

Talking Points

June 6, 2024

Hospitals are Safe for Earthquakes, but Access to Health Care is at Risk

Without time and legislative reform, access to vital health services is at risk throughout California.

- Hospitals are an important part of their communities, and California must do all it can to ensure that patients have uninterrupted access to care.
- Under current law, hospital buildings that are unable to meet the state's seismic standards by Jan. 1, 2030, will be forced to close and **patient care will cease in those buildings.**

Patients and health care workers are safe — hospitals will stand after an earthquake.

- Right now, hospitals have already met the 2020 state standard for building integrity and are among the safest buildings in California. They have spent billions of dollars to retrofit and rebuild facilities for patient care and to protect patients and workers.
- More than 98% of hospital buildings in California have met the state's current requirements to remain standing, keeping patients and workers safe after an earthquake.

SB 1432 provide time and enhances California's earthquake disaster planning.

- Addresses patient and worker movement in case of an earthquake by requiring patient and worker continuity plans, in conjunction with existing emergency preparedness plans, to ensure continued care.
- Provides an initial three years once a compliance plan is submitted, then up to five years depending on the hospital's project. This will provide time to balance compliance with preserving access to care.
- Adds requirements to report to the Legislature on seismic funding, enhance stakeholder analysis and review, and improve government accountability. The state must consider the impact of the operational standard on health care access and cost.

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- The Department of Health Care Access and Information (HCAI) should understand whether a hospital can meet the full requirement or would be forced to modify services to comply, and report to the Legislature on the impacts to health care services for patients throughout California.
- There will be hospitals and systems that cannot afford the construction. The state must be a partner in compliance, considering and proposing funding options for hospitals, particularly in California's most vulnerable populations.
- HCAI should consider impacts on access to key services for hospitals' surrounding communities when determining whether to grant an extension.