



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, aging, and disabled, rely on electricity-dependent durable medical equipment (DME) and essential health care services to do so.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, the Office of the Assistant Secretary for Preparedness and Response (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 and their partners can use the Program's national, data-driven tools to support targeted emergency preparedness, response, recovery, mitigation, and resilience activities for more than 4.2 million at-risk Medicare beneficiaries.

The **HHS emPOWER Map** is a public, interactive map that displays the total number of at-risk electricity-dependent Medicare beneficiaries at the state, territory, county, and ZIP Code levels. The **HHS emPOWER Representational State Transfer (REST) Service (Public)**, provided via ASPR's GeoHEALTH Platform, allows users to consume the same map data layer in their own geographic information system (GIS) application. Users can also request HHS emPOWER Map data and Program information by using **emPOWER AI** on **Google Assistant** and **Amazon Alexa**. Community partners can readily 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 De-identified Dataset** provides the monthly total number of Medicare claims for select electricity-dependent DME and four additional health care services in a geographic area, down to the ZIP Code level. ASPR provides an updated dataset each month to state, territory, and certain major metropolitan area (i.e., New York City, Chicago, Los Angeles County, District of Columbia) public health authorities. Public health authorities and their partners have used this data to develop and enhance emergency systems, plans, and processes to support community-based at-risk

populations, and to support data-driven decision-making regarding potential shelter and evacuation assistance needs, response asset and resource allocation, and power restoration prioritization.

The **HHS emPOWER Emergency Response Outreach Individual Dataset** can be officially requested by a public health authority to support life-saving assistance and outreach public health activities in the event of an incident, emergency, or disaster. It is a secure and restricted tool that contains limited individual-level beneficiary information (e.g., name, address) and health care provider information. The HHS emPOWER Emergency Response Outreach Dataset has been used to rapidly identify, locate, and voluntarily evacuate at-risk individuals, and to help ensure continuity of care by reconnecting them with their health care providers.

How the HHS emPOWER Program is Helping

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

Over 65,000 community organizations and individuals, from rural to urban areas, have used the HHS emPOWER Map and REST Service to protect the health of electricity-dependent populations in communities across the nation.

¹ DME include, but are not limited to, ventilators, oxygen concentrators, intravenous infusion pumps, electric wheelchairs, and cardiac implantable devices

