

119TH CONGRESS
1ST SESSION

S. 739

To amend title XXXIII of the Public Health Service Act with respect to flexibility and funding for the World Trade Center Health Program.

IN THE SENATE OF THE UNITED STATES

FEBRUARY 26, 2025

Mrs. GILLIBRAND (for herself and Mr. SCHUMER) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend title XXXIII of the Public Health Service Act with respect to flexibility and funding for the World Trade Center Health Program.

1 *Be it enacted by the Senate and House of Representa-
2 tives of the United States of America in Congress assembled,*

3 SECTION 1. SHORT TITLE.

4 This Act may be cited as the “9/11 Responder and
5 Survivor Health Funding Correction Act of 2025”.

1 **SEC. 2. FLEXIBILITY FOR MENTAL HEALTH CONDITION**

2 **CERTIFICATIONS UNDER THE WORLD TRADE**

3 **CENTER HEALTH PROGRAM.**

4 (a) IN GENERAL.—Section 3305(a) of the Public
5 Health Service Act (42 U.S.C. 300mm-4(a)) is amend-
6 ed—

7 (1) in paragraph (1)(A), by inserting “subject
8 to paragraph (6),” before “for”; and

9 (2) by adding at the end the following:

10 “(6) LICENSED MENTAL HEALTH PROVIDER
11 FLEXIBILITY FOR MENTAL HEALTH CONDITION CER-
12 TIFICATIONS.—

13 “(A) IN GENERAL.—For purposes of an
14 initial health evaluation described in paragraph
15 (1)(A) with respect to a mental health condition
16 (including any such evaluation provided under
17 section 3321(b) or through the nationwide net-
18 work under section 3313), such evaluation may
19 be conducted by a physician or any other li-
20 censed mental health provider in a category of
21 mental health providers determined by the
22 WTC Program Administrator under subpara-
23 graph (B).

24 “(B) CATEGORIES OF LICENSED MENTAL
25 HEALTH PROVIDERS.—Not later than 180 days
26 after the date of enactment of the 9/11 Re-

1 sponder and Survivor Health Funding Correc-
2 tion Act of 2025, the WTC Program Adminis-
3 trator shall issue regulations for the categories
4 of licensed mental health providers who, in ad-
5 dition to licensed physicians, may conduct eval-
6 uations under subparagraph (A) with respect to
7 a mental health condition and make determina-
8 tions under section 3312(b) with respect to
9 such a condition.”.

10 (b) FLEXIBILITY FOR WTC RESPONDERS.—Section
11 3312(b) of such Act (42 U.S.C. 300mm–22(b)) is amend-
12 ed—

13 (1) in paragraph (1)(A)—

14 (A) in the matter preceding clause (i), by
15 striking “physician” and inserting “physician
16 (or, in the case of a mental health condition, a
17 physician or any other qualified mental health
18 provider)”; and

19 (B) in clause (i), by striking “physician”
20 and inserting “physician or other qualified men-
21 tal health provider”;

22 (2) in paragraph (2)—

23 (A) in subparagraph (A)—

24 (i) in the matter preceding clause (i),
25 by striking “physician” and inserting

1 “physician (or, in the case of a mental
2 health condition, a physician or any other
3 qualified mental health provider)”;

4 (ii) in clause (i), by striking “physi-
5 cian” and inserting “physician or other
6 qualified mental health provider”; and

7 (iii) in clause (ii), by striking “such
8 physician’s determination” and inserting
9 “the determination of such physician or
10 other qualified mental health provider”;
11 and

12 (B) in subparagraph (B)—

13 (i) in the matter preceding clause (i),
14 by striking “physician determinations” and
15 inserting “determinations by physicians
16 (or, in the case of a mental health condi-
17 tion, physicians or other qualified mental
18 health providers)”; and

19 (ii) in clause (i), by striking “physi-
20 cian panel” and inserting “panel of physi-
21 cians (or, in the case of a mental health
22 condition, physicians or other qualified
23 mental health providers)”;

24 (3) in paragraph (5), by striking “examining
25 physician” and inserting “examining physician (or,

1 in the case of a mental health condition, examining
2 physician or other qualified mental health pro-
3 vider); and

4 (4) by adding at the end the following:

5 “(6) DEFINITION OF ‘QUALIFIED MENTAL
6 HEALTH PROVIDER’.—For purposes of this sub-
7 section, the term ‘qualified mental health provider’
8 means a licensed mental health provider in a cat-
9 egory determined by the WTC Program Adminis-
10 trator under section 3305(a)(6)(B).”.

11 **SEC. 3. CRITERIA FOR CREDENTIALING HEALTH CARE
12 PROVIDERS PARTICIPATING IN THE NATION-
13 WIDE NETWORK.**

14 Title XXXIII of the Public Health Service Act (42
15 U.S.C. 300mm et seq.) is amended—

16 (1) in section 3305(a)(2) (42 U.S.C. 300mm-
17 4(a)(2))—

18 (A) in subparagraph (A)—

19 (i) by striking clause (iv); and

20 (ii) by redesignating clauses (v) and

21 (vi) as clauses (iv) and (v), respectively;

22 (B) by striking subparagraph (B); and

23 (C) by redesignating subparagraphs (C)
24 and (D) as subparagraphs (B) and (C), respec-
25 tively; and

4 SEC. 4. CLARIFYING CALCULATION OF ENROLLMENT.

5 (a) RESPONDERS.—Section 3311(a) of such Act (42
6 U.S.C. 300mm-21(a)) is amended by adding at the end
7 the following:

8 “(6) DECEASED WTC RESPONDERS.—An indi-
9 vidual known to the WTC Program Administrator to
10 be deceased shall not be included in any count of en-
11 rollees under this subsection or section 3351.”.

12 (b) SURVIVORS.—Section 3321(a) of such Act (42
13 U.S.C. 300mm–31(a)) is amended by adding at the end
14 the following:

15 “(5) DECEASED WTC SURVIVORS.—An individual known to the WTC Program Administrator to
16 be deceased shall not be included in any count of
17 certified-eligible survivors under this section or in
18 any count of enrollees under section 3351.”.

20 SEC. 5. TIME PERIOD FOR ADDING HEALTH CONDITIONS
21 TO LIST FOR WTC RESPONDERS.

22 Section 3312(a)(6) of the Public Health Service Act
23 (42 U.S.C. 300mm-22(a)(6)) is amended—
24 (1) in subparagraph (B), by striking “90” and
25 inserting “180”; and

**3 SEC. 6. FUNDING FOR THE WORLD TRADE CENTER HEALTH
4 PROGRAM.**

5 (a) IN GENERAL.—Section 3351 of the Public Health
6 Service Act (42 U.S.C. 300mm–61) is amended—

(1) in subsection (a)(2)(A), by amending clause
(xi) to read as follows:

9 “(xi) for each of fiscal years 2026
10 through 2090—

“(I) the amount determined under this subparagraph for the previous fiscal year multiplied by 1.07; multiplied by

24 (2) in subsection (c)—

25 (A) in paragraph (4)—

(i) by amending subparagraph (A) to
read as follows:

3 “(A) for fiscal year 2025, the amount de-
4 termined for such fiscal year under this para-
5 graph as in effect on the day before the date of
6 enactment of the 9/11 Responder and Survivor
7 Health Funding Correction Act of 2025;”;

(ii) by amending subparagraph (B) to
read as follows:

10 “(B) for fiscal year 2026, the greater of—

“(i) the amount determined for such fiscal year under this paragraph as in effect on the day before the date of enactment of the 9/11 Responder and Survivor Health Funding Correction Act of 2025; or

16 “(ii) the amount expended for the pre-
17 vious fiscal year for the purposes described
18 in this paragraph increased by 25 percent;
19 and”; and

25 (B) in paragraph (5)—

(i) by amending subparagraph (A) to
read as follows:

3 “(A) for fiscal year 2025, the amount de-
4 termined for such fiscal year under this para-
5 graph as in effect on the day before the date of
6 enactment of the 9/11 Responder and Survivor
7 Health Funding Correction Act of 2025;”;

(B) as subparagraph (C);

10 (iii) by inserting after subparagraph
11 (A) the following:

12 “(B) for fiscal year 2026, the greater of—

13 “(i) the amount determined for such
14 fiscal year under this paragraph as in ef-
15 fect on the day before the date of enact-
16 ment of the 9/11 Responder and Survivor
17 Health Funding Correction Act of 2025; or

18 “(ii) the amount expended for the pre-
19 vious fiscal year for the purpose described
20 in this paragraph increased by 25 percent;
21 and”; and

22 (iv) in subparagraph (C), as so redes-
23 ignated, by striking “the amount specified
24 under this paragraph for the previous fis-
25 cal year” and inserting “the amount ex-

1 pended for the previous fiscal year for such
2 purpose”.

3 (b) TECHNICAL AMENDMENTS.—Title XXXIII of the
4 Public Health Service Act (42 U.S.C. 300mm et seq.) is
5 amended—

6 (1) in section 3352 (42 U.S.C. 300mm–62), by
7 amending subsection (d) to read as follows:

8 “(d) REMAINING AMOUNTS.—Amounts remaining in
9 the Supplemental Fund shall revert to the Treasury in ac-
10 cordance with section 1552 of title 31, United States
11 Code.”;

12 (2) in section 3353 (42 U.S.C. 300mm–63), by
13 amending subsection (d) to read as follows:

14 “(d) REMAINING AMOUNTS.—Amounts remaining in
15 the Special Fund shall revert to the Treasury in accord-
16 ance with section 1552 of title 31, United States Code.”;

17 and

18 (3) in section 3354 (42 U.S.C. 300mm–64), by
19 amending subsection (d) to read as follows:

20 “(d) REMAINING AMOUNTS.—Amounts remaining in
21 the Pentagon/Shanksville Fund shall revert to the Treas-
22 ury in accordance with section 1552 of title 31, United
23 States Code.”.

1 **SEC. 7. REPORT TO CONGRESS.**

2 (a) IN GENERAL.—Not later than 3 years after the
3 date of enactment of this Act, the Secretary of Health and
4 Human Services (referred to in this section as the “Sec-
5 retary”) shall conduct an assessment of anticipated budg-
6 et authority and outlays of the World Trade Center Health
7 Program (referred to in this section as the “Program”)
8 through the duration of the Program and submit a report
9 summarizing such assessment to—

10 (1) the Speaker and minority leader of the
11 House of Representatives;

12 (2) the majority and minority leaders of the
13 Senate;

14 (3) the Committee on Health, Education,
15 Labor, and Pensions and Committee on the Budget
16 of the Senate; and

17 (4) the Committee on Energy and Commerce
18 and the Committee on the Budget of the House of
19 Representatives.

20 (b) INCLUSIONS.—The report required under sub-
21 section (a) shall include—

22 (1) a projection of Program budgetary needs on
23 a per-fiscal year basis through fiscal year 2090;

24 (2) a review of Program modeling for each of
25 fiscal years 2017 through the fiscal year prior to the
26 fiscal year in which the report is issued to assess

1 how anticipated budgetary needs compared to actual
2 expenditures;

3 (3) an assessment of the projected budget au-
4 thority and expenditures of the Program through fis-
5 cal year 2090; and

6 (4) any recommendations of the Secretary to
7 make changes to the formula under section
8 3351(a)(2)(A) of the Public Health Service Act (42
9 U.S.C. 300mm-61(a)(2)(A)), as amended by section
10 6(a)(1), to fully offset anticipated Program expendi-
11 tures through fiscal year 2090.

