Uncertainties Surrounding the James Zadroga 9/11 Health and Compensation Act

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In what many considered a startling display of partisan politics, a long-delayed bill meant to mandate $7.4 billion in funding of health care for those suffering from medical 9/11-related illnesses failed to pass in the House this June. Pundits favoring the bill placed the blame for its failure on both Democrats and Republicans, and after a successful re-introduction of the bill in September, the future of the bill yet remains in question as it proceeds to the Senate, where it enjoy no enthusiastic Democratic proponents and certainly no significant Republican support.

The James Zadroga 9/11 Health Care Bill is named for a New York City police detective who died due to respiratory illness several years after serving as a first responder at ground zero in September of 2001. The cause of his death has been the subject of fierce controversy, with medical examiners and NYC Mayor Michael Bloomberg both repeatedly changing their positions on claims of a direct relation to 9/11. Zadroga’s single case reflects a larger concern over the hazardousness of the air in downtown NYC immediately following the attacks of 9/11 and the illness of many first responders to Ground Zero.

“At least 900 people have died since September 11th, at least, from 9/11-related diseases,” said Congressman Anthony Weiner at a press conference in September (Rauh). This number has been highly contested, with many pointing out that while it is certain that at least 836 people who worked at ground zero have died, the cause of each death has ranged from cancer and other diseases to traffic accidents and military action (DePalma).
While the cause of all those deaths remains unclear, the need for further study over time as the body of data increases is certain. The levels of dust and highly alkaline material were measured at high levels - levels that can cause significant and painful damage to human bodies (DePalma).

In early June, a settlement was reached through negotiation between the City of New York and about 10,000 rescue and clean-up workers at ground zero for $712.5 million after a previous $657 million settlement was criticized by many as being too small - including Manhattan District Court Judge Alvin Hellerstein, who voided the original agreement in order for a more favorable settlement to be reached. The New York Times reports that recipients will include a range of plaintiffs between those with no “qualifying” injury but with fear of impending illness – warranting payments as low as $3,250 – to survivors of deceased ground zero workers who have demonstrable links between their loved ones’ illness and their presence at the World Trade Center site (Sulzberger). The settlement was reached, as stated, with 10,000 plaintiffs – however, there are currently 53,000 responders enrolled in a “patchwork” of independent health care providers and 71,000 individuals enlisted in the World Trade Center Health Registry, which enrolls people who have been directly exposed to 9/11-related toxins (“Continuing”). Additionally, the World Trade Center Health Panel appointed by New York City Mayor Michael Bloomberg in September 2006 estimates that “the cost to evaluate and treat all those affected or potentially affected by the 9/11 attacks could exceed $392 million per year for the foreseeable future—an estimate that does not include the costs to treat any late-emerging, chronic conditions that may arise, or increased pension and disability costs associated with the 9/11 attacks” (Geller).
It is important to recognize that not all injuries and ailments related to 9/11 rescue workers are simply physical. According to a study by Perrin and DiGrande published in the American Journal of Psychiatry in 2007, about 3,500 of the 28,962 (12.4%) World Trade Center Health registrants who reported working at the WTC site suffer from post-traumatic stress disorder. A particularly high level of unaffiliated volunteers have been diagnosed, suggesting that a lack of prior experience or training makes first responders much more vulnerable to suffering long-lasting psychological illness after experiencing physical or psychological trauma (Perrin). Zadroga would appropriate $8.5 million “to provide mental health services to address mental health needs” relating to the 9/11 attacks (James Zadroga).

The Zadroga bill, had it been enacted into law, would have established a World Trade Center Health Program within the National Institute for Occupational Safety and Health, effectively taking over facilitation of health care for the up to 60,000 first responders who worked at ground zero immediately following the terrorist attack of September 11, 2001, and provided $7.4 billion in funding for its operations. Contrary to a popular over-simplified understanding of the bill, Zadroga is not a “health insurance” bill that will cover all health insurance costs for 9/11 workers. Many health care workers already have health care. The significant divergence from current medical care for first responders is in its specialization - health care services provided by medical professionals specifically trained and specializing in possible WTC-related disease would be made available.

New York City Representative Carolyn Maloney introduced the bill, with the bipartisan sponsorship of the entire New York delegation, to the House of
Representatives, where it gained 115 co-sponsors. The bill’s content and introduction to and vote on the House floor continues to be the subject of heated debate, sparking, among other actions, an impassioned and much-discussed speech by New York Representative Anthony Weiner on the House floor.

The bill was introduced under a suspension of House rules, a tactic described by Democrats as one usually utilized by the House leadership for bills considered uncontroversial or urgent in nature. In order for it to pass without opportunity for debate or amendment, a suspension of the rules requires a two-thirds, rather than simple, majority in order to pass. The bill received a vote of 255-159, just under the required two-thirds majority, with support from 12 Republicans and opposition from 4 Democrats. Democrats introduced the bill under such a suspension of rules, pundits write, in order to bypass a likely manipulation by Republican members, who took issue with the way funding for the bill was appropriated and who might have introduced an amendment to explicitly prohibit coverage of first responders who are also undocumented immigrants. These suspicions were based in previous Republican attempts at attaching immigration and abortion restrictions to the bill throughout its path to the floor of the House (McAuliffe).

The White House remained relatively silent on the issue, apparently reluctant to publicly support a bill mandating spending rather than leaving it up to the annual appropriations of the budget (McAuliffe).

Both Democrats and Republicans suffered criticism for the handling of the bill unrelated to the actual content of the bill. Republicans were painted by Democrats and their supporters as being “more concerned with protecting the interests of the foreign
based companies who try to avoid paying taxes than helping those who answered the nation’s call on 9/11,” as described by AFL-CIO President Richard Trumka (Pecquet).

Critics of the Democrats claimed that introducing the bill under the suspension of the house rules was too risky or, as Republican Long Island Representative Pete King charges, evidence of “moral cowardice and a failure of leadership” (McAuliff). Mayor Bloomberg expressed “outrage” at the required 2/3-majority threshold, stating definitively at a press conference that “[The Democrats] will not get that. And they know that. So this is a way to avoid having to make a tough decision” (Pecquet).

The Democrats successfully passed the bill in September by a 268-160 vote, with seventeen Republicans and three Democrats crossing party lines by voting for and against the bill, respectively.

The successful passage of the Zadroga bill in the House under regular House rules in September, proponents of the bill await a precarious vote in the Senate. Apparently responding to pressure from the New York delegation and first responders, President Obama, who expressed support for the bill as a presidential candidate, issued an official White House statement that he will sign the bill if it is passed. The statement was received with praise and encouragement from the bill’s proponents, including Anthony Weiner’s remark that the White House statement “brings us one step closer to the bill’s ultimate passage” (Barrett). Mayor Bloomberg has expressed satisfaction with the statement while reaffirming that he “thought [Obama] should have spoken out earlier” (Bloomberg).

The latest reported status on The Library of Congress’ Congressional information service is listed as having been referred to the Senate Committee on Health, Education,
Labor, and Pensions, where hearings have been held on 9/11 health care issues. Passage in the Senate would be met with a promised signature from President Obama. The best hope for proponents of the bill, it seems, is to introduce it during the lame duck session of the Senate following the November 2010 Congressional elections. Whether it will pass even then is doubtful. Passionate debate surrounds the question of what responsibilities are owed by whom, and to which workers. Scientific questions still remain unanswered. Reporter Anthony DePalma writes that the bill is “a response to the need for compassion to take the place of certainty.” The Zadroga bill would not only provide care to any who may be suffering 9/11-related health problems, but it would also provide a central point of research to understand the actual connections between the illnesses of those who were medically affected by their work at ground zero.
Works Cited


