



**Hospital Preparedness Program (ASPR)
FY 2019 Labor HHS Appropriations Bill**

	FY2017	FY2018	FY2019 President's Request	FY2019 TFAH
Hospital Preparedness Program (ASPR)	\$255,500,000	\$264,555,000	\$255,000,000	\$474,000,000

Hospital Preparedness Program (ASPR)

Background: The Hospital Preparedness Program (HPP), administered by the Assistant Secretary for Preparedness and Response (ASPR), provides funding and technical assistance to every state and territory to prepare the health system to respond to and recover from a disaster. HPP is the only source of federal funding for these efforts. HPP is building the capacity of healthcare coalitions (HCCs) - regional collaborations between healthcare organizations, providers, emergency managers, public sector agencies, and other private partners - to meet the disaster healthcare needs of communities. HPP builds resilience in the healthcare delivery system by increasing their ability to operate and provide care during a disaster, saving lives and ensuring the earliest possible recovery of the system.

Healthcare coalitions' roles include coordination and planning, conducting exercises and trainings, providing information and situational awareness across the system, sharing resources, and leading scenario planning. The grants support 476 healthcare coalitions with 28,000 participating facilities from across the health system, a 63 percent increase from 2012. ASPR supports coalitions and their members to develop preparedness and response capabilities in four key domains: foundation for healthcare and medical readiness; healthcare and medical response coordination; continuity of healthcare services delivery; and medical surge.

Impact: HPP is the only source of federal funding for regional health system preparedness, minimizing the need for supplemental state and federal resources during a disaster. HPP helps the healthcare system save lives in major events in ways such as effectively sharing resources, distributing patients, and situational awareness and information sharing.

Recent events have shown the program's impact:

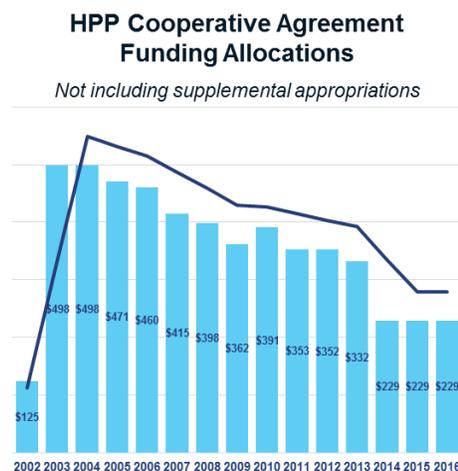
- **Republican National Convention (RNC) preparedness:** HPP helps regions prepare for major events. The Northeast Central Ohio Regional Healthcare Coalition is a network of hospitals, EMS, public health departments and emergency management services that work together to prepare for disasters. With thousands of tourists and media personnel congregating in Cleveland for the 2016 RNC, the HCC coordinated with 27 hospitals and facilities throughout the state to prepare for a surge of patients, if needed. The HCC

communicated daily to share information, ensure inventories of equipment and blood, and update hospital bed availability.¹

- **Pennsylvania Train Derailment:** During the 2015 Pennsylvania Amtrak derailment, more than 200 people were transported to area hospitals with injuries. The Pennsylvania Department of Health and regional healthcare coalitions coordinated to ensure coalition members had needed medical equipment and supplies, real-time information, communication systems, and appropriate personnel. HPP-supported systems enabled an incident command structure, sent out notifications of emergency room capacity to coalition members within a half hour, tracked and triaged patients, moved personnel to sister facilities, and distributed patients to regional hospitals.²
- **Mississippi Tornado:** In 2014, a tornado ripped through rural Winston County, MS, significantly damaging Winston Medical Center, requiring evacuation of 40 hospital patients, 112 nursing home residents and 100 new patients injured by the tornado. Relying on coalition partners and a state-wide, web-based resource tracking tool, hospital personnel and the Mississippi State Department of Health Disaster Team ensured safe transport of patients, including a record of care, to other nearby facilities.³

HPP appropriations have been cut in half from \$514 million in FY03 to \$255 million in FY17, including a \$100 million cut – one-third – in FY14. ASPR’s analysis found that funding reductions have resulted in capabilities taking longer to achieve and an inability to sustain the progress that has been made, and the National Health Security Preparedness Index finds that healthcare delivery remains an area of vulnerability.⁴ Given the criticality of HPP’s funding to key preparedness activities, impacts of future budget cuts to HPP would have direct effects on both awardee’s and HCC’s abilities to perform and sustain essential health care system preparedness and response activities.

Recommendation: TFAH recommends \$474 million for FY19 for HPP to help rebuild the program from years of underfunding, the amount authorized in 2006. FY17 marked the beginning of the new project period, which shifted the focus of the program from supporting establishment of healthcare coalitions to ensuring they are ready to respond to emergencies. HHS also anticipates the new emergency preparedness rule from the Centers for Medicare and Medicaid Services could result in 50,000 new HCC members, and adequate funding is needed to ensure successful implementation and oversight of the program.



¹ HHS, “HPP in Action: Republican National Convention.”
<https://www.phe.gov/Preparedness/planning/hpp/events/Pages/rnc.aspx>

² HHS, “HPP in Action: Amtrak Train Derailment, Philadelphia, PA.”
<http://www.phe.gov/Preparedness/planning/hpp/events/Pages/amtrak-derailment.aspx>

³ Mississippi Hospital Preparedness Program press release, “Winston: An Emergency Preparedness’ Success Story.”
http://www.mhanet.org/Images/aWebDocuments/PDFs/Emergency%20Prep/PR_Winston.pdf

⁴ National Health Security Preparedness Index, www.nhspi.org.