

116TH CONGRESS  
1ST SESSION

# S. 1107

To require a review of women and lung cancer, and for other purposes.

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## IN THE SENATE OF THE UNITED STATES

APRIL 10, 2019

Mr. RUBIO (for himself, Mrs. FEINSTEIN, Mrs. CAPITO, and Mr. MANCHIN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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## A BILL

To require a review of women and lung 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,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Women and Lung Can-  
5       cer Research and Preventive Services Act of 2019”.

6       **SEC. 2. FINDINGS.**

7       Congress finds as follows:

8               (1) According to the American Cancer Society,  
9       in the United States, approximately 181 women die

1 each day of lung cancer, or about one woman every  
2 8 minutes.

3 (2) Lung cancer is the leading cause of cancer  
4 death among women.

5 (3) The American Cancer Society estimates  
6 that 66,020 women will die of lung cancer in 2019.

7 (4) Studies have shown a higher incidence rate  
8 of lung cancer for women who were never smokers  
9 compared to men who were never smokers.

10 (5) According to the American Cancer Society,  
11 new cases of lung cancer dropped by 3 percent per  
12 year in men from 2011 to 2015, while new cases in  
13 women only dropped 1.5 percent per year in the  
14 same time period.

15 (6) According to the 2014 report, “The Health  
16 Consequences of Smoking—50 Years of Progress: A  
17 Report of the Surgeon General, 2014”, the relative  
18 risk of developing lung cancer increased tenfold  
19 among female smokers between 1959 and 2010.

20 (7) According to the American Cancer Society,  
21 approximately 40 percent of lung cancers are adeno-  
22 carcinoma, a subtype of non-small cell lung cancer,  
23 which is the most common type of cancer seen in  
24 non-smokers and is more common in women than in  
25 men.

1           (8) Exposure to radon accounts for approxi-  
2           mately 21,000 deaths from lung cancer each year  
3           and is the second leading cause of lung cancer in  
4           non-smokers.

5           (9) A Government Accountability Office report  
6           published on October 22, 2015, called for the Na-  
7           tional Institutes of Health to do more in evaluating  
8           gender differences in research.

9           (10) Additional research strategies, including  
10          clinical trials, are necessary to explore the dif-  
11          ferences in lung cancer risk factors, incidence, and  
12          treatment response in women, and to address the  
13          disparate impact of lung cancer on women who have  
14          never smoked.

15          (11) Lung cancer screening, which can detect  
16          lung cancer at its earliest, most curable stage, is a  
17          covered service available without cost-sharing for  
18          those at high risk.

19          (12) Published peer-reviewed actuarial studies  
20          indicate that lung cancer screening individuals at  
21          high risk may be cost-effective.

22          (13) The National Framework of Excellence in  
23          Lung Cancer Screening and Continuum of Care,  
24          launched in 2012, demonstrated that lung cancer

1 screening can be safely and effectively carried out in  
2 community hospital settings around the Nation.

3 (14) Information on the impact of lung cancer  
4 on women and the importance of early detection  
5 should be incorporated into all relevant public health  
6 awareness campaigns.

7 **SEC. 3. SENSE OF CONGRESS CONCERNING WOMEN AND**  
8 **LUNG CANCER.**

9 It is the sense of Congress that—

10 (1) there is a disparate impact of lung cancer  
11 on women and, in particular, on women who have  
12 never smoked;

13 (2) additional research strategies to explore the  
14 differences in women with respect to lung cancer  
15 risk factors, incidence, histology, and response to  
16 treatment are justified and necessary;

17 (3) the implementation of lung cancer preven-  
18 tive services for women should be accelerated; and

19 (4) the public health agencies of the Federal  
20 Government should coordinate public education and  
21 awareness programs on the impact of lung cancer on  
22 women and the importance of early detection.

1 **SEC. 4. INTERAGENCY REVIEW TO EVALUATE AND IDEN-**  
2 **TIFY OPPORTUNITIES FOR THE ACCELERA-**  
3 **TION OF RESEARCH ON WOMEN AND LUNG**  
4 **CANCER, GREATER ACCESS TO PREVENTIVE**  
5 **SERVICES, AND STRATEGIC PUBLIC AWARE-**  
6 **NESS AND EDUCATION CAMPAIGNS.**

7 (a) IN GENERAL.—The Secretary of Health and  
8 Human Services, in consultation with the Secretary of De-  
9 fense and Secretary of Veterans Affairs, shall conduct an  
10 interagency review to evaluate the status of, and identify  
11 opportunities related to—

- 12 (1) research on women and lung cancer;  
13 (2) access to lung cancer preventive services;  
14 and  
15 (3) strategic public awareness and education  
16 campaigns on lung cancer.

17 (b) CONTENT.—The review and recommendations  
18 under subsection (a) shall include—

- 19 (1) a review and comprehensive report on the  
20 outcomes of previous research, the status of existing  
21 research activities, and knowledge gaps related to  
22 women and lung cancer in all agencies of the Fed-  
23 eral Government;  
24 (2) specific opportunities for collaborative,  
25 interagency, multidisciplinary, and innovative re-  
26 search, that would—

1 (A) encourage innovative approaches to  
2 eliminate knowledge gaps in research;

3 (B) evaluate environmental and genomic  
4 factors that may be related to the etiology of  
5 lung cancer in women; and

6 (C) foster advances in imaging technology  
7 to improve risk assessment, diagnosis, treat-  
8 ment, and the simultaneous application of other  
9 preventive services;

10 (3) opportunities regarding the development of  
11 a national lung cancer screening strategy with suffi-  
12 cient infrastructure and personnel resources to ex-  
13 pand access to such screening, particularly among  
14 underserved populations; and

15 (4) opportunities regarding the development of  
16 a national public education and awareness campaign  
17 on women and lung cancer and the importance of  
18 early detection of lung cancer.

19 (c) REPORT.—Not later than one year after the date  
20 of the enactment of this Act, the Secretary of Health and  
21 Human Services shall submit to Congress a report on the  
22 review conducted under subsection (a).

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