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119TH CONGRESS
1ST SESSION

H. R. 3490

IN THE SENATE OF THE UNITED STATES

JUNE 4, 2025

Received; read twice and referred to the Committee on Homeland Security and Governmental Affairs

AN ACT

To require the Government Accountability Office to produce a report on esophageal 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 ''Gerald E. Connolly Esophageal Cancer Awareness Act of 2025''.

SEC. 2. FINDINGS.

Congress finds that—

(1) esophageal cancer is the fastest increasing cancer among American men;

(2) esophageal cancer is one of the fastest growing cancer diagnoses among all Americans, increasing more than 700 percent in recent decades;

(3) esophageal cancer kills 1 American every 36 minutes every day;

(4) esophageal cancer is among the deadliest of cancers, with only about 1 in 5 patients surviving 5 years;

(5) esophageal cancer has tripled in incidence among younger Americans in recent decades;

(6) esophageal cancer has low survival rates because it is usually discovered at advanced stages when treatment outcomes are poor;

(7) raising awareness about esophageal cancer empowers individuals to seek preventive care, recognize symptoms, and pursue early detection strategies;

(8) survivors, caregivers, medical professionals, and researchers have made tremendous strides in

advancing treatment options and improving the quality of life for those affected by the disease;

(9) esophageal cancer can be prevented through early detection of its precursor, Barrett's esophagus, which can be eliminated with curative outpatient techniques;

(10) research indicates that patients diagnosed with early-stage esophageal cancer have a significantly higher 5-year survival rate (as high as 49 percent) compared to those diagnosed at later stages, underscoring the critical need for enhanced screening and awareness; and

(11) as of December 2022, the American Gastroenterological Association recommends screening with a standard upper endoscopy in individuals with 3 or more established risk factors for Barrett's Esophagus and esophageal adenocarcinoma, including—

(A) male sex;

(B) non-Hispanic white ethnicity;

(C) age of 50 years or older;

(D) a history of smoking, chronic gastrointestinal reflux disease, or obesity; and

(E) a family history of Barrett's Esophagus or esophageal adenocarcinoma.

SEC. 3. GAO REPORT.

Not later than 1 year after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to Congress that includes an evaluation of—

(1) the total impact of esophageal cancer-related health care spending under the Federal Employee Health Benefits Program for Federal employees and retirees diagnosed with esophageal cancer; and

(2) how often individuals covered under the Federal Employees Health Benefits Program with medical records indicating such individuals are high-risk for esophageal cancer undergo screening according to the established guidelines.

Passed the House of Representatives June 3, 2025.

Attest: KEVIN F. MCCUMBER,

Clerk.