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BYRD PROMOTES BLACK LUNG BENEFITS FOR COAL MINERS

Secures provision in Senate health care bill to aid widows of victims of black lung disease

In remarks delivered by his senior staff at the National Mine Health and Safety Academy in Beckley, Senator Robert C. Byrd, D-W.Va. congratulated the new Assistant Secretary of Labor for Mine Safety and Health for moving forcefully to “end black lung – period,” and to promulgate new stricter rules pertaining to respirable coal dust and silica enforcement, as well as seeking improvements in fire suppression, roof controls and other safety concerns in our Nation’s coal mines.

Byrd, as the senior member of the Senate Appropriations Committee, has been instrumental in increasing the coal enforcement budget of the federal Mine Safety and Health Administration (MSHA) by more than one-third following the Sago mining disaster in January 2006 -- from $115 million in Fiscal Year 2005 to $159 in the Fiscal Year 2010 Department of Labor appropriations bill which is pending before the full Senate. Byrd has also included an additional $4 million in the past two Department of Labor appropriations bills for increased dust inspections by MSHA to help prevent black lung disease.

It was also announced that Byrd has secured provisions in the Senate health care bill that is currently being debated on the Senate floor that would improve the Federal Black Lung Program. For the thousands of West Virginians relying on federal black lung benefits, Byrd’s provisions will ensure that the dependent widows and survivors of those black lung beneficiaries will continue to receive benefits even after the death of the miner. By requiring coal companies to provide stronger evidence when attempting to prove that totally disabling lung disease in older coal miners was caused by smoking or other factors unrelated to mining, the provisions Byrd included “will offer a helping hand to miners and their widows during the costly and complex process of applying for benefits.”

“Equitable access to benefits is absolutely necessary – but prevention must remain paramount. The incidence of black lung finally reached an all-time low during the 1990s, thanks to the longstanding leadership of the Mine Safety and Health Administration, many coal miners, physicians, and other advocates. Although the incidence of black lung disease has rebounded recently, I believe that, together with our continued commitment, we can reverse course. We can and must ‘end black lung,’ and move the vital work of coal-mining to a healthier, brighter future,” Byrd’s remarks concluded.

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