

111TH CONGRESS  
1ST SESSION

# H. R. 2115

To amend the Public Health Service Act to establish an Office of Men's Health.

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## IN THE HOUSE OF REPRESENTATIVES

APRIL 27, 2009

Mr. HILL (for himself and Mr. TIM MURPHY of Pennsylvania) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To amend the Public Health Service Act to establish an Office of Men's Health.

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 “Men and Families  
5 Health Care Act of 2009”.

6 **SEC. 2. FINDINGS.**

7 The Congress finds the following:

8 (1) Risks to the health and well-being of the  
9 Nation's men (and our families) are on the rise due

1 to a lack of education, awareness, and pursuit of  
2 preventative screening and care—

3 (A) men are leading in 9 out of the top 10  
4 causes of death;

5 (B) 1 in 2 men versus 1 in 3 women in  
6 their lifetime will be diagnosed with cancer;

7 (C) the life expectancy gap between men  
8 and women has increased from one year in  
9 1920 to 5.2 years in 2005; and

10 (D) studies show that women are 100 per-  
11 cent more likely than men to visit a doctor,  
12 have regular physician check-ups, and obtain  
13 preventive screening tests for serious diseases.

14 (2) While this health crisis is of particular con-  
15 cern to men, it is also a concern for women regard-  
16 ing their fathers, husbands, sons, and brothers.

17 (3) According to the Census Bureau, by the  
18 time men and women reach age 65, the ratio of men  
19 to women reduces to 85 to 100. The growing dis-  
20 parity in this statistic suggests that among other  
21 factors, the declining health of men increases the  
22 risk of women entering retirement age as widows.

23 (4) According to the Administration on Aging,  
24 more than half of elderly widows now living in pov-

1       erty were not poor before the death of their hus-  
2       bands.

3               (5) Men's health is a concern to Federal and  
4       State governments which absorb the enormous costs  
5       of premature death and disability, including the  
6       costs of caring for dependents left behind.

7               (6) Educating men, their families, and health  
8       care providers about the importance of early detec-  
9       tion of male health issues (i.e. cardiovascular, men-  
10      tal, prostate health, cancer (lung, prostate, skin,  
11      colorectal, testicular, and more), HIV/AIDS,  
12      osteoporosis, and other pertinent health issues) can  
13      result in reducing rates of mortality for male-specific  
14      diseases, as well as improve the health of the Na-  
15      tion's men and its overall economic well-being.

16              (7) Of concern is the physical, mental, and  
17      emotional well-being of our military men (and  
18      women) returning from war zones and our veterans.  
19      We must pay attention to their needs and the needs  
20      of their families.

21              (8) Recent scientific studies have shown that  
22      regular medical exams, preventive screenings, reg-  
23      ular exercise, and healthy eating habits can help  
24      save lives.

1           (9) Appropriate use of tests such as prostate-  
2           specific antigen (PSA) exams and blood pressure,  
3           blood sugar, lipid panel, and colorectal screenings in  
4           conjunction with clinical exams or self-testing, can  
5           result in the early detection of many problems and  
6           in increased survival rates.

7           (10) Men’s health is a concern for employers  
8           who pay the costs of medical care and lose produc-  
9           tive employees.

10          (11) Prostate cancer is the most frequently di-  
11          agnosed cancer in the United States among men, ac-  
12          counting for 25 percent of all cancer cases—

13                (A) over 185,000 men will be newly diag-  
14                nosed with prostate cancer this year alone, and  
15                almost 29,000 will die;

16                (B) costs associated with prostate cancer  
17                detection and treatments exceed \$8 billion an-  
18                nually and represent 8 percent of cancer and  
19                0.4 percent of all health-related expenditures in  
20                the United States;

21                (C) prostate cancer rates increase sharply  
22                with age, and more than  $\frac{2}{3}$  of such cases are  
23                diagnosed in men age 65 and older;

1 (D)  $\frac{2}{3}$  of annual prostate cancer expendi-  
2 tures in the United States are paid for by Medi-  
3 care; and

4 (E) the incidence of prostate cancer and  
5 the resulting mortality rate in African-American  
6 men is twice that of all other men.

7 (12) It is estimated that in 2008, approximately  
8 115,000 men were diagnosed with lung cancer, and  
9 almost 91,000 of the Nation's men died from lung  
10 cancer.

11 (13) It is estimated that in 2008, approximately  
12 54,000 men were diagnosed with colorectal cancer,  
13 and over 24,000 of the Nation's men died from  
14 colorectal cancer.

15 (14) Men make up over half of the diabetes pa-  
16 tients aged 20 and over in the United States (10.9  
17 million men total) and nearly  $\frac{1}{3}$  of them do not  
18 know it—

19 (A) whereas approximately 21,000,000  
20 Americans are living with diabetes, men are 30  
21 percent more likely to die from the disease;

22 (B) 54 million American people have pre-  
23 diabetes and 1.5 million new cases of diabetes  
24 were diagnosed in 2005; and

1 (C) people with diagnosed diabetes have  
2 medical expenditures that are 2 to 3 times  
3 higher than patients without diabetes and the  
4 estimated cost of diabetes in 2007 was  
5 \$174,000,000, including \$116,000,000 in ex-  
6 cess medical expenditures and \$58,000,000 in  
7 reduced national productivity.

8 (15) Over 8,000 men, ages 15 to 40, will be di-  
9 agnosed this year with testicular cancer, and 380 of  
10 these men will die of this disease in 2008. A com-  
11 mon reason for delay in treatment of this disease is  
12 a delay in seeking medical attention after discov-  
13 ering a testicular mass.

14 (16) Men over the past decade have shown  
15 poorer health outcomes than women across all racial  
16 and ethnic groups as well as socioeconomic status.

17 (17) Establishing an Office of Men's Health is  
18 needed to investigate these findings and take further  
19 actions to promote awareness of men's health needs.

20 **SEC. 3. ESTABLISHMENT OF OFFICE OF MEN'S HEALTH.**

21 Title XVII of the Public Health Service Act (42  
22 U.S.C. 300u et seq.) is amended by adding at the end  
23 the following:

1 **“SEC. 1711. OFFICE OF MEN’S HEALTH.**

2       “(a) IN GENERAL.—The Secretary shall establish  
3 within the Department of Health and Human Services an  
4 office to be known as the Office of Men’s Health. The Sec-  
5 retary shall appoint a director as head of the office.

6       “(b) ACTIVITIES.—The Secretary, acting through the  
7 Director of the Office of Men’s Health, shall—

8               “(1) conduct, support, coordinate, and promote  
9 programs and activities to improve the state of  
10 men’s health in the United States, including by  
11 working with the Department of Veterans Affairs,  
12 the Department of Defense, and the Federal Em-  
13 ployee Health Benefits Plan; and

14               “(2) provide for consultation among offices and  
15 agencies of the Department of Health and Human  
16 Services for the purposes of—

17                       “(A) coordinating public awareness, edu-  
18 cation, and screening programs and activities  
19 relating to men’s health;

20                       “(B) coordinating programs and activities  
21 under title XVIII of the Social Security Act re-  
22 lating to men’s health, including prostate can-  
23 cer, diabetes, colorectal cancer, cholesterol, and  
24 mental health screening programs;

25                       “(C) coordinating public awareness pro-  
26 grams and activities, including prostate cancer,

1 diabetes, colorectal cancer, cholesterol, and  
2 mental health screening programs, for men  
3 identified at being at increased risk of these  
4 diseases;

5 “(D) coordinating prostate-specific antigen  
6 (PSA), diabetes, cholesterol, and colorectal can-  
7 cer screening programs and activities relating  
8 to men’s prostate health, cardiovascular health,  
9 and mental health in order to conduct a com-  
10 parative effectiveness review; and

11 “(E) establishing a clinical registries data-  
12 base to assess and measure quality improve-  
13 ment of programs and activities relating to  
14 men’s health.

15 “(c) REPORT.—Not later than 2 years after the date  
16 of the enactment of this section, the Secretary, acting  
17 through the Director of the Office of Men’s Health, shall  
18 submit to the Congress a report describing the activities  
19 of such Office, including findings by the Director regard-  
20 ing men’s health.”.

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