CHARTER

World Trade Center Health Program Scientific/Technical Advisory Committee

Committee's Official Designation.

World Trade Center Health Program Scientific and Technical Advisory Committee

Authority.


Objective and Scope of Activities.

The James Zadroga 9/11 Health and Compensation Act of 2010 (the Act) established within the Department of Health and Human Services (HHS) the World Trade Center (WTC) Health Program. The WTC Health Program began providing on July 1, 2011: (1) medical monitoring and treatment benefits to eligible emergency responders and recovery and cleanup workers (including those who are Federal employees) who responded to the September 11, 2001, terrorist attacks; and (2) initial health evaluation, monitoring, and treatment benefits to residents and other building occupants and area workers in New York City who were directly impacted and adversely affected by such attacks ("survivors").

Certain specific activities of the WTC Program Administrator are reserved to the Secretary, HHS, to delegate at his/her discretion; other WTC Program Administrator duties not explicitly reserved to the Secretary, HHS, are assigned to the Director of the National Institute for Occupational Safety and Health (NIOSH). The administration of the World Trade Center Health Program Scientific/Technical Advisory Committee (Advisory Committee) established under Section 3302(a) of the Act is left to the Director of NIOSH in his/her role as WTC Program Administrator. Section 3302(a) authorizes the WTC Program Administrator to establish and appoint advisory committee members. In addition to the duties described below, the committee
may be consulted on other matters as related to and outlined in the Act at the discretion of the WTC Program Administrator.

**Description of Duties.**

Section 3302(a)(1) of the Act establishes that the Advisory Committee will review scientific and medical evidence and make recommendations to the WTC Program Administrator on additional WTC Health Program eligibility criteria and additional WTC-related health conditions. Pursuant to Section 3312(a)(6)(G) of the Act, the Advisory Committee will additionally review and evaluate policies and procedures, as well as any subsequent substantive amendments to such policies and procedures, used to determine whether sufficient evidence exists to support adding a health condition to the List of WTC-Related Health Conditions; the committee will also make recommendations to the WTC Program Administrator regarding the identification of individuals to conduct independent peer reviews of the scientific and technical evidence that would be the basis for issuing a final rule adding a condition to the List of WTC-Related Health Conditions. The committee may be consulted on other matters as related to and outlined in the Act at the discretion of the WTC Program Administrator.

**Agency or Official to Whom the Committee Reports.**

Section 3302(a)(1) of the Act instructs the Advisory Committee to provide advice to the WTC Program Administrator.

**Support.**

The Centers for Disease Control and Prevention (CDC) and NIOSH shall provide administrative services, funds, facilities, staff, and other necessary support services, and perform the administrative functions of HHS under the Federal Advisory Committee Act, as amended (5 U.S.C. App.), with respect to the committee.

**Estimated Annual Operating Costs and Staff Years.**

The estimated annual cost for operating the committee, including compensation and travel expenses for members, but excluding staff support, is $19,082. Estimate of annual person-years of support required is 0.20 at an estimated annual cost of $28,836.

**Designated Federal Officer.**

The WTC Program Administrator will select a full-time or permanent part-time Federal employee to serve as the Designated Federal Officer (DFO) to attend each committee and subcommittee meeting and ensure that all procedures are within applicable statutory, regulatory, and HHS General Administration Manual directives. The DFO will approve and prepare all meeting agendas, call all of the committee and subcommittee meetings, adjourn any meeting when the DFO determines adjournment to be in the public interest, and chair meetings when
directed to do so by the official to whom the committee reports. The DFO shall be present at all meetings of the full committee and subcommittees. In the event that the DFO cannot fulfill the assigned duties of the committee, one or more full-time or permanent part-time employees will be assigned as DFO and carry out these duties on a temporary basis.

**Estimated Number and Frequency of Meetings.**

The frequency of meetings shall be determined by the WTC Program Administrator based on program needs, but not less than once every two years, at the call of the DFO. Meetings shall be open to the public except as determined otherwise by the Secretary, HHS, or other official to whom the authority has been delegated; in accordance with the Government in the Sunshine Act (5 U.S.C. 552b(c)) and Section 10(d) of the Federal Advisory Committee Act; notice of all meetings shall be given to the public. Meetings shall be conducted, and records of the proceedings kept, as required by applicable laws and Departmental regulations.

**Duration.**

Continuing.

**Termination.**

Statutory authority is specified in Section 3302(a)(5) of the Act for the committee to continue in operation during the period in which the WTC Health Program is in operation, currently set to terminate in 2090. This Advisory Committee Charter is to be renewed every two years, as required under 5 U.S.C. App., Section 14(b)(2).

**Membership and Designation.**

In accordance with Section 3302(a)(2) of the Act, the WTC Program Administrator must appoint at least 15 members to the committee. The committee membership shall include at least: 4 occupational physicians, at least two of whom have experience treating WTC rescue and recovery workers; 1 physician with expertise in pulmonary medicine; 2 environmental medicine or environmental health specialists; 2 representatives of WTC responders; 2 representatives of certified-eligible WTC survivors; an industrial hygienist; a toxicologist; an epidemiologist; and a mental health professional. Additional members may be appointed at the discretion of the WTC Program Administrator. Currently, the committee membership consists of 17 members who are appointed by the Administrator. Members, other than federal government employees, will be deemed Special Government Employees. Federal members will be deemed Regular Government Employees. The term limit of members will be staggered in four-year terms. A member may serve up to 180 days after the expiration of that member’s term if a successor has not taken office.
Subcommittees.

Subcommittees composed of members of the parent committee may be established as needed with the approval of the WTC Program Administrator. The subcommittees must report back to the parent committee and do not provide advice or work products directly to the WTC Program Administrator or HHS. The HHS Committee Management Officer will be notified upon establishment of each subcommittee and will be provided information on its name, membership, functions, and estimated frequency of meetings.

Recordkeeping.

The records of the Advisory Committee and established subcommittees of the committee shall be managed in accordance with General Records Schedule 6.2, Federal Advisory Committee Records or other approved agency records disposition schedule. These records shall be available for public inspection and copying, subject to the Freedom of Information Act, 5 U.S.C. § 552.

Filing Date.

May 12, 2021

Approved:

Kalwant Smagh

Date: 2021.04.30 08:21:37 -04'00'

Date Director

Strategic Business Initiatives Unit