

Emergency Equipment for Native American Health Care Facilities

FY24 Interior Appropriations Conference Request

ISSUE: The increasing frequency of catastrophic wildfires has caused energy companies to institute the practice of Public Safety Power Shutoffs (PSPS) to minimize the risks of loss of life from extreme climate events (see map below for high fire-threat areas in California). When certain conditions are present, the local utility institutes a PSPS to protect local communities from the risk of deadly wildfires. Some of the conditions that could trigger a PSPS include:

- A “Red Flag” warning from the National Weather Service
- Low humidity levels (below 20%)
- Forecasted sustained winds of 25mph with expected gusts of more than 45mph
- Conditions of dry fuel on the ground combined with low moisture

PROBLEMS FOR TRIBAL HEALTH CENTERS: While a PSPS is an important tool to minimize loss of life from wildfires, a PSPS can have dire consequences for rural health care facilities. These issues can be especially acute for Native American communities. Many Tribal Health Programs (THPs) are located in remote areas. When these clinics experience a power outage, it places the lives of patients, staff members, and visitors at risk. Recent improvements in the distribution of vaccines, antiretroviral drugs, and other supplies and services have introduced new demands for electricity in clinics with little or no access to reliable electrical power.

Given that all tribal health programs provide vaccines, and many keep on hand specialty drugs, proper temperature storage is critically important. Temperature variation threatens the stability of the medication, potentially rendering them unsafe for patients. Prolonged power outages of more than four hours can jeopardize vaccines and medications for thousands of patients. In many cases, after an outage the manufacturer will have to recertify that the medication is safe for use – a process that can take days. All the while, life-saving medications remain quarantined and unavailable for sick patients.

GENERATORS ARE A SOLUTION: In the event of a prolonged outage, generators can help save medications and vaccines, and more powerful generators can keep entire clinics operating throughout a PSPS. According to the California Rural Indian Health Board, less than one-third of THPs in the state are equipped with generators. The requested funding would provide generators for rural THPs that are most at risk for power outages.

FUNDING SHORTFALL: This request will help address an historic underfunding of THPs. For example, the federal Indian Health Service (IHS) typically provides THPs with only 50% of the funding needed to operate - with underfunded local facilities covering the balance. What’s more, federal spending on Native Americans health care is less than almost any other population – in 2016, the federal government spent \$8,602 per capita on health care for federal inmates compared with just \$2,843 per patient within the IHS.

PRIOR CONGRESSIONAL SUPPORT: In the FY21 Omnibus Appropriations bill, Congress provided \$1M to acquire emergency generators for THPs. In the FY22 Omnibus Appropriations bill, Congress provided an additional \$2M in funding. In the FY23 Omnibus Appropriations bill, Congress provided an additional \$1M in funding. The total funding amount from FY21 to FY23 is \$4M for the purchase or lease of emergency generators for THPs.

With a portion of the funding from FY21, the Indian Health Service allocated funds to purchase a state-of-the-art generator for the Sonoma County Indian Health Project, a THP in Santa Rosa, CA. With the funds from this program in FY21 and FY22, seven California Tribal Health Centers have received funding for backup generation needs. However, there is still a huge need for this funding at Tribal Health Centers across the state.

FY24 APPROPRIATIONS REQUEST: Additional \$16M included in Interior, Environment and Related Agencies Appropriations bill, Title III - Related Agencies, Indian Health Service, Hospitals and Health Clinics, specifically for emergency equipment to improve resilience for Tribal Health programs in states that have de-energization protocols.

CPUC High Fire-Threat Zones:

NOTE: the red areas are “extreme risk” and the orange areas are “elevated risk”

