



For Immediate Release

Media Contact

March 4, 2013

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Historic PAHPA Reauthorizing Legislation Prioritizing Critical Care Approved in Congress

WASHINGTON, D.C.— With the United States House of Representatives voting to approve the Pandemic and All-Hazards Preparedness Reauthorization Act (PAHPRA) of 2013 this evening, Congress has, for the first time in history, prioritized the nation’s critical care system within federal disaster planning efforts. The final legislation includes three key Roundtable-endorsed provisions within the National Health Security Strategy (NHSS) that collectively will serve to enhance the nation’s ability to care for the critically ill and injured in the aftermath of a public health emergency.

Specifically, the provisions will add the critical care system to the federal government’s medical preparedness and surge capacity goals, thereby ensuring that critical care is included in federal, state and local planning efforts to increase preparedness for public health emergencies. This reauthorization also requires the inclusion of medical surge capacity in the periodic evaluation of the nation’s preparedness capabilities, enabling an efficient and effective medical response during an emergency.

Finally, the approved legislation includes language that requires planning for coordinated medical triage and evacuation to appropriate medical institutions during a public health emergency. This language supports the Roundtable’s past calls for increased planning for patient evacuation in hospitals—including ICUs. PAHPRA’s Roundtable-endorsed provisions were drawn from national preparedness provisions included in the bipartisan Critical Care Assessment and Improvement Act of 2011 (H.R. 971), introduced by then-Congresswoman Tammy Baldwin (D-WI) and Congressman Erik Paulson (R-MN) in the 112th Congress.

Said Paulsen of the reauthorization: “I am pleased to see that the provisions I have been working on with now-Senator Baldwin to help improve our nation’s critical care capabilities are included in this important legislation. This bill will go a long way in helping us become better prepared for public health emergencies and strengthen our nation’s preparedness infrastructure.”

Senator Tammy Baldwin, now a member of the important Senate Health, Education, Labor, & Pensions (HELP) Committee, also remarked in support of today’s PAHPRA legislation, “As you can imagine, when faced with a health emergency such as the recent flu pandemic, the critical care delivery system plays an integral role in our nation’s medical response.” Added Senator Baldwin, “Yet, until now, there has been a lack of focus on critical

care in federal disaster policymaking efforts—despite the demands placed on the critical care delivery system during large-scale emergencies, such as we witnessed during the evacuation of several New York City ICUs during Hurricane Sandy.”

In response to today’s vote in the House, Dr. Brad Poss, Chairman of the Roundtable’s Board of Directors said, “The Roundtable on Critical Care Policy has actively supported this reauthorizing legislation over the course of the last two years for the significant advances it makes to preparedness efforts, and in particular, its recognition that strengthening our critical care infrastructure is an integral component of ensuring our nation’s medical preparedness for a health emergency.” Added Dr. Poss, “We applaud our leaders in Congress for their bipartisan commitment to passing this important piece of legislation.”

The bipartisan PAHPRA, which updates the 2006 Pandemic and All-Hazards Preparedness Act, seeks to protect against pandemics and attacks by reauthorizing programs that provide key resources to states, health departments and hospitals to reinforce preparedness efforts. It strengthens the National Health Security Strategy by expanding disaster readiness and coordination across the health care system, including critical care services.

The Roundtable on Critical Care Policy is a nonprofit advocacy organization that provides a collaborative forum for leaders in critical care and public health to advance a common federal policy agenda to improve the quality, delivery and efficiency of critical care in the United States.

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