mutations to facilitate access to
13 studies.

14 “(F) Developing biomarker-specific clinical
15 trials.

16 “(G) Participating in industry-sponsored preci-
17 sion oncology studies.

18 “(H) Participating in monthly calls and not less
19 than three in-person meetings per year with the Pro-
20 gram Leadership to assess progress.

21 “(I) Providing ongoing reporting to the Pro-
22 gram Leadership regarding trial accrual and re-
23 search conducted by the Center.

24 “(J) Establishing metastasis biopsy capability.

1 “(K) Extending resources to affiliated medical
2 centers in the Veterans Integrated Service Network
3 in which the Center is located.

4 “(2) The Secretary shall ensure that each Center des-
5 ignated under the Program employs, at a minimum—

6 “(A) a medical oncologist;

7 “(B) an interventional radiologist;

8 “(C) a urologist;

9 “(D) a radiation oncologist;

10 “(E) a pathologist; and

11 “(F) two full-time equivalent research staff
12 members.

13 “(d) DESIGNATION OF CENTERS OF EXCELLENCE.—

14 (1) The Secretary may designate additional medical facili-
15 ties as Centers of Excellence.

16 “(2) The Secretary shall ensure that not fewer than
17 21 medical facilities are designated as Centers of Excel-
18 lence under this section at all times.

19 “(3) The Secretary shall ensure that at least one
20 medical facility in each Veterans Integrated Service Net-
21 work is designated as a Center of Excellence under this
22 section.

23 “(4) The Secretary shall ensure that not fewer than
24 seven of the Centers of Excellence designated under this
25 section have a genitourinary program.

1 “(5) Effective on the date of the enactment of this
2 section, the following medical facilities shall be designated
3 as Centers of Excellence for the Program:

4 “(A) The Seattle VA Medical Center in Seattle,
5 Washington.

6 “(B) The James J. Peters VA Medical Center
7 in the Bronx, New York.

8 “(C) The Lieutenant Colonel Charles S. Kettles
9 VA Medical Center in Ann Arbor, Michigan.

10 “(D) The Margaret Cochran Corbin Manhattan
11 VA Medical Center in Manhattan, New York.

12 “(E) The Jesse Brown Department of Veterans
13 Affairs Medical Center in Chicago, Illinois.

14 “(F) The West Los Angeles VA Medical Center
15 in Los Angeles, California.

16 “(G) The Corporal Michael J. Crescenz VA
17 Medical Center in Philadelphia, Pennsylvania.

18 “(H) The Durham VA Medical Center in Dur-
19 ham, North Carolina.

20 “(I) The Washington DC VA Medical Center in
21 Washington, District of Columbia.

22 “(J) The James A. Haley Veterans Hospital in
23 Tampa, Florida.

24 “(K) The Portland VA Medical Center in Port-
25 land, Oregon.

1 “(L) The Jamaica Plain VA Medical Center in
2 Boston, Massachusetts.

3 “(M) The San Francisco VA Medical Center in
4 San Francisco, California.

5 “(N) The Michael E. DeBakey Department of
6 Veterans Affairs Medical Center in Houston, Texas.

7 “(O) The Rocky Mountain Regional VA Med-
8 ical Center in Aurora, Colorado.

9 “(P) The John J. Cochran Veterans Hospital in
10 St. Louis, Missouri.

11 “(Q) The Kansas City VA Medical Center in
12 Kansas City, Missouri.

13 “(R) The Joseph Maxwell Cleland Atlanta VA
14 Medical Center in Decatur, Georgia.

15 “(S) The Ralph H. Johnson VA Medical Center
16 in Charleston, South Carolina.

17 “(T) The Orlando VA Medical Center in Or-
18 lando, Florida.

19 “(U) The Baltimore VA Medical Center in Bal-
20 timore, Maryland.

21 “(V) The John L. McClellan Memorial Vet-
22 erans’ Hospital in Little Rock, Arkansas.

23 “(W) The William S. Middleton Memorial Vet-
24 erans Hospital in Madison, Wisconsin.

1 “(X) The Minneapolis VA Medical Center in
2 Minneapolis, Minnesota.

3 “(Y) The George E. Wahlen Department of
4 Veterans Affairs Medical Center in Salt Lake City,
5 Utah.

6 “(Z) The Carl T. Hayden Veterans’ Adminis-
7 tration Medical Center in Phoenix, Arizona.

8 “(AA) The Dallas VA Medical Center in Dallas,
9 Texas.

10 “(BB) The Malcom Randall Department of
11 Veterans Affairs Medical Center in Gainesville, Flor-
12 ida.

13 “(6) For purposes of complying with the minimum
14 number of Centers of Excellence under paragraph (2), the
15 Secretary shall count any towards the minimum number
16 any medical facility designated under paragraph (5) and
17 not terminated under subsection (e).

18 “(e) TERMINATION OF DESIGNATION.—(1) Each
19 Center of Excellence designated under subsection (d) shall
20 remain so designated for not less than five years, unless
21 the Secretary terminates such designation in accordance
22 with this subsection.

23 “(2) Not earlier than January 1, 2030, the Secretary
24 may terminate the designation of a medical facility as a
25 Center of Excellence under this section if the Secretary

1 determines the facility is failing to meet the requirements
2 in subsection (c).

3 “(3) Before terminating the designation of a medical
4 facility, the Secretary shall—

5 “(A) submit to the Committees on Veterans’
6 Affairs and the Committees on Appropriations of the
7 House of Representatives and the Senate a notice of
8 the intent to terminate such designation; and

9 “(B) wait for a period of 60 days following the
10 date of the submission of such notice.

11 “(f) PERFORMANCE REVIEW.—(1) In 2030 and each
12 year thereafter, the Secretary shall review the performance
13 of not more than seven Centers of Excellence.

14 “(2) The Secretary shall ensure that the performance
15 of each Center of Excellence is reviewed only once in a
16 five year period.

17 “(3) By the date of the submission of the annual re-
18 port described in subsection (f) in 2035 and every fifth
19 year thereafter, the Secretary shall ensure the perform-
20 ance of each Center of Excellence has been reviewed.

21 “(4) Each performance review under this subsection
22 shall assess whether the performance of the Center of Ex-
23 cellence in providing the services required under sub-
24 section (c) is adequate to justify the continued designation
25 of the facility as a Center of Excellence under this section.

1 “(g) PROGRAM LEADERSHIP TEAM.—(1) The Sec-
2 retary shall establish a Program Leadership team located
3 at the Seattle VA Medical Center in Seattle, Washington,
4 which shall remain designated as a Center of Excellence
5 until at least 2033.

6 “(2) If the Secretary terminates the designation of
7 the Seattle VA Medical Center in Seattle, Washington, as
8 a Center of Excellence under subsection (e), the Secretary
9 shall select another Center to serve as the location of the
10 Program Leadership team.

11 “(3) The Program Leadership team shall include, at
12 a minimum, an Executive Director, a Clinical Director,
13 and a Research Director, who shall be employees of the
14 medical center at which the Program Leadership team is
15 located.

16 “(4) The Program Leadership team shall—

17 “(A) provide strategic liaison services with
18 sponsors and prospective sponsors of clinical trials to
19 ensure engagement by the Department with study
20 design and participation;

21 “(B) coordinate participation by the Depart-
22 ment in prostate cancer group studies sponsored by
23 the National Cancer Institute;

1 “(C) facilitate the development of study con-
2 cepts, designs, and start-up with researchers of the
3 Department with limited clinical trial experience;

4 “(D) create and execute a model for hybrid de-
5 centralized clinical trials to be used by Centers of
6 Excellence when conducting trials, including remote
7 research coordination, regulatory start-up and main-
8 tenance, data management, and Institutional Review
9 Board approval;

10 “(E) create and maintain a publicly available
11 prostate cancer registry and data repository of the
12 Department;

13 “(F) establish and maintain relevant working
14 groups of experts of the Department;

15 “(G) host at least monthly calls and at least
16 three in-person meetings per year with a representa-
17 tive of each Center for Excellence to assess progress;
18 and

19 “(H) develop a uniform genetic sequencing plat-
20 form to be implemented by each Center of Excel-
21 lence to allow for coordination among such Centers.

22 “(5) The Executive Director shall—

23 “(A) provide administrative leadership to the
24 Program in partnership with the Clinical Director;

1 “(B) develop, execute, and monitor a national
2 strategic plan for the Program; and

3 “(C) serve as the liaison to leadership of the
4 Department and Centers of Excellence.

5 “(6) The Clinical Director shall—

6 “(A) oversee the Program to ensure eligible vet-
7 erans receive access to care based on the latest re-
8 search;

9 “(B) develop and implement strategies for Pro-
10 gram growth, quality improvement, and patient sat-
11 isfaction;

12 “(C) serve on the review committee of the Pro-
13 gram for clinical trials conducted by Centers of Ex-
14 cellence to ensure studies are conducted ethically
15 and efficiently; and

16 “(D) serve as the liaison with stakeholders to
17 integrate clinical services and research.

18 “(7) The Research Director shall—

19 “(A) provide leadership on national research ob-
20 jectives;

21 “(B) serve on committees to review new re-
22 search concepts and projects developed by Centers of
23 Excellence;

1 “(C) maintain an understanding of current re-
2 search and emerging technologies in prostate cancer;
3 and

4 “(D) interact with stakeholders, including regu-
5 latory agencies, study sponsors, and research institu-
6 tions, to improve prostate cancer research conducted
7 by the Department.

8 “(h) ANNUAL REPORT.—(1) Not later than March
9 1 of each year, the Secretary shall submit to the Commit-
10 tees on Veterans’ Affairs and the Committees on Appro-
11 priations of the House of Representatives and the Senate
12 a report on the Program. Each such report shall include,
13 for the year covered by the report—

14 “(A) the funding levels for each Center of Ex-
15 cellence;

16 “(B) the number of veterans participating the
17 Program;

18 “(C) the number of researchers and providers
19 participating in the Program;

20 “(D) the number of publications relating to
21 prostate cancer by researchers and providers of the
22 Department;

23 “(E) the number of clinical research studies
24 supported by the Program;

1 “(F) the number of veterans enrolled in such
2 clinical research studies;

3 “(G) the five-year survival rate of veterans en-
4 rolled in clinical research studies of the Program
5 compared to other veterans and civilians with pros-
6 tate cancer;

7 “(H) the five-year survival rate of veterans with
8 non-prostate genitourinary cancers enrolled in clin-
9 ical research studies of the Program at genito-
10 urinary centers compared to that of other veterans
11 and civilians with non-prostate genitourinary can-
12 cers; and

13 “(I) an estimate of (A) through (G) for the up-
14 coming year.

15 “(2) In 2029, the report required in this subsection
16 shall include a comprehensive plan for the designation and
17 operation of the Centers of Excellence under this section,
18 including a timeline for the performance evaluations, per-
19 formance criteria to be used in evaluations, and the proc-
20 ess for selecting Centers.

21 “(3) In 2031 and each year thereafter, the report re-
22 quired in this subsection shall include, for the year covered
23 by the report, the results of the performance reviews con-
24 ducted under subsection (f) and a determination by the
25 Secretary regarding whether each Center of Excellence re-

1 viewed that year meets the criteria for continued designa-
2 tion as a Center of Excellence.

3 “(i) AUTHORIZATION OF APPROPRIATIONS.—There is
4 authorized to be appropriated \$15,500,000 for each of fis-
5 cal years 2027 through 2029 to the Secretary to carry
6 out this section.”.

7 (b) CLERICAL AMENDMENT.—The table of sections
8 at the beginning of such chapter is amended by inserting
9 after the item relating to section 7330D the following new
10 item:

“7330E. Precision oncology program for cancer of the prostate.”.

11 (c) FUNCTIONS AND FUNDING OF CENTERS OF EX-
12 CELLENCE.—

13 (1) FUNCTIONS.—The Secretary of Veterans
14 Affairs may not remove from any medical facility
15 designated as a Center of Excellence under section
16 7330D of title 38, United States Code, any staff,
17 program, or function relating to prostate cancer that
18 was in effect on January 1, 2023, until January 1,
19 2030.

20 (2) FUNDING.—The Secretary of Veterans Af-
21 fairs may not reduce funding provided to such Cen-
22 ters of Excellence below the total amount provided
23 by public and private sources in effect on January
24 1, 2023, until January 1, 2030.

1 (d) DEADLINE.—The program required by section
2 7330E of title 38, United States Code, as added by sub-
3 section (a), shall be established by not later than 180 days
4 after the date of the enactment of this Act.

5 **SEC. 3. IMPLEMENTATION PLAN.**

6 Not later than 60 days after the date of the enact-
7 ment of this Act, the Secretary of Veterans Affairs shall
8 submit to the Committees on Veterans' Affairs of the Sen-
9 ate and the House of Representatives a plan for the imple-
10 mentation of section 7330E of title 38, United States
11 Code, as added by section 2. Such plan shall include—

12 (1) a description of staffing requirements at
13 each Center of Excellence designated under such
14 section;

15 (2) a description of any contracting require-
16 ments necessary to fulfill the requirements of such
17 section;

18 (3) a plan for the development of the uniform
19 sequencing platform required under subsection
20 (g)(3)(H) of such section;

21 (4) a description of the development of the
22 prostate cancer registry and data repository under
23 subsection (g)(3)(E) of such section;

24 (5) a plan for coordination with the Central In-
25 stitutional Review Board; and

- 1 (6) a description of anticipated funding levels
- 2 for the ten-year period beginning on the date of the
- 3 submission of the plan.

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