



**MEMORANDUM**

April 30, 2015

**To:** The Honorable Carolyn B. Maloney  
Attention: Elizabeth Darnall

**From:** Sarah A. Lister, Specialist in Public Health and Epidemiology, slister@crs.loc.gov, 7-7320

**Subject:** **Section-by-Section Summary of the “James Zadroga 9/11 Health and Compensation Reauthorization Act,” H.R. 1786 and S. 928, as Introduced**

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This memorandum summarizes provisions in the James Zadroga 9/11 Health and Compensation Reauthorization Act (henceforth referred to as the Reauthorization Act). The Reauthorization Act was introduced as substantively identical bills in the House (H.R. 1786) and Senate (S. 928) on April 14, 2015. It would reauthorize the World Trade Center Health Program (WTCHP) and the September 11<sup>th</sup> Victim Compensation Fund (VCF). All references to “the Secretary” in this memorandum refer to the Secretary of Health and Human Services (HHS).

Information from this memorandum is of general interest to Congress. As such, this information may be provided to other congressional requesters, and may be published in CRS products for general distribution to Congress at a later date. In any case, your confidentiality as a requester would be preserved. Please contact me if I may be of further assistance.

### **Section 1. Short Title**

This Act may be cited as the “James Zadroga 9/11 Health and Compensation Reauthorization Act.”

### **Section 2. Reauthorizing the World Trade Center Health Program (WTCHP)**

The following subsections would amend sections in Title XXXIII of the Public Health Service Act (PHSA), 42 U.S.C. 300mm et seq., which authorizes the World Trade Center Health Program (WTCHP).

*Subsection (a)(1)* would amend PHSA Section 3351(a) to permanently reauthorize the World Trade Center Health Program Fund (the Fund). It would authorize the appropriation of \$431 million for the federal share of the program for FY2015, and, for each subsequent fiscal year, the amount for the prior fiscal year increased by the increase in the medical care component of the Consumer Price Index for all Urban Consumers (CPI-U), as estimated by the Secretary for the 12-month period ending with March of the previous year.<sup>1</sup> It also would strike the current funding limitation for FY2016. Instead, it would allow

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<sup>1</sup> Both the bills and current law refer in several provisions to increasing benefits according to increases in the CPI-U or the CPI-U medical care component. Neither the bills nor current law specifies how benefits would be adjusted if either index were to (continued...)

any unexpended amounts provided prior to FY2015 to remain in the Fund. It would establish all amounts deposited into the Fund to remain available until expended.

*Subsection (a)(2)* would amend PHSA Section 3351(b) to add the following functions to the list of functions for which money deposited into the Fund may be used:

- the quality assurance program for the monitoring and treatment delivered by the Centers of Excellence and any other participating health care providers as described in PHSA Section 3301(e);
- the WTCHP annual report described in PHSA Section 3301(f);
- the WTCHP steering committees described in PHSA Section 3302(b); and
- contracts with the Clinical Centers of Excellence described in PHSA Section 3305(a)(1).

*Subsection (a)(3)* would amend PHSA Section 3351(c) to change the inflationary adjuster for payments to immediate family members of firefighters, capped at \$400,000 for FY2012, from the CPI-U to the medical care component of the CPI-U. It also would amend the cap on funding for the WTC Health Program Scientific/Technical Advisory Committee as follows:

- for FY2013 and FY2014, the amount for the prior fiscal year (starting with the FY2012 amount of \$100,000) increased by the increase in the CPI-U;
- for FY2015, \$200,000; and
- for each subsequent fiscal year, the FY2015 amount increased by the increase in the CPI-U.

Finally, it would amend the cap on funding for Uniform Data Collection as follows:

- for FY2013 through FY2016, the amount for the prior fiscal year (starting with the FY2012 amount of \$10 million) increased by the increase in the CPI-U;
- for FY2017, \$15 million; and
- for each subsequent fiscal year, the amount for the prior fiscal year increased by the increase in the CPI-U.

*Subsection (b)* would amend PHSA Section 3301 to explicitly authorize the Secretary to promulgate regulations as necessary to administer PHSA Title XXXIII, the World Trade Center Health Program.

*Subsection (c), Clinical Centers of Excellence and Data Centers*, would amend PHSA Section 3305 to clarify that Clinical Centers of Excellence would be contracted to, among other things, provide activities to retain individuals who are eligible for program benefits. It also would clarify that Data Centers would be contracted to, among other things, evaluate data on any newly identified WTC-related health conditions, and coordinate retention activities carried out by Clinical Centers of Excellence.

*Subsection (d), World Trade Center Responders*, would amend PHSA Section 3311, the authority that limits the number of eligible WTC responders, by striking the reference to “the end of fiscal year 2020” in directing the WTCHP Administrator to consider the adequacy of funding when conducting enrollments.

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decrease.

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*Subsection (e), World Trade Center Survivors*, would make the same change as above (striking the reference to the end of FY2020) to PHSA Section 3321, the authority that limits the number of eligible WTC survivors.

*Subsection (f), Payment of Claims*, would amend PHSA Section 3331 to permanently extend the matching obligation for New York City to pay 10% of total WTCHP costs.

*Subsection (g), World Trade Center Health Registry*, would revise PHSA Section 3342 to clarify that the Administrator shall maintain a registry of victims of the September 11, 2001 attacks that is at least as comprehensive as the registry maintained by the New York City Department of Health and Mental Hygiene as of January 1, 2015.

### **Section 3. Reauthorizing the September 11<sup>th</sup> Victim Compensation Fund of 2001**

The following subsections would amend sections of the Air Transportation Safety and System Stabilization Act (ATSSSA), 49 U.S.C. 40101 note.

*Subsection (a), Purpose*, would amend ATSSSA Section 403 to expand the stated purpose of the Victim Compensation Fund (VCF) through addition of the italicized language: to provide *full* compensation to any individual (or relatives of a deceased individual) who was physically injured or killed as a result of the terrorist-related aircraft crashes of September 11, 2001, *or the rescue and recovery efforts during the immediate aftermath of such crashes*.

*Subsection (b), Timing and Requirements for Filing a Claim*, would amend ATSSSA Section 405 to remove the five-year limitation (effective with the publication of program regulations<sup>2</sup>) on filing a claim, and would make certain conforming amendments.

*Subsection (c), Payments to Eligible Individuals*, would amend ATSSSA Section 406(d) to eliminate the \$2.775 billion cap on total program payments, and would make a conforming amendment. (It would retain the \$875 million cap on total payments in the first five years of the program, effective with the publication of program regulations.) It also would eliminate the requirement to ratably reduce payments to account for the monetary cap on total program payments, while providing the Special Master (who administers the VCF) the authority to reduce payments if necessary. It would, in cases for which an award were so reduced, allow the Special Master to pay the balance of the award to the claimant when funds became available, rather than requiring that such balance be paid between years five and six of the program. The subsection also would make certain conforming amendments.

*Subsection (d), Regulations*, would amend ATSSSA Section 407(b) to require the Special Master to promulgate regulations pursuant to the Reauthorization Act within 180 days of enactment.

### **Section 4. Amendment to Exempt Programs**

*Subsection (a), In General*, would add both the September 11<sup>th</sup> Victim Compensation Fund and the World Trade Center Health Program Fund to the list of federal retirement and disability accounts and activities

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<sup>2</sup> This final rule has been published. Department of Justice, “James Zadroga 9/11 Health and Compensation Act of 2010,” 76 *Federal Register* 54112, August 31, 2011.

that are exempt from sequestration under Section 255(g)(1)(B) of the Balanced Budget and Emergency Deficit Control Act of 1985 (2 U.S.C. 905(g)(1)(B)).<sup>3</sup>

*Subsection (b), Applicability*, would apply the amendments made by subsection (a) to any applicable sequestration order issued after the date of enactment.

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<sup>3</sup> For general information, see CRS Report R42050, *Budget “Sequestration” and Selected Program Exemptions and Special Rules*, coordinated by Karen Spar.

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