

AMERICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS



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LEGISLATIVE ALERT!

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March 26, 2009

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 2009 (H.R. 847). This bipartisan bill would provide medical monitoring, treatment, and compensation to emergency responders, recovery and clean-up workers, and community members 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 thousands of these individuals 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. Studies have documented similar health problems among residents, building workers and other community members exposed to the toxic dust.

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.

For the past several years, Congress has designated funding for the World Trade Center Responder Health program, which has provided medical monitoring and treatment through the FDNY and a consortium of clinical centers coordinated by Mount Sinai. Since FY 2008, funding has also been designated to provide screening and medical treatment to residents, students, and other community members for health problems related to the September 11 attacks. But this funding is only a short-term stopgap measure.

H.R. 847 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. 847 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 individuals 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. 847 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. In addition, the bill would limit the overall legal liability for construction contractors and the City of New York for 9/11-related health claims to the funds available in the WTC Captive Insurance Company and coverage under liability insurance. This limitation would not apply to claims involving gross negligence or intentionally tortious acts.

The bill contains a number of provisions that would help limit the cost of the program and assure that the most seriously impacted individuals receive the care and compensation they deserve. These include:

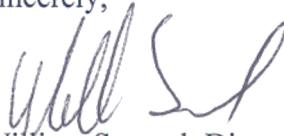
- Limitation of the geographic area and potential population covered by the bill to those areas and groups with significant exposures.
- Delivery of medical services through Centers of Excellence and providers who have the expertise to diagnose and treat WTC-related health problems in a cost-effective manner.
- High standards of causation or association for determining that a health condition is WTC-related.
- Specificity and uniformity in the process of assessing and determining whether a condition is related to WTC exposures.
- A cap on program participation at 15,000 additional responders and 15,000 additional community members.

- Establishing private or public health insurance as the primary payer for non-work related conditions and offsetting costs for work-related conditions by workers compensation payments.
- Cost sharing by the City of New York for medical monitoring/screening and treatment costs for WTC-related conditions provided under the WTC health program.

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 the thousands of 9/11 rescue, recovery, and clean-up workers and area residents who are now sick because of their exposure to WTC hazards.

It has been more than seven years since the 9/11 attacks. It is time that Congress act to address the health needs of 9/11 responders and community members. The AFL-CIO urges you to co-sponsor and support the James Zadroga 9/11 Health and Compensation Act. To cosponsor this legislation, please contact Anna Cielinski in Rep. Maloney's office at 202-225-7944.

Sincerely,



William Samuel, Director

GOVERNMENT AFFAIRS DEPARTMENT