

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.

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

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Gerald E. Connolly
3 Esophageal Cancer Awareness Act of 2025”.

4 **SEC. 2. FINDINGS.**

5 Congress finds that—

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

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

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

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

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

18 (6) esophageal cancer has low survival rates be-
19 cause it is usually discovered at advanced stages
20 when treatment outcomes are poor;

21 (7) raising awareness about esophageal cancer
22 empowers individuals to seek preventive care, recog-
23 nize symptoms, and pursue early detection strate-
24 gies;

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

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

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

7 (10) research indicates that patients diagnosed
8 with early-stage esophageal cancer have a signifi-
9 cantly higher 5-year survival rate (as high as 49 per-
10 cent) compared to those diagnosed at later stages,
11 underscoring the critical need for enhanced screen-
12 ing and awareness; and

13 (11) as of December 2022, the American Gas-
14 troenterological Association recommends screening
15 with a standard upper endoscopy in individuals with
16 3 or more established risk factors for Barrett’s
17 Esophagus and esophageal adenocarcinoma, includ-
18 ing—

19 (A) male sex;

20 (B) non-Hispanic white ethnicity;

21 (C) age of 50 years or older;

22 (D) a history of smoking, chronic gastro-
23 intestinal reflux disease, or obesity; and

24 (E) a family history of Barrett’s Esoph-
25 agus or esophageal adenocarcinoma.

1 **SEC. 3. GAO REPORT.**

2 Not later than 1 year after the date of the enactment
3 of this Act, the Comptroller General of the United States
4 shall submit a report to Congress that includes an evalua-
5 tion of—

6 (1) the total impact of esophageal cancer-re-
7 lated health care spending under the Federal Em-
8 ployee Health Benefits Program for Federal employ-
9 ees and retirees diagnosed with esophageal cancer;
10 and

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

Passed the House of Representatives June 3, 2025.

Attest:

KEVIN F. MCCUMBER,

Clerk.