

**STATEMENT OF
MICHAEL R. BLOOMBERG
MAYOR
CITY OF NEW YORK**

BEFORE

**THE HOUSE COMMITTEE ON ENERGY AND COMMERCE
HEALTH SUBCOMMITTEE**

ON

H.R. 6594

THE 9/11 HEALTH AND COMPENSATION ACT OF 2008

JULY 31, 2008

Chairman Pallone; ranking member Deal; Congressmen Towns, Engel, and Weiner; members of the subcommittee. I want to thank you for this extraordinary invitation to testify on this panel along with the bipartisan sponsors of the “9/11 Health and Compensation Act.”

I understand that my presence on this panel along with Members of Congress breaks with the normal procedures of Congress. And like Speaker Pelosi’s strong commitment to moving forward on this bill, that strongly underscores the historic importance of this measure. Passing this bill would, at long last, fully engage the Federal government in resolving the health challenges created by the attack on our entire nation that occurred on 9/11.

The destruction of the World Trade Center was an act of war against the United States. People from every part of the country perished in the attack, and people from all 50 states took part in the subsequent relief and recovery efforts. And that makes addressing the resulting and ongoing health effects of 9/11 a national duty.

Members of the committee: Nearly two years ago, as the fifth anniversary of 9/11 approached, I directed Deputy Mayors Edward Skyler and Linda Gibbs to work with City health experts and agencies to make a thorough investigation of the health problems created by that terrorist attack. Their report, published six months later, established beyond question that many people suffered physical and mental health effects as a result of the World Trade Center attack and its aftermath. They include firefighters and police officers, community residents, schoolchildren, and owners and employees of neighborhood businesses, and also construction workers and volunteers from across America who took part in the heroic task of clearing the debris from the World Trade Center site.

The report made clear that the ultimate scope of these health effects is still unknown. It also identified the two most important challenges presented by these health problems. The great strength of this bill is that it addresses them both.

First, it would establish much-needed year-in, year-out Federal support for monitoring, screening, and treatment of health-related problems among eligible 9/11 responders and community residents. It would also fund

essential ongoing medical research so that we can better understand what the health impacts of 9/11 are, and what resources we need in order to address them.

To date, the Federal government has provided ad hoc appropriations for monitoring and treatment for first responders and workers who answered the call on 9/11. Congress also appropriated funds for residents, area workers, and other community members whose health was affected by the attack. But until last week, the Federal Department of Health and Human Services had not released those funds, and only now has issued a request for proposals.

New York City has long recognized this unmet need; we have not waited for Federal funds to address it. In fact, the City has budgeted nearly \$100 million for 9/11 health initiatives. About half that will be used to treat residents, workers, and others at the WTC Environmental Health Center in our Health and Hospitals Corporation. But providing long-term treatment to those who are sick, or who could become sick, because of 9/11 is rightly a national responsibility.

And while Federal funds have supported important research and treatment efforts, the uncertain and insufficient nature of that support has needlessly jeopardized the future of these programs. Passage of this bill would make that future secure.

Similarly, the World Trade Center Health Registry that we created and that we maintain in partnership with the Federal government is the most comprehensive nationwide database on 9/11 health-related issues. Consistent Federal support for the Registry will guide essential research and treatment for Americans affected by 9/11-related health problems – who live in all but four of the nation's 435 Congressional districts – for years to come.

The bill also incorporates strict cost-containment standards for spending on treatment. For example, it requires the City of New York to pay 5% of the cost of treatment provided at our public hospitals and clinics. We accept this obligation. It will give us a powerful incentive to work with Federal health officials to ensure that expensive and finite medical resources only go to those who truly need them.

The second key element of this bill is that it would re-open the Victim Compensation Fund. This is an essential act of fairness for those whose 9/11-related injuries or illnesses had not emerged before the fund was closed in

December 2003, or who couldn't be compensated because of the overly narrow eligibility requirements in place at that time. It also would heal rifts that have needlessly emerged since 9/11.

Today, the victims of 9/11, the City of New York and the construction companies that carried out the clean-up at the World Trade Center are being forced into expensive legal proceedings. This bill would stop these needless and costly court cases. It would allow the City to help, rather than litigate against, those who are ill. It would end misplaced efforts to assign blame to the City and the companies who worked to bring New York back from 9/11, instead of to the terrorists who attacked our nation.

It would also create a mechanism for converting \$1 billion now available to the Captive Insurance Company for this purpose. And it would indemnify the City and its contractors from future liability in such cases.

And it would send the clear message that if – God forbid – terrorists strike us again, contractors and responders can meet the challenge urgently and unselfishly, knowing that their government stands behind them.

In summary: This bill directly addresses the current and future health problems created by 9/11, and also provides important relief for past injuries and illnesses.

Members of the committee: We will observe the anniversary of 9/11 just six weeks from today.

Let's work together to pass this bill and ensure that men and women who bravely answered the call of duty when our nation was attacked receive the health care that they deserve.

Statement of Caswell F. Holloway

**Chief of Staff to New York City Deputy Mayor for Operations Edward Skyler
and
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H.R. 6594: 9/11 Health & Compensation Act of 2008

July 31, 2008

**Committee on Energy and Commerce
Sub-committee on Health
U.S. House of Representatives**

Good morning. I want to thank Chairman Pallone, Ranking Member Deal, and the other distinguished members of the Committee for convening this hearing on H.R. 6594, *The 9/11 Health and Compensation Act of 2008*.

I also want to reiterate Mayor Bloomberg's thanks to House Speaker Nancy Pelosi, and to the New York delegation-- particularly representatives Maloney, Nadler, King and Fossella for making this legislation a priority. As we approach the seventh anniversary of the worst terrorist attack on American soil, it is critical to ensure that the unmet health needs and lingering harm that people have suffered as a result of the attacks are finally addressed.

My name is Cas Holloway and I am Chief of Staff to New York City's Deputy Mayor for Operations Edward Skyler and a Special Advisor to Mayor Bloomberg. Along with my colleague Rima Cohen, who is also here today, I served as Executive Director of a Panel convened by Mayor Bloomberg at the fifth anniversary of the attacks to assess the Health Impacts of 9/11 and what needed to be done to ensure that those who are sick or could become sick get the treatment they need.

The Committee has already heard a great deal about this bill today, including from Mayor Bloomberg, so I'll keep my remarks limited to a few key issues.

As the Mayor said, this bill achieves two things critical to completing the nation's recovery from 9/11: First, it provides long-term, funding to monitor and treat those who are sick or who could become sick because of 9/11, and continues to fund and expand critical research. Second, the bill reopens the Victim Compensation Fund so that people who were harmed by the terrorist attacks can get compensation fairly and quickly without having to prove that the City, the contractors, or anyone else but the terrorists were at fault.

More than 90,000 (and by some estimates, well more than 100,000) New York City firefighters, police officers, other first responders and recovery workers responded to ground zero and participated in the rescue, recovery and clean-up at ground zero. As the Committee has heard, today, tens of thousands are being monitored and treated for 9/11-related conditions at the Fire Department and the other Centers of Excellence, including at Mt. Sinai Medical Center. Federal funding to meet this critical health need has been ad-hoc, and this bill will finally provide the long-term, sustained funding that is needed to ensure that we care for those who answered the nation's call on 9/11.

And hundreds of thousands of residents, area workers, school children and other community members were directly impacted by the attacks. Although Congress has appropriated money to treat these groups, the only Center of Excellence open to these groups has not yet received any federal funding, and the City of New York is currently paying the entire cost to treat approximately 2,700 patients for WTC-related conditions. As Mayor Bloomberg said, the City has not waited for the federal government to address this unmet need—but this is clearly a national obligation that, under this bill, will finally be met.

We recognize, however, that these are still public dollars and in keeping with Mayor Bloomberg's commitment to fiscal responsibility and accountability this bill incorporates protections to ensure that the funds will go to those who are injured as a result of the terrorist attacks and that the funds will be spent responsibly.

There are, of course, many important provisions in this bill, but I want to say a few words about those controls.

First, the bill defines specific groups (for example, firefighters or recovery workers) and specific geographic areas that people must have been in on, or within a defined time period after 9/11 to be eligible for treatment.

I should note that there is specified funding to treat people outside the designated areas or groups who may—on a case-by-case basis—be eligible for treatment for a 9/11-related condition. This is necessary because we do not know the full extent of the health impacts of the disaster and want to provide a means for anyone sick because of 9/11 to get treatment.

Second, while people who meet these criteria are “eligible” for treatment, to actually get treatment, a doctor with experience treating WTC-related conditions must determine based on a medical examination, that exposure to airborne toxins, trauma or other hazards caused by the 9/11 attacks is substantially likely to be a significant factor causing, contributing to or aggravating the patient's condition.

That assessment must be based in part on standardized questionnaires; and even after a condition is deemed to be WTC-related, it is subject to review and certification by the WTC administrator.

These are tough standards that are based to a large extent on the protocols already in place at the WTC Environmental Health Center in the New York City Health and Hospitals Corporation. They are necessary to ensure that only those who are sick due to 9/11 are treated under this program.

The bill caps the number of responders and community members who can get monitoring or treatment. These limitations are based on the best available information about how many people were exposed and could potentially be ill, and while we think they will be sufficient to provide treatment to anyone who may need it, there are reporting requirements in the bill so that Congress will be told if those caps are approached.

In addition to these controls—which apply to every potential patient—the bill mandates the establishment of Quality Assurance and Fraud Prevention programs that will act as further safeguards against the misuse of these funds for any purpose other than to monitor and treat those affected by the 9/11 attacks.

The bill also includes important provisions to ensure that federal dollars go only to cover costs that the federal government should pay. For example, there is an offset for any Workers'

Compensation payments that have been made. For non-work related conditions, the program acts as the payer of last resort if an eligible recipient has applicable health insurance.

Finally, as Mayor Bloomberg pointed out, under the bill, the City is responsible for paying 5% of the cost of treating anyone treated at a Center of Excellence within the City's Health and Hospitals Corporation (This currently includes all of the residents, area workers and other community members in treatment at a WTC-specific program because it is the only program available for them).

9/11 was an attack on the nation and the obligation to provide treatment for these individuals is a national one—but requiring the City to pay 5% of these costs is an obligation we accept because it ensures that we have a strong incentive to monitor these programs and make sure that these health care dollars are spent wisely.

I want to mention one issue that should be addressed as this bill moves forward. To assist in coordinating the responder and community programs, the bill establishes a Steering Committee for each program that, among other things, will advise the WTC Administrator on what conditions are WTC-related and will assist with outreach to affected populations. The City would like a representative from the Police Department and at least one other responder agency on the Steering Committee for the responder program, and a representative from the Department of Health on both Steering Committees. This representation is critical to ensure that the City agencies whose employees and retirees are affected participate in the administration of the WTC program and that the Department of Health—which is the home of the WTC Health Registry—also has an institutional role.

The bill also ensures that critical 9/11-related research is expanded, and existing efforts, like the World Trade Center Health Registry based in the City's Department of Health, continue. Long-term research is the only way that we're going to be able to develop a full understanding of the Health Impacts of 9/11 and dedicate resources appropriately to treat them.

The Registry is a partnership between the City and the federal government. It is largest effort of its kind in history, with more than 71,000 exposed people in it from every state in the country and from all but 4 Congressional Districts. Over 20 percent of the people in the Registry are from outside the New York Metropolitan region. This is a reflection of the numbers of people from throughout the country who were in New York at the time of the attacks, or who came to New York afterwards.

Finally, this bill will fulfill another core recommendation of Mayor Bloomberg's World Trade Center Health Panel, the urgent need for Congress to reopen the Victim Compensation Fund (VCF).

Between 2001 and 2004, the VCF provided compensation to a combined total of nearly 5,700 victims' families and individuals injured in the attacks.

It was a fair and efficient process that provided a measure of relief to the victims of the attacks and their families.

Now it's imperative that the fund be reauthorized to take care of those who were not eligible to benefit from it before it closed in December 2003. The fact that their injuries have been slower to emerge, or that the initial eligibility criteria were too narrow should not disqualify them from getting the help they need.

The bill also provides indemnity to the City and the contractors for the historic recovery and clean-up that helped bring New York City and the country back after 9/11. And it will make the \$1 billion currently in the Captive Insurance Company available to much more quickly pay claims—so that people can be compensated for losses rather than trying to prove that the City, or the contractors, or anyone but the terrorists was responsible for the devastating harm caused by 9/11.

Reopening the Fund would help assure that if another terrorist attack were to take place, our first responders and the private sector could respond with the same purpose and dedication that we saw on 9/11, knowing that their government will always stand by them.

In sum, the Health and Compensation Act of 2008 is a vital lifeline to the men and women who risked everything, and helped lift our nation back onto its feet during our time of greatest need. That's why it has gained the support of New York's Congressional delegation. And it's why Mayor Bloomberg and his Administration are pledging to work with you all and do everything possible to make it a reality.

Thank you for your attention. I'd be happy to answer any questions you might have.

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