

118TH CONGRESS
1ST SESSION

S. 2665

To require the Secretary of Defense to provide to firefighters of the Department of Defense medical testing and related services to detect and prevent certain cancers.

IN THE SENATE OF THE UNITED STATES

JULY 27, 2023

Mr. CARPER (for himself and Ms. COLLINS) introduced the following bill;
which was read twice and referred to the Committee on Armed Services

A BILL

To require the Secretary of Defense to provide to firefighters of the Department of Defense medical testing and related services to detect and prevent certain cancers.

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 “Federal Firefighter
5 Cancer Detection and Prevention Act of 2023”.

1 **SEC. 2. MEDICAL TESTING AND RELATED SERVICES FOR**
2 **FIREFIGHTERS OF DEPARTMENT OF DE-**
3 **FENSE.**

4 (a) **PROVISION OF SERVICES.**—During the annual
5 periodic health assessment of each firefighter of the De-
6 partment of Defense, or at such other intervals as may
7 be indicated in subsection (b), the Secretary of Defense
8 shall provide to the firefighter (at no cost to the fire-
9 fighter) appropriate medical testing and related services
10 to detect, document the presence or absence of, and pre-
11 vent, certain cancers.

12 (b) **CRITERIA.**—Services required to be provided
13 under subsection (a) shall meet, at a minimum, the fol-
14 lowing criteria:

15 (1) **BREAST CANCER.**—With respect to breast
16 cancer screening, if the firefighter is a female fire-
17 fighter—

18 (A) such services shall include the provi-
19 sion of a mammogram to the firefighter—

20 (i) if the firefighter is 40 years old to
21 49 years old (inclusive), not less frequently
22 than twice each year;

23 (ii) if the firefighter is 50 years old or
24 older, not less frequently than annually;
25 and

1 (iii) as clinically indicated (without re-
2 gard to age); and

3 (B) in connection with the provision of a
4 mammogram under subparagraph (A), a li-
5 censed radiologist shall review the most recent
6 mammogram provided to the firefighter, as
7 compared to prior mammograms so provided,
8 and provide to the firefighter the results of such
9 review.

10 (2) COLON CANCER.—With respect to colon
11 cancer screening—

12 (A) if the firefighter is 40 years old or
13 older, or as clinically indicated without regard
14 to age, such services shall include the commu-
15 nication to the firefighter of the risks and bene-
16 fits of stool-based blood testing;

17 (B) if the firefighter is 45 years old or
18 older, or as clinically indicated without regard
19 to age, such services shall include the provision,
20 at regular intervals, of visual examinations
21 (such as a colonoscopy, CT colonoscopy, or
22 flexible sigmoidoscopy) or stool-based blood
23 testing; and

24 (C) in connection with the provision of a
25 visual examination or stool-based blood testing

1 under subparagraph (B), a licensed physician
2 shall review and provide to the firefighter the
3 results of such examination or testing, as the
4 case may be.

5 (3) PROSTATE CANCER.—With respect to pros-
6 tate cancer screening, if the firefighter is a male
7 firefighter, such services shall include the commu-
8 nication to the firefighter of the risks and benefits
9 of prostate cancer screenings and the provision to
10 the firefighter of a prostate-specific antigen test—

11 (A) not less frequently than annually if the
12 firefighter—

13 (i) is 50 years old or older; or

14 (ii) is 40 years old or older and is a
15 high-risk individual; and

16 (B) as clinically indicated (without regard
17 to age).

18 (4) OTHER CANCERS.—Such services shall in-
19 clude routine screenings for any other cancer the
20 risk or occurrence of which the Director of the Cen-
21 ters for Disease Control and Prevention has identi-
22 fied as higher among firefighters than among the
23 general public, the provision of which shall be car-
24 ried out during the annual periodic health assess-
25 ment of the firefighter.

1 (c) OPTIONAL NATURE.—A firefighter of the Depart-
2 ment of Defense may opt out of the receipt of medical
3 testing or a related service provided under subsection (a).

4 (d) USE OF CONSENSUS TECHNICAL STANDARDS.—
5 In providing medical testing and related services under
6 subsection (a), the Secretary shall use consensus technical
7 standards in accordance with section 12(d) of the National
8 Technology Transfer and Advancement Act of 1995 (Pub-
9 lic Law 104–113; 15 U.S.C. 272 note).

10 (e) DOCUMENTATION.—

11 (1) IN GENERAL.—In providing medical testing
12 and related services under subsection (a), the Sec-
13 retary—

14 (A) shall document the acceptance rates of
15 such tests offered and the rates of such tests
16 performed;

17 (B) shall document tests results to identify
18 trends in the rates of cancer occurrences among
19 firefighters; and

20 (C) may collect and maintain additional in-
21 formation from the recipients of such tests and
22 other services to allow for appropriate scientific
23 analysis.

24 (2) PRIVACY.—In analyzing any information of
25 an individual documented, collected, or maintained

1 under paragraph (1), in addition to complying with
2 other applicable privacy laws, the Secretary shall en-
3 sure the name and any other personally identifiable
4 information of the individual is removed from such
5 information prior to the analysis.

6 (3) SHARING WITH CENTERS FOR DISEASE
7 CONTROL AND PREVENTION.—The Secretary may
8 share data from any tests performed under sub-
9 section (a) with the Director of the Centers for Dis-
10 ease Control and Prevention, as appropriate, to in-
11 crease the knowledge and understanding of cancer
12 occurrences among firefighters.

13 (f) DEFINITIONS.—In this section:

14 (1) FIREFIGHTER.—The term “firefighter”
15 means someone whose primary job or military occu-
16 pational specialty is being a firefighter.

17 (2) HIGH-RISK INDIVIDUAL.—The term “high-
18 risk individual” means an individual who—

19 (A) is African American;

20 (B) has at least one first-degree relative
21 who has been diagnosed with prostate cancer at
22 an early age; or

1 (C) is otherwise determined by the Sec-
2 retary to be high risk with respect to prostate
3 cancer.

○