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Mayor
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Examining the Continuing Needs of Workers and Communities Affected by 9/11
and
S. 1334, James Zadroga 9/11 Health & Compensation Act of 2009

June 29, 2010

Committee on Health, Education, Labor and Pensions
United States Senate
Thank you Chairman Harkin, Ranking Member Enzi, and the other distinguished members of the Committee for convening this hearing on S. 1334, the James Zadroga 9/11 Health and Compensation Act. I also want to particularly thank Senator Gillibrand for introducing this legislation to establish a sustained, long-term 9/11 health program.

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 and the attacks on the Pentagon were acts 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.

This legislation achieves what WTC responders, area residents, and other survivors of the 9/11 terrorist attacks have long been seeking—sustained funding to treat those who are sick, or could become sick because of 9/11; continued research on potential WTC health effects; and the reopening of the Victim Compensation Fund so that those harmed as a result of 9/11 are fairly compensated without having to show that anyone but the terrorists were at fault.

Before detailing the virtues of this legislation, I’d like to review some essential facts about the scope of this problem and the efforts the City has made to address it. Four years ago, as the fifth anniversary of 9/11 approached, I directed City agencies to undertake a thorough investigation of the health problems potentially created by the terrorist attack. The 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 contributed to 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; that they must continue to be studied; and that those who are sick or could become sick must be monitored and treated with the best possible care.

S. 1334 achieves those aims, but New York City has not waited for Federal funds to address this issue. For instance, the City funded the launch and expansion of the WTC Environmental Health Center at our Health and Hospitals Corporation (HHC) before receiving any federal dollars; and we’ve launched a number of public outreach campaigns about 9/11 health problems and how to get help.

WTC Centers of Excellence and the WTC Health Registry
The federal government has been an important partner in this area. The annual appropriations that Congress and the President have made over the last several years have funded the World Trade Center program at Mount Sinai, as well as the longest-running health response to the attacks—the FDNY WTC Medical Monitoring and Treatment Program.

The FDNY Center of Excellence provides monitoring and treatment to the firefighters and other FDNY personnel who participated in WTC rescue, recovery and clean-up. With the help of federal appropriations, the Program has provided specialized WTC health care to thousands while generating leading research on the health impacts of 9/11. Lacking long-term funding, however, the Program faces perpetual uncertainty about its ability to continue providing clinical services.

In addition, the HHC WTC Environmental Health Center was awarded in 2008 a three-year grant for $10 million a year. This funding is critical to allowing the program to continue addressing the physical and mental health needs of community members.

Finally, short-term federal grants enabled the establishment of the WTC Health Registry (WTCHR), which this bill will continue to fund on a permanent basis. The Registry is a partnership between the City and the federal government that is the largest effort of its kind in history. It includes more than 71,000 people from every state in the country who reported being exposed to the aftermath. Over 20 percent of the people in the Registry are from outside the New
York Metropolitan region. This reflects the number of people from throughout the country who were in New York at the time of the attacks or who came to New York soon after.

Efforts by the Registry, FDNY, Mt. Sinai, the HHC WTC Environmental Health Center and the reports generated by the Medical Working Group—which we convened to keep us all abreast of the newest research and resource-needs for 9/11 health issues—are central to the City’s core approach to this issue: dedicating resources based on the latest science and medical research. And the data shows that 9/11 health issues continue to be a serious problem.

Registry data confirm continued high levels of reported post-9/11 asthma and Post-Traumatic Stress Disorder (PTSD) among Registry enrollees 5-6 years after the attacks. Adverse respiratory health symptoms, while most frequently reported by rescue and recovery workers, have also been reported by Lower Manhattan residents, office workers, and passersby on 9/11, and more than 20,000 directly exposed adults may have received new asthma diagnoses since the event. PTSD levels were high at baseline and remained elevated at the time of the last survey in 2006-2007.

The Registry will soon launch the third major health survey of all enrollees, 10 years after 9/11. This survey is the only tool that gathers critical health information from a diverse group of individuals exposed to the WTC disaster—including rescue, recovery, clean-up workers, Lower Manhattan community members, office workers and children. As has been reported, however, the Registry is facing funding shortfalls that threaten its ability to carry out the survey—highlighting the need for sustained, long-term funding.

S. 1334 provides for the long-term sustainability of the City’s Centers of Excellence and the efforts of the WTC Health Registry. 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. As part of this, the bill would maintain the WTC National Responder Program, providing monitoring and treatment for the many men and women who came from across the country to help in WTC rescue, recovery and clean-up operations.
In addition, the bill funds essential ongoing medical research, including the WTC Health Registry, so that we can better understand what the health impacts of 9/11 are, and what resources we need to address them. Finally, 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.

The bill’s provision for the long-term future of the centers of excellence is critical. While Federal funds have supported important research and treatment efforts, the uncertain and fragmented nature of that support has needlessly jeopardized the future of these programs. Passage of this bill would make that future secure.

To ensure that funding goes only to those whose conditions are due to 9/11, the legislation includes important controls and cost-containment standards that the City fully supports. In addition, the bill makes the City responsible for paying 20% of the cost of care provided at our public hospitals and clinics. This is a significant obligation, but we accept it. 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.

Less than three months from today, we will observe the ninth anniversary of 9/11. Too much time has passed without action on this legislation. Let’s work together to ensure that those who survived the attacks, and those who risked their lives to save others, receive the health care that they deserve.

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