



AMERICA'S
ESSENTIAL
HOSPITALS

Statement for the Record Committee on Energy and Commerce

Markup of H.R. 6378, Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2018

July 18, 2018

America's Essential Hospitals appreciates the opportunity to submit a statement for today's markup of the Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2018. We appreciate your efforts to ensure adequate funding for hospitals preparing for and responding to public health threats and emergencies. Below, we outline the unique role essential hospitals play as first responders and facilities well-positioned for a coordinated regional response.

America's Essential Hospitals is the leading association and champion for hospitals and health systems dedicated to providing high-quality care to all. Filling a vital role in their communities, our 325 member hospitals provide a disproportionate share of the nation's uncompensated care and devote about 40 percent of their inpatient and outpatient care to Medicaid or uninsured patients. Through their integrated health systems, members of America's Essential Hospitals offer primary care through quaternary care, outpatient care in ambulatory clinics, public health services, mental health and substance abuse services, and wraparound services vital to disadvantaged patients.

Essential hospitals form a critical part of the nation's emergency health care infrastructure by providing trauma services, teaching disaster readiness, coordinating preparedness efforts, and offering specialty services, such as poison and burn centers. As you develop legislation to give hospitals the funding support they need to keep communities safe, we welcome the opportunity to further discuss the unique role essential hospitals play in preparing for, responding to, and monitoring public health emergencies and threats.

ESSENTIAL HOSPITALS AS FIRST RESPONDERS

Members of America's Essentials Hospitals are on the front lines of public health emergency response in their communities, providing vital care to all in their trauma centers, burn units, and emergency departments. While our members represent about 6 percent of all U.S. hospitals, they

operate 35 percent of all level I trauma centers and 38 percent of all burn-care beds.¹ Due to their commitment to high-quality health care for all, regardless of social and financial status, our member hospitals often are the first site of care for those affected by or treated in response to a public health emergency. Our members provide a significant volume of public health and emergency preparedness services and do so while preserving quality of care and the integrity of the health care system.

In many cases, essential hospitals serve as their city or county emergency command center, and they have worked to build partnerships with local services and emergency preparedness teams to enhance coordination across an affected region. During outbreaks and public health threats, our members draw on these partnerships with public health departments, law enforcement, emergency medical services, and other community providers to ensure the readiness and swift activation of response systems. In recognition of their ability to enhance coordination and regional response, three members of America's Essential Hospitals in 2015 were named regional treatment centers for patients with the Ebola virus and other highly infectious diseases. The U.S. Department of Health and Human Services selected the facilities that would serve as treatment centers, and its Office of Assistant Secretary for Preparedness and Response awarded funding to these facilities to enhance their ability to care for patients and manage outbreaks.

As trusted providers for all, essential hospitals have seen firsthand how public health emergencies can affect individuals and their surrounding communities. When facing a grave threat—from an influenza outbreak to a hurricane to an Ebola scare—communities turn to essential hospitals in times of emergency. As a result, our members play an integral role in the nation's preparedness efforts, and they offer specialized inpatient and emergency services not available elsewhere in their communities.

RESOURCE NEEDS FOR RESPONSE

Functioning health care systems are critical to their communities during emergencies. The services essential hospitals offer are vital in emergency response efforts nationwide. Essential hospitals, many of which are level I trauma centers, must remain well-prepared and funded to protect the patients and communities they serve.

Infrastructure is an extremely important aspect of emergency response, as well as the testing and running of drills. Essential hospitals have dedicated already limited resources to maintaining systems for preparedness and participating in specialized training. For example, essential hospital leaders and employees have attended Federal Emergency Management Agency training on emergency management and incident command, in addition to emergency exercises and training on decontamination. Further, many of our members have fully staffed command centers for dealing with a broad variety of issues, from weather-related disasters to terrorist attacks and mass shootings, as well as public health emergencies. This enables the hospital to strategically and methodically tackle problems while maintaining standard operating procedures.

But funding shortfalls pose consistent and significant obstacles for essential hospitals. Our members operate with an average margin less than half that of other U.S. hospitals, and they often do not recoup the costs associated with their response to emergencies that affect not only their hospital directly, but their surrounding communities.

¹ Clark D, Roberson B, Ramiah K. Essential Data: Our Hospitals, Our Patients—Results of America's Essential Hospitals 2016 Annual Member Characteristics Survey. America's Essential Hospitals. June 2018. www.essentialdata.info/. Accessed July 18, 2018.

Funding for the Hospital Preparedness Program (HPP) and other preparedness programs, and the prioritization of HPP grants to essential hospitals, is necessary. Since its inception under the Pandemic and All-Hazards Preparedness Act (PAHPA), the HPP has provided critical funding and support for hospitals during public health crises. When the program was first created, its funding level was at its highest: \$515 million per fiscal year. Since then, HPP funding authorization has dropped to approximately \$375 million, and the program currently is funded at only \$255 million per fiscal year. America's Essential Hospitals supports restoring HPP funding to its original level of \$515 million for each fiscal year.

MEETING WORKFORCE NEEDS

Workforce shortages strain the ability of essential hospitals to provide adequate medical evaluation and care during events that cause spikes in patient volume. Medical surge capacity not only refers to the direct patient care needed during the emergency, but to other tasks, such as extensive laboratory studies or epidemiological investigations.

We support efforts to meet public health emergency workforce needs. Targeting state and local workforce shortages is one of the best ways to ensure care is available for individuals and families before, during, and after a public health emergency. Bolstering the presence of the Medical Reserve Corps in areas hit hard by a public health emergency and that face the most significant shortages of health professionals offers an excellent tool to meet the needs of those affected by an emergency. Congress must ensure the availability and seamless activation of trained professionals in advance of a public health emergency.

UNDERSTANDING THE NEEDS OF AT-RISK INDIVIDUALS

We urge policymakers to consider the disproportionate share of at-risk populations essential hospitals treat when considering the resources needed to assist these populations during an emergency. These patients include those who have disabilities, come from diverse cultures, speak limited or no English, lack transportation, face chronic conditions, or struggle with pharmacological dependency.

The definition of "at-risk" populations should encompass a variety of risk factors—both clinical and social—to improve existing planning and response efforts for this population. For example, at-risk populations will need access to medications to support ongoing and chronic health needs (e.g., opioids, HIV treatment) during an emergency. Also, there are post-event considerations for at-risk individuals, such as mental health monitoring and treatment. We urge the committee to direct resources to hospitals to support care before, during, and after an emergency for at-risk individuals with diverse needs.

Overall, we urge the committee to provide adequate and sustained funding for hospitals that deliver trauma care, emergency preparedness, health care workforce training, and other communitywide services to all, including people who face financial hardships.

Thank you for giving us the opportunity to submit our statement on the Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2018. We look forward to working together in the coming weeks. If you have questions, please contact Interim Director of Legislative Affairs Amanda Walsh at awalsh@essentialhospitals.org or 202-585-0551.

