

Ready or Not 2026: Protecting the Public's Health from Diseases, Disasters, and Bioterrorism



Utah



State Performance

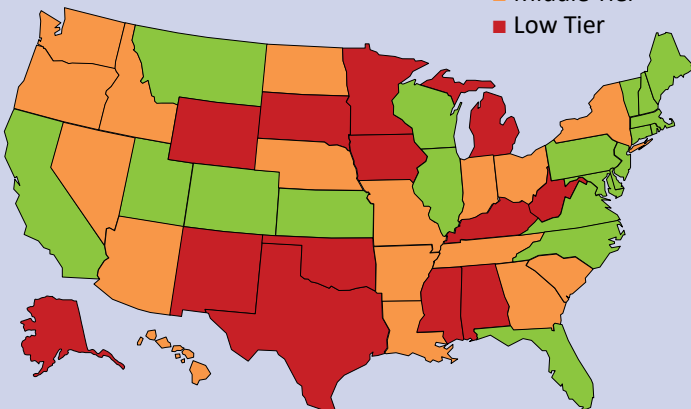
Scoring tier, 2025

High

- ✓ **Nurse Licensure Compact (NLC)**
State participates in NLC, 2025
- ✓ **Public Health Accreditation Board (PHAB)**
Accredited by PHAB, 2025
- ✓ **Emergency Management Accreditation Program (EMAP)**
Accredited by EMAP, 2025
- ✗ **Public Health Lab Capacity**
Public health laboratories had a written plan for a six- to eight-week surge in testing capacity, 2025

2025 State Emergency Preparedness Rankings: High, Middle, and Low

- High Tier
- Middle Tier
- Low Tier



Seasonal Flu Vaccination

39.5%

Seasonal flu vaccination rate for people ages 6 months and older, 2024-25



Patient Safety

60.7%

Percentage of hospitals with "A" grade, fall 2025



Water Security

1.11%

Percent of population who used a community water system in violation of health-based standards, 2024



Paid Sick Leave

87%

Access to Paid Sick Leave by Census Division, 2025



Avoidable Mortality

208

Total avoidable death rate (per 100,000), 2022-23

370

Avoidable death rate gap (per 100,000), 2022-23



State Public Health Funding



Funding change, FY 2024-25

Read the full report at:

<https://www.tfah.org/report-details/ready-or-not-2026>

Priorities for Congressional Action



Congress should provide at least \$11.5 billion for Centers for Disease Control and Prevention (CDC) in FY2027. An estimated 80 percent of CDC's budget goes to external partners, underpinning preparedness for health threats across the country.



Congress should reauthorize the *Pandemic and All-Hazards Preparedness Act*, providing the needed authorities for health emergency preparedness.



Congress should invest in the Public Health Emergency Preparedness program and Hospital Preparedness Program, which support every state and territory to have a baseline level of readiness for disasters.



Congress should support funding and workforce for CDC's National Immunization Program, expand vaccine access for uninsured adults, and conduct oversight of changes to recommended immunization schedules that impact health coverage.



Congress should speed detection and response to emerging threats by supporting public health data modernization, public health infrastructure, advanced molecular detection, and wastewater surveillance.



Congress should create a national standard for job-protected paid sick, family, and medical leave to contain the spread of outbreaks and protect health.



Congress should accelerate medical countermeasures research, development, stockpiling, and distribution for known and unknown threats.



Additional policy recommendations can be found in the report at: <https://www.tfah.org/report-details/ready-or-not-2026>.