CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON CIVIL SERVICE AND LABOR JOINTLY WITH COMMITTEE ON HEALTH

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HELD AT: Council Chambers - City Hall

B E F O R E: I. DANEEK MILLER

CHAIRPERSON

MARK LEVINE CHAIRPERSON

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## A P P E A R A N C E S (CONTINUED)

Steven Banks, General Counsel, New York City Office of Labor Relations, OLR

Sherif Soliman, Senior Advisor to the First Deputy Mayor

Mark Farfel, Department of Health and Mental Hygiene

Karen Mazza, Deputy Executive Director, New York City's Employees Retirement System, NYCERS

Alicia Slack, General Counsel, New York City's Employees Retirement System, NYCERS

Ellie Engler, Executive Assistance to President Michael Mulgrew of the United Federation of Teachers, and Director of Staff

Oren Barzilay, President, FDNY EMS, Local 2507

Mary Fetchet, Founding Director, Voices of September  $11^{\rm th}$ 

Stephanie Landau, Program Director, Voices for September  $11^{\rm th}$ 

Linda Mercer, Traffic Agent, NYPD

Leonard Sorgie, 9/11 Survivor

John Feal

Matthew McCauley, 9/11 First Responder, Now Legal Counsel Representing Linda Mercer & 9/11 Survivors

Michael Barasch, Managing Partner, Law Firm of Barasch & McGary

Richard Alles, FDNY Deputy Chief & Former Political and Legislative Director of the UFOA.

[sound check] [pause] [gavel]

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CHAIRPERSON MILLER: Good morning. Ι'm Council Member I. Daneek Miller, and I'm the Chair of the Committee on Civil Service and Labor, and I'm happy to be joined by my colleague Council Member Mark Levine, the Chair of the Committee on Health. I would like to thank everyone for coming out to this morning's hearing. Today's joint oversight hearing will focus on the health of September 11<sup>th</sup> responders and the surrounding community. We will be receiving an update on the state of 9/11 survivors and its first responders health. In addition, this important oversight the Committee on Civil Service and Labor will be hearing a resolution introducing-introduced by myself Resolution 655, which will call upon the Mayor to grant sick leave to all civilian officers, employees-officers and employees of New York City seeking treatment-seeking treatment for qualifying World Trade Center related conditions. The terrorist attack of-the terrorist attack of September 11, 2001 had a profound and lasting effect on New York City and the nation as a whole. One of these was the harmful health effects of those who were first responders and survivors of these attacks. Aside

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from the large number of direct deaths and acute injuries felt on that day, thousands have been left with chronic health issues ranging from asthma, cancer and mental health conditions. These health issues have had ad-adverse consequences on many people's daily lives including continue to work and finding future employment. Some of the city's workforce were entitled to earn the new sick leave. Otherwise known as online-In Line of Duty Sick Leave because they were injured while in the line of duty. Regrettably, this limited—it was limited to the uniform services, Fire Department, Police Department, Sanitation and Corrections. However, other city employees such as EMT, engineers, peace officers, laborers and others who participated in the recovery efforts, and now suffer from World Trade Center related health conditions, do not have the same benefits. Notably, after many years this problem has been partially addressed by Mayor de Blasio announcing on October 23<sup>rd</sup> that an agreement had been reached with DC37, the city's largest municipal labor union. The agreement stipulates that the city will provide unlimited 9/11 sick leave to an estimated 2,000 active city workers who participated in ground

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zero recovery and clean-up operations and contracted a World Trade Center related health condition. importantly, this sick leave is retroactive to September 11, 2001, and leave taking since then will be restored. While we are glad that these workers will now be compensation for the treatment they sought for their illness, the time the city-the time is now for the city to do right by all members of its workforce who went above and beyond the call of duty, and it is now past due. Though we anticipate the announcement of future agreements with other unions representing these brave workers, as each day passes, they will continue to use their regular sick leave and miss work, retire prematurely or simply just die waiting for a benefit that they should have received a long time ago as a matter of general principle and not collective bargaining. I'd like to thank-today's hearing we will also look at the issue of city workers being denied or delayed authorization and disability pensions due to their efforts in the-on the line of duty at Ground Zero. While this Council has no direct legislative oversight over various city pension systems, we can certainly shine a light on this issues and advocate for the thousands of city

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works who simply are waiting to be treated fairly and with the dignity by the city and leadership of the pension system for city employees. I look forward to hearing from those who testify, and understanding how these health and employment concerns are being addressed. I'd like acknowledge the Council Member [pause] Here we go—I would like—and I would also like to thank my Legislative and Policy Aid, Brandon Clark; Senior Policy Analyst Joseph Goldblum; the Council Policy Analyst and Finance Joseph Goldblum; Council Policy Analyst and Finance Analyst Malcomb and Kindler (sic). With that, I will now turn it over to my Co—Chair for his opening statement

CHAIRPERSON LEVINE: Thank you so—so much Co-Chair Miller. I am excited about this topic. To our knowledge it has been a long time since this Council has focused on the critical issue of the health of those women and men who working for the city had their health directly really impacted by a proximity to Ground Zero. I'm excited that we are joined here today by our colleagues, Council Member Danny Dromm, Council Member Adrienne Adams; and Council Member Alan Maisel. Today's hearing will look at various issues stemming from the terrorist

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 8 attacks of 9/11 particularly at the continued health of survivors, first responders and community members and the challenges faced by those who continue to suffer from the effects of the 9/11 attacks. effects of 9/11 have continued to manifest themselves in the brave first responders who rushed to the scene, and then the people who lived in the neighborhoods surrounding Ground Zero. These effect have been both mental and physical caused by traumatizing scenes and contaminants released in the air by collapsed buildings. Symptoms that have proven to be directly liked to the 9/11 attacks are known as qualifying World Trade Center related health condition. The Department of Health and Mental Hygiene and the Federal Agency for Toxic Substances and Disease Registry created the World Trade Center Registry, which is a data gathering effort that started in May 2009 to document the effects of Ground

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Zero on people working, living and studying in the vicinity. The Registry has since led to city funded offshoots that focused on more specific groups such as the study of Lower Manhattan residents and office workers exposed to the disaster. Thanks to the World

Trade Center Registry and in accordance with the

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 9

World Trade Center Health Program we now know what the top 10 certified World Trade Center conditions

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the top 10 certified World Trade Center conditions are and can track World Trade Center conditions with more certainty and regularity. These conditions have been documented affecting police officers, firefighters, emergency medical technicians, civilians living in the area, an even Stuyvesant High School students who were attending school when the attacks occurred. With this data we must ensure that every New Yorker and person affected by 9/11 receives the care to which they are entitled, and those impacted by the worst terrorist attack in-in American history, must receive meaningful and effective care. In this hearing we hope to find out about the state of health of New York City communities affected by-by proximity Ground Zero and we aim to hear from people both previously and newly diagnosed World Trade Center health conditions to gain a better understanding of how their lives have been affected, and understand what resources were available to them and how all of this has affected their quality of life. We also seek to learn from DOHMH what the city plans and continues to do to meet and address the

needs of all our residents to make sure that no

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person or detail is neglected. The outstanding bravery and sacrifice exhibited by New Yorkers have made their mark on our nation. We must ensure that those efforts are met with the sufficient care and attention they deserve. It's customary at the end of opening statements to thank you committee staff, which I'm going to do, but I have to give them an extra, extra, extra, extra special shout-out because the Health Committee has staff no fewer than nine hearings in the last five weeks. It's a remarkable, remarkable run. I'm exhausted just thinking about it. So, I do want to really thank and acknowledge our committee counsel Ze Emanuel Hailu and Sara Lis; Policy Analyst Emily Balking, Finance Analyst Janette Merrill and my Legislative and Policy Team Amy Slattery, Aya Keefe, and Jake Sporn for making this hearing and the previous eight hearings possible. Thank you very much, and I think we're going to turn it over to the Administration. Yes? And we'll-=we'll do the affirmation please. Thank you.

raise your right hand. Do you affirm to tell the truth, the whole truth and nothing but the truth in

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your testimony before this committee, and to respond honestly to Council Member questions?

STEVEN BANKS: Yes.

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SHERIF SOLIMAN: Yes.

LEGAL COUNSEL: Please state your name and title and begin when you're ready.

STEVEN BANKS: Good morning. Thank you, Chair Miller, Chair Levine and members of the Council here today for holding this important hearing to discuss the health of 9/11 responders and the surrounding community. My name is Steven Banks, General Counsel of the New York City Office of Labor Relations. The primary purpose of my testimony will be to describe and lay out recent progress the city has made with its municipal unions regarding sick leave benefits for civilian employees who respond on and after 9/11/2001. But before I get into the substance of those recently negotiated agreements and on behalf of Commissioner Lynn, I would like take this opportunity to note the profound gratitude and respect that the Office of Labor Relations as an institution has for city employees, but particularly those who responded to the catastrophic attacks of September 11<sup>th</sup>. It's sometimes taken from granted

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that our-that our municipal employees answer the call to rescue their fellow citizen and perform all the necessary functions to keep the city moving and thriving. During and after the 9/11 attaches, all types of city employees did so with honor, pride and courage. The issue-less than two months ago in late October were able to reach a settlement with DC37 to provide a brand new 9/11 sick leave benefit, and thereby resolve an issue that had been concerning for many of those who responded and helped the city get back on its feet after 9/11. The issue had been that while the city's uniform services or Police, Fire, Correction and Sanitation received unlimited sick leave. Most civilian employees accrue a set number of days usually one per month or 12 per year. civilian employees also accrue up to 27 annual leave days, which are used for vacation and other personal business. It was brought to our attention that there were and are civilian employees who participated in the rescue, recovery and clean-up operations relate to 9/11 and later developed illnesses, which did not require retirement, but affected employees' ability to continue working. The reason I mention retirement is that there have been amendments to the Pension

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 13 1 2 Law, which affected these same employees. In 2005, the landmark—the landmark World Trade Center 3 4 Presumption Law was passed, and has been expanded through amendments thereafter. This ground breaking 5 6 law provides a presumption in the New York State 7 Retirement and Social Security Law that certain enumerated illness were contracted as a result of the 8 participation in the World Trade Center rescue, 9 recovery and cleanup. Those deemed to have 10 participated according to eligibility criteria and 11 12 the law may qualify for accident disability benefits and in the event of death, the survivors may also 13 qualify for an accidental death benefit. Now the 14 15 issue of a separate sick leave benefit for 9/11 16 responders as a supplement to the existing benefits 17 in place first came to my attention last spring based 18 on a bill that was proposed in Albany to provide a new benefit. We thought that the appropriate forum 19 20 to address the issues of these workers was at the collective bargaining table. Paid leave benefits are 21 2.2 generally considered a mandatory subject collective 23 bargaining and provisions providing various types of paid leave are in all of our collective bargaining 24

agreements with the city. In general we all do

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firmly believe that collective bargaining negotiation is the best way to solve these sorts of issues because it allows for all site to be heard, and for all interest to be balanced. From a labor relations standpoint, we in New York City want to be the answer to Wisconsin, and we want to show that collective bargaining does, in fact, work for both the employees and the taxpayers. We believe we've demonstrated this in a number of ways including with other paid leave issues. Earlier this year Commissioner Linn testified next door regarding paid parental leave for teachers at the DOE, and a couple months later we announced an agreement with the UFT providing a new paid parental leave benefit. In this case with regard to 9/11 sick leave, the city led by Sherif Soliman--who is here with me today-engaged with DC37 and worked out mutually benefit-mutually beneficial. The key terms are unlimited sick leave for any civilian employees who participated in the World Trade Center Rescue, Recovery and Clean-Up Operations and has contracted a qualifying World Trade Center condition, which renders them unable to work. both of terms the rescue, recovery and cleanup and qualifying World Trade Center conditions are terms of

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ours, which until now have been used for the eligibility for the pension benefits that I described earlier, and so we tracked those same criteria for sick leave benefit. Employees receiving this benefit will be subject to medical monitoring not unlike our uniformed employees who report to the medical-medical division at their respective agency while they're out on unlimited sick leave. And for employees who are currently active and have, therefore, not been able to benefit from the Pension Amendment described earlier, sick leave will be restored retroactively as the Chair mentioned for absences in the past that were connected to the World Trade Center condition. Now, since the agreement was reached with DC37 in October, we've approached every other civilian union and offered that they sign on under the same terms. This is necessary because each employee organization has a legal right to negotiate the benefits for their members. To date, nine other unions after DC37 have signed on, and we expect others to follow suit in the coming weeks and months. We're also working on implementation issues. We have a meeting with DC37 tomorrow to discuss some of the rollout and standing up of this new benefit. We are extremely proud to

have partner with our unions to solve an important issue for those who served us in the fact of unspeakable tragedy. I'd like to recognize the leadership of the Mayor and the First Deputy Mayor

leadership of the Mayor and the First Deputy Mayor in

allowing this to move forward, and I'm be happy to

7 answer any questions about the labor negotiations and

8 the new 9/11 sick benefit., and if there are

9 questions about the registry, we have folks from the

10 Department of Health and Health and Hospitals to

11 assist in answering those questions as well. Thank

12 you.

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13 CHAIRPERSON LEVINE: Thank you Mr. Banks.

14 If I could just ask we have Mr. Farfel from-from DOH.

Would you mind joining the panel just so that we can

16 ask you questions as well as they come up. [pause]

17 And we'll-we'll as our committee counsel to do the

18 affirmation for you. Thank you.

LEGAL COUNSEL: Please raise your right hand. Do you affirm to tell the truth, the whole truth and nothing but the truth in your testimony before this committee, and to respond honestly to Council Member questions?

MARK FARFEL: I do.

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CHAIRPERSON MILLER: Okay, Mr. Soliman does not have testimony. So, let me just say—first say that we've been joined by Council Members Maisel, Eugene and Adams, and everyone is here now. So, with that being said, I'm going to start off with Mr. Banks' testimony where he described briefly the agreement with DC37, and so now that the agreement has been reached with DC37 to provide their members with unlimited sick, how many other unions, which you said I think is 11, that you have reached out to better understand this universe we are talking about, how any non-uniformed employees including DC37 did not have access to the line of duty unlimited sick leave or how many DC37 employees will be covered in this new agreement?

question about the number of civilian employees, there's just under 300,000 civilian city employees, almost 100,000 in DC37. Most of those have come on—into city employment well after 2001/2002. So, in terms of the number affected, it's going to be a small subset of that population who actually were not active city employees in—in 9/11 and the year after and participated in the rescue, recovery and cleanup.

that we're able to recapture that entire universe?

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STEVEN BANKS: So, I mean that's not completely within our control. It's just a bilateral conversation, but we've reached out to all those unions. Some have come back with very legitimate questions about how the process works. In the example of DC 37, we had a long back and fourth of negotiations. So, some of our other union partners have to get up to speed. But they've been sort of rolling in on a—on a weekly basis. So, it's our expectation that most, if not all, will be wrapped up in the coming weeks.

CHAIRPERSON MILLER: So, you say that you've reached out to all the—all the relevant units represented by the State of New York. How—how have you—-? [pause] What—so what was the outreach? Did you just send out a general memorandum that—that of those who may have been impacted by 9/11 related illnesses should respond that there is a renewal of the registry and—and potentially collective barging opportunity over unlimited sick time or have we—was there some form of the databased that has identified those who had served curing recovery in 2001 and beyond?

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anecdotal information that it's likely that all or if not all then almost all of our city unions will have been touched even if there's a few employees who participated. So our goal is to just reach out to all of the—the civilian (sic) unions, and so our office, you know, through myself and some of the other negotiators at OLR reach out to each union individually, explain what had happened with the DC 37 agreement, and suggest that—that a similar provision be extended to their members.

CHAIRPERSON MILLER: And that would kind of include folks like traffic enforcement that were down and—and had babies? Because I know that over the past five years that I've done hundreds of general member ship meetings with—with local unions and—and this has been a topic of conversation, and—and—and I just wanted to make sure that those who I have spoken to over the past five years had been included with this and—and—and then perhaps without getting into detail, detail the overtone of the framework that that looks like. Because I know I was many, many years ago when—when the original plan (sic) we drafted for uni—uniform agencies that it was

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very specific to the work that they were doing, and that just want to be sure that the same opportunity 3 exists and that the proper outreach was being done 4

5 that recaptured the entire universe of folks that had

6 been impacted. So, just again could you elaborate on

7 how that was done, and-and as well as-as well as we-

we are now-we have now established that folks are 8

suffering not just physical but mental and emotional 9

related issues as well, and how have we been 10

addressing that and-and incorporated that into the 11

12 language that-that we've been using for the past

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STEVEN BANKS: Yeah, I mean so, certainly our goal would be cover any civilian city employees. So that would include traffic enforcement agents like you mentioned. We have school safety agents who are working in the schools like Chair Levine mention, you know, who are potentially as well. I mentioned auto mechanics. If you just think of, you know, they were fixing the vehicles that have been down at the Ground Zero site, and, you know, folks in or 911 system. mentioned the fire alarm dispatchers and, you know, my understanding and I'm not an expert in this area, but my understanding is that the existing Pension

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Law, it's a qualifying conditions does include a range of mental health uses as part of the qualified conditions. So, you know, we believe that the structure that we've establish does cover those sorts of issues for the people who need it.

CHAIRPERSON MILLER: And—and—and do you believe that the—the—the language that was used to provide this benefit to DC37 members and subsequently the other members gives you the type of latitude that is necessary to serve those members moving forward. So sometimes that the—the previous language may have been restrictive in what we see so far as addressing mental health and other issues and particular concerns of this workforce. Does this give you the latitude? DO you have the latitude within the framework of this language to—to be able to move forward in serving those employees, and allowing them to the benefits that they need?

STEVEN BANKS: Just speaking for a collective bargaining perspective, we thought that the existing pajala (sic) did provide a good framework for defining not only the service in terms of rescue, recovery and cleanup but the—the qualifying conditions that was pending in Albany used

some of those structures as well. So, we—we did think that that appropriately covered our employees,

and that ultimately was the—the structure that we
agreed to with our union so there obviously was some—

7 | structure made sense.

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## CHAIRPERSON MILLER: So--

some bilateral agreement that that-that that

STEVEN BANKS: So, if we need to look at something in the future, the good thing about collective bargaining right is we can always come back to the table if something needs to be addressed. You know, if—if there is something that the parties haven't anticipated, you can always come back to the table.

CHAIRPERSON MILLER: Okay, good. With that, I'm going to pass it over to Council Member Levine.

CHAIRPERSON LEVINE: Thank you, Mr.

Chair. I just want to emphasize the extent to which this hearing is focused on a group of victims of the worst terrorist attack in American history who too long were being ignored. The public generally only thinks about the people who perished the day of the attack and secondarily of the heroic first responders

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who absolutely deserve every bit of support from this city and the society for their sacrifice, but there was another group of victims, which is people who reported to work out of duty to their city and ended up spending days, weeks, months breathing in air which we now understand was toxic, and we owe it them to ensure that they have every accommodation to get the care they need to avoid financial hardship, and what this hearing is about, and we are pleased that you've achieved a landmark agree now wit DC 37 and that this now being followed by other unions. just want to follow up, if I can—as much as I can clarify the excellent question so my colleague, how soon can we expect that every city employee who was exposed will be covered by this new policy?

STEVEN BANKS: Yeah, so again that's not completely within our control. That's a bilateral discussion between us and each—each union, but based on the feedback the we've received so far, obviously it's a new benefit on top, or, you know, we're not asking for any give-backs or trade-offs, right, we--

CHAIRPERSON LEVINE: [interposing] And—and—I'm sorry to interrupt because that point is soso, so key. If—usually in collective bargaining one

side gives something and the other side gives something, and I don't think it would be fair if workers who didn't ask to be sent to work near Ground Zero now are told they have to give something up to receive the benefit of paid sick time. So, can you just clarify the extent to which we can avoid that unfair arrangement. Yes, please Mr. Soliman.

SHERIF SOLIMAN: Sure, Chair Levine. So, from the outset when we started discussions with the unions on this benefit, our intention was to keep the discussion solely on the issue of extending sick leave benefits to affected employees. In no way did we intend nor did we ask or engage in conversations about trade-offs or any sort of compromises outside of this issue for any other labor issue. Our intent from the very beginning and it is today to make sure that we have a program that works, that meets the balance of both labor and on the city side. So, it—this is not intended to make sure we have any compromises outside of this actual benefit.

STEVEN BANKS: That's such and important point, and I appreciate you clarifying that. For the Department of Health, so, the—the—the Registry can

MARK FARFEL: Sure, the Registry was

you update us on the number of people who are currently participating?

established in 2003-2004 when 71,000 people voluntarily involved in the Registry to help us understand long-term 9/11 health impacts. So, we have worked very hard over the years. We've had repeated health surveys to get health updates from our enrollees and we give our enrollees many, many ways to stay in touch with us, give us their updated contact information so that we can continue to communicate with them about their health. So, we—we've had really great participation in our surveys and, you know, we still try to include all 71,000 in the various research projects that we do and, you know, we've had quite a bit of success over the years

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CHAIRPERSON LEVINE: Do you also track whether these individuals have health insurance, and do you have a sense of how many lack health insurance?

in documenting the long-term health impacts of 9/11.

MARK FARFEL: No, I-I don't have that information on the top of my head, but what we do put emphasis on is referring our enrollees to the World

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Trade Center Health Program. So, we-we make many efforts to-to inform everybody in the Registry of the existence of the World Trade Center Health Program, and then more importantly for those individuals in the Registry to tell us that they have 9/11 related symptoms and conditions on our health surveys, we reach out to them personally, and we encourage them to apply for the program, and we offer them an application and assistance. And so, over time we've reached out to more than 20,000 people just since 2013, and we know that 7,000 of our enrollees so far have made an application to the World Trade Center Health Program. So it's an ongoing process. It'sit's a core part of what we do as a registry because as you know, we don't provide care. It's not our mission. The World Trade Center Health Program does that, but a very important aspect of our work is a devoted unit that tries to reach out and encourage people to apply.

CHAIRPERSON LEVINE: do you track qualifying medical conditions that these individuals might have—have contracted?

MARK FARFEL: No, we're basically, we learn about health through the Self Report, but the

estimate because as-as I said, you know, the research

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were lost in the aftermath. I think we need to

ascertain that number for the good of the-the

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individuals and families and—and for the benefit of history. So, we—we—we would like to continue to explore that question with you. Mental health services are available to those who are suffering from the emotional after effects. Is that correct and are you making referrals for such purposes?

MARK FARFEL: Yes. When I mentioned the Registry's treatment referral program, the—the way it works is if our enrollees are reporting 9/11 related mental or physical health conditions, then we do include them in our outreach most definitely

CHAIRPERSON LEVINE: Okay. There were children in school near Ground Zero as soon as several weeks after the attack, Stuyvesant High School being a block away. It's frightening to think about the possible impacts on young lungs of breathing that air. Can you state anything specific to children who were exposed?

MARK FARFEL: Yes. The World Trade Center Health Registry through their parents we had enrolled about 3,200 people who were children at the time of 9/11, and in the mix of all of the various studies that the registry has done, we have taken a look at respiratory and mental health impacts on children as

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well as behavioral impacts, and we have a number of publications in that are that we could share with you, but we do-we do in the broad-the broad range of research we do. We have a number of studies that are focused on children and earlier in the introduction it was mentioned the various respiratory studies that were done, and we've looked at studies of adolescents, and how their physical and mental health has progressed over time, and we have also collaborated with external researchers who have recruited our registry enrollees into more in-depth studies of children's emotional and mental health. For example, studies at Columbia University or NYU. So, we-we not only do research ourselves in-house, but we provide a platform for qualified expert external academic type researchers to do even more in-depth studies.

CHAIRPERSON LEVINE: So, DOHMH has a very sophisticated system for communicating to hospitals, doctors, physicians, medical providers about emerging trends that you see in public health. So you have a system in place to communicate to medical providers with trends you're seeing among health conditions amongst--

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MARK FARFEL: [interposing] Yes, I can-I can mention several avenues that we-we've tried to do that. One is that the-the Health Department collaborated with the Clinical Centers of Excellence over time on producing physician guidelines for-for doctors who are caring both survivors and responders. Those guidelines were-were updated, and there's also a set of quidelines focused on physicians taking care of children. So, that's one avenue. The other is the-we have the 9/11 Health Information website, and on the website the registry makes all of its research, findings available. We have information on the website on the 9/11 Health Program there. have summaries of the health impacts of 9/11. So, we have a lot of useful information, and that's updated periodically and then we communicate routinely with our enrollees with annual reports, and we include all of those resources as well as the research findings.

CHAIRPERSON LEVINE: Okay, thank you. I want to pass it off to—to my Co—Chair who has some additional questions. I just want to make the—the important final point that we've really had a two—tiered system now for people who because of their working for the city were exposed to the dangers of

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2 ground zero and we have thankfully and rightly give a

very robust set of benefits to the first responders,

4 but for the broader number of municipal workers who

5 were classifying survivors, where there's been too

6 many obstacles in place, and we know that there are

7 people who have had to lose their jobs because the

8 need to take sick time and we know that that has put

9 them in some cases into bankruptcy, and we know that

10 people who are no longer working are probably more

11 | likely to see their health deteriorate because of all

12 the benefits that remain in the workforce would

13 provide. So, we want to continue to push to make

14 | sure that every worker and who was doing their job

15  $\parallel$  for the city, every resident of the neighborhood,

16 | every student in every school nearby get the support

17 | they need for their medical care, for their financial

18 | benefits to make sure that the city never forgets the

19 sacrifice they made on the most difficult day in

20 American history. I'm going to pass it back to you,

21 Mr. Chair.

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22 CHAIRPERSON MILLER: Thank you Chair

23 | Levine. So, to follow up on what-what Chair Levine

24 | just mentioned in terms of those who have been

separated from-from the city's employment, what is

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2 the outreach on those who have retired or been forced

3 to retire or who has in some way separated service.

4 How-how have we outreached and what is the

5  $\parallel$  relationship, and have you collaborated with NOC and

6 other bargaining units to be able to identify those

7 individuals.

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So, thank you, Chair STEVEN BANKS: Miller. So, just speaking broadly I think what wewhat we have achieved here with these agreements filled a gap that existed, right? What we view-how we view this is sort of providing a continuum of care. We has the pension piece that was set in law since 2005. That—that covered people who were disabled because of 9/11 work, and then upon their death, their survivors could qualify for an accidental death benefit. The gap was for people who were still employed by the city and who wanted to stay working for the city, and so I think with these agreements we have started to fill that gap, fill the void and so we have people who currently are on payroll, which, you know, essentially make up the lion's share of-of the eligible population. certainly have people who have separated from the service since then, and we have people are still

employed by the city not on active payroll, but are on some kind of leave. So, so it is the people who have separated from city service who are not on leave and who have not retired that I think we want to have a robust dialogue with the unions about how to reach out those individuals to make sure that are they able to come back to work first of all, or are they awaiting for example a retirement benefit and to see if there's anything that could be done for—for that group of employees. But I think for the most part we have employees who are on active payroll or who are on some kind of leave, or who have since retired pursuant to the disability laws that are on the books.

CHAIRPERSON MILLER: So, that—it's—that I said need a little light on—on where we're trying to get with this because obviously you want to capture as much of the universe as possible, and we know that those individuals are certainly out there. Based on the registry now I know in—in my situation in my years in 2001 in the—with the MTA and—and—and members that I once represented including myself that were down there that—that signed onto the registry. That registry is—is no longer available, but we do know

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that for those who sing up now considering that these conditions manifest themselves over time that people are coming in. So, number one, I want to kind of fall back and be able to talk about the registry, how folks that—that come in and—and—and use the services of Department of Health and Mental Health, and kind of identify these—these illnesses as 9/11 related, what then-how-how are they are treated and how do we move forward with that if they were not previously on-on a part of the registry. Certainly we want to speak to that, but again and how do we-how are we identifying those individuals who are separated from service. I'm glad that there's outreach, with the unions in-in doing so, but for those who-what are we relying on for those who are separated from service and even those who are working who are not a part-a part of the registry, how are we identifying and serving those individuals?

STEVEN BANKS: Sure. So, it's important to note that for not only the pension laws, but also for this 9/11 sick leave benefit the gateway to the benefit is that you are pre-qualified under the Pension Law and the ability to file what's called a Notice of Participation, which allows your to be

prequalified by the pension systems. The-the deadline has been extended numerous times by the state legislature, and you can file a notice at any time before September 11 of 2022. So, the opportunity still exists for employees who have participated in Rescue, Recovery and Cleanup Operations to file with the retirement systems a Notice of Participation. So, that opportunity then still exists for them to access the 9/11 sick leave

benefit. So that has not been foreclosed.

CHAIRPERSON MILLER: Okay. That is great, and I just want to make sure that all the bargaining unit representing these employees are—are aware of this information. What happens to those employees that are non-represented, the managerial staff and others? Do they have an opportunity to take advantage of—of this new round of bargaining as well?

STEVEN BANKS: Absolutely. So, as we do in other cases, we will—we will be—we will be doing the mayoral personnel order to cover managers and for the non-represented employees so that they're covered.

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appreciate it. It's not question. I just wanted to

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say first off, than you to the folks here for your efforts to-two months ago I guess with DC37 to help bring more folks into it, but I also-I really thank the chairs for having this hearing because we always say never forget but often times we-we actually do forget to help those who helped us in our most critical moment in this city. I think everybody has a story about where they were on 9/11 and when they found out the news. In some cases people-it was an election day, if you remember and folks out there actually doing their democratic duty as has happened. So, I just want to say thank you to the chairs for keeping this conversation moving forward so that noanybody who worked at or around the city on at ground zero is not left out of important critical service they have. So, I have no questions, but I just wanted to say thank you for the collective effort here to make sure those are continuously taken care of and remembered. Thank you.

CHAIRPERSON MILLER: Thank you, Council
Member Powers. Again, I just want to echo that as
well. Thank you for the efforts and having
represented those workers on each side and in part of
the early negotiations even with the original package

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representing uniformed workers. It is so important that we not forget, and that we understand unintended consequences and that-that this is something that has evolved, and that we want to be able to ensure that we capture that-not just the universal folks that had-were involved in, but the next gen that potentially are involved that we keep this dialogue open, and—and certainly the Administration is to be applauded for providing this benefit that had for so long been missing, and was mentioned, created two tiers of benefits for those who have served. And so bring in equities is always important, and really keeping he light on those who-who so valiantly served in no matter what capacity is—is very important and I-I thank you for-for your testimony. And this is open-ended just as it is with those bargaining units involved. It is certainly with the Council. I ask that whatever happens as we move forward there to continue to keep the Council informed and-and because we are certainly a partner as we move forward.

STEVEN BANKS: Thanks. Thank you.

thank you so much for your testimony.

[pause]

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CHAIRPERSON MILLER: Now the next panel is Karen Mazza, Alicia Slack from NYCERS and Nicole from the Police Printing Fund. [background comments/pause] For those who have recently joined us, if you are looking to testify, please fill out a witness slip. [background comments/pause] We've been joined by Council Member Ampry-Samuel. [background comments] Could you please state your name for the record and begin your testimony.

KAREN MAZZA: Good morning I'm Karen Thank you for this opportunity to appear Mazza. before you here today. I'm the Deputy Executive Director New York City's Employees Retirement System, and with me here today is Alicia Slack our General Counsel. Our Executive Director Melanie Winters sends her regards and he regrets that she could not be here today as she is traveling back from a previously planned visit her mother. For background, as you may know NYCERS is one of the city's five defined benefit plans. It is the largest municipal pension system in the country and provides benefits to a diverse population of city employees from Sanitation workers and correction officers to City Council Members and the Mayor. NYCERS provides

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42 disability benefit to its members under provisions of law, but in light of today's agenda, I will focus on the laws related to the World Trade Center. World Trade Center Disability provides in part that certain disabling injuries, illnesses or disease incurred by certain state and city employees including NYCERS members who participated in World Trade Center Rescue, Recovery and Cleanup Operations are presumed to have been incurred as a result of an accident sustained in the performance and discharge of duty. For any member to qualify for disability retirement under the World Trade Center Law, the member must file a notice of participation and be verified as having participated in WTC Rescue, Recovery and Cleanup Operations that meet certain criteria. The members notice of participation is filed with NYCERS and then provided to the agency where the member worked during the qualifying period. The agency is asked to verify—to either verify the member's participation or statewide the agency could not verify that the member participated. agency cannot participation, the member is given an opportunity to dispute the agency's findings by

submitting additional evidence to support the claim.

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON 1 CIVIL SERVICE AND LABOR 43 2 If the agency still cannot verify after reviewing the additional evidence, the member's case is reviewed by 3 NYCERS' Board of Trustees World Trade Center Review 4 5 Committee. A verified notification is a place holder 6 in the event that the member becomes subsequently 7 ill. The member becomes ill and applies for World Trade Center Disability/Retirement, they submit 8 medical evidence in support of their claim and the 9 case is brought before NYCERS Medical Board. 10 Medical Board is an independent board of three 11 12 physicians appointed pursuant to New York City Administrative Code. The Medical Board must 13 determine whether the member is suffering from World 14 15 Trade Center qualifying condition or impairment as 16 defined by law. To make this determination the Medical Board will use all medical evidence and 17 18 conduct some interview and physical examination of the member. By law, the Medical Board's 19 20 determination regarding disability is binding on the Board of Trustees. If the Medical Board determines 2.1 2.2 that the member is disabled by a World Trade Center 23 qualifying condition, then the Medical Board is 24 required to presume the condition is a result in the

member's participation in Rescue, Recovery and

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 1 44 2 Cleanup. However, the presumption can be rebutted if the Medical Board finds that documentation, interview 3 4 and examination support a finding that the presumption is rebutted. In that case, the Medical 5 6 Board makes a recommendation to the Board of Trustees 7 that the World Trade Center presumption is rebutted. The member may appeal the Medical Board's 8 recommendation to the Board of Trustees. After such 9 appeal, the medical—the Board of Trustees makes a 10 final determination regarding whether the member 11 12 qualifies for disability under World Trade Center Law. That's the World Trade Center Law-I'm sorry. 13 14 That's the World Trade Center Disability process at a 15 very high level. There are many more detailed steps 16 in the process, and every member's case and 17 circumstances are different. I encourage you to 18 visit the World Trade Center section of our website. It contains information helpful to members such as 19 information on the law, forms, frequently asked 20 question and links to other organizations such as the 21 2.2 World Trade Center Health Program, the 9/11 Victim's 23 Compensation Fund, Workers Compensation and more. 24 There are also two reports from our Executive 25 Director that highlight the improvements that NYCERS

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and Board of Trustees have made in the World Trade

Center and disability process. The entire NYCERS

team is committed to working with our stakeholder,

the Medical Board and the Board of Trustees to

continue to make changes that would help our members

who served New York City during a terrible tragedy to

receive all benefits they are entitle to

expeditiously and compassionately. Thank you.

CHAIRPERSON MILLER: Okay. [pause] We are glad to see that this information is readily available on the NYCERS website, and for those members who access in advance of applying for disability retirement and what is necessary and what are qualifying conditions certainly, but could you-I know that in reviewing testimony from-from past hearings that NYCERS was involved with-with the pension system that there's a distinct discrepancy in those who would qualify for disability pensions particularly those EMTs and others that did not have a specific agency pension that NYCERS was a little more stringent. Are they—are your qualifying qualifications and requirements for disability pensions different from Police of Fire pensions?

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KAREN MAZZA: The law that covers both NYCERS and police pension funds are—are the same. They're in different parts of the law, but as far as qualifying conditions and participation in Rescue, Recovery and Cleanup the definitions are the same.

CHAIRPERSON MILLER: So, how do you explain the discrepancy in the numbers of those who have been approved by NYCERS as opposed to those?

It's nearly a 25% difference.

KAREN MAZZA: The only thing I could say is that Medical Board is an independent board. They make the determination on disability and their determination on disability is binding by law and the Board of Trustee.

CHAIRPERSON MILLER: And these independent medical examiners they are experts in World Trade Center conditions?

MAZZA: I would say that we have made an effort since this—these issues have come to our attention to get them more familiar with the conditions related to World Trade Center. We've had meetings with the World Trade Center Health Fund doctors, and we brought different—different—different

types of doctors onto the board to provide that kind of coverage.

who have come before the—those who applied and been denied they have been given an opportunity obviously under and appeal but they have been—is the appeal with the same doctors or the doctors that you have brought in with more extensive World Trade related experience? Are they the ones now making the determination.

it depends on their status at the time that they're denied. For example, if someone is a pensioner, has already retired, they would apply to be reclassified, and they probably would see a different board than they saw initially. The same goes for a member who is still in city service who reapplies. They probably would be seen a different board.

CHAIRPERSON MILLER: And so, did you just add the—a number of additional independent medical examiners? Did you increase that number or did you replace them, the ones that were previously there that may or not had the specific qualifications that

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2 are necessary to make a-a-an adequate judgment about 3 retirement?

opening on the Boards, we filled them. However, the number of doctors that we're allowed to appoint from the three—the three appointing facilities is set in the Administrative Code, and we're hoping that we will get some legislation this year to allow us to expand the number of doctors that we can have on each—in each—in each Department of Health. DCAS and NYCERS as appointees to allow us to have more medical boards and to have more doctors with different backgrounds.

CHAIRPERSON MILLER: So, again, how does—
so how would you—how would you describe the
discrepancies between those approvals or lack thereof
between the principal ones?

KAREN MAZZA: I really can't describe why there's discrepancies. The Medical Boards that Police Department and the Fire Department are different boards than at NYCERS, and as I said it's—it's an independent board that makes the determination.

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that's denying them or it may be that they are not-

78, which would be in the Supreme Court. So, I just

1	COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 51
2	want to make sure we get you the right numbers. So,
3	if you could clarify what you've
4	CHAIRPERSON LEVINE: [interposing] Well,
5	it would be great to get each of those categories.
6	Do you have those numbers handy?
7	KAREN MAZZA: Not hand right now
8	ALICIA SLACK: [interposing] Not here.
9	KAREN MAZZA:but we can get those.
10	CHAIRPERSON LEVINE: Okay, well we-we
11	would certainly like to get them, and—and for those
12	who have been denied because this is so sensitive,
13	is—is there any referral work that you—that you do to
14	help the pensioner or the claimant restore to full
15	health and overcome whatever challenges they are
16	currently living with?
17	KAREN MAZZA: I'm not-I don't understand
18	what you're asking me.
19	CHAIRPERSON LEVINE: If—if someone is
20	denied, is there anything the city can do for them to
21	support them short of approval of their claim?
22	KAREN MAZZA: Not from the Pension system
23	side.
24	CHAIRPERSON LEVINE: Okay. [pause]

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CHAIRPERSON MILLER: Council Member

3 Adams.

COUNCIL MEMBER ADAMS: Thank you, Mr.

Chair. Good morning and thank you so much for your testimony here today. Just taking a look at the resources that are available, you noted in your testimony that there's helpful information on your website including FAQs, forms and links to other organization, which is great. Your website also has an extensive Executive Director update that outlines a numerous set of changes at NYCERS to facilitate more claims processed, and enhance the customer service experience for those individuals that are filing the claims. Can you share some of the operation changes that have been made and how you plan to build on those successes?

that we did was we created two additional World Trade
Center Review Committees, the Board of Trustees
Review Committees, which is able to review 21 cases
on appeal on each day. Those are cases where the
agencies cannot verify that the member participating
in Rescue, Recovery and Cleanup. They then come
before a committee of three of the Board of Trustees

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members. By adding two additional boards-we only had one board. By adding traditional boards, we're able to see more cases every month. We've also allow now for simultaneous filing where a member can apply for both, can apply for accident disability under World Trade Center, ordinary disability and service, and whichever one is completed first, they are retired under so they can continue to collect some form, of pension, and continue their health insurance. then once the accidental disability claims is completed, they can either switch over to accidental or if they need to appeal, they can do that. Members can also-this is one of our biggest accomplishments I Now, members can actually go online onto our website and review their Notice of Participation and the process that's going on with that, whether they've been verified or not verified and where they are in the process. We also added two additional staff to the Medical Division staffing, and these people provide intensive World Trade Center work. So, members who are filing for disability or who have already filed for disability under World Trade Center, we have two dedicated staffers to deal with them, to provide follow, and to make sure they get

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scheduled timely. And also, we—under the reclassification process, which is where you've been retired already. You come back because you developed a World Trade Center illness, initially if you were retired under World Trade Center for any illness, we did not allow you to come back and—and reclassify. However, we found that that was limiting pensioners' ability to file for other benefits. So, for example if you were disabled for World Trade Center under psychological disability you can now reclassify if you become ill with another—with another World Trade

Center qualifying condition.

Thank you. I just had one follow-up along those lines. Co-Chair Levine asked about numbers a little while ago and according to your July 17, 2018

Executive Director Update, the number of notices of participation had dramatically increased—I'm sorry—decreased from 977 at the end of 2017 to 394. Do you know what that number is as of today?

ALICIA SLACK: I have to report that that number actually went up, and the reason it went up was because as Mr. Soliman testified, the law allowing people to file notices of participation was

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extended. So we did see a jump in people filing notices of participation. So—so at the end of November, the number was up to 582, but many of those are as a result of the extension of filing period.

COUNCIL MEMBER ADAMS: Okay, terrific. Thank you very much.

CHAIRPERSON MILLER: Thank you so much

Council Member Adams. Can I get back to the

explanation of required participation? Now is that

the owner's responsibility on the member applying and
why would not their agency be able to provide that
information?

ALICIA SLACK: As we get further and further away from 2001, we're finding that for example during Super Storm Sandy, several agencies had things filed—stored in basements that got flooded. So, records of—or participation were—were lost in that. As administrations change and—and staffing changes, people don't' know people who had originally worked there, which is why we created the World Trade Center Committees, which allows a member to come in with any information they have and also to provide testimony to say when they were there, what they were doing. Many times people were bringing

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things like badges from down at the World Trade

Center site, affidavits from other employees who were

there with them, and they bring it to the—the

committee, which is like I said three members of the

Board of Trustees to review.

CHAIRPERSON MILLER: So, how many—how many folks who were denied appealed based on this new information, and new opportunity, and how many folks were denied based on participation or lack of proof of participation?

With we have a total of 11,103 notices of participation. We've sent them all to the agencies to verify. We've received back 10,551 verifications, 552 are waiting agency reports. Of the-of those-of the total, 3,513 were not qualified, 7,038 were qualified. The 3,513 are then offered the opportunity to send in additional evidence to support their claim that they participated. Again, if the agency cannot verify on the second round, it goes to the World Trade Center Review Committee.

ALICIA SLACK: And to further help the members what happens is that if ultimately the Board of Trustees were to find that there wasn't enough

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2 evidence on the subcommittee's review, it's not a

3 final determination. So if at any time a member can

4 get more affidavits, can get more documents and wants

5 | to resubmit, those documents will go before the

6 agency first because it is the agency's

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7 responsibility to verify, but if the agency still

8 | can't verify, we'll then again go before the

9 subcommittee for another review. It's not until the

10 member has a disability application on file, and

11 | they're making a determination regarding disability

12 | that there would be a final determination regarding

13 participation, and at that time the member would

14 | still be given one more chance to submit any further

15 documentation in support of its claim.

CHAIRPERSON MILLER: I'm—I'm really glad that this—this latest opportunity is—is being provided, but I also am dismayed and disappointed that agencies aren't able to provide the qualifying information, and that where they're not able to provide qualifying information that this is acceptable. Having been a life long public servant having served at recovery efforts, I would—if—if need

be and the New York City Transit Authority was not

able to provide times sheets and-and-and pay stubs,

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and—and assignments, would be just ridiculous no matter what the time frame is that-that you don't know where and when your employees are at all times that you are responsible for the employees. are things that occur that, you know, say someone was transporting as I, and at some point not 9/11 related, there was-there was a lawsuit. They need to find out who was driving vehicle, who was where at what time. Otherwise the city is liable. effort would be made to find out who was that that time, who was—whether it was in the area pulling all assignments and-and time cards and-there's just a plethora of ways for them to know where their employees were at any given time, and I-I find it really unacceptable that folks that have-have been denied whether this opportunity has been is being provided for them not now is-is really a slap in the with those who are serving and potentially have been denied a benefit that not-it's just that they are entitled to that they so sorely need. So, whatever provisions that are in place I hope that it is not just the Board that are making these decisions. They're certainly-they're-and agencies that they are talking with-with workers and-and those bargaining

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units that represent those workers. understanding to watch this of each individual agency so that they can identify ways to tell whether or not a person is there, that is pretty ridiculous that someone denied such a crucial, critical life saving benefit because an agency, which they serve, which ha provided services to all of our citizens of the city not just during that time of 9/11 can't provide their whereabouts. That's pretty unacceptable, and I-I would hope that we will do all that we can moving forward. Furthermore, I would love to hear from Police Pension some of the things that they have in place and ways that they were able to address some of the nuances that-that caused denials on the other side, being able to identify or prove participation and-and also whether or not your doctors were versed in World Trade Center condition as opposed to just apparently general practitioners.

KAREN MAZZA: So, the New York City

Police Pension Fund Medical Board, which is a subset

of the Board of Trustees, similar to NYCERS is a

panel of three independent doctors, one of whom is

appointed by the Department of Health, from the

Department of Citywide Administrative Services, and

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the third directly from the Police Pension Fund Board of Trustees. We have several panels that meet regularly and one throughout city that our members both active and retired appear in front of in conjunction with applications for disability retirement. We also have the verification process where our members have to file a Notice of Participation stating that they spent 40 hours participation in the Rescue, Recovery and Cleanup Operations at the World Trade Center site, or they were present for the first 48 hours from when the first plane hit the first tower. The Police Pension Fund works very closely with the New Your City Police Department in order to verify our members. We have dedicated personnel at the Police Pension Fund who do review Police Department records such as command entry logs, rollcalls, overtime slips, et cetera to ensure that we can provide that our members were down there if, in fact, they were. And then once that documentation is called, it's given to the Board of Trustees who ultimately makes the determinations to whether or not the members' participation can be verified.

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CHAIRPERSON MILLER: Thank you. So,

NYCERS are we using best practices and—and—and

collaborating with the Police Pension as to how we

can identify first of all participation and then

secondly, do we have anyone from your panel of

independent doctors? Where do they come from? The

second question.

ALICIA SLACK: As far as coordinating as police does, police—the Police Pension Fund has one employer that they call from, which is the Police Department. NYCERS has every agency in the city including CUNY and Transit Authority, Health and Hospitals. So, we would not be able to have the same access to records that police have, and I'm not clear on what your second questions was as far a—

CHAIRPERSON MILLER: The—the first question was best practice in—in terms of being able to identify participation to identify the litany of ways to identify whether or not people were actually at Ground Zero. I think it would behoove NYCERS to adopt—to adopt some of those policies and identifying if you haven't already done so. So, my question was about best practice, but you also—you know, you have the MLC and kind of a collaboration of agencies and a

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2 collaboration of bargaining units, and I'm-I'm not understanding why workers aren't being represented on 3 the board.

KAREN MAZZA: I wouldn't say that agencies are not responding to us, but as I said, some of them have records that were destroyed because they were stored in basements and they were destroyed during Super Storm Sandy and we work very closely. We have three union representatives on our board. have DC37, have Teamsters Local 237 and Transport Workers Union Local 100. So, we have labor representation, which is very active in assisting members to get more information. So, we do-we do have a lot of reach-out in that-in that respect

ALICIA SLACK: Also, since the hearings at the State Senate have occurred, NYCERS and the Mayor's Office have reached out to the various agencies, and-and given them the specific name of people that need to be verified to ask for assistance, and we have received a bunch back, denotes Melanie's report back in July that the number of notices were decreasing. So, we have been in contact with a bunch of the agencies to try and-and

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COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 1 63 2 help them as much as we can. But the burden on the agency based on the law. 3 DR. MAYBANK: Okay before-before you go, 4 just for the record could you identify those agencies 5 whose paperwork were lost in Super Storm Sandy? 6 7 KAREN MAZZA: That I don't know off the top of my head, but I can certainly get that 8 information back to you. 9 10 CHAIRPERSON MILLER: Do you how many of the agencies—how many agencies there were? 11 12 KAREN MAZZA: I don't know. CHAIRPERSON MILLER: Okay, could you-so, 13 Counsel will be sending a letter with additional 14 15 questions. I ask that you respond appropriately and 16 timey, and I--KAREN MAZZA: [interposing] Can I-Can I-17 18 CHAIRPERSON MILLER: [interposing] Yep. 19 20 KAREN MAZZA: --point out one other thing, which is that sometimes verification is not 21 2.2 about the agencies not receiving information, but 23 it's because the law require that the member participate for 40 hours of Rescue, Recovery and 24

Cleanup, and it has to be Rescue, Recovery and

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Cleanup as defined by a the law. So, there are times when it's not the agency's fault. It's that the member doesn't qualify under the law.

CHAIRPERSON MILLER: But that wouldn't be participation, right, in terms of whether or not the person was there, whether or not they qualified base on—so you're saying based on a particular part—the particular type of work that was performed?

KAREN MAZZA: [off mic] Yes.

ALICIA SLACK: [on mic] Yes, based on the type of work a member has to in order for a Notice of Participation to be verified by an agency. A member must either have participated on September 11<sup>th</sup> of 2001, September 12<sup>th</sup> of 2001, and any time for any period time for 40 hours between September 11, 2001 and September 12 of 2002, and they must have participated in Rescue, Recovery and Cleanup Operations, which is defined by in general terms as having participated and has been clarified by the Law Department.

CHAIRPERSON MILLER: But what is that?

So-so again, if—if the folks that I represented at the MTA were responsible for transporting from Ground Zero to Ground Zero and other locations throughout

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specifications?

the city, and they met the 40-hour requirement, would they then meet the requirements of—of the work

ALICIA SLACK: In a broad sense and every
case very specific it's hard to talk in the broad
sense, but in a broad sense if the person

participated for 40 hours in doing the job that you
are describing, most likely the would have qualified,
whether the agency has qualified them or the special
trial—I mean Special Review Committee of NYCERS has

qualified them depends on whether the agency has records or whether person has come and testified before NYCERS and has established that work.

much. Thank you for your testimony. It's been—it's been helpful. As I said, we-we-we do have further questions we'll send and—and some—some of the things that you weren't able to respond to appropriately today, we're hoping that we'll receive that as well, but the conversation as we move forward obviously we've learned some things today that—that it—that we hope to work with some of our colleagues on the state side to be able to amend and advance opportunities for—for people to get their benefit

will lead me into an ask of this committee, and it's

major ask. Came into the union representing a couple

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hundred thousand staff member-members and a million kids, and I started doing my work on school construction, asbestos, lead in the water, things like that, communicable diseases, and I had a role in developing citywide protocols for doing construction and renovation in school buildings while schools were occupied. This expertise took on a whole new meaning in the after—aftermath of 9/11. [coughs] I have to find my page, which it disappeared on me. So, 9/11happens, the Chancellor was Chancellor Levy, and Randy Weingarten and Chancellor Levy stood on the promenade and watched the buildings fall. I was on my through the Holland Tunnel, through the Brooklyn Battery Tunnel--it's called something else thoughinto my office to take a look at some buildings down in Chinatown, and I was called by a member of the Division of School Facilities, Bernie Orland, a good friend of mine who currently still works at the Board of Education. I also was called by Alex Lampert another good friend of mine who works at School Construction Authority. Both of them told me don't go in. It was the time when you had a telephone that was as big a shoe box in your. I don't know if you remember but that was that time. The towers fell,

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and our first concern was how do these kids get out, and my members, my union nurture over a million kids in school buildings and some way somehow they carried kids in wheelchairs down the step. They carried them up the Westside Highway, they took them home with them, they walked across the Brooklyn Bridge. They did whatever was necessary to make the children safe, and that's exactly what happened. Not one child was hurt after 9/11. Some of them stayed in the school until the coast was clear. So, what was going to happen? We came together as a team, School Construction Authority, the UFT and DOE and we figure out the number of schools, which ones. We had to decide. The DOE decided. It had to be relocated to other sites, and as a team we worked together to relocate all these kids, and I remember the union having vans packed. We were up on-on 21st Street packed with textbooks, and construction paper and all kinds of things because they were going to schools that they were collocated with or other buildings, and I cannot tell you what a great effort and what a great team we were in the DOE, UFT, and SCA. worked together terrifically. Several days of after 9/11 a team of us three from the UFT more from the

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DOE, more from School Construction Authority began our hunt in the 10 or 11 schools that closed around Those schools were evacuated. We had the Towers. our mental health experts in the schools making sure that the kids who saw this horrific event and the teachers who saw this had the support they needed, and we started top to bottom, roof to basement looking at what the buildings looked like, assessing the dust, assessing the vents, conducting air monitoring, reviewing the results, and figuring out how are we ever going to open this school in the zone of the World Trade Center. As time went on, we all know that EPA told us the air was safe, and there was a reopening of the schools. It didn't happen overnight. The first school to reopen was Stuyvesant High and then there was a rolling admissions of school-a rolling re-entry of schools into their buildings I think through March. So, after that happened in March, we went back to business. dealing with Tuberculosis. I was dealing with [coughs] communicable disease. I was dealing with lead and water, asbestos. That was my job. Oddly enough in August of 2016, the AFL-CIO gave me a big award. It was the Zadroga Award. And I was very

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 70 1 2 proud to receive it, and I thought it honored my work during 9/11. I'm very proud. It hangs on my wall 3 today, but here's the kicker: That's all I thought, 4 5 I put it up on my wall, and it wasn't until my two close friends Michael Barasch and Richard Alles asked 6 7 to meet with me. So, Bridget Ryan another good friend and colleague of mine set up a meeting, and we 8 sat down and talked, and they said, Ellie, what are 9 you doing about your members? I said my members? 10 What do you mean my members? What-what should I be 11 12 doing about my members? Well, they're survivors as you both pointed out, and I'll get to the big ask in 13 a minute. I had done nothing. I had done nothing 14 15 from 2001, the passage of the Zadroga, the 16 reauthorization 'til that day I sat down with these two gentlemen. It hadn't occurred to me that not only 17 18 were my member survivors that came back to work and worked there through May, but I myself was a 19 20 responder. We were-we were searching buildings for dead body parts and through the-we were looking in 21 2.2 ventilation systems, looking at rugs, doing air 23 testing. What a meeting that was. What a meeting 24 that was. So, just to let you know, three people on

my UFT Team two of us have to answer, myself being

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON 71 1 CIVIL SERVICE AND LABOR 2 one and my other colleagues. One-one has not gotten to caner. I can't speak for DOE or the School 3 4 Construction Authority about their teams, but two out 5 of three of us have gotten cancer since our exposure-6 heavy exposure to the 9/11 air. So, as a result of 7 that, we did some research. No one ever did outreach 8 to us. No one. I got this award and I met with 9 these two gentlemen who said: What about you? What 10 about your members? I am certified as a first responder, and we began the process of identifying 11 12 every member that worked in the-in the buildings during 2001 and 2002. We went through per-payroll 13 14 records, as you said, and found every single member, 15 and there was approximately a thousand of them. 16 we did after that was we sent out letters. We've 17 held three or four forums and the numbers of cancer 18 related illnesses, Asthma, respiratory diseases is astounding, and to this day when we continue to reach 19 20 out to the-we've done a reach-out five times, and we continue to have forums. We've had one at 21 2.2 Stuyvesant. We had one in Chinatown. Then we had 23 one in my office at 52 Broadway about two weeks ago. Twenty-five people showed up from those that received 24

letters. One in particular I'll tell you about, an

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Asian woman taught in Chinatown, lives in Chinatown. She just came because she got the message and said let me see what this is about. I did a presentation as did the attorneys. They're not pitching for clients. They have given me information, and I'm just giving my members information because no one has ever done outreach to my members, but my members have a good union that protects them. A little late, but we're doing it. This Asian woman turned to me and said, "I have cancer. I taught in Chinatown. My husband died of cancer. He lived in Chinatown. cousin has cancer." That's just an example of a member coming to a meeting not expecting anything, and realizing the she was entitled to healthcare, to benefits, to compensation. We will continue to do our work. With all due respect the city says and the Health Department says they've reach out. They have not reached out. It's up to you. I just got a call from a custodian who was diagnosed with-the attorneys for a custodian who was diagnosed with leukemia, and he doesn't know how to get his records. personally wrote to the Board of Education and got documentation for him that he was actually working in it, Murray Bergtraum during that period in the zone.

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 73 1 2 So, we continued our talk and I realized a light bulb went off: What about the kids? What about the kids? 3 4 We're talking about a 5-year-old in kindergarten who 5 went to school everyday as soon as schools opened up. 6 I'm not even talking about the ten that were closed. 7 I'm talking about the ones in Chinatown Murray Bergtraum, the elementary schools. They walk through 8 that zone every day. Today, that 5-year-old is what? 9 10 A high school—a senior from high school at Stuyvesant is what, 32, 33? Is that right? 11 12 Something like that. What about all those kids? Department of Education and New York City Department 13 14 of Health has done nothing, zero, nothing to reach 15 out to those kids, and that's what I'm asking you for 16 today because how many of those kids from 22 to 32 know that a cancer that they've develop--and there 17 18 are many of them-is related to the exposure that they had while walking to school, getting off the subway 19 walking to school, leaving their apartment walking to 20 school. They have done nothing. The story about 21 2.2 having records flooding out-flooded out during 23 Hurricane Sandy has come to me, too. They said 24 Stuyvesant oh the basement got so wet. At 234 the

basement was wet, and that's where the records are,

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but I know that the Health Department has records of every child. You can't get into school unless the Health Department knows-knows you've been immunized, and that has to be in a data base, and they have done nothing. So, I come to the Council. I will protect my members. I will meet with TRS. I will meet with first to make sure they have a good understanding of what it means to see my members who have deceased-my members that needed disability and review all of their records because I can identify every person that has been exposed. I will meet with these DC37 with 32BJ, with the Custodial Union. I'll do the work of the union that the city hasn't done for us. What I'm asking you to do is help me get the city to get those-use whatever methods they have. This isn't a lot of money. Post on Facebook. Take out some ads, do some digital stuff, but any child that was in school has the right to know, the right to know that they had an exposure, a serious exposure and they've never been told. I ask for your help. We will devote staff from the union to help in any way we We're committed to doing that. President Mulgrew has given me the assurances that everwhatever we need to do, if it's going down into the

basement and getting those records, we will do it. We will find those children. Thank you very much.

CHAIRPERSON MILLER: Thank you so much

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for that testimony and-and I just want you to know that the purpose of this hearing while we-we-we, you know, we're-we're hearing a resolution. We want to talk about workers, but the purpose is to ensure that we're-we're looking at all the unintended consequences that we're capturing the entire universe and talking about those who haven't been spoken about that they have a voice here today, which certainly you have just given them, and-and the Council is-is going to work with you, and the UFT and others to make sure that—that we capture that entire universe and that everyone has been impacted, that-that we know who they are, and they're being provided the services that that they are entitled to, but with that-I want to pass it over to the-to the Chair of

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the Health Committee.

CHAIRPERSON LEVINE: Thank you, thank
you, Mr. Chair. Ellie, I have to say that's one of
the most powerful testimonies I've ever seen in my
five years in the Council and your bravery in

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standing up and telling your personal story and advocating not for yourself--

ELLIE ENGLER: No. I'm out for my members.

CHAIRPERSON LEVINE: Yes and so to-to critics of-of organized labor who think that it's only about defending their members, I mean you are a perfect example of the broader vision especially of teachers who obviously are in this work because they care about the kids first and foremost, and you are perfectly reflecting that. So, I thank you from the bottom of my heart for speaking out for the kids. Ιt seems to me that the city should know down to the last name exactly who were the children who were in schools in proximity to ground zero during this critical period. So, we must have a list. I don't know how many kids are on the list, hundreds, maybe a few thousand.

ELLIE ENGLER: A few? We have thousands.

CHAIRPERSON LEVINE: So, we must have a list of those names, and some of them are going to still be-well, maybe-at this point none would still be in the schools, but we would have last known address. We might have a last known phone number.

## COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 77 1 2 That would be a starting point. So, have we not 3 mailed letters to the last know address for example of these several thousand now former students? 4 ELLIE ENGLER: The city has not. 5 Department of Education claims that there's no such 6 7 list. CHAIRPERSON LEVINE: But—and the Health 8 Department has no such list? 9 10 ELLIE ENGLER: No, they said no. I know they do, but they say no. 11 12 CHAIRPERSON LEVINE: [interposing] It-it 13 wouldn't require much work. Again, this is knowable 14 information. These are children who were enrolled in 15 schools within a certain geographic zone during that 16 critical—basically it's—it's one school year 17 basically. 18 ELLIE ENGLER: Yes. CHAIRPERSON LEVINE: Right. So, it's the 19 20 school year of-of '01 to '02 who were enrolled in a certain geographic area. You've probably thought 21 2.2 about maybe it's one-mile radius. I'm not sure. 23 ELLIE ENGLER: We know—the schools will

below-below Canal Street, and then I think some below

two members: Carlos Lelo (sp?) and Ricardo Queen to

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 80 the terrorist attack. In the course of the last 17 years a hundred additional members have made a supreme sacrifice in service to our great city. active duty workforce on 9/11 was 2,500; 431 are currently still on active duty, and are being treated for 90 separate, separate health conditions related to work at the World Trade Center. That equates to 17% of the workforce. Of those 431, 88 or 22% are currently battling cancer. It bears mentioning that the average age of these members is 49 years. They are now suffering from diseases that are normally seen in in subsequent (sic) generations-generians. I'm sorry. Asbestos related cancer notably lung cancer can take 20 years for symptoms to show up. These cancers are beginning to appear at an alarming rate. Bearing witness to that fact, in this month alone I have attended the funerals of three of my That leaves mothers and fathers burying members.

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members. That leaves mothers and fathers burying their children and spouses burying their loved one. The well of backbites and stately departmental—departmental funerals is but little consolation. We also have 700 retirees on the treatment. These retirees while a bit older are developing acute health issues at an alarming rate. So, of the 2,500

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 1 81 2 EMS members employed on that fateful day, 1,009 are being treated for health related issues caused by the 3 terror attack. We have rebuilt the World Trade 4 5 Center. We have pledged that we will never forget. Yet, problems still remain in adjudication and 6 7 administration of 9/11 related claims. The Governor has legislated World Trade Center related diseases by 8 presumptively related to the rescue and recovery 9 efforts. But because of the link between a 10 particular medical condition and the World Trade 11 12 Center exposure is not always definitive, the city has challenged a high portion of 9/11 related Workers 13 Compensation Claims. The denial rate of NYCERS 9/11 14 15 disability pension remains unchanged at around 50%. 16 While has been learned, the entire spectrum and trajectory of World Trade Center related disorders 17 18 and the mechanizeable (sic) onset persistence remain to be fully described, an d while those mechanisms 19 20 are continually evolving, we need to maintain extent and grant options to our members. While listening to 21 2.2 others testify here today, I took some notes. 23 was questions whether the unions had to negotiate for this benefit. The fact is we did have to negotiate. 24

There is give-back. When our members have to-when

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON 1 CIVIL SERVICE AND LABOR 82 2 our members reach retirement whatever sick leave bank they have, they have to return it to the city. 3 4 years, our members endured unpaid sick leave day, 5 hundreds of hours. Some of them have lost their 6 homes, their spouses. Yet, when the Governor 7 legislated this benefit for the entire state, the 8 city opposed it, and we were left out. [pause] wanted our vacation day on top of that, but we fought 9 10 The only thing that we got was our vacation. [pause] Some of the Mighty Robin (sic) has been a 11 12 staunch advocate on helping us. It's been a year since numerous NYCERS hearings have been held. As of 13 14 today, there are still no oncologists to examine our 15 members. How does somebody with no experience in 16 cancer examine our members? [pause] Some of them haven't even-have even been diagnosed with PTSD. 17 18 Yet, PTSD is not recognized as a medical condition under the World Trade Center Compensation Fund. 19 20 Therefore, leaving our members stranded, and appealafter an appeal, still stranded. It leaves us no 21 2.2 choice, but now to go up to Albany again and 23 legislate to include PTSD. Mental Health is a 24 serious issue. Anybody who experienced that day has some sort of mental issue. Thank you for your time.

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CHAIRPERSON LEVINE: Thank you, Mr.

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President. Thank you . Please.

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MARY FETCHET: [off mic] Good morning.

I want to

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thank the Committee for inviting us here today.

[pause] Is this on? Okay. Good morning.

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name is Mary Fetchet and I'm Founding Director Voices

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of September 11<sup>th</sup>, an organization that I co-founded

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in 2001 following the death of my 24-year-old son

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Brad who was working on the 89<sup>th</sup> floor of the South

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Tower. I'm here today with Stephanie Landau who has

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worked with Voices for 11 years as Program Director-

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12 yeas as Program Director. At the time of the

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attacks, I was working as a Clinical Social Worker

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and established Voices to provide support services and access to resources and mental healthcare for all

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those impacted by 9/11. Over the past 17 years our

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staff has provided over 160,000 hours of support

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services and wide range of programs for victims'

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families, survivors, responders and their families,

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and it's worth noting that the support services that

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23 raised privately. For six years Voices worked along

we provided are funded by money that we actually

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with other outreach partners to assist survivors and

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responders in accessing treatment through the World

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Trade Center Health Program. Today, we continue to be focused on providing continuity of care by working collaboratively to provide programs that address the long-term mental health needs of the 9/11 community. Our testimony is focused on the long-term needs of 9/11 victims' family members, survivors, responders and their families. The families of the 2,977 victims lived around the country and around the world. Ninety countries lost citizens that day. Since 2001, the needs of victims' families have evolved. In 2015, Voices conducted a scientific research study that was actually funded by the Canadian Government to evaluate the long-term needs of 600 victims' families. The findings demonstrated that 15 years later many families have a range of needs. A third of the family members who participated are resilient and have been able to integrate and accept the loss of their loved one, and move forward in a productive way. A third have mental health needs that fluctuate from time to time possibly based on subsequent losses, news of other tragedies, illness or changes in their support system. A third of those who participated are still experiencing serious mental health conditions such as

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85 depression, anxiety and PTSD. Many families that we contacted about the study were actually unwilling to participate for a variety of reasons. Most indicated that reflecting back on their personal experience would be too painful, would reopen old wounds or complicate their mental health conditions. Based on our research and our daily contact with 9/11 families, we have found longstanding mental health issues that have not been addressed for children of the victims who are now young adults, which are complicated by misdiagnosis, intergenerational issues, substance abuse and other developmental challenges. For example, a victim's child who was 13 years old at the time struggled through high school and college and was misdiagnosed and treated with stimulants for Attention Deficit Disorder when in reality he had anxiety and depression. This in turn led to substance abuse, and the need for years of private therapy. Another example of mental health stressor is the continued identification of human remains, which continues today. The Office of Chief Medical Examiner's Office of New York City still has 7,000 unidentified human remains. Of the 2,753 victims, at the World Trade Center site, over 1,100

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victims' families have never been notified. families have by choice have been notified multiple times. Our family has been notified six times of our son's remains, the most recent just three months ago. Over 17 years later we received calls from victims' families that are contacting us for the first time asking for support services. Many have never sought mental health treatment, and their conditions have been magnified due to other losses, lack of support and unforeseeable circumstances out of the control. As far as the survivors, in 2006, Voices worked with Morgan Stanley to analyze a number of survivors who were present in Lower Manhattan on 9/11. The study indicated that over 400,000 people lived, worked or went to school within a quarter mile-of a mile of the World Trade Center on 9/11. Of that number only about 18,000 survivors are currently enrolled in the World Trade Center Health Program and many do not know they qualify or that it's still open. survivors still reside in the area, yet. Others have relocated to other parts of the country, which makesmakes it much more complicated than to make them aware of the program. Some survivors have become sick and sought treatment for illnesses with their

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own private medical doctors not recognizing the-the connection with their exposures at the World Trade Center site. As an example, we received a call from the husband of a woman who worked at a-at a school in the area, and was diagnosed with brain cancer. husband called the day before her surgery wondering if she should apply to the program. We helped expedite her application. Some terminally ill survivors never recognize the connection between the 9/11 related exposure, and it' not until many years after they're death that their families contact us asking for help. Although they've perished, we can assist the families by connecting them with attorneys that are helping them apply for the Victims' Compensation Fund. The overlooked survivor community are the thousands of individuals who worked in the World Trade Center building, but just didn't happen to be at work that day. Many of them lost hundreds of friends and colleagues that day, and were tasked with rebuilding their companies. Recognition of their need for support varies from company to company. Nearly 75,000 responders are currently registered in the World Trade Center Health Program. John Feal who has been working tirelessly and helping

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responders apply to the program is here today, and

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we're often contacted by responders who have moved

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out of the area who came from other parts of the

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country to work in the rescue and recovery effort.

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For instance, we were contacted a response team from

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Phoenix, Arizona who had 42 colleagues who came to

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the area, and they actually worked with one of the

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attorneys to get theme into the Compensation Program.

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As of September 30<sup>th</sup>, I know this came up earlier of

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2019--CHAIRPERSON MILLER: [interposing] Susan, I'm sorry, but we do-we do have-we have to be out of

> MARY FETCHET: Oh, oaky.

CHAIRPERSON MILLER: There's another hearing. So, I'm asking you to please wrap up, summarize and wrap up.

MARY FETCHET: Well, I know-I know you mentioned about the 2000-there's 2,104 people that are on record that have died since 9/11, and I think that's under-estimate actually of the people that have died because it's really not recognizing the people that committed suicide, and it's also not recognizing the people that may have died and not

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2 recognized them until after-after they have deceased, when the family approaches us and I'm going to turn 3 it over to Stephanie.

STEPHANIE LANDAU: Thank you. [coughs] So overall the challenges we're trying to describe are very, very significant for the families of the survivors and the responders. It's very confusing. There are multiple, multiple layers of services that are provided. A lot of them all have the same name. You've got the Victim Compensation from the World Trade Center Health Program, and then you-they have a Survivor Program, a Responder Program, a National Program, and there's really no way for people, that se try to help people navigate through all these systems, and we just really wanted to make sure that you're aware that there's a lot of challenges to these systems that are there. Their families have no support. A lot of times family members are sick. They're taking care of somebody who is sick, and they have nobody supporting them. They have to give up their time to take people to their medical treatments that also are not being recognized as time off. it's a very, very complicated system, and they really, really need help navigating, and this is only

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going to get worse, as was mentioned. With asbestos related diseases you're going to have a lot more families that are going to be depending and looking to the city for services. What we would like to do is really to conclude is that we're here today to support the entire 9/11 community. We would like to applaud all the Centers of Excellence who provide incredible, compassionate expertise in taking care of everybody who has gotten sick. We would also like to give a little shout-out to John Feal and all the attorneys that are here who represent the survivors and responders and their families with great emphasis-impetus-empathy--that was hard-as they continue to battle for additional funding for the victims' compensation, and for fair treatment and sick leave for all those who have been impacted

MARY FETCHET: And I know you mentioned best practices. I think we've learned a lot over the last 17 years, and I'm hoping that it's taken into account What we have learned if, God forbid, you know, there's another attack or acts of mass violence.

CHAIRPERSON MILLER: Okay, thank you—
thank you so very much. We've been joined by Council

1	COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 91
2	Member Barron, and I'm going to allow my Co-Chair
3	here to kind to jump right in.
4	CHAIRPERSON LEVINE: Mr. Barzilay, thank
5	you for your very, very powerful testimony. It's
6	hard to think of any group of workers have more
7	clearly sacrificed on behalf of the city and service
8	in the Post-9/11 period and have—clearly deserve
9	every measure of support we can offer-
10	ORAN BARZILAY: [interposing] Thank you.
11	CHAIRPERSON LEVINE:including
12	undoubtedly support for those who suffer from PTSD,
13	and I just want-want to ask you to clarify because
14	when I look at the statistics from the World Trade
15	Center Health Program, they do list PTSD as one of
16	their conditions. In fact, it's one of the most
17	common for both responders and survivors. Can you-
18	MARY FETCHET: So, they'll treat it, but
19	they don't-they don't-initially support it.
20	CHAIRPERSON LEVINE: Okay, so they're
21	tracing this condition without offering financial
22	support? Is that accurate?
23	ORAN BARZILAY: Correct.
24	MARY FETCHET: Yeah.

ORAN BARZILAY: That is correct.

city's response to this, and we-we thank you for

highlighting that contradiction, and we certainlysupport you on that.

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ORAN BARZILAY: Thank you.

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MARY FETCHET: Can I clarify that a little bit? The Zadroga Act created two sort of

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equal branches. One is the Victim Compensation Fund,

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which is financial rewards, and that does not include

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any mental health awards. On the other hand, you have

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World Trade Center Health Program, which has all

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sorts of variations, which is why it gets confusing.

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They will treat—they will physically—they will

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actually provide treatment but no financial

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it—it makes it so you can't work. It doesn't get

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recognizing it, but they're not recognizing it as

included in your financial compensation. So, they're

compensation. So, you can go in for counseling, but

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financial loss.

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CHAIRPERSON LEVINE: Okay, thank you.

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CHAIRPERSON MILLER: Thank you, Mr.

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Chair. So, if—there's a lot going on here, and—and

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you've provided a-a-a-just a plethora of-of really

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credible and necessary-necessary testimony here

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today—and—and pretty much answered most of the

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questions that we have here about what are next

steps. What has not been done? Have we kind of captured that universe of everybody that is being impacted and—and certainly your collective testimony have—have dealt with that, but if we had to prioritize initiatives, programs—and as we move forward, what would be our first steps, and what would be those priorities? [pause] From each of

you.

ORAN BARZILAY: From my perspective and for—for everybody that's involved with FDNY, I would say some issues with NYCERS have to be adjusted getting them the appropriate funding for maybe the doctors that we're asking for, the specialists. You know, you have members with cancers who are being diagnosed with PTSD, fatigue instead of being authorized for a cancer diagnosis for—for their retirement.

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CHAIRPERSON LEVINE: So, I—I—I think that we've acknowledged that piece there, and I personally have a lot of experiences with—with—within—with IMEs, and they—they never work for workers. I think that we're addressing that. More importantly, I think the hearings that our colleagues did in—in Albany has really shined light on that, and because of that,

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they have brought other individuals in, but we're going to keep at the forefront and—and certainly that's why we have these hearings, right, to give voices to those who—who have been historically disenfranchised around these areas hear, and that is quite frankly unacceptable. I think they've begun to make changes, and we want to stay—stay on them to make sure that they have credible qualified folks making these determinations, and that we close these—these disparity gaps about who is receiving the qualified disability pension, and who is not. And—and so certainly that's something we want to deal with. From—from—from a civilian standpoint, what are the next steps?

MARY FETCHET: Well, I think there's still a lot of stigma attached to mental health and, you know, that's something that has to be addressed generally, but, you know, I'm just struck by, you know, victims and -and people that are directly affected by John Feal and-and others that have to come forward to push the government to do what should be, you know, common sense. You know, so I think to-to really look at the bigger picture and-and for you all to be thinking about how can you move this

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forward? How can simply it for these people? How can do what's right so that people have both the mental health and the medical care that they need and deserve.

CHAIRPERSON MILLER: Okay, thank you. I hope that we've seen that—that the—the city of New York at the very least have—have really taken steps to understand the general mental health issues, but in particularly as it pertains to those survivors and—and—and—and family members of survivors and the unintended consequences that they have had there, and that we—we have a responsibility to—to—to provide them with the necessary services and I think just the dialogue and the conversations that we've had over the pat fives years in communities throughout the city and particularly around 9/11 that—that we are addressing that, but we want to continue this dialogue.

MARY FETCHET: Well, if I could just add
I think one thing that makes things difficult is
having to fight for things that you deserve, and-and
when there's multiple organizations and agencies
providing a small sliver of what the—the support
should be, it makes it very difficult for people to

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conditions.

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navigate. So, I think to-to think about a

collaboration and messaging and—and making things

easy because the navigation of many of these issues

what—is what complicates the mental health

CHAIRPERSON MILLER: Okay. Thank you so very much for your testimony. I'm sorry, we have Council Member Adams.

COUNCIL MEMBER ADAMS: Thank you, Chair Miller. I-I just wanted to make a comment, and-and thank the co-chairs for continuing this dialogue. You know, the-the more we peel this-this onion back, the more layers there seem to be, and I just really appreciate your testimony here today, your passionate testimony here today. I happen to have a family member who was diagnosed for the third or fourth time three months ago with another illness as a direct result of being a first responder on 9/11. So, I-I certainly do sympathize and-and empathize with everything that you've said here today. So thank you very much. In addition to that, testimony that was provided by Ellie Engler at little while ago from UFT where she reached out, and she was very, very passionate about the children and wanting to get

1 CIVIL SERVICE AND LABOR 98 2 information to the children and families of the children. This information that you've provided in 3 your packet: 9/11: Were You There? specifically 4 addresses her concern, and-and for our estimation and 5 6 my estimation it looks like this is the answer that 7 she was looking for to that question: How are we reaching the children? How are we reaching the 8 families that continue to be impacted from 10, 15, 20 9 10 years later and beyond. This issue is going to affect and has affected generations in the City of 11 12 New York and beyond even for those that aren't even in the state of New York. So, when we look at this 13 14 picture, for us right here in New York City, we're 15 taking a look through a small lens right now at New 16 York City alone, and then as we peel back this onion, we're taking a look at a wider instance of teachers 17 18 and people that may have just been walking down the 19 street, students young and old. Also, we can take a 20 look at people that came in to assist from other-from other areas of the country, across this country. 21 2.2 had numerous individuals that came to that pile to 23 assist. So, I'm just going to ask that this information be shared with UFT and others. Were You 24

This answers that question in trying to get

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There?

more information in and more information out to those
that may have been involved and so critically

4 impacted on 9/11. So thank you again very much.

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much for your testimony. Our final panel: Linda

Mercer, Matthew McCauley; John Feal (sp?), Michael

Barasch and Leonard Sorgie. [background

comments/pause] Before we get started, I'd like to

acknowledge my good friend Ritchie Yales (sic) who—

who has—has been on the forefront for—for—obviously

for nearly two decades now, and continues to be so—

Give your name and testimony. [pause]

morning. My name is Linda Mercer. I am a traffic agent. I work for the NY—the NYPD over 30 years. I have served many mayors and before—before the mayor we have now. I have been diagnosed with cancer from 9/11. I'm certified by the World Trade Center that happened. I have been treated. I do dialysis. The cancer left from my breast to liver. Right now I'm—I'm supposed to have an operation. They couldn't do it because the cancer is so much on liver. So, the doctor say I'm going to be on chemo—chemo—I'm sorry. Chemo for the rest of my life. Right now, I don't

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have no sick time. I was standing on the step in October on the Mayor's step and asking him to sign for Traffic-all the traffic agents, all the city workers that was down at 9/11. I was told that he'd sign it, but as of this day, I still don't unlimited sick time. Come January the 4th of 2019, I got to go back and do more chemo, and my doctor told me this is going to be a heavy dose of chemo that I won't be able to come to work. So, I don't have no sick time. So, I'm asking you all to please help me. I have to support my family. Without full sick time I can't go to work and I won't get paid. So, please. you. Oh, I'm sorry. Due to the fact that I'm with the NYPD and they have unlimited sick time, I feel that Traffic should have unlimited sick time, too, because we in that unit-we in that NYPD. So, thank you. [pause]

JOHN FEAL: I want to thank the Chair and the Counsel for today's hearing. I want to wish everybody here a merry Christmas and a Happy New Year, a Happy Hanukkah, Happy Hwanazaa, whatever you celebrate happy that. I especially want to thank Linda Mercer and I want to—I want to wish her a Merry Christmas. So, let me start by saying we shouldn't

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 101 1 2 be here today talking about sick leave for 9/11 responders. We shouldn't be here at all, but for the 3 4 record, I have no part in this game. I have no skin 5 in this game. I'm not represented by a union. 9/11 responder who lost half of my foot, was 6 7 diagnosed with post-traumatic, got my BCF award. Could have went to an island this holiday season, but 8 I stuck around for the last 15 years to help pass 9 10 nine pieces of legislation in DC, Albany, New Jersey and Michigan for free. I've even donated over \$5 11 12 million and a kidney, but I have no skin in this game other than seeing what's just. Two years ago my team 13 14 walked the halls of Congress. Then we stopped to walk 15 the halls of Albany to get a bill passed. Along with 16 the 9/11 Health Watch and others, we wanted 17 responders like Linda Mercer and hundreds of others 18 who responded to 9/11 who became deathly ill because of their heroic actions to get leave, unlimited sick 19 20 leave because of their heroic action. Working with State Senator Kaminsky and Senator Golden we walked 21 2.2 the Capital and the state to mandate that all 9/11 23 responders get unlimited sick time. Governor Cuomo supported it, we passed it, and it was signed into 24

law in September of 2017. And while there were some

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problems in the beginning ironed out, and now there are others getting unlimited sick time. Under this State Law the Mayor has opposed, there are agencies like the New York State Police, the Port Authority, Suffolk County Police, New York State Court Officers and other agencies that have worked out this without any conflicts or no need for negotiation or collective bargaining. And keep in mind no one has to protect or negotiate to help their members affected by 9/11 and aside from that, yet Linda Mercer still sits here eight days before Christmas without unlimited sick time because it hasn't been negotiated, and will most likely die before the Mayor of New York City simply does the right think, negotiate. You have to know what you're talking about in order to have a negotiation, and while I have not seen the contract, I know first hand that this contract is flawed and it hurts its members. am baffled that the parties involved decided it was a good ides to negotiate for a benefit that was already I am dumbfounded they felt it was not necessary to speak to anyone who was involved with passing the bill in 2017, but yet they hijacked our press conference six weeks ago. They tried to play savior.

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They've tried to play hero. That title is reserved for those who suffer from the illnesses, but the locals and the Mayor—the Mayor's Office apparently know nothing about what they were talking about but managed to completely screw up a very simple concept that had bipartisan support and the governor's support. So, let me make this clear, make it-make it simple for those who have no skills and successful leadership skills. If you were responder at 9/11 and you got sick from your exposure, then you are entitled to unlimited sick time. Now, I understand the Mayor has delayed the team by telling all the unions take-take what has already been negotiated or get nothing. I'm here to tell everybody, tell every union do not negotiate with the Mayor's Office because he'll be back in Albany in January to get legislation passed so nobody has to negotiate and get force fed with the Mayor's Offices. They were disingenuous earlier to you guys. I hope you know they were playing you. That's off the record and now on the record and I am sure with the help of proven leaders like Govern Cuomo, Andrea Stewart Cousins and Senator Flannigan we will get this done before the Mayor and his team figure out what they know what

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they're doing. In closing, the parties that negotiated for something that was already a legal right will have blood on their hands when people like Linda die without unlimited sick time. So, I leave you with a quote by Ben Franklin: "We are all born ignorant, but one must work hard to remain stupid."

Thank you

Hi. My name is Leonard LEONARD SORGIE: Sorgie. I am perhaps by happenstance attending today, and actually speaking with you today only as the result of the positive things I heard from the Council that I decide to raise what I believe is an issue that has been ignored over the years. It results from the fact that I spent some time considering my family's situation as 9/11 survivors. My wife was diagnosed with breast cancer 45 months after 9/11. We live in Battery Park City. I was there on 9/11. We returned home at the city's instance, the government's instance. They were interested in restoring Lower Manhattan to being a vibrant community. We were assured it was safe. My very much wanted [coughs] to move away. I insisted it was safe, and we stayed and—and my wife is fine today. She recovered from her breast cancer and has

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done very well. When looking into the issues, I came to understand from an April 2006 New York City Health Register report that some 900 people were identified as having been in the contamination zone, having contracted cancer after 9/11 but most likely those people were denied benefits through the World Trade Center Heath Program, and I perhaps by New York City as well, I don't know because their cancer was deemed to have manifested too soon. So, again for example was deemed to have been diagnosed with cancer 12 weeks too early. So, she's not a victim of 9/11. will say she certainly considers herself a victim of 9/11. So what I would like to ask is that New York City this Council will look into that issue, the World Trade Center Health Program. Dr. Howard set a 48-month minimum latency period before he'll consider a cancer patient to be a victim. That's based upon ambiguous science given a cancer-triggering event the latency is very much unknown. Dr. Howard in setting the policy for the World Trade Center Health Program specifically stated his goal was to ensure?: "No false negative" decision. Yet-yet the 48-month solid cancer latency period they set, they eventually decided upon clearly leaves behind cancer victims

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who-whose cancer resulted from 9/11, and I don't know who oversees the World Trade Center Health Program, and these sort of scientific just rules and regulations that they set. This is-this is a critical rule that ends up eliminating probably at least 1,000 cancer patients from-from the group recognized as being the victims, and I would like or would ask that New York City on behalf of what are mostly New York-New Yorkers investigate and consider whether this is an avenue for advocating on behalf of those thousand or so people with the federal government to-to revisit what's an appropriate latency period. Should it still be 48 months? I've seen data in the last seven years where there have been many instances of cancer developing in less than 48 months. So, again, I'm not quite certain of the proper avenue to have that issues consider, but I do think given these-our New Yorkers who are being ignored who are being told they are not victims that somehow it would be helpful for the Council to—to consider that issues, and if would be appropriate, I'd be more than willing to sit with your staff at some time and speak a little bit more about it. Thank you. MATTHEW MCCAULEY: Good afternoon thank

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you very. I want to thank—thank the City Council for

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you very. I want to thank-thank the City Council for holding this hearing today, and can only hope that we can accomplish some things that are long overdue. name is Matthew McCauley. I was a 9/11 first responder myself. I represent Linda Mercer along with many other 9/11 responders and survivors, who become ill as a result of their exposure to the toxic dust and debris from the World Trade Center Site. You've John Feal and the passion he has for the 9/11 community to ensure that they get what they are due and not forgotten. I presented at many of the same meetings he has spoken at as well. It was at these meetings, Chaired by members of the New York State Senate and Assembly that we first discussed the inequality being faced by New York City 9/11 responders when it came to getting your unlimited sick time. It took those meetings to get us where we are here today, here still discussing why New York-9/11 New York City responders do not have the same benefits as the people they stood shoulder to shoulder with ground zero as well as the-the same people they stand shoulder with at the very frequent 9/11 responder funerals that we have on an average

three times per week now. However, that was actually

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 1 108 2 not the purpose of those meetings. The purpose was to discuss and examine how 9/11 responders were being 3 treated in the pension system, and more specifically 4 5 how they were being treated by NYCERS. We have been hearing an increasing number of complaints by the New 6 7 York City 9/11 responders that their World Trade Center pensions were being denied or strangely 8 classified to PTSD while ignoring their life 9 10 threatening and the physical illnesses. meetings saw testimony from both 9/11 responders and 11 12 the representatives from NYCERS including Executive Director Melanie Whinnery and General Counsel Alicia 13 Slack. As a result of those meetings and following 14 15 suggestions that we made by John and others, NYCERS 16 met with members of the World Trade Center Health Program and the Victims' Compensation Fund to have a 17 18 better understanding of how those programs work with 9/11 responders and to understand how the work that 19 20 NYCERS does impacts those programs. They worked to verify more notices of participation for its members. 21 2.2 They created website pages and updated other-others 23 to provide information to it's 9/11 responders. 24 showed that some changes could be made even more than

16 years after 9/11. However, they also identified

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 1 109 2 issues that remain problematic, and given that NYCERS is controlled by the Mayor, all of these issues can 3 4 be corrected if the Mayor addresses them. (1) NYCERS is un-understaffed both administratively and 5 medically. 9/11 issues should be handled 6 7 specifically by 9/11 teams. The World Trade Center Health Program, the 9/11 VCF and the state have all 8 shown that having teams focused on 9/11 responders 9 They're still in a 10 gets the job done. (2) Backlogs. backlog verifying 9/11 responders' notices of 11 12 participation. Much of that is due to the other agencies failing to respond to NYCERS. You heard 13 14 earlier a testimony about the fact that some people 15 may not be qualified. That doesn't count for those 16 that have had responses back. If they respond we've been told that they're not qualified. They're able 17 18 to then go some place and try to find information. NYCERS has said openly in their—in their hearings 19 that they've had agencies that couldn't actually 20 respond back to them. It's 2018. There should not 21 2.2 be hesitation from an agency to respond back to 23 It's the city of New York. The Mayor can NYCERS. order them to respond and if they don't respond, then 24

they should be de facto considered to be part of it,

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 110 2 not held against it because right now what happens if the agency doesn't respond back, it's on the 3 responder's side to prove that they were there. 5 don't want affidavits from people that they were down there with the Victim's Compensation Plan. You hard 6 7 from Michael Barasch about that. The Victims' Compensation Fund takes sworn affidavits. The World 8 Trade Center Health Program takes sworn affidavit. 9 The city agencies don't want sworn affidavits because 10 they're concerned about fraud. Again, there's sworn 11 12 affidavits. Everybody in here understands what the ramification of lying in a sworn affidavit is. 13 the issues should be dealt with in a-in a different 14 15 way. The appropriate physicians are not in place to 16 review 9/11 cases. Experts from the World Trade Center Health Program and FDNY Medical Division that 17 18 would be Crane and Dr. Prezant have met with them and offered advice to them. Yet they still do not have 19 20 oncologist review cases on a regular basis. cancer is devastating the 9/11 responder community. 21 2.2 There 70 cancers approved by the World Trade Center 23 health program ad being 9/11 related. All of t he

major institutions on the East Coast have done or are

doing 9/11 cancer research. Yet, no one oncologist

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sits on the NYCERS board with a regular-with a regular physician and the same is true for an Occupational Health Specialist, and our Boarded Occupational Health Specialist such as Michael Crane, Michael Crane from the World Trade Center Health Program offered to find them whatever doctors they needed to have. Yet, we heard today that they don't have enough physicians. We've been hearing that for man a year now that there's not enough physicians and that needs to be changed. Why hasn't the Mayor or the City changed that? It's just a matter of expanding the number of folks that can sit on the boards. (4) It still takes too much time to navigate the NYCERS Pension System, and it—and it often requires an attorney go get the needed results including appeals as the Councilman brought up before. These delays have ripple effect on Social Security decisions because the members must be off payroll to qualify in most instances. They affect the DCF determinations when it comes to awards and often cause them to duplicate their work, which takes resources away from others as well as slows down the process. Because of the lack of sick time for its members, some are forced to take an ordinary pension

1 CIVIL SERVICE AND LABOR 2 in the fact of financial ruin. So, they actually have to abandon their pension, and we've had that. 3 4 Jennifer Doherty was somebody who came in here and said that she had to make a decision and when she 5 6 came to the State hearing and she had to make a 7 decision. She could an ordinary pension because she had enough time to retire. She ran out of her sick 8 She had no option or off for a few with no 9 pay, and then that leaves the FDNY's Honor Fund or 10 John Feal or somebody to-to keep things going. So 11 12 what did she do? She took the ordinary pension and she struggles everyday with her cancer now. So, now 13 14 she has to go back and reclassify that ordinary 15 pension. Now it sounds pretty simple that at least 16 she's getting paid. She should still be on the books today if she had unlimited sick time and NYCERS could 17 18 be working at least that part of it out, but she was forced to leave versus having financial ruin. There's 19 20 more to be done here in the situation, and the New York City responder community is only getting worse. 21 2.2 We call on the Mayor to fix the issues. Lately we've 23 heard of 10-year plans to fix New York City

infrastructure as well as NYCA and other agencies.

We need an immediate plan to fix the issues that

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plaqued the 9/11 and NYCERS and eliminate-excuse meeliminate the ripple effect. Greater transparency and accountability is also needed. The World Trade Center and the Victims' Compensation Fund and all the Centers for Excellence, and John will tell you this. He's been at the meetings including those across the country convene at least once a month to ensure that they're all on the same page. Do you think that means that there are concerns about them? I live in the community. They all come into New York. all sit down. These are high ranking practitioner and high ranking government officials that meet every single month to make sure that everything is moving slowly within those organizations, moving together within those organizations. It's time for that bodywork to include numbers of NYCERS, and if the Medical Board doesn't-if they don't want to do their own meetings maybe they should attend some of the other ones themselves. A quick discussion about follow-up on the sick time and I'll end. Why, why, why has this not been implemented going forward for all New York City agencies? The Mayor has said that he favors it, but it seems it's only on his own terms. There is no reason why every New York City

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responder by the end of today should not have at least sick time going forward. Linda Mercer will start 2019 without another—with another battery of chemo therapy, and wondering how she will get up and go to work the next morning. There are many other Linda Mercers out there, and more to come. Just do the right thing and protect them going forward and work everything else out. Thank you.

MICHAEL BARASCH: Good afternoon everybody. I'm Michael Barasch, Managing Partner of the Law Firm Barasch & McGary. I want to thank you for having us all here today as I finish up. I'm joined here by my associate who has already been recognized, former retired FDNY Deputy Chief Richard Alles who was former Political and Legislative Director of the UFOA. I need not mention he was also a 9/11 first responder. Our law firm represents over 12,000 people in the 9/11 community. Nearly every day a new person in our offices-one of our clients or a new person calls us up to report that there's been another death, and it's absolutely horrifying. of my clients who was an NYPD Detective James Zadroga, Jimmy died of Pulmonary Fibrosis in 2006 at aged 34. When they did an autopsy, they found glass

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in his lungs. Think about that. If he had that in his lungs, I submit that every responder, every school child, every resident, every office worker who is assured the air is safe and was invited to come back downtown, we all have that in our lungs. addition to the ground glass they found asbestos, chromium, lead Benzene and number of other known carcinogens in his lungs, and that was the evidence that doctors that NIOSH and the CDC needed to link what is now 68 cancers to the World Trade Center toxins. Everyone whether they were uniform, nonuniform was breathing the same toxic dust. According to NIOSH and CDC, according to them, not attorneys, nearly 20,000 people so far have had cancers linked to the World Trade Center toxins, and because of the delay it takes to get an appointment with the Health Program, there are thousands more waiting for an appointment to have their illnesses certified. Nine thousand first responders nationwide, 1,700 FDNY members and 8,000 civilians have been diagnosed with caners. My firm alone we were talking before-Councilman Levine you were asking about the students. My law firm alones represents 25 former students from Stuyvesant High School, PACE University and BMCC with

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON 1 CIVIL SERVICE AND LABOR 116 2 cancers. We're about 25-year-old women with breast caner, 28-year-old men with bladder cancer. 3 horrifying. You know, these kids were told come back 4 to school. I'm sure those of you who were around at 5 6 that time remember they turned Stuyvesant High School 7 into a morgue, and then because the EPA said, "Oh, don't worry," all they did was mop the floors. These 8 kids went back to school. The air conditioner ducts 9 were filled with this toxic, and as we talked—as 10 Ellie talked about it before, kid were getting our of 11 12 their subways, walking to school while building burned for 99 days. Thousands of others have died as 13 14 well who were not responders, and we're-not only that 15 but we are seeing aggressive cancers. Somebody mentioned earlier or I read it in some of the 16 17 literature that breast cancer is I think the second 18 most common or the third most common cancer that they've linked, right. So, do you know how rare-and 19 20 I'll be-I'll admit my ignorance-I didn't even know that men could get breast cancer. Well, it's so rare 21 2.2 that only 1 in 100,000 men ever get breast cancer. 23 My firm represents 500 women with breast cancer. So, you would expect I would represent five men with 24

breast cancer. My firm represents 32 men with breast

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR 1 117 2 cancer. Congress finally did the right thing after the EPA screwed up and misled us, and misled the 3 450,000 odd people in the 9/11 community that passed 4 5 the Zadroga bill in 2010. They reauthorized it in 6 2015, but there are too main problems and I'm going 7 to leave you with this: Two year from tomorrow, the Victim Compensation Fund will expire for good, but I 8 don't think people are going to stop getting cancer. 9 I don't think they're going to stop dying. 10 Unfortunately, there isn't enough money that was set 11 12 aside in 2015, and as a result, the Special Master has already announced that starting in February, 13 14 future awards are going to be reduced. They just 15 don't have enough money. Nobody envisioned the rate 16 of cancers and respiratory illnesses or that deaths that would so much higher than anyone thought 17 18 possible. Congress must act again and extend the Victim Compensation Fund. Everybody else here has 19 talked about NYCERS so I'm not going to talk about 20 that. That's in my written report. I just want to 21 2.2 thank you for taking the time and especially for now 23 reaching to the former school children. I don't know-and it should be known that-you know, why should 24

these families, why should these kids who have now

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2 moved from all over the country, why should they 3 connect that the cancer they suffered or they were

4 diagnosed with in 2014, was—is now considered related

5 to their toxic exposure during the school year of

6 2001-2002. Thank you so much.

CHAIRPERSON MILLER: Thank you so much to all of you for your testimony and-and we're going to be kicked out of here. But before I pass it over, I just want to say on the record that the Mayor's Office of Pensions were asked to attend and-[background comment] Yeah, they-they-they were invited and they did not show, but we're going to continue to apply he pressure to get the answers that are necessary. Obviously, this is something that is near and dear to all of the members that hare here today and to Council and that we look forward to working with each and every one of you to advance this, and your testimony here today is absolutely not last on the members of these two committees. asked you here today because—as clarification as we moved forward that we want something to send to the Administration. We want to be able to work with our colleagues in the state and federal government to ensure that we're providing the critical services

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that all of the victims of 9/11 and—and their survivors deserve, and so we—again, we thank you for—for your testimony here today. Council Member Levine.

CHAIRPERSON LEVINE: Thank you, Mr. Chair and—and I second those remarks, and wanted to ask if any of you could comment on whether there are health conditions that you're seeing amongst the folks you're working with, with are not currently covered by the Health Program.

MALE SPEAKER: I think John will also speak on this, but we're seeing a large number of autoimmune issues, a large number of neuropathy and neuropathic issues that are coming in. Some of them are secondary to underlying conditions, but there's a large number of cases that are out there and that's why you have the Scientific Advisory Committee from the World Trade Center Health Program that's looking into getting new conditions that are passed. It take a long time to get them in. There is definitely people out there right now that are waiting that need to be in the program I'm sure Michael could speak to that as well.

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MICHAEL BARASCH: To-to order-to-to get an illness, a new illness added to the Zadroga bill you have to petition the Scientific and Technical Advisory Committee. You've got to have medical research. You've got to have medical channels. have to have the science to back it up. Autoimmune is being looked at and Neuropathy looked. We're seeing a lot of hard cases, stand-alone heart by itself is on the bill but, is a secondary illness. It is. This is a long grueling process, but this is what we have. We're working everyday to make this better, but I want to ask you guys, in the future when you do hearings, let us be your experts. Let us sit down you guys so we can educate you guys so when you're asking the questions to those who are disingenuous, we'll let you know when they're lying. We'll let you know when they're not telling you the truth. We'll let you know when they're raising their right hand and they don't tell the truth. the 9/11 community. We know the science. We work with the federal, state and local governments. There's nothing the tree of us don't know. We want to help. Not only do we help the 9/11 community today, we want to help the people that are helping us

chairs and thank you to the panel for presenting your testimony. It's always, as you've indicated critical that we hear from those who were on the frontlines,

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and I wasn't here for the Administration's testimony, but I can certainly believe that it was not fully truthful or forthcoming because as we—as has been alluded to earlier, EPA misled, misinformed or even lied when they said that the air was safe to breathe. They say they didn't have all the information. Then you should have withheld your comments—

MALE SPEAKER: [interposing] We do.

decision until you had all the information, but certainly those who suffered and who have died and who have those illnesses based their offering their services at that time are certainly entitled to all of the compensation and all the health benefits and all of the procedures that they need to get better, and we want to thank for coming.

MICHAEL BARASCH: We thank you caring, and that means a lot. You know, it's just showing empathy and showing sympathy that the 9/11 community need. They need somebody that's going to show them that they care not a bunch of union leaders or a government or city agencies that are going blow smoke up the ass. I've been to 181 funerals. I paid for nine of them. I'm sure Ritchie has been to dozens of

COMMITTEE ON HEALTH JOINTLY WITH THE COMMITTEE ON CIVIL SERVICE AND LABOR funerals himself. We've seen the pain and suffering in this 9/11 community that's going to be a generation long battled for us. So, we need all the help we can get. CHAIRPERSON MILLER: The Council stands with all those who have survived and all those who suffered and their families and we look forward to continuing to engage and each and every person that testified and spend time to come in here today. So, I want to thank the staffs for putting together. It was absolutely critical that we do this. You did a great job there Malcolm, Joe, Brandon and the staff of-of Council Member Levine. Thank you so much, and with that, we are right on the button, and this hearing is adjourned. [gavel] 

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World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date January 15, 2019