

**Congress of the United States**  
**Washington, DC 20515**

March 11, 2021

Steven J. Corwin, MD  
President and Chief Executive Officer  
New York-Presbyterian Hospital  
630 West 168th Street  
New York, NY 10032

Dear Dr. Corwin,

We write today regarding New York-Presbyterian Hospital's (NYP's) method of participation in the World Trade Center (WTC) Health Program. It has come to our attention that NYP, one of the largest hospitals in the world, has for years provided care for 9/11 responders and survivors under a "Single Case Agreement" administrative approach, rather than enter into a full or universal "Provider Agreement" with the federal government's WTC Health Program. Such a universal "Provider Agreement" would encompass all members receiving services under the WTC Health Program by any NYP provider.

We are concerned that the "Single Case Agreement" model currently in use generates excessive administrative burdens that delay access to lifesaving care for 9/11 responders and survivors, as well as increased costs for the WTC Health Program, which has been established to serve this population. This model results in case-by-case agreements allowing an individual WTC Health Program member to seek care from only one specific provider at a time. Consequently, every time that a new WTC Health Program member needs care from NYP, a "Single Case Agreement" must be prepared, submitted, and approved by all parties. Furthermore, each time that a WTC Health Program patient needs a test or consultation with a different provider at NYP, a separate "Single Case Agreement" must be drafted, reviewed, and agreed to by all parties. Should a provider with the WTC Health Program decide that a WTC Health Program member needs to receive treatment at NYP, it could take weeks for the patient to receive approval for care as the referring provider must first contact the WTC Health Program for a referral and authorization. At that point a "Single Case Agreement(s)" must be drafted, reviewed by all parties, and approved. This process results in significant delays, reducing the quality of care and the quality of life for WTC Health Program members.

We understand that NYP has treated – and continues to treat – some of the most severely ill members enrolled in the WTC Health Program. Thanks to NYP, the WTC Health Program has been able to provide its members with highly specialized care that is often not available elsewhere in the New York metropolitan area. However, each of these members likely requires care from more than one provider and more than one division in a hospital – and under the current model, each additional provider requires a separate "Single Case Agreement" before that care can be given. For example, WTC Health Program members may be referred to concurrently or consecutively: radiology; infectious disease; critical care; oncology; hematology; physical

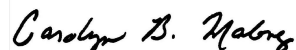
therapy; etc. Under the current “Single Case Agreement” model, none of these referrals are covered by the single case agreement with the WTC Health Program member’s main physician at NYP. This is especially problematic for various physician groups treating WTC Health Program members (Columbia Doctors, Weill Cornell Physician Organization, etc.) whose physicians only refer patients to NYP hospitals.

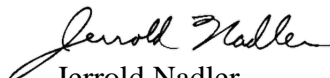
Unfortunately, these administrative barriers have resulted in both patient visit cancellations and unresolved service claims. These unpaid claims then become the financial responsibility of the WTC Health Program member – a financial burden they are not meant to bear – as the WTC Health Program does not have the legal authority to pay providers outside its network of affiliated providers. In several instances, WTC Health Program members have been forced to go outside of the Program and engage in protracted negotiations with their private insurance company to cover medical fees that otherwise would have been covered by the WTC Health Program. This is antithetical to the purpose of the WTC Health Program and the care we owe these first responders and survivors.


With the 20<sup>th</sup> anniversary of the September 11th attack this fall, it is long overdue that NYP makes its facilities and services fully and easily accessible to WTC Health Program members. We are requesting that NewYork-Presbyterian Hospital transition its WTC Health Program administrative model from “Single Case Agreement” to a full and universal “Provider Agreement” so that our heroes can get the care they deserve, without unnecessary administrative barriers and costs. We hope that you will take immediate action to resolve this as soon as possible.

Thank you for your attention to this urgent matter.

Sincerely,

  
Carolyn B. Maloney  
Member of Congress

  
Jerrold Nadler  
Member of Congress

  
Andrew Garbarino  
Member of Congress