World Trade Center Health Program Scientific/Technical Advisory Committee

February 9, 2023

Administrator's Opening Remarks

Good morning and welcome to the 14th meeting of the **Scientific/Technical Advisory Committee** for the World Trade Center Health Program. I want to thank each of you for taking time from your busy schedules to participate in the Committee and to offer your advice about the Administrator's charge to the Committee.

I want to welcome the members who are returning to the Committee: Dr. Gulati, Dr. Markowitz, and Dr. Talaska. I also want to extend a warm welcome to our new members: Dr. Comiskey, Dr. Gaitens, and Indrina Kanth.

In December of 2022, Congress passed the 9/11 Responder and Survivor Health Funding Correction Act as part of the FY 2023 Omnibus Appropriations spending bill. The Funding Correction Act provides one billion dollars in supplemental funds for the World Trade Center Health Program.

Recently, the Program experienced several transitions in the patient care delivery contracts, including a new contract administrator of the Nationwide Provider Network, and a new pharmacy benefit manager. Commander Brittany Rizek will provide an overview of the state of the World Trade Center Health Program, including the implementation of these two new contracts.

In addition, Dr. Travis Kubale will provide an update on the Program's research portfolio and new initiatives that the Program has put in place to disseminate research findings to program members, clinicians and other stakeholders.

Recently, we partnered with the David J. Sencer CDC Museum to launch *Health Effects of 9/11*, an online exhibition devoted to raising awareness about the ongoing health effects linked to 9/11 exposures and telling the stories of those impacted. I invite you to visit the exhibition by following the link that Travis will provide.

Following this Committee's recommendation to add uterine cancer to the List of WTC-Related Health Conditions eligible for coverage by the World Trade Center Health Program, the final rule adding all types of uterine cancer including endometrial cancer to the List was published in the *Federal Register* on January 18, 2023.

Program members with certified uterine cancer can receive treatment covered by the Program at no out-ofpocket cost on and after January 18, 2023. Commander Hannah Dupont will provide the Committee an overview of the status of uterine cancer coverage by the Program.

Finally, I seek your recommendation regarding changes to the *Policy and Procedures for Adding Non-Cancer Health Conditions to the List of WTC-Related Health Conditions*.

As you are aware, when adding a health condition to the List, the Administrator may take a range of actions as a result of the Science Team's evaluation of the evidence. In general, such actions depend on the weight of evidence supporting a causal association between the health condition in question and exposures to 9/11 Agents.

In preparing their evaluation of the evidence for the Administrator, the Science Team categorizes the weight of evidence pertaining to the non-cancer health condition in one of five evidentiary categories: (1) substantial likelihood, (2) high likelihood, (3) limited likelihood, (4) inadequate likelihood, and (5) no likelihood.

The proposed changes to the Non-Cancer Policy & Procedures clarify the weight of evidence categories and thresholds for Administrator actions. These changes are substantive, and in accordance with the Zadroga Act, I request the STAC's input. Dr. Robert Daniels will present an overview of the Policy and Procedures for Adding Non-Cancer Health Conditions to the List and will describe the proposed changes to you in detail.

Pursuant to the Zadroga Act, I am asking the Committee to "review and evaluate" the revised *Policy and Procedures for Adding Non-Cancer Health Conditions to the List of WTC-Related Health Conditions*. Specifically, I seek your advice on two questions:

- 1. Does the revised language under Section IV.B. of the Policy and Procedures for Adding Non-Cancer Health Conditions to the List of WTC-Related Health Conditions adequately clarify the five weight-ofevidence categories used for grading a causal association by the Science Team?
- 2. Are the evaluation criteria established for each weight-of-evidence category clearly defined, reasonable, and appropriately linked to an action?

I am looking forward to receiving your advisory recommendations from today's meeting.

Thank you again for your service on the Committee and have a good meeting.

John Howard, M.D. Administrator