



815 SIXTEENTH STREET, N.W.
WASHINGTON, D.C. 20006

JOHN J. SWEENEY
PRESIDENT

RICHARD L. TRUMKA
SECRETARY-TREASURER

ARLENE HOLT BAKER
EXECUTIVE VICE-PRESIDENT

LEGISLATIVE ALERT!

(202) 637-5057

September 9, 2008

Dear Representative:

On behalf of the AFL-CIO, I am writing to urge you to support and cosponsor the James Zadroga 9/11 Health and Compensation Act of 2008 (H.R. 6594). This bi-partisan bill would provide medical monitoring, treatment, and compensation to emergency responders, recovery and clean-up workers, and others suffering serious diseases as a result of hazardous exposures resulting from the 9/11 terrorist attacks. It would also reopen the 9/11 Victim Compensation Fund (VCF) to provide compensation for economic losses and harm as an alternative to the current litigation system.

On September 11, 2001 and during the following days and weeks, tens of thousands of emergency workers, construction workers, and others rushed to the World Trade Center (WTC) to assist in rescue and recovery operations. These workers and residents, and others near Ground Zero, were exposed to a toxic mix of dust and fumes from the collapse of the WTC and the subsequent fires, some of which lingered for weeks. Now many of these individuals, particularly the heroic responders who experienced the highest exposures, are suffering from serious respiratory diseases and other health problems.

Studies conducted by the Mount Sinai Medical Center, the Fire Department of New York (FDNY), and the New York City World Trade Center Health Registry have all documented significant respiratory problems among firefighters, police, construction workers, and others who responded to the 9/11 attacks. In addition, high incidences of gastrointestinal and mental health problems have been found, and there is growing concern about the development of other chronic diseases.

These health problems are widespread and serious. Nearly 70 percent of responders examined by the Mount Sinai School of Medicine suffered respiratory problems, with one-third suffering significant loss of lung function. The FDNY found that rescue workers suffered an average loss of 12 years of lung capacity. Many of those who are sick can no longer work, their workers' compensation claims are being contested and they have lost their health insurance and a number of deaths have now been officially attributed to exposure to WTC toxins. These workers are in dire need of medical treatment.

For the past several years, Congress has designated funding for the WTC Worker and Volunteer Medical Screening Program, which has provided medical monitoring through the FDNY and a consortium of clinical centers coordinated by Mount Sinai. For the past year, additional funds have been appropriated for medical treatment for WTC responders who are sick. But this funding is only a short-term stopgap measure.

H.R. 6594 would provide a comprehensive long-term solution to address the serious health problems that WTC responders and area residents are facing as a result of 9/11 hazardous exposures. H.R. 6594 would establish the World Trade Center Health Program, under the direction of the National Institute for Occupational Safety and Health (NIOSH), to provide medical monitoring and treatment for WTC-related health conditions to responders and area residents. It would build off the existing medical programs to provide high quality care through the Clinical Centers of Excellence at the FDNY, the Mt. Sinai consortium, and the WTC Environmental Health Center at Bellevue Hospital. Additional clinical centers would be designated, including those to provide monitoring and treatment for those outside the New York area. Coordinating Centers of Excellence would be established to develop uniform treatment protocols and collect and analyze data.

Individuals who meet the eligibility criteria would receive monitoring and medical treatment for WTC-related health conditions at no cost. H.R. 6594 would also reopen the September 11th Victim Compensation Fund to provide compensation for economic damages and loss for those who were not previously eligible or became sick after the original December 22, 2003 deadline, with awards determined by a Special Master.

As you may be aware an earlier version of the James Zadroga 9/11 Health and Compensation Act was introduced last year shortly before the sixth anniversary of the September 11th attacks. H.R. 6594 makes several substantive changes to the earlier legislation in order to control costs and assure that the most seriously impacted individuals receive the care and compensation they deserve.

Major changes from H.R. 3543 to H.R. 6594 include:

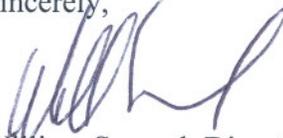
- Reducing the geographic area, and the potential population, covered by the bill.
- Higher standards of causation or association for determining that a health condition is WTC-related.
- Increased specificity and uniformity in the process for assessing and determining whether a condition is related to WTC exposures.
- Setting a cap on program participation at 35,000 additional responders and 35,000 additional community members.
- Establishing a capped contingency fund to pay the cost of WTC-related health claims that may arise in individuals who fall outside the more limited definition of the eligible population included in the revised bill.
- Setting reimbursement rates for medical treatment costs based upon Medicare fee schedules.
- Requiring a 5 percent cost share by the City of New York for medical monitoring/screening and treatment costs for WTC-related conditions provided through Clinical Center of Excellence within the New York City Health and Hospitals Corporation.

- Providing indemnification for construction contractors and the City of New York related to the rescue and recovery efforts in response to the September 11, 2001 World Trade Center attacks.

The attack on the World Trade Center was not only an attack on New York; it was an attack on the nation. Compelled by a moral obligation, the nation acted to compensate and care for those injured in the collapse of the World Trade Center and the attack on the Pentagon and the surviving family members of those who were killed. The same moral obligation should compel the nation to meet the needs of 9/11 rescue, recovery, and clean-up workers and area residents who became ill because of their exposure to WTC hazards.

The AFL-CIO believes that Congress should take action on this important legislation before adjournment and urges you to support H.R. 6594. To cosponsor this legislation, please contact Anna Cielinski in Rep. Maloney's office at 202-225-7944.

Sincerely,

A handwritten signature in black ink, appearing to read 'William Samuel', written over a faint, illegible typed name.

William Samuel, Director
GOVERNMENT AFFAIR DEPARTMENT