



**Testimony  
Before the Subcommittee on Health  
Energy and Commerce Committee  
United States House of Representatives**

**Examining H.R.1786, The James Zadroga 9/11  
Health and Compensation Reauthorization Act**

*Statement of*

**John Howard, M.D.**

*Director, National Institute for Occupational Safety and Health  
Administrator, World Trade Center Health Program  
Centers for Disease Control and Prevention  
U.S. Department of Health and Human Services*



**For Release on Delivery  
Expected at 10:15 a.m.  
Thursday, June 11, 2015**

Good morning, Mr. Chairman, and other distinguished members of the Subcommittee. My name is John Howard, and I am the Administrator of the World Trade Center Health Program—a program of the National Institute for Occupational Safety and Health (NIOSH) in the Centers for Disease Control and Prevention (CDC) of the Department of Health and Human Services.

I am pleased to appear before you today to discuss the World Trade Center Health Program, and those who responded to, or survived, the September 11, 2001, terrorist attacks on New York City; and those who responded at the Pentagon and in Shanksville, Pennsylvania.

The World Trade Center (WTC) Health Program's members responded to an epic disaster and, as a result, suffered mental and physical injury, illness, and premature death. The Program's members responded to the 9/11 disaster from all 50 states and from 429 out of 435 Congressional districts.

The original health program began seeing patients soon after September 11<sup>th</sup> and operated as a series of cooperative agreements or grants from the National Institute for Occupational Safety and Health. As a discretionary grant program, it was based on year-to-year appropriations – making it challenging to plan adequately for the members' ongoing health needs.

In January 2011, the Program was provided mandatory funding when the Congress passed and President Obama signed into law the James Zadroga 9/11 Health and Compensation Act of 2010. As required by the Zadroga Act, the new World Trade Center Health Program was established in July 2011. This funding allows the Program to more adequately plan and carry out the Congress' intent, as specified in the Zadroga Act, to care for responders and survivors of the September 11, 2001, terrorist attacks.

In Calendar Year 2014, of the 71,942 members enrolled in the World Trade Center (WTC) Health Program, 20,883 members received treatment for health conditions arising from toxic and other hazardous exposures resulting from the terrorist attacks of September 11, 2001, and 28,059 members received health evaluations and monitoring to ensure early medical intervention for any developing health condition that is specified for coverage in the WTC Health Program.

Since the Program's implementation in July 2011, 11,473 members have been treated for asthma, 6,672 members have been treated for post-traumatic stress disorder (PTSD) and 6,497 members have been treated for chronic respiratory disorders. The majority of our members suffer from multiple mental and physical health conditions and take multiple medications for these conditions.

Certain types of cancer were added to the list of health conditions covered by the Program in late 2012. Since then, the Program has certified 4,265 cases of cancer among member responders and survivors.

The World Trade Center Health Program fills a unique role in the lives of our members and in our society.

First, our members are evaluated and treated by medical providers who have a depth of experience with the physical and mental needs of 9/11 responders and survivors dating back to September 11, 2001. Their extensive clinical expertise with the responder and survivor populations, as well as their understanding of the role of exposure in causing disease, exceeds the understanding of providers unfamiliar with the types of exposures and health conditions common to the 9/11 population. Our members have mental and physical health conditions that are difficult to treat, but have had a trusted relationship with their doctors at the Program's Clinical Centers of Excellence for over a decade. This allows the Program to ensure that timely, specialized care is provided to Program members.

Second, our members are receiving health care that cannot be provided, or only provided with great difficulty, by other types of health insurance plans. For example, health insurance plans do not routinely cover work-related health conditions, leaving such coverage to workers' compensation insurance.

However, workers' compensation insurance often presents coverage challenges

for our WTC Health Program members because their 9/11-related health conditions often first manifest years after 9/11. The WTC Health Program serves a vital role in overcoming the difficulties that members might otherwise experience in its absence. Without the Program, our 9/11 responders and survivors might end up in *limbo*, rather than in treatment.

Third, I would mention the value of the World Trade Center Health Program beyond the direct benefits to its members.

By providing evaluation and treatment for those most affected by 9/11 as a single cohort, the Program greatly aids not only the individual members, but also our national understanding of the long-term health effects of 9/11, including its effects on children. The Program helps us better prepare for the medical needs arising from large-scale disasters that might occur in the future.

Finally, without the WTC Health Program, there would simply be a less coordinated system of care for responders and survivors made sick by the September 11, 2001, terrorist attacks.

Thank you for the opportunity to testify. I would be happy to answer any questions you may have.