



**American Hospital  
Association®**

800 10th Street, NW  
Two CityCenter, Suite 400  
Washington, DC 20001-4956  
(202) 638-1100 Phone  
[www.aha.org](http://www.aha.org)

May 22, 2018

The Honorable Lamar Alexander  
Chairman  
United States Senate  
Committee on Health, Education, Labor & Pensions  
428 Dirksen Senate Office Building  
Washington, DC 20510

The Honorable Patty Murray  
Ranking Member  
United States Senate  
Committee on Health, Education, Labor & Pensions  
428 Dirksen Senate Office Building  
Washington, DC 20510

Dear Chairman Alexander and Ranking Member Murray:

On behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, and our clinician partners – including more than 270,000 affiliated physicians, 2 million nurses and other caregivers – and the 43,000 health care leaders who belong to our professional membership groups, the American Hospital Association (AHA) supports the Senate Health, Education, Labor and Pensions (HELP) Committee’s bipartisan reauthorization of the hospital and public health preparedness programs contained within S. 2852, the Pandemic and All-Hazards Preparedness and Advancing Innovation Act of 2018 (PAHPAI).

America’s hospitals and health systems play a critical role in all types of disaster and public health emergencies, and we share the Committee’s goal of improving our nation’s preparedness and response capabilities and capacities. We support your efforts to innovate with regional health care emergency preparedness and response systems, and provide for demonstrations as these systems are developed. We also support reauthorizing the critical Hospital Preparedness Program (HPP) under the jurisdiction of the Department of Health and Human Services Assistant Secretary for Preparedness and Response. The HPP has supported enhanced planning and response; facilitated the integration of public and private sector emergency planning to increase the preparedness, response and surge capacity of hospitals; and improved state and local infrastructures that help health systems and hospitals prepare for public health emergencies. These investments have contributed to saving lives during many disasters and emergencies.

The lessons of the many catastrophic emergencies and disasters in 2017 alone, including the hurricanes in Texas, Florida and Puerto Rico, the mass shooting in Las Vegas and the wildfires in California, as well as the threats posed by possible chemical, biological, radiological, and nuclear events (including emerging infectious diseases) support the need for a much more significant investment in health care system preparedness. Currently, America’s health care system again focused on Ebola. **We are concerned that the 2.7 percent increase in authorized funding for the HPP contained in S. 2852 may be inadequate to ensure that the health care delivery system is ready to respond to and recover**



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Page Two

**from the ever-changing and growing threats, which hospitals, health care systems and communities face. Instead, we continue to urge the Committee to increase the HPP's authorization level to at least \$515 million for fiscal years 2019 through 2023, representing a more appropriate level of investment in emergency preparedness as threats and risks continue to emerge.**

Further, we note that S. 2852 links HPP funding to the development of the regional health care emergency preparedness and response systems envisioned in Section 203 of the bill. We believe that \$515 million in authorized funding for HPP would reflect Congress' commitment to developing these critical regional health care systems, which need substantial support to be realized.

**In addition, the AHA is disappointed that S. 2852 does not permit in the awarding of HPP funds, hospital associations, academic medical centers, and health systems to compete, alongside the state and directly-funded city public health departments, for being the awardee in each jurisdiction.** Allowing for such competition would allow HPP to fund those entities that present the most innovative approaches to health care delivery system readiness. A second benefit of introducing competition is the potential to address the misalignment between HPP's health care mission and its current awardees' public health mission. While most of the HPP's public health department awardees work well with their private sector health care delivery system counterparts to enhance preparedness and response, others struggle to work collaboratively with the private health care system that they also regulate. With such a change, private health care entities or hospital associations that have the organizational capacity and initiative to lead sector-wide preparedness and response activities would be able to carry out the goals and objectives of the HPP in their state or jurisdictions. **We continue to urge the Committee to support innovation and competition in selecting the most appropriate HPP awardees.**

Thank you for your commitment to health care and all-hazards preparedness. America's hospitals and health systems stand ready to respond during disasters and emergencies. The AHA looks forward to continuing to working with you as this important legislation advances. If you have questions for would like further information, please contact Robyn Bash, vice president, government relations and public policy operations, at [rbash@aha.org](mailto:rbash@aha.org) or 202-626-2672.

Sincerely,

/s/

Thomas P. Nickels  
Executive Vice President