

**HEALTH AND HUMAN SERVICES (HHS)
AGENCIES RESPONSE TO HURRICANE IKE AND
OTHER DISASTERS**

**Senate Finance Committee
February 3, 2009**

Albert Hawkins, HHSC Executive Commissioner
David L. Lakey, M.D., DSHS Commissioner

PUBLIC HEALTH AND MEDICAL RESPONSE TO DISASTERS

Health and Medical Response

- Part of the overall Texas emergency response efforts under the direction of the Governor's Division of Emergency Management.
- Department of State Health Services is the lead agency for health and medical response.
- Health and human services enterprise effort
 - Coordinating public health and medical services
 - Assisting medical special needs population
 - Provision of water and ice
 - Radiation response

Major Response Activities of 2008

- Hurricane Dolly
- Tropical Storm Edouard
- Hurricane Gustav
- Hurricane Ike

Disaster Response Activities (Pre-Event)

- Working with local partners on planning activities
- Establish Health/Medical Incident Command
- Work with State and Federal partners to secure and preposition needed assets
- Evacuation of State Facilities
 - State schools and hospitals in evacuation zone
 - Assisting with UTMB's evacuation
- Care for individuals with Medical Special Needs (MSN)
 - Coordinating ambulances, air ambulances and other evacuation assets
 - Establishing MSN shelters
 - Placement of MSN individuals into nursing homes
 - Coordinate pharmaceutical support

Disaster Response Activities (Post-Event)

- Reestablishing medical care in disaster site
 - Coordinate federal Disaster Medical Assistance Teams (DMATs)
 - Mobile medical hospital

- Support health care facilities in response area
- Support local public health
 - Assessing public health risks in the community post disaster
 - Monitoring shelter conditions
 - Provision of immunizations
- Disaster behavioral health response
 - Crisis Incident Stress Management
 - Community Services
- Point of Distribution (POD) support
- MSN patient locator call center
- Coordinate the care of the dead
 - Mortuary teams
- Vector control (Mosquitoes)
- Repatriation
- After action evaluation of response

Disaster Public Health Response: *What Went Well*

- Increased EMS capacity for disaster response
- Evacuated MSN individuals from different parts of Texas based on uncertainty of Hurricane Ike’s ultimate landfall
- Use of state-wide MSN evacuees tracking system
- Use of DSHS electronic system to identify hospital bed availability by hospital and regional area
- Provision of care in MSN shelters
- Quick execution of pre-established contracts
 - Incident command support
 - Pharmaceutical contracts
 - Health care worker contracts
 - Mosquito control contracts
- Deployment of DSHS “strike” teams with various expertise to provide assistance or consultations
- Placement of MSN evacuees in nursing homes
 - Case managers in MSN shelters

- Adjustment of admission criteria for nursing home placement
- Partnerships with academic institutions
- Use of state facilities for sheltering

Hurricane Response Challenges

- Identification of MSN individuals who self-evacuated
- Identification and meeting needs of home-bound MSN individuals that stayed in place
- Meeting the needs of MSN evacuees in shelters
 - High acuity levels of MSN evacuees (much sicker population)
 - Larger than expected numbers of morbidly obese MSN evacuees
 - Scarcity of specialized MSN assets, especially to accommodate morbidly obese MSN evacuees
- Federal rules on National Disaster Medical System air evacuation assets are restricted to hospitalized patient evacuations only
- Repatriation of MSN evacuees
 - within Texas
 - to neighboring states
- Protecting healthcare facilities
 - hospitals
 - outpatient dialysis centers
- Reduction of preventable fatalities post disaster
- Reimbursement of private sector partners

Next Steps: DSHS Preparedness Response Improvements

- “After Action” evaluations to identify areas that need to be improved
- Working with local, state, federal & private partners on implementation of preparedness response improvements
- Ensuring public health resources for disaster response

Disaster Recovery & Public Health Preparedness Exceptional Item

- Enhancing response for all-hazards, natural or manmade – hurricanes to salmonella
- Improving timeliness of laboratory tests, environmental analysis and disease surveillance
- Maintaining skilled workforce for rapid deployment in event of emergency or disease outbreak

- Expanding local health services
- Public health response equipment
- State hospital repairs so that they can serve as MSN shelters

BENEFITS PROVIDED AFTER HURRICANE IKE

Food Stamp Benefits

Food Stamp benefits are 100 percent federally funded. Administrative costs for the program are generally split 50/50 with the federal government. HHSC issued emergency Food Stamp benefits under the Hurricane Ike waiver to over 142,000 new households totaling almost \$67.0 million.

- The average benefit amount issued for emergency food stamps was \$469.00.

Nearly 222,000 existing Food Stamp households received replacement benefits totaling approximately \$38 million.

195,520 households already receiving Food Stamps when Hurricane Ike hit received a supplemental benefit totaling \$30.6 million to account for increased disaster related expenses.

HHSC faced challenges in meeting the demands for services:

- Eligibility offices were impacted by the storm and many offices were unable to open immediately.
 - Some offices could not open due to the lack of power.
 - Local servers and hardware were damaged in some cases.
- Staff were personally impacted and were dealing with personal challenges.
- Accommodations were scarce in the affected areas making it difficult to bring in staff from other areas.
- Clients faced long wait times at local offices and on the telephone due to high demand. To help address this:
 - Many eligibility offices were open expanded hours and on the weekends.
 - To the extent possible workload was distributed to other areas of the state not affected by the storm.
 - The automated system that supports the eligibility process in the Houston area (SAVERR) does not allow for the electronic distribution of workload.

Other Needs Assistance

To date, HHSC has received nearly 357,000 applications for Other Needs Assistance for Hurricane Ike; approved more than 56,000 households for more than \$103.5 million.

HHSC is responsible for 25 percent of the cost of Other Needs Assistance or \$25.9 million to date. Estimate a total of \$40 million in state funds for the event.

- To finance the state share, funds were transferred from available funds in CHIP.

Victims of such disasters are eligible for assistance from the Other Needs Assistance (ONA) provision of the Federal Assistance to Individuals and Household Program if they do not have insurance, are underinsured, and do not qualify for low-interest loans from the Small Business Administration.

- ONA is administered jointly with the Federal Emergency Management Agency (FEMA). FEMA provides housing assistance and HHSC provides grants for other needs. The maximum grant amount per household is \$28,800.
- ONA provides assistance with transportation, personal property, medical, dental and funeral expenses based on eligibility criteria (e.g. a vehicle damaged by a flood; the replacement or repair of wheelchairs, eyeglasses, or other medical equipment; appliances, car seats, and other personal property).

Case Management Services

HHSC expects approval by FEMA of approximately \$60 million in federal disaster relief grant funds, to provide long-term case management services to Hurricane Ike victims.

Case management services will be provided to an estimated 30,000 families in the 34-county Hurricane Ike disaster area through March 1, 2010.

- Goal is to help families attain pre-hurricane status in impacted areas of their lives.
- This 100% federally funded pilot project will test for FEMA state developed models for providing case management services in response to future disasters in the United States.
- Long-term disaster case management is a critical element in disaster relief:
 - Ensures timely and comprehensive needs assessments for families impacted by Ike;
 - Establishes family centered recovery plans with goals and timelines;
 - Provides critical link to match families in need to job preparation, mental health, medical and various other direct client services. (FEMA does not allow the funds to be spent on direct client services);
 - Case workers will advocate for clients when necessary, especially clients with special needs; and
 - Provides information to Texas and FEMA on the status of disaster recovery efforts.

HHSC issued a Request for Proposals (RFP) on 12/5/08 soliciting proposals to provide the services.

- RFP stressed importance of collaboration with local communities, faith-based organizations and governmental entities, especially those already involved in relief efforts.

- Twelve proposals received from several types of entities; non-profit, governmental, faith-based and private sector—evaluation process is almost complete.

COSTS ASSOCIATED WITH THE HHS AGENCIES RESPONSE TO HURRICANE IKE

Four natural disasters required pre and post disaster responses from health and human service agencies. Costs for Hurricanes Dolly, Gustav and Tropical Storm Edouard totaled approximately \$28 million (\$13 million general revenue). State costs were absorbed by agencies in 2008 and federal fund reimbursement continues to be processed by FEMA and other federal agencies.

Hurricane Ike

- Pre and post disaster response of the five HHS agencies is estimated to total \$314 million in all funds (\$46 million general revenue). Additional detail on the impact of the response and cost estimates is provided.
- Required HHS staff to work more than 174,000 overtime hours for a total of \$2.4 million (all funds).
 - To date, payments have been made according to regular HHSC overtime compensation policy for FLSA covered employees.
- Required HHS staff to work 45,000 hours in compensatory (comp) time for a total of approximately \$1 million (all funds).
 - No payments have been made to FLSA exempt staff for comp time.

Summary of Expenses Related to Hurricane Ike

	All Funds	GR
Health and Human Services Commission	\$ 268,998,522	\$ 44,460,322
Department of Assistive and Rehabilitative Services	\$ 40,915	\$ 8,183
Department of Family and Protective Services	\$ 1,429,753	\$ 12,270
Department of State Health Services	\$ 33,040,668	\$ 1,731,984
Department of Aging and Disability Services	\$ 10,949,119	\$ 0
Total -	\$ 314,458,977	\$ 46,212,758

Additional detail by agency and expense category is provided in Appendix A.

Social Services Block Grant Funds:

Texas has been awarded \$218.9 million in supplemental Social Services Block Grant (SSBG) federal funds. These funds can be used to help fund state and local needs, including uncompensated health care. Funds are available through September 30, 2010.

- Funds must be used to assist persons affected by Hurricanes Ike and Dolly, as well and Hurricanes Katrina and Rita.
- Supplemental SSBG funds may be available to cover some of the uncompensated medical and transportation evacuation costs for:
 - The 60 day period immediately after Hurricanes Ike and Dolly; and
 - Estimated ongoing costs within the grant period.
- Currently HHSC estimates uncompensated care expenditures from providers including hospitals, clinics, and long-term care providers at approximately \$35 – 40 million.
 - Collecting expenditure data from health care providers on their uncompensated care responses. Results will be available later this month.
 - HHSC conducted an analysis of migration of uncompensated patient care from UTMB.
 - Payments made to medical providers for uncompensated care could start as early as March 2009.
- Other potential uses for the SSBG Supplemental funds include:
 - Additional social service and health care needs of local communities; and
 - Additional needs for other eligible recovery services.

Appendix A
Costs Associated with HHS Agencies Response to Hurricane Ike

Agency	Expense Category	Total Event Cost Estimate	Total Event State Cost
HHSC*	Other Needs Assistance Client Services	\$ 160,000,000	\$ 40,000,000
	Other Needs Assistance Administration	5,249,557	-
	Water and Ice	18,979,466	-
	2-1-1 Tx Information and Referral Evacuation Assistance	1,102,699	-
	System Support Services/Reopening Damaged HHS Local Offices	6,374,994	-
	Commission IT (Immediate Emergency Services)	71,684	-
	Disaster Case Management Services (Locally Administered and Provided)	67,450,000	-
	Lone Star Card Issuance (Electronic Benefits Transfer)	1,412,390	674,051
	Staff Overtime (Eligibility and Eligibility Support)	1,200,000	559,573
	Eligibility Temporary Clerical, Postage, Travel, Supplies, etc	3,291,900	1,529,745
	Eligibility Support Services Customer Care Center	100,000	46,208
	Commission IT (Restoring Local Office Telephone Systems & Computers)	3,446,816	1,493,698
	Enterprise IT (SAVERR Programming)	62,769	28,923
	Staff Comp Time	256,247	128,124
	Total, HHSC	\$ 268,998,522	\$ 44,460,322
DARS	Travel	\$ 146	\$ 29
	Other Operating Costs - Interpreters	4,868	974
	Other Operating Costs	10,000	2,000
	Client Services	21,730	4,346
	Staff Overtime	1,138	228
	Staff Comp Time	3,033	607
	Total, DARS	\$ 40,915	\$ 8,183
DFPS	Consumable Supplies	\$ 179,900	\$ -
	IT Equipment Replacement-Air Cards	1,078,000	-
	Travel	150,000	-
	Staff Overtime	4,325	-
	Staff Comp Time	17,528	12,270
	Total, DFPS	\$ 1,429,753	\$ 12,270
DSHS	DSHS Reported Damages	\$ 30,597	\$ 30,597
	CMOC Mission Tasking	929,756	-
	RMOC Mission Tasking	340,000	-
	DSHS deployed Ambulances	3,473,800	377,125
	EMS Strike Team Expenses	238,050	17,854
	DSHS FTE Travel Cost	189,349	6,125
	MACC & EMS Operation Center Costs	94,467	-
	BCFS Shelter - MSN	9,467,003	410,995
	Supplies for Medical & Shelter Operations	1,108,426	-
	Transportation for Evacuees with Special Needs	306,560	-
	EMS Contractors for Special Needs Evac Buses	144,000	-
	Staffing Nurses for Special Needs Shelters	2,311,843	89,289
	Vector Control (Ground Spraying)	9,618	-
	Vector Control (Aerial Spraying)	4,441,023	-
	Special Needs Shelter Tents	26,000	-
	DSHS Special needs Dialysis Shelter	118,793	-
	Crisis Counseling	1,746,862	-
	Mental Health Disaster Assistance	6,564,083	-
	Adjustment to Reimbursement due to FEMA Amendments	800,000	800,000
	Staff Overtime	296,902	-
	Staff Comp Time	403,536	-
	Total, DSHS	\$ 33,040,668	\$ 1,731,984

Appendix A
Costs Associated with HHS Agencies Response to Hurricane Ike

Agency	Expense Category	Total Event Cost Estimate	Total Event State Cost
DADS	Ambulances	\$ 6,000	\$ -
	Buses	30,000	-
	Food	977,393	-
	Fuel	22,542	-
	Health Maintenance/Care Coordination	1,087,590	-
	Income Support	512,740	-
	Legal Assistance	111,542	-
	Lodging	40,345	-
	Maintenance Repairs	770,572	-
	Medical Supplies	148,509	-
	Non-Medicaid Clients in DADS Nursing Homes (NH)	5,884,815	-
	Other	149,361	-
	Other Transportation	50,413	-
	Staff Travel	20,556	-
	Supplies	101,204	-
	Vehicle Rental	7,598	-
	Staff Overtime	663,700	-
	Staff Comp Time	364,241	-
	Total, DADS	\$ 10,949,119	\$ -
	Total -	\$ 314,458,977	\$ 46,212,758
* Funds were transferred from CHIP to cover general revenue need.			