

## Hospitals Are Safe from Earthquakes, but Access to Health Care Is at Risk

### The Issue

Access to vital health care services is at risk for millions of Californians.

Under current law, any hospital building that does not meet the state's 2030 seismic standards by Jan. 1, 2030, will be forced to close and **patient care will cease at those facilities.**

That's despite the fact that right now, patients and health care workers are safe — hospitals have already met a 2020 state standard and **will stand after an earthquake.** Hospitals are among the most seismically safe buildings in California, having spent billions of dollars to retrofit and rebuild facilities for patient care and to protect workers and patients.

But nearly two-thirds of all hospitals — the primary centers for health care and among the largest employers in communities — have been unable to meet the next 2030 seismic requirements — imposed 30 years ago — that every building, including those that house laundry and financial services, be “fully operational” after an earthquake. These upgrades are estimated to cost upward of \$100 billion statewide. That cost will add to the cost of health care in California.

Nearly all hospitals (98%) report that if they or a neighboring hospital must close or reduce services due to these requirements, patients will be at risk. Patients would experience longer wait times, there will be less hospital capacity during a crisis, and patients will have to travel farther for specialty services and emergency department care.

California's finite pool of health care resources should be directed toward patient care first, rather than unnecessary construction projects. At a time when more than half of the state's hospitals lose money every day caring for patients, access to health care for all Californians must be the top priority.

### What's Needed

Hospitals need time and regulatory changes to make sure they can continue to meet communities' needs following an earthquake. The deadline for seismic upgrades should be extended to provide the time needed to retrofit or rebuild buildings. Regulations should also be changed to make sure that every health care dollar is wisely invested in patient care rather than bricks and mortar.

Additionally, as the state works to hold health care costs in check, it must consider the impact tens of billions in infrastructure spending will have. Directing the Office of Health Care Affordability to analyze the cost impact will be critical to ensuring access to affordable health care for all California communities.

■ **Hospitals that are able to stay open by meeting the 2030 seismic requirements report they will have to take the following steps:**

**66% of hospitals**  
Forgo expansion of new service lines

**63% of hospitals**  
Temporarily close certain service lines

**61% of hospitals**  
Lay off employees

**58% of hospitals**  
Reduce funding for community partners

**45% of hospitals**  
Permanently close certain service lines, such as labor and delivery, behavioral health, and specialty care

*Source: March 2023 survey of California hospitals*