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**CONTACT: Laura Segal, 202-223-9870 x 27 or [lsegal@tfah.org](mailto:lsegal@tfah.org)**

## **TFAH Applauds Sen. Durbin and Rep. Capps for Introducing Legislation to Protect Disaster Victims**

Washington, DC – Trust for America’s Health commends Sen. Richard Durbin (D-Ill.) and Rep. Lois Capps (D-CA 23) for introducing legislation to guarantee emergency treatment for victims affected by a major public health disaster, regardless of their health insurance status or ability to pay. The Public Health Emergency Response Act (PHERA) would ensure every American could seek the medical treatment they need in the immediate aftermath of events such as hurricanes, terrorist attacks, or pandemic flu outbreaks, without being deterred by prohibitive health care costs. Treating compromised individuals protects victims from unnecessary illness or death, guards the general public from contracting communicable diseases, and saves hospitals and localities from operating in the red as they keep up with a sudden surge in demand.

“We know all too well that a public health emergency, such as a natural disaster, biological attack or infectious disease outbreak, could strike at any time,” said Jeff Levi, Executive Director of Trust for America’s Health, a leading non-profit public health advocacy group. “The key is to contain the damage to the public’s health and ensure that victims’ chances of survival are not dependent on their level of health care coverage. Trust for America’s Health applauds Rep. Capps for her leadership on disaster preparedness, and her efforts to ensure that Americans are as safe as possible in the case of a disaster.”

“Whether it was the hurricanes that hit the Gulf Coast, the aftermath of the 9/11 attacks, or the floodwaters in the Midwest, the need for medical services in each of these emergencies was immediate and in some cases dramatic. This bill would make it easier for uninsured victims to seek treatment and would provide coverage to the health care professionals who are treating them,” said Durbin. “This measure will help save lives and ensure a functioning health care system for whatever lies ahead.”

“We only need to look at the September 11th attacks and Hurricanes Katrina and Rita to remind ourselves of the need for rapid access to healthcare services during a public health emergency,” said Rep. Capps, a public health nurse and Vice-Chair of the Energy and Commerce Committee's Subcommittee on Health. “In a hurricane or widespread infectious disease outbreak, no one should hesitate to seek emergency care for themselves or their children because of a fear of medical costs. In a time of acute crisis, the risks are too big to let Americans simply fend for themselves and ask hospitals and localities to pick up the tab.”

PHERA would put into place a framework to provide reimbursement for uncompensated care in the event of a major public health emergency. The plan would allow the Secretary of Health and Human Services to trigger a temporary (90 day) emergency health benefit for uninsured and otherwise qualified individuals affected by a disaster, in the event that the Secretary declares that a public health emergency exists and opts to activate the benefit.

The legislation would clarify who is eligible for this benefit, limit the amount of time for which the benefit would last, and stipulate what providers would be covered. It would not use Medicare, Medicaid or SCHIP funding. The funding mechanism would be the Public Health Emergency Fund, a no-year fund available to the Secretary. The bill authorizes funding for an education campaign about the availability of the benefit, but further funding would not be necessary until Congress appropriated funds during a declared public health emergency.

The temporary benefit established through this bill would help remove a disincentive for uninsured individuals to promptly seek medical care. Any delay in seeking care could result in lives lost, particularly during an infectious disease outbreak when immediate identification and isolation are necessary to limit the spread of disease, and delay in seeking care could render treatment ineffective. By helping to reduce the burden of uncompensated care, PHERA would help ensure the solvency and continuity of our health care system during a catastrophic emergency.

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