HHS emPOWER Program Executive Summary: Shaping Decisions to Protect Health in an Emergency

Why the HHS emPOWER Program is Needed

Advances in technology and health care services have better enabled at-risk individuals with access and functional needs to live independently in their personal homes. Millions of at-risk individuals, particularly those who are chronically ill and aging, rely on electricity-dependent durable medical and assistive equipment (DME) and devices, and or essential health care services to maintain their independence.[1]

Local incidents to large-scale emergencies and disasters can rapidly thrust at-risk individuals into life-threatening situations within hours or days. Many may rapidly seek assistance from emergency medical services or overwhelm hospitals or shelters when seeking access to care or secure power. Others may shelter in place as they are unable to evacuate safely without assistance, putting their lives at risk.

Prior to 2013, public health officials, health care providers, emergency managers, and first responders commonly reported that they did not have access to accurate information that could help them better anticipate, plan for, and respond to the needs of at-risk populations in their communities prior to, during, and after an incident, emergency, or disaster.

What the HHS emPOWER Program Offers

In 2013, ASPR, in partnership with the Centers for Medicare and Medicaid Services (CMS), developed the HHS emPOWER Program to help communities protect the health of at-risk populations living independently, better ensure continuity of care and services, and reduce system stress in the event of a natural or man-made incident, emergency, or disaster. The HHS emPOWER Program uses limited Medicare administrative claims data to provide the right data, in the right tool,

to the right person, at the right time.

Public Health Authorities (PHAs) and their partners can use the data-driven tools to support targeted emergency preparedness, mitigation, response, recovery activities for over 4.5 million at-risk Medicare beneficiaries.

The **HHS emPOWER Map** is a public, interactive map that displays the total number of at-risk Medicare beneficiaries using electricity-dependent DME and devices, and those who rely on a health care service(s) and any electricity-dependent DME and devices at the state, territory, county, major metropolitan areas (MMA), and ZIP Code levels. The **HHS emPOWER Representational State Transfer (REST) Service,** allows Geographic Information System (GIS) users to consume the same map data layer in their own GIS systems.

The **emPOWER AI** tools also provide users with HHS emPOWER Map data and Program information. Community partners can use these tools to gain population-level situational awareness of electricity-dependent populations; anticipate and plan for emergency medical service and hospital surge in advance of an emergency; and inform sheltering and evacuation assistance needs in advance of an emergency.

The **HHS emPOWER Emergency Planning Dataset** provides the monthly total number of Medicare claims for select electricity-dependent DME and devices, and or essential health care services, in a geographic area, down to the ZIP Code level. ASPR provides an updated dataset each month to state, territory, certain MMAs (New York City, Chicago, and Los Angeles County), and the District of Columbia PHAs.

The **HHS emPOWER Emergency Response Outreach Dataset** can be officially requested by PHAs to support life-saving assistance and outreach activities in the event of an incident, emergency, or disaster. It is a secure and restricted tool that contains limited individual-level and health care

provider information. The HHS emPOWER Emergency Response Outreach Dataset has been used to rapidly identify, locate, voluntarily evacuate at-risk individuals, and to help ensure continuity of care by reconnecting them with their health care providers during incidents, emergencies and disasters.

How the HHS emPOWER Program is Expanding

In 2018, ASPR, in partnership with CMS, launched the **emPOWERing State/Territory Medicaid and Children's Health Insurance Plan (CHIP) Data Pilot** in response to requests from states and territories who wanted to develop a similar understanding of pediatric and other adult at-risk populations in their communities. The pilot provides knowledge, tools, and technical assistance to help states and territories create emPOWER datasets using their own state or territory-operated Medicaid and CHIP.

How the HHS emPOWER Program is Helping

PHAs across all fifty states, five territories, three MMAs, and the District of Columbia have used the HHS emPOWER Program tools, in collaboration with their partners, to strengthen emergency preparedness, mitigation, response, and recovery activities across a range of emergency scenarios that include, but are not limited to, severe weather, wildfires, hurricanes, flooding, power outages, winter storms, and critical infrastructure failures.

Over 770,000 community partners and individual users, from rural to urban areas, have used the HHS emPOWER Map and REST Service to plan for and protect the health of electricity and health care-dependent populations in communities across the nation.

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[1] DME and devices includes, but is not limited to, ventilators, oxygen concentrators, intravenous infusion pumps, electric wheelchairs, and cardiac implantable devices.