

Congress of the United States
Washington, DC 20515

June 16, 2009

Mr. Peter Orszag
Director, Office of Management and Budget (OMB)
725 17th Street, NW
Washington, DC 20503

Dear Director Orszag:

Thank you for your recent response to our letter of March 26, 2009 regarding funding for the World Trade Center (WTC) Health Program.

In your response, you claim that the WTC grantees have only spent 50 percent of the funds appropriated since 2003. We believe that this figure significantly underestimates the actual expenditures and spending commitments of the grantees and thus misrepresents the actual needs of these vital health programs.

These underestimates are due to a combination of factors related to the funding vehicles (i.e., grants) including delays in actual expenditures being reflected in the accounting systems used by the Department of Health and Human Services (DHHS) and OMB to track spending in these programs and the fact that these federal accounting systems do not always reflect spending commitments made by the grantees as part of providing medical care for these WTC responders. Within their institutions, the grantees must account for those spending commitments in order not to exceed the amount of funding available through their grants.

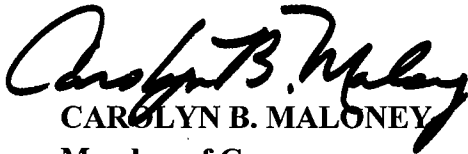
We have recently learned that these discrepancies, combined with unexplained delays in processing extensions to the current grants for the clinical centers, have resulted in the New Jersey center having to prepare to stop seeing patients next month due to the delays in extending their grant extension. They report that they will have only \$100,000 in available funding left at the end of June, hardly enough to operate a busy medical clinic. This situation was apparently not reflected in the federal accounting systems. Other medical centers serving the WTC responders will soon find themselves in similar situations unless their grants are extended and adequate funding made available to them.

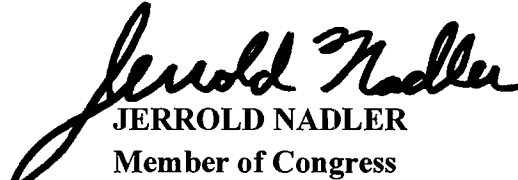
We recognize that the current mechanisms used to fund this program, which were designed by the previous administration, are not ideal and make oversight of the program more challenging. In our proposed legislation, the 9/11 Health and Compensation Act (H.R. 847), we have strived to correct that problem by funding the medical care for eligible responders and community residents through a more direct reimbursement

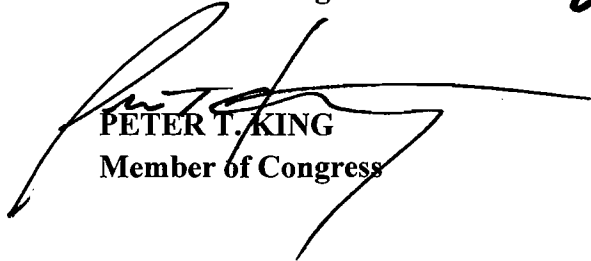
system. Meanwhile, as our bill is being considered by Congress, we need to make sure that we continue to provide adequate funding for the badly needed medical care that these people deserve. We cannot continue the restrictive policies of the previous administration who sought to limit this program by unnecessarily restricting the available funding and support for these centers. These restrictions are described in our enclosed letter to Department of Health and Human Services Secretary Sebelius.

We look forward to continuing to work with you and OMB on the WTC Health Program and providing care for the heroes and heroines of 9/11.

Sincerely,


CAROLYN B. MALONEY
Member of Congress


JERROLD NADLER
Member of Congress


PETER T. KING
Member of Congress


MICHAEL E. McMAHON
Member of Congress

Enclosure

cc: The Honorable Kathleen Sebelius
Secretary, U.S. Department of Health and Human Services

Dr. Thomas R. Frieden
Director, Centers for Disease Control and Prevention

Congress of the United States

Washington, DC 20515

June 9, 2009

The Honorable Kathleen Sebelius
Secretary
U.S. Department of Health & Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Madam Secretary:

As members of the New York Congressional Delegation, we write to congratulate you on your appointment to lead the U.S. Department of Health and Human Services. We look forward to working with you and President Obama to tackle the serious health challenges our nation faces, including comprehensive health care reform, H1N1 flu response, and preserving Medicare for future generations, among others.

We also look forward to working closely with you on an issue important to New York—9/11 health effects and the World Trade Center Health Programs run through the National Institute for Occupational Safety and Health (NIOSH) within the Centers for Disease Control and Prevention (CDC). Specifically, we ask you to 1) overturn restrictive policies from the previous administration that limit the care afforded to WTC responders and community members who are ill from exposure to Ground Zero toxins, 2) review our legislation, H.R. 847, which would provide a comprehensive, long-term solution to the problem, and 3) meet with the New York Delegation to jumpstart discussions about how to move forward to serve these heroes who served our nation in its time of need.

As you know, thousands of first responders and community members exposed to the toxins of Ground Zero are now sick and need our help. These include New York Firefighters, EMTs and Police, construction workers, clean-up workers, residents, area workers, and school children, among others. Their illnesses include respiratory and gastrointestinal system conditions such as asthma, interstitial lung disease, chronic cough and gastroesophageal reflux disease (GERD), and mental health conditions such as post-traumatic stress disorder (PTSD). Many of these individuals are disabled and can no longer work, and some have died due to their 9/11 illnesses.

Over the last seven years, federally funded programs to address these illnesses developed in a piecemeal fashion. First in FY 2002, funding was provided for a responder screening program. As diseases were identified, Congress put in place in FY 2004 an ongoing responder monitoring program to track illnesses over time. For the first time, in FY 2006, treatment funding was made available for responders, and eventually in FY 2008 the program came to cover community members. In the summer of 2008, federal funding became available to provide treatment to responders who lived outside of the New York City metropolitan area. Previously in the national responder program, federally funded monitoring was available but treatment money was provided by the Red Cross.

While the current WTC Health Programs at CDC/NIOSH are finally running relatively smoothly, as a delegation we have had concerns throughout the establishment and operation of these programs. We look forward to working with you to remove any administrative barriers from the previous administration that may prevent FY 2009 funding from being used for outreach, benefits counseling, and data evaluation. We feel that FY 2009 funding should be utilized to focus on these important components of patient care.


In addition to examining the current program, we invite you to review and comment on H.R. 847, the 9/11 Health and Compensation Act. The purpose of the bill is to continue, enhance, and make permanent the care provided by the WTC Centers of Excellence to responders, community members, and national program participants. It provides for uniform data collection and research, as well as compensation for economic loss by reopening the September 11 Victim Compensation Fund. We hope you will participate in the process towards enacting H.R. 847 into law.

Finally, we would like to schedule a New York Delegation meeting with you to discuss these issues in more detail. Please have your staff contact Anna Cielinski of Rep. Maloney's office to coordinate such a meeting.

Thank you in advance for your help in ensuring that the heroes and heroines of 9/11 receive the care they so desperately need and deserve.


Sincerely,


CAROLYN B. MALONEY
Member of Congress

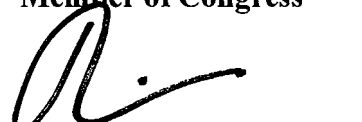

PETER T. KING
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Member of Congress



CHARLES B. RANGEL
Member of Congress


JERROLD NADLER
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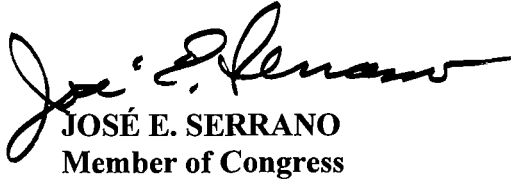

MICHAEL E. McMAHON
Member of Congress

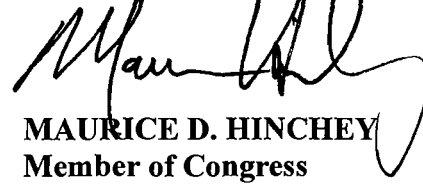

ANTHONY D. WEINER
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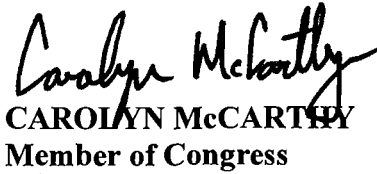

EDOLPHUS TOWNS
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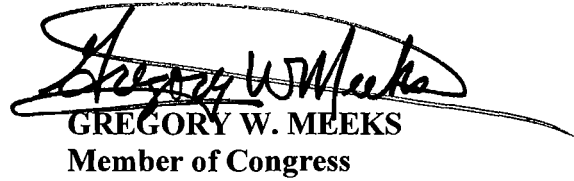

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NITA M. LOWEY
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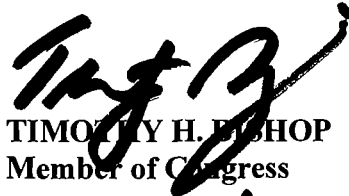

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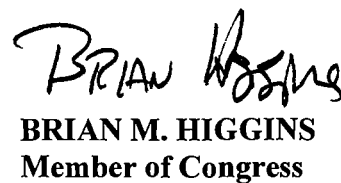

CAROLYN MCCARTHY
Member of Congress

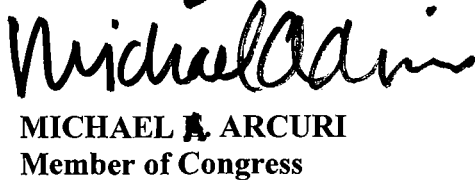

GREGORY W. MEEKS
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JOSEPH CROWLEY
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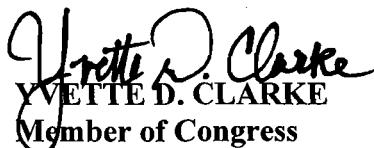

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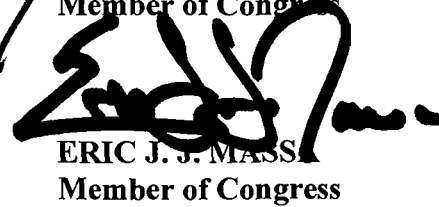

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