



Hospital Preparedness Program / Health Care Readiness and Recovery (HCRR)
Administration for Strategic Preparedness and Response (ASPR)
Public Health & Social Services Emergency Fund (PHSSEF)
FY 2024 Labor HHS Appropriations Bill

| | FY2022 | FY2023 | FY2024 President's Request | FY 2024 TFAH |
|--------------------------------------|---------------|---------------|---|-------------------------|
| Hospital Preparedness Program (ASPR) | \$295,500,000 | \$305,000,000 | \$312,005,000 | \$500,000,000 |

Background: The tremendous strain that the COVID-19 pandemic has placed on America’s healthcare system was long predicted by health security experts. While our nation has made progress in preparing the healthcare system for localized emergencies, a nationwide pandemic exposed longstanding gaps in healthcare preparedness. The Health Care Readiness Portfolio, administered by the Administration for Strategic Preparedness and Response (ASPR) at HHS, supports the readiness of the health care delivery system for emergencies. The foundation for this state of readiness is the Hospital Preparedness Program (HPP), which provides funding and technical assistance to 62 health departments in all states, U.S. territories, freely associated states, and in Los Angeles County, Chicago, New York City, and Washington, D.C. to prepare the health system to respond to and recover from a disaster. HPP builds resilience in the healthcare delivery system by increasing its ability to operate and provide care during a disaster, saving lives and ensuring the earliest possible recovery of the system. The funding line that supports HPP also supports other related initiatives within the broader portfolio that support healthcare readiness, such as the Regional Disaster Health Response System (RDHRS) and the National Special Pathogen System (NSPS).

Impact: ASPR’s Health Care Readiness Portfolio is the primary source of federal funding for regional health system preparedness, minimizing the lag in response and need for supplemental state and federal resources during most health emergencies. HPP is a fundamental component of that portfolio and supports the development of healthcare coalitions (HCCs) – sub-state regional collaborations between healthcare organizations, emergency management, public health agencies, emergency medical services, and other private partners – to increase medical surge capacity, coordinate resource allocation, and leverage strong partnerships across the healthcare continuum during an emergency. As of June 30, 2022, the cooperative agreements support 318 HCCs with 47,028 participating entities from across the health system, including 91 percent of all U.S. acute care hospitals and 98 percent of public health agencies.¹ Meaningful participation by healthcare facilities in coalitions means that when disaster strikes, systems are in place to coordinate the response. These systems support managing patient movement, communicating situational awareness, and providing resource-sharing across disparate healthcare entities to maintain clinical care delivery and enable the healthcare system to save lives and protect

¹Fiscal Year 2021/Budget Period 3 data collected by ASPR National Healthcare Preparedness Programs (NHPP) Branch.

Americans. HHS has found that HCCs are making progress on enhancing their Health Care Preparedness and Response Capabilities² – what the healthcare delivery system must do to effectively prepare for and respond to emergencies – but gaps remain.³

During the tremendous challenges of the pandemic, ASPR has provided resources, technical assistance, and information sharing across HCCs to improve readiness for patient surges. The HPP cooperative agreement served as the foundation for COVID-19 funding for HCCs, which was used to help coalitions ramp up their response to the pandemic as well as concurrent disasters.⁴ Since the shooting in Uvalde, TX in May 2022, a Texas health care coalition, the Southeast Texas Regional Advisory Council (SETRAC), has partnered with emergency response partners and regional health care partners to hold over 1,000 mass casualty response trainings, exercises, and drills, saving lives and teaching emergency response to communities across the southeast region of Texas.

In addition to the HPP cooperative agreement, ASPR’s Health Care Readiness Portfolio also includes the National Special Pathogen System (NSPS), which seeks to provide a coordinated, equitable, and standardized system of care for patients suspected of, or infected with, a special pathogen, similar to other national systems of care (e.g., the national trauma system). The NSPS includes the National Emerging Special Pathogens Training and Education Center (NETEC), a consortium of three academic medical centers that acts as a national hub for the other components of the NSPS, 13 Regional Emerging Special Pathogen Treatment Centers (RESPTCs), which act as regional hubs for special pathogen readiness and provide resources for patient care and clinical operations among the region’s health care organizations; 55 state and jurisdiction Special Pathogen Treatment Centers (SPTCs), which received COVID-19 emergency supplemental funding as sub-recipients of the 62 HPP recipients; and 53 hospital associations, which used COVID-19 emergency supplemental funding to support the provision of special pathogen care at the state and local levels. Through the portfolio, ASPR also manages the Regional Disaster Health Response System (RDHRS), which directly supports four regional partnerships to develop and disseminate innovative practices in coordinating disaster readiness and surge capacity at the regional level. These sites are intended to collaborate with HCCs and other partners to identify gaps in patient care affected by emergencies, expand specialty care expertise, and coordinate medical response across jurisdictions.⁵

Appropriations for ASPR’s Health Care Readiness Portfolio have been cut nearly in half from \$515 million in FY 2003 to \$305 million in FY 2023, or 62 percent when accounting for inflation. Even before the pandemic, the National Health Security Preparedness Index found that healthcare delivery remained a nationwide area of vulnerability.⁶ In 2019, HHS identified surge capacity, access to specialty care, healthcare situational awareness, health system readiness and

² 2017-2022 Health Care Preparedness and Response Capabilities, <https://www.phe.gov/Preparedness/planning/hpp/reports/Documents/2017-2022-healthcare-pr-capabilities.pdf> Note: Currently, ASPR is updating the Health Care Preparedness and Response Capabilities to reflect new insights.

³ PHSSEF CJ FY22.

⁴ HHS. COVID-19 Supplemental Funding Overview. <https://www.phe.gov/emergency/events/COVID19/HPP/Pages/overview.aspx>

⁵ Regional Disaster Health Response System Report to Congress. HHS, 2020. <https://www.phe.gov/Preparedness/planning/RDHRS/Documents/RDHRS-RTC.pdf>

⁶ National Health Security Preparedness Index, [NHSPI 2020 Key Findings.pdf](#)

patient transport and tracking as key priorities for improvement. The COVID-19 pandemic demonstrated how critical these gaps can be during a widespread, high-impact event.

Recommendation: TFAH recommends \$500 million for FY 2024 for HPP to help rebuild the program from years of underfunding. The increases would be used for:

- Increased funding to the HPP cooperative agreement, based on the current formula. Such increases have a larger impact on states with smaller public health budgets. The drastic cuts experienced by the program have led to decreased capacity and a wide variation in capabilities from state to state.
- Building capacity of HPP recipients and their HCC subrecipients and healthcare partners to be more adequately prepared for infectious diseases outbreaks, including strengthening HPP coordination with the National Special Pathogen System.
- Addressing major gaps in health system preparedness, such as readiness of emergency medical services and medical transport systems. Effective medical transport is especially a concern in rural areas that have experienced hospital closures in recent years.
- Continuing to fund the Regional Disaster Health Response System sites, which have already helped partnership members address healthcare preparedness challenges in its regional, tiered framework to build a nationwide response system and identifying and scaling healthcare readiness innovations.