

PROGRAM ASSISTANCE LETTER

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DOCUMENT TITLE: Requesting a Change in Scope to Add Temporary Service Sites in Response to Emergency Events

TO: Health Center Program Awardees and Look-Alikes
Primary Care Associations
National Training and Technical Assistance Partners

I. Purpose

This Program Assistance Letter (PAL) updates information regarding the process for requesting the addition of a temporary service site to a health center's scope of project in response to emergency events. This PAL replaces PAL 2014-05: "Updated Process for Requesting a Change in Scope to Add Temporary Sites in Response to Emergency Events."

For ease of reference, this PAL restates pertinent language from [Policy Information Notice \(PIN\) 2008-01: "Defining Scope of Project and Policy for Requesting Changes"](#) (Section IV.C.) and [the Federal Tort Claims Act \(FTCA\) Health Center Policy Manual \(Section I.F\)](#). For additional information, please see the full text of these policy issuances.

HRSA recognizes that, for declared public health emergencies, such as an infectious disease pandemic, health centers and the populations they serve may be impacted without physical displacement of the health center or the communities and populations they serve. This contrasts with emergencies such as hurricanes, floods, earthquakes, tornadoes, widespread fires, and other natural/environmental disasters, the impact of which may include physical displacement. Therefore, this PAL clarifies that a health center may be "impacted" by an emergency with an associated need for establishment of temporary service sites absent physical displacement of the health center or the communities and populations it serves.

In addition, the PAL clarifies language on the length of time that HRSA will approve a temporary site. While HRSA approval of a temporary service site will be in effect for 90 days, the health center may contact its Project Officer for an extension. Such extensions are subject to HRSA

approval. The PAL also includes information on the limits of FTCA coverage for volunteers as well as information on the [Health Center Volunteer Health Professional Program](#).

This PAL does not fully address Medicaid/Medicare reimbursement or eligibility for the 340B Drug Pricing Program during an emergency. This PAL also does not fully address FTCA coverage for FTCA-deemed Health Center Program awardees during an emergency. For information on FTCA coverage and related topics for FTCA-deemed Health Center Program awardees, please refer to:

- [Federal Tort Claims Act \(FTCA\) Health Center Policy Manual](#)¹
- [Temporary Privileging of Clinical Providers by Federal Tort Claims Act \(FTCA\) Deemed Health Centers in Response to Certain Declared Emergency Situations \(PAL 2017-07\)](#)
- [Health Center Volunteer Health Professional Program](#)

II. Applicability

This PAL applies to all health centers funded under section 330 of the Public Health Service (PHS) Act (42 U.S.C. 254b) (“section 330”). It also applies to health centers designated as look-alikes under section 1861(aa)(4) and section 1905(l)(2)(B) of the Social Security Act, which are also required to comply with section 330 of the PHS Act. Throughout this PAL, “health center” refers to all the organizations described above.

III. Background

As a vital component of the nation’s health care safety net, health centers are uniquely positioned to deliver needed primary care services during an emergency. For the purposes of this PAL and other policy issuances related to emergency response, in-scope services provided at approved temporary service sites by health center providers on behalf of the health center are provided within the health center’s scope of project.

For the purposes of this PAL and other related policy issuances, an “emergency” is an event that affects the overall patient population and/or the community at large and that precipitates the declaration of a state of emergency at a local, state, regional, or national level by an authorized public official such as a governor, the Secretary of the United States (U.S.) Department of Health and Human Services, or the President of the U.S. Examples include, but are not limited to: hurricanes, floods, earthquakes, tornadoes, wide-spread fires, and other natural/environmental disasters; civil disturbances; terrorist attacks; collapses of significant structures within the community (for example, buildings, bridges); infectious disease outbreaks; and other public health threats. In situations where an emergency has not been officially declared by a public official, HRSA evaluates the situation on a case-by-case basis. The purpose of the evaluation is to determine whether extraordinary circumstances justify a determination that the situation faced by the health center constitutes an emergency for the purposes of approving a temporary service site in response to emergency events.

¹ This and other [FTCA Policies for Health Centers](#) are available on the HRSA website.

For the purposes of this PAL, HRSA considers a health center to be affected or impacted by a declared emergency, such that this PAL may be applicable, if any part of the health center's service area is within the geographic area of the declared emergency.

HRSA recognizes that during an emergency, health centers are likely to participate in an organized state or local response, including by providing primary or preventive care services at temporary locations. A temporary location could include, but is not limited to, any place that provides shelter to evacuees and victims of an emergency. A temporary location also may include a location where immunizations, specimen collection/testing, triage, or other medical care is provided as part of a coordinated effort to provide immediate medical care where it is most needed. A health center may request a change in scope of project to temporarily add a service site, as defined in PIN 2008-01, in response to an emergency event.

A service site is defined in PIN 2008-01 as a location where all of the following conditions are met:

- health center encounters are generated by documenting in the patients' records face-to-face contacts between patients and providers;
- providers exercise independent judgment in the provision of services to the patient;
- services are provided directly by or on behalf of the awardee, whose governing board retains control and authority over the provision of the services at the location; and
- services are provided on a regularly scheduled basis (e.g., daily, weekly, first Thursday of every month). However, there is no minimum number of hours per week that services must be available at an individual site.

For additional information on the service site definition, see: [PIN 2008-01: "Defining Scope of Project and Policy for Requesting Changes.](#)

In order for HRSA to approve the temporary service site, the site must meet the criteria in [Section IV. Criteria for Adding a Temporary Service Site](#) and the health center must provide to HRSA the information as described in [Section V. Process for Requesting a Change in Scope of Project to Add a Temporary Service Site in Response to a Declared Emergency](#). **HRSA approval of a temporary service site will be in effect for 90 days.** Any extension beyond 90 days is subject to HRSA approval.

IV. Criteria for Adding a Temporary Service Site

A. Criteria for an Impacted Health Center to add a Temporary Service Site Within or Adjacent to the Service Area

HRSA considers a health center to be affected or impacted by a declared emergency if any part of the health center's service area is within the geographic area of the declared emergency. In addition to the criteria for a service site provided in [Section III.](#)

[Background](#), for an impacted health center, a temporary service site that meets the specific criteria outlined below will be approved by HRSA as part of the health center's scope of project:

1. Services provided by health center staff at the proposed service site are on a temporary basis;
2. The proposed temporary service site is within the health center's service area or a county, parish, or other political subdivision adjacent to the health center's service area;
3. Services provided by health center staff at the proposed temporary service site are within the health center's approved scope of project;² and
4. All activities conducted by health center staff at the proposed temporary service site are on behalf of the health center.

B. Criteria for an Impacted Health Center to Add a Temporary Service Site Outside the Service Area

HRSA considers a health center to be impacted by a declared emergency if any part of the health center's service area is within the geographic area of the declared emergency. The primary purpose of adding a temporary service site outside the service area is to provide medical care to the health center's patient population and to other medically underserved populations that work or live in the area impacted by the emergency.

In addition to the criteria for a service site provided in [Section III. Background](#), for an impacted health center, a temporary service site outside the health center's regular service area and in an area that is not in an adjacent county, parish, or political subdivision that meets the specific criteria outlined below may be approved by HRSA as part of the health center's scope of project if the health center demonstrates the following:

1. The purpose of the temporary service site is to:
 - provide services primarily to its original health center patient population that has been impacted by the emergency; and/or
 - provide services to other medically underserved populations that may have been impacted by the emergency.

² Please note that all applicable state licensure requirements apply in all instances. For more information on requirements related to credentialing and privileging of providers, please see the [Health Center Program Compliance Manual, Chapter 5: Clinical Staffing](#) and PAL 2017-07: "[Temporary Privileging of Clinical Providers by Federal Tort Claims Act \(FTCA\) Deemed Health Centers in Response to Certain Declared Emergency Situations.](#)"

2. Services provided by health center staff at the proposed service site are provided on a temporary basis;
3. Services provided by health center staff at the proposed temporary service site are within the health center's approved scope of project;³ and
4. All activities conducted by health center staff at the proposed temporary service site are provided on behalf of the health center.

C. Criteria for a Non-Impacted Health Center to Add a Temporary Service Site Adjacent to the Service Area

HRSA considers a health center to be non-impacted by a declared emergency if the health center does not have any part of its service area within the geographic area of the declared emergency. In emergency situations, a non-impacted health center may participate in an organized state or local response and provide primary care services at temporary sites in a county, parish, or political subdivision adjacent to the health center's service area. In addition to the criteria for a service site provided in [Section III. Background](#), for a non-impacted health center, a temporary service site that meets the specific criteria outlined below may be approved by HRSA as part of the health center's scope of project if the health center demonstrates that:

1. Services provided by health center staff at the proposed service site are provided on a temporary basis;
2. The proposed temporary service site is in a county, parish, or other political subdivision adjacent to the health center's service area;
3. Services provided by health center staff at the proposed temporary service site are within the health center's approved scope of project;⁴ and
4. All activities conducted by health center staff at the proposed temporary service site are provided on behalf of the non-impacted health center.

D. Non-Impacted Health Center Proposing to Add a Temporary Service Site Outside the Service Area

HRSA considers a health center to be non-impacted by a declared emergency if the health center does not have any part of its service area within the geographic area of the declared emergency. A non-impacted health center is not eligible to submit a

³ Please note that all applicable state licensure requirements apply in all instances. For more information on requirements related to credentialing and privileging of providers, please see the [Health Center Program Compliance Manual, Chapter 5: Clinical Staffing](#).

⁴ Please note that all applicable state licensure requirements apply in all instances. For more information on requirements related to credentialing and privileging of providers, please see the [Health Center Program Compliance Manual, Chapter 5: Clinical Staffing](#) and [PAL 2017-07: "Temporary Privileging of Clinical Providers by Federal Tort Claims Act \(FTCA\) Deemed Health Centers in Response to Certain Declared Emergency Situations."](#)

change in scope request to add a temporary site to respond to emergency events outside the health center's service area beyond adjacent counties, parishes, or political subdivisions. Employees of a non-impacted health center who provide care during an emergency outside their health center's service area beyond adjacent counties, parishes, or political subdivisions may not be eligible for the benefits associated with the Health Center Program, including FTCA coverage, for those activities.

V. Volunteering at an Impacted Health Center

If a health center's providers volunteer at an impacted health center that is not their "home" health center (i.e., the health center where the provider is ordinarily employed, contracted, or volunteering), such volunteering does not constitute the establishment of a temporary service site for their home health center. In addition, eligibility for FTCA coverage through a provider's status as a deemed health center staff member (including as an employee, contractor, or volunteer health professional of a deemed health center) does not "follow" the provider to support work performed on behalf of another entity, including another deemed health center.

Volunteers are not automatically eligible for FTCA liability coverage through the Health Center FTCA Program. Eligibility for FTCA coverage for individual volunteer health providers through the Health Center Volunteer Health Professionals (VHP) Program requires that a deemed health center apply for protections for each individual volunteer through a VHP deeming sponsorship application. More information on the requirements for this program, including the current VHP Deeming Sponsorship Application Instructions are available on the [Health Center Volunteer Health Professionals \(VHP\) website](#).

Health centers and providers should exercise caution in ensuring that providers delivering services at or on behalf of an entity other than the health center by which they are employed or contracted can clearly demonstrate on which entity's behalf they are acting. FTCA liability protections may be placed at risk when a provider acts on behalf of more than one entity under circumstances that do not make it clear on what health center's behalf the individual was acting at the time of an event that becomes the subject of a claim or lawsuit.

When FTCA matters become the subject of litigation, the U.S. Department of Justice and the federal courts assume significant roles in certifying or determining whether a given activity falls within the scope of employment for purposes of FTCA coverage. Health centers and providers are encouraged to consult with private counsel and/or consider the purchase of private malpractice insurance when individual providers wish to undertake activities on behalf of multiple entities and/or in multiple capacities.

VI. Process for Requesting a Change in Scope of Project to Add a Temporary Service Site in Response to a Declared Emergency

In order for HRSA to approve a temporary service site, the health center must provide the following information to HRSA by email or phone. **A health center must submit this**

information to HRSA via the health center’s HRSA Project Officer, the back-up Project Officer, or at the HRSA offices described below as soon as practicable but no later than 15 calendar days after initiating emergency response activities at the location. HRSA will determine on a case-by-case basis whether extraordinary circumstances justify an exception to the 15-day requirement.

1. Health center name.
2. The name of a health center representative and this person’s contact information.
3. A brief description of the declared emergency, including whether a state of emergency has been officially declared by an authorized public official such as a governor, the Secretary of the U.S. Department of Health and Human Services, or the President of the U.S., or if there has been an official warning issued regarding an anticipated emergency event by an authorized public official.
4. A brief description of planned emergency response activities at the proposed temporary service site. (This should be no more than one to two sentences.)
5. A summary of the requested change in scope of project, including:
 - temporary address information, and
 - the date emergency response activities at the site were initiated (if they have already started).
6. Explanation and/or assurance that each of the applicable criteria for adding a temporary service site will be met.

The table below links to the criteria for HRSA to approve a request to add a temporary service site in response to emergency events:

		Where is the Temporary Service Site?	
		WITHIN OR ADJACENT to the Health Center’s Service Area	OUTSIDE the Health Center’s Service Area
Is the Health Center Impacted by the Declared Emergency?	If Yes	Use Criteria for an Impacted Health Center to add a Temporary Service Site Within or Adjacent to the Service Area	Use Criteria for an Impacted Health Center to Add a Temporary Service Site Outside the Service Area
	If No	Use Criteria for a Non-Impacted Health Center to Add a Temporary Service Site Adjacent to the Service Area	Not Eligible for Approval. See Non-Impacted Health Center Proposing to Add a Temporary Service Site Outside the Service Area

If **neither** the Project Officer **nor** his/her designated back-up is available, the health center should contact its Health Services Office's main line:

- **Office of Northern Health Services: 301-443-0011.**
States/Territories: AK, CO, CT, DC, DE, ID, IL, IN, MA, MD, ME, MI, MN, MT, ND, NH, NJ, NY, OH, OR, PA, PR, RI, SD, UT, VA, VI, VT, WA, WI, WV, and WY.
- **Office of Southern Health Services: 301-480-1130.**
States/Territories: AL, AR, AZ, CA, FL, FM, GA, GU, HI, IA, KS, KY, LA, MO, MP, MS, NC, NE, NM, NV, OK, PW, SC, TN, and TX.

If the health center's Project Officer and Health Services Office are not available, the health center should submit this information to the Health Center Program Support either by phone at 1-877-974-BPHC (2742) or online at <http://www.hrsa.gov/about/contact/bphc.aspx>.

HRSA will confirm receipt of the temporary service site information with the health center and will notify the health center if additional information is required to approve the request. HRSA will expedite the review of such requests with the goal of notifying the health center of HRSA's decision within 48 hours of receipt of the request.

If HRSA approves the request, HRSA will take all actions necessary to add the site to the health center's scope of project on a temporary basis and will send documentation, such as a Notice of Award/Designation, reflective of HRSA's approved effective date. The approved effective date will be either the HRSA approval date or, if emergency response activities were initiated **within 15 days** of the request, the date those activities were initiated and, therefore, the temporary site was open/operational. HRSA will determine on a case-by-case basis whether extraordinary circumstances justify an exception to an effective date.

HRSA's approval of the temporary service site will automatically expire 90 days after the temporary service site's approved effective date, regardless of the issue date of formal documentation, and HRSA will administratively remove the temporary service site from the health center's scope of project. A health center must contact its Project Officer to request HRSA approval for an extension of time beyond 90 days.

VII. Contact

For further assistance regarding a change in scope request to add a temporary service site during an emergency, Health Center Program awardees and look-alikes are encouraged to contact their Project Officers.