

Revised

A Quick Guide: FEMA Reimbursement for Acute Care Hospitals



Prepared by:



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Background

Disasters have the potential to disrupt patient care at nearly every hospital in the United States. Although the type of disaster varies based on the type of region, state and type of institution, most facilities have mechanisms in place to respond to an event. What is lacking in many instances is the processes and experience needed to quickly recover from the event and resume normal operations. The FEMA Public Assistance (PA) program is intended to assist with the recovery from disasters; however, it can often times be difficult to navigate, especially for healthcare facilities. This guide will help hospitals and healthcare systems know what is needed to support their recovery after an event.

Consistent with the mission of Yale New Haven Health System Center for Emergency Preparedness and Disaster Response (YNHHS-CEPDR) to assist hospitals in all areas of emergency preparedness, YNHHS-CEPDR, with support of Health and Human Services Hospital Preparedness Program Funding from the Connecticut Department of Public Health (CT DPH), developed *A Quick Guide: FEMA Reimbursement for Acute Care Hospitals*, for hospitals seeking reimbursement from FEMA's PA Program.

Overview

The original guide was developed in 2012 and has since been updated to reflect changes in the PA program and expand the content to make it more applicable to the healthcare community in 2016.

A Quick Guide: FEMA Reimbursement for Acute Care Hospitals provides an overview of FEMA's reimbursement process and outlines the tasks and corresponding timelines that must be met by acute care hospitals to successfully apply to FEMA for reimbursement of disaster related expenses incurred as a result of the event. The guide provides information on FEMA's policies and the application process for reimbursement and provides a common understanding of the program policies as they relate to hospitals. This document is only intended as a guide and not an official source; the information contained herein should be verified with FEMA PA program representatives and state officials.

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PREPAREDNESS

- ❑ Hospitals and other Private Non-Profits (PNP) can contract with an outside firm or individual to provide representation and advocacy on their behalf with FEMA. Contractors may be identified through pre-existing or informal networks. Portions of the cost of this type of representation may be reimbursable from FEMA through direct administrative costs. (see Quick Facts: Applicant’s Representative)

Prior to Event:

- ❑ Establish a written policy that outlines how the hospital will capture disaster related expenditures, including labor and materials, through cost centers or purchase orders
 - *Note:* In some cases, having a policy in place prior to a disaster may result in more comprehensive reimbursement
- ❑ Pre-disaster procedure should be created to track “normal” usage in your institution
 - *Note:* Policies and procedures should provide a means to justify disaster related costs above and beyond normal operating expenses
 - FEMA does not reimburse for normal operating expenses prior to or after a disaster
- ❑ Emergency protective measures and other preparation activities performed within a reasonable and justified time in advance of the event (generally 72 hours), may be eligible for reimbursement
- ❑ Offsite facilities, including physician offices:
 - Contents and operations may be eligible for reimbursement depending on the terms of the lease, insurance and ownership
- ❑ Set-up zero dollar cost centers (2 or more) to capture disaster related charges
 - Cost codes within the cost center should include labor, supplies, pharmaceuticals, equipments, etc.

RESPONSE AND RECOVERY

Critical Timeframes

Time Limits

- ❑ Submit *Request for Public Assistance* (RPA) within 30 days of date that area is designated a disaster area in a Presidential Disaster Declaration
- ❑ Kickoff Meeting will be scheduled within one week of FEMA’s receipt of the *Request for Public Assistance*
- ❑ Damaged facilities and emergency work must be identified and reported to FEMA within 60 days of the Kickoff Meeting

Completing Work:

Time starts from the Date of the Declaration and may be adjusted depending on the extent of the disaster. States can extend the timeframe up to a certain allowance, additional extensions of times may be requested by the State to FEMA.

Type of Work	Time after Designation	Additional extension by State
Debris Clearance	6 months	6 months
Emergency Protective Measures	6 months	6 months
Permanent Work	18 months	30 months

Prior to Disaster Declaration

- ❑ Ensure that financial and record keeping policies and processes are activated to capture all disaster related expenditures.
 - A team of persons from multiple departments will likely be tracking costs associated with FEMA reimbursement. It is important that facilities designate a single dedicated person to serve as the singular point of contact to FEMA and coordinate the completion and filing of financial related costs. Maintain accurate disbursement and accounting records documenting all work performed and costs incurred (See Quick Facts: Categories of Work)
 - All employees must be aware that they are not to interact with FEMA directly and should refer all questions or inquiries to the facility's designated point of contact.

Applicant's Briefing

- ❑ Occurs after disaster declaration
- ❑ Will be conducted by a representative from each State's Office of Emergency Management and/or Homeland Security for potential Public Assistance applicants
- ❑ Applicant attends to gather available assistance and eligibility requirements
- ❑ A Request for Public Assistance (RPA) will be filed (see FEMA PA Forms Library, <http://www.fema.gov/interactive-forms-library>).
 - Applicant's official notification to FEMA of intent to apply for Public Assistance
 - Typically filed at Applicant's briefing; if unable to do so the RPA must be *submitted within 30 days* of the *disaster designation* of the area for Public Assistance

Kickoff Meeting

- ❑ *Kickoff meeting* will be scheduled within one week of FEMA's receipt of the hospital's RPA
 - This is a substantive, project-oriented meeting with the applicant, the State and FEMA
 - Damages will be discussed, needs assessed and a plan of action developed
- ❑ Identify who will attend kickoff meeting. Ideally this would include personnel from the risk insurance department, emergency management coordinator, finance department, facilities department and others with knowledge of the disaster related expenditures
- ❑ FEMA will likely seek to obtain as much information as they can in a short amount of time in order to get the applicant's Project Worksheets drafted and obligated efficiently; it is incumbent on the Applicant to be diligent in gathering all the requested information to ensure that Project Worksheets are complete and reflective of actual expenses incurred.
- ❑ Compile a list of all damages and bring to the meeting
- ❑ Bring insurance policies on damaged facilities
- ❑ After this meeting you will have to prepare detailed descriptions and summaries of the repair projects (See Quick Facts: Project Worksheet)
- ❑ Damaged facilities and emergency work must be identified and reported to FEMA *60 days after Kickoff meeting*. Use the Project Worksheet to document the location, damage description and dimensions, scope of work and cost estimate for each project. Be very specific and clear. This document is the basis for the grant.

- ❑ The Detailed Damage Description must accurately quantify the damages the facility incurred as a result of the disaster. This description is the foundation for reimbursement and changes to the Scope of Work or disaster-related costs must align to it in order to be eligible.
- ❑ Documentation is critical to recovery of maximum reimbursement.
- ❑ It is the applicant's responsibility to identify any "special considerations". The Special Considerations Form will be reviewed at the Kickoff Meeting. (See Quick Facts: Special Considerations Worksheet)
- ❑ *Note:* At this meeting processes for ongoing communications and interactions between the State, FEMA and the applicant or the applicant's appointed representative will be discussed. Generally, the processes are incident specific, site specific and state specific. (see Quick Facts: Applicant's Representative)

After Event

- ❑ Retain all documentation for up to 3 years from the date the state closes the sub-grantee grant

QUICK FACTS

Applicant's Representative

- Applicants may elect to contract with a firm or organization to provide oversight and advocacy on their behalf throughout the PA process
- The applicant is then represented by the firm or organization at most or all meetings with the State and FEMA
- *Note:* All requests for meetings made by the State and FEMA should be documented by the applicant to ensure that all costs incurred for the representation are captured accurately as they may be reimbursable.
- Generally, portions of the costs for these services may be reimbursable as Direct Administrative Costs and are subject to the cost share for the disaster.

Categories of Work

FEMA describes "Eligible work" as "emergency work" and "permanent work" based on the following categories (hospitals typically request reimbursement under the categories highlighted in yellow):

- **Emergency Work (6-month timeframe for completion)**
 - Category A: Debris Removal
 - May include debris removal operations from the facility's campus; however, this work is usually deemed Category B as the municipality is typically responsible for hauling debris from the right-of-way.

- **Category B: Emergency Protective Measures**
 - Includes all work needed to protect the facility, life and property, but does not include permanent repairs to the facility.
- **Permanent Work (18-month timeframe for completion)**
 - Category C: Roads and Bridges
 - May include work to parking lots, depending on factors such as size, ownership, etc.
 - Category D: Water Control Facilities
 - May include facility-owned storm drainage systems or culverts, depending on size and configuration.
 - **Category E: Buildings and Equipment**
 - Includes all permanent repairs or replacement of buildings, contents, and equipment (including vehicles).
 - Category F: Utilities
 - May include power plants at larger facilities or underground electrical service lines, depending on configuration and ownership.
 - Category G: Parks, Recreational, and Other Facilities
 - Generally not for reimbursement of healthcare facilities

Category B Work Emergency Work

- Acute Care Hospitals (ACH) generally have emergency work under Category B
- Some examples of Category B work include:
 - temporary facility related costs to continue operations until permanent restoration work is completed
 - emergency evacuations
 - labor costs for emergency mass care or shelter operations, (See FEMA Policy 9525.4, Emergency Medical Care and Evacuations) <http://www.fema.gov/9500-series-policy-publications/95254-emergency-medical-care-medical-evacuations>
 - emergency protective measures
 - temporary generators
- ACH emergency work under Category B can be done by permanent employees (An employee who has been hired for a position without a pre-determined time limit)
- Permanent employees' regular time is generally not a covered expense if employees are performing their regularly assigned duties according to their traditional work schedule; however, depending on the disaster this time may be reimbursable if it falls within a certain timeframe (e.g., 30-days following the event, etc.)
 - *NOTE: Rule of Thumb:* Would the employee be doing this work if there wasn't a disaster?
 - Permanent Employees: For debris removal and emergency protective measures, only overtime labor is eligible, regardless of normal duties or assignments
 - (See FEMA Recovery Policy RP 9525.7 Labor Costs-emergency work): http://www.fema.gov/pdf/government/grant/pa/9525_7.pdf
- Overtime (OT) is eligible for permanent employees doing emergency work
- OT is eligible for reassigned employees doing emergency work
- OTs eligible for temporary employees and certain backfill employees doing emergency work
- Cost for contractors performing emergency work is generally eligible for reimbursement. Usually regular time salaries of the applicant's employees supervising the contractors is not eligible for reimbursement

Category E Work Permanent Work

- Acute Care Hospitals (ACH) generally have Permanent Work in Category E
- Some examples of Category E work include:
 - Repairs to buildings, structural components, interior systems such as mechanical, electrical and plumbing systems, equipment and contents including furnishings
 - May reimburse for upgrades that are required by code; replacement of damaged building may be eligible if the repair costs are more than 50% of the replacement costs.

Typical Eligibility Guidelines for Regular and Overtime Costs (may vary by disaster)

REGULAR TIME	OVERTIME
Regular time labor costs are eligible for permanent restoration work (Cat E)	ACH's pre-disaster policy on OT or compensatory time determines if hospital is reimbursed for OT by salaried employees
Regular time labor costs not eligible for emergency work (Cat B)	Compensatory time for exempt employees is not eligible except where written policies allow for it and the policy cannot be contingent on Federal funding
Regular time labor costs eligible for permanent work for reassigned employees (Cat E)	OT labor costs are eligible for permanent restoration work (Cat E)
Regular time labor costs eligible for Backfill employee	OT labor costs are eligible for emergency work (Cat B)
Regular time labor costs are eligible for Temporary employees for both emergency and permanent work (Cat B and Cat E)	OT labor costs are eligible for emergency work for reassigned employees (Cat B)
Regular time labor costs are eligible for Supervisor's time	OT labor costs are eligible for permanent work for reassigned employees (Cat E)
	OT labor costs for backfill employees are eligible
	OT labor costs for temporary employees are eligible for both emergency and permanent work (Cat B and Cat E)
	OT labor costs for permanent employees for debris removal and emergency protective measures (Emergency work Cat A and B) are eligible
	OT labor costs for permanent work are eligible for all employees (Cat E)

Reasonable Cost

Reasonable cost is a cost that is both fair and equitable for the type of work being performed.

Reasonable cost can be established by:

- Historic documentation for similar work
- Average costs for similar work in the area
- Published unit costs from national cost estimating databases
- FEMA cost codes, equipment rates, and engineering and design service curves
- Applicants should work with FEMA to establish reasonableness via proper bidding and historical costs after a disaster so that expectations are realized as early as possible

It is highly recommended that pre-positioned contracts be used wherever possible as prices and terms are identified in less exigent circumstances and are generally more reasonable. FEMA provides reimbursement for these types of contracts:

Contract Types

- **Lump sum**—for work within a prescribed boundary with a clearly defined scope and a total price
- **Unit price**—for work done on an item-by-item basis with prices broken out per unit
- **Cost plus fixed fee**—a lump sum or unit price contract with a fixed contractor fee added into the price
- **Time and material**—should be avoided, but may be allowed for emergency work when a clear scope of work cannot be developed; generally limited to 70 hours

FEMA does not review or approve contracts but does provide:

- Technical assistance to ensure eligibility compliance.
- Information on whether costs are reasonable

Insurance

After eligibility has been determined, FEMA's Insurance reviewer will ultimately determine additional deductions, using calculations to determine anticipated insurance proceeds either based on depreciation, actual insurance claims, insurance documentation, etc. Hospital insurance risk managers should work with FEMA to outline insurance requirements. Many times a blanket policy for all facilities owned and operated by a hospital is procured and has a maximum value of coverage. In devastating disasters this maximum can oftentimes be exceeded and unless there is a schedule of coverage for each facility. FEMA may make its own determination on how insurance proceeds are applied, which can be a disadvantage to reimbursement. Also, FEMA approaches insurance coverage for flood and wind damages separately; specific insurance coverage for each type of damage often exist and flood damages may be covered more stringently.

Self-Insurance

Many healthcare facilities are self-insured. FEMA has very strict policies on how reimbursement is determined for self-insured applicants. Self-insured facilities that are not the responsibility of State agencies may still receive reimbursement with certain insurance considerations:

- Providing the self-insurance program includes a dedicated funding stream and allocation
- Deductibles are generally reimbursable

- Insurance proceeds are deducted from the reimbursement
- Private Non-Profit institutions and Local/Tribal organizations that are self-insured may not satisfy FEMA's insurance requirements. If this occurs then they may still be reimbursed under the PA program, but they may be required to purchase insurance as a contingency for eligibility.

Special Considerations

Special considerations are issues other than PA Program eligibility that could affect the scope of work and funding for a project. Special Considerations issues that must be addressed before Federal PA grant money can be obligated include:

- **Insurance.** Project grants must be reduced by insurance proceeds received or anticipated.
- **Hazard mitigation.** Damaged facilities may be eligible for additional assistance for hazard mitigation measures.
- **Historic preservation.** The Stafford Act requires compliance with Federal historic preservation laws.
- **Environmental protection.** The Stafford Act requires compliance with Federal environmental laws.

The Special Considerations Questions form reflects these areas of concern by identifying elements of the project that would trigger a special considerations review. (See also FEMA Public Assistance Guide, 322, Chapter 4, pages 115-136)

<http://www.fema.gov/pdf/government/grant/pa/paguide07.pdf>

Applicant's responsibility to identify Special Consideration and review them with FEMA at the Kickoff Meeting, Special Considerations Form (FF 90-120) (see example below):

<http://www.fema.gov/interactive-forms-library>

DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY SPECIAL CONSIDERATION QUESTIONS		O.M.B. NO. 1660-0017 Expires October 31, 2008
APPLICANT	Hospital Name as noted by FEMA	FEMA PW No.
PROJECT NAME	PROJECT NO.	LOCATION
App. Ref Number		
Form must be filledout - for each project.		
1. Does the damaged facility or item of work have insurance and/or is it an insurable risk? (e.g., buildings, equipment, vehicles, etc.) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		
Remember: project grants will be reduced by insurance proceeds received or anticipated		
2. Is the damaged facility located within a floodplain or coastal high hazard area/or does it have an impact on a floodplain or wetland? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		
3. Is the damaged facility or item of work located within or adjacent to a Coastal Barrier Resource System Unit or an Otherwise Protected rea? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		
4. Will the proposed facility repairs/reconstruction change the pre-disaster condition? (e.g., footprint, material, location, capacity, use or function) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		
5. Dose the applicant have a hazard mitigation proposal or would the applicant like technical assistance for a hazard mitigation proposal? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		
6. Is the damaged facility on the National Register of Historic Places or the state historic listing? Is it older than 50 years? Are there other, silliar buildings near the site? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		
7. Are there any pristine or undisturbed areas on, or near, the project site? Are there large tracts of forestland? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		
8. Are there any hazardous materials at or adjacnt to the damaged facility and/or item of work? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		
9. Are there any other environmental or controversial issues associated with the damaged facility and/or item of work? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure Comments		

Address of damaged facility or location

FEMA Form 90-120, FEB 96

PREVIOUS EDITION OBSOLETE

Alternate and Improved Projects

- Permanent work to facilities may be deemed as alternate or improved projects and are subjected to different funding rules.

Alternate Projects

- When a damaged facility is no longer needed or the services/functions of the facility are changed as a result of the repair/replacement the reimbursements may be redirected to an alternate project. They may include:
 - Repair or expansion of other facilities
 - Construction of new facilities
 - Demolition of the original structure
 - Purchases of capital equipment
- Alternate projects do not necessarily have to be disaster related and can be incorporated into new or prior capital expansion plans provided they can be attributed to a public benefit. These types of projects must be approved by FEMA.
- Requests for alternate projects must be made within 12 months of the kickoff meeting and approved by FEMA prior to project commencement.
- Alternate projects for private non-profit (PNP) entities are eligible for 75% of the approved Federal share of the estimated eligible costs associated with repairing the damaged facility to its pre-disaster design or the Federal share of the actual costs for completing the alternate project, whichever is less. Since the typical Federal share is set at 75%, this means the overall reimbursement may be as low as roughly 56% of the costs associated with repairing the damaged facility to its pre-disaster design.

Improved Projects

- These projects typically occur when the applicant uses the opportunity to repair the damaged facility to make additional improvements while still restoring the facility to its pre-disaster function and capacity. They may include:
 - Projects with changes to the pre-disaster configuration of the facility such as location, footprint or size.
 - Projects where the applicant opts to use a code or standard that does not meet FEMA requirements for repairs to the facility.
- Construction work cannot begin on improved projects without prior approval from FEMA and the State.
- Reimbursement for improved projects is limited to the federal share of the estimated costs of the original or improved project, whichever is less.
- Funds to construct the improved project may be combined with a grant from another Federal agency or with another approved project.

Hazard Mitigation

- To allow applicants to take action to reduce or eliminate long-term risk to people and property from natural hazards and their effects, FEMA provides two types of Hazard Mitigation Funding; Section 404 and Section 406.
- Section 404 funding is provided to states on a percentage basis for the overall disaster and is disbursed according to the State Hazard Mitigation Plan.
- Section 406 is provided to mitigate facilities damaged as a result of the declared disaster in order to prevent similar damages from similar future disasters.
- While not universal, generally Section 406 funds are utilized to apply mitigation to damaged elements of facilities and Section 404 funds are utilized for undamaged parts. Sections 404 and 406 funding may not be duplicative; however Section 404 funding may be an additive and accomplished on Section 406 facilities. The appropriate split between these two funding sources on a project is a decision that is made by FEMA.
- ACHs and other PNPs will be notified when Hazard Mitigation Grant Program application and funding becomes available.
- For more information see: <http://www.fema.gov/application-development-process/hazard-mitigation-grant-programs-frequently-ask-questions#3>

Section 404 Hazard Mitigation

- 404 Hazard Mitigation funding is provided through the Hazard Mitigation Grant Program (HMGP) and is available following disasters but not under the jurisdiction of the PA Program.
- The State manages the program and is responsible for soliciting applications from eligible applicants (e.g. ACHs).
- Projects seeking 404 funding must be submitted to the State in accordance with the State's hazard mitigation plan. These funds can be applied statewide or in specific counties.

Section 406 Hazard Mitigation

- 406 Hazard Mitigation funding is provided through the PA program and only applies to the damaged elements of the facility and not undamaged parts or an entire system or campus.
- Only measures of permanent work (e.g., Cat E) can be provided with 406 Hazard Mitigation funding.
- 406 Hazard Mitigation funding is considered part of the total eligible cost for repair, restoration or reconstruction of a facility. However, these funds are not available for alternate projects or improved projects where a new replacement facility is involved.
- Upgrades that are required to meet applicable codes and standards are not considered mitigation measures and are part of the eligible restoration work under the PA Program. Mitigation efforts must be cost-effective; FEMA uses several methods to determine this.
 - Mitigation measures amount to up to 15% of the total eligible costs for repair work on the project; however, critical facilities (e.g., hospitals) may have cost-

effective measures up to 100% of the total eligible cost of eligible repair work to the facility.

- If mitigation measures exceed eligible costs of repair work, the state or applicant must demonstrate cost effectiveness by providing a Benefit Cost Analysis (BCA), which may be formulated using FEMA's BCA software. The BCA is based on a comparison of the total project cost to the total cost of the following benefits:
 - Damages to the facility and its damaged contents
 - Temporary facilities required due to the damage
 - Loss of function
 - Loss of life and injury
 - Costs of prior damages to the facility
 - Damages avoided in the future due to mitigation measures
- If FEMA recommends 406 mitigation measures the Applicant is not required to implement them; however, not doing so may jeopardize future reimbursement opportunities if the facility is damaged in a subsequent disaster.
- Applicants may request 406 mitigations measures in absence of FEMA recommending them. This request needs to occur prior to any repair or reconstruction work beginning on the damaged facility as any work that is in progress or completed and needs to be corrected as a result of the mitigation may impact the overall application of 406 funding on the project.

Appeals Process

Overview of Appeals

- An eligible applicant (e.g., ACH) may appeal any PA eligibility determination or funding implications based on decisions made by FEMA.
- The applicant has a right to two appeals which are filed by the applicant via the state's PA officer
- The right to appeal will be made clear at a meeting in which the project worksheet (PW) is presented and reviewed between the applicant, state and FEMA when the applicant is asked to sign the completed PW.
- The state will outline the level of support they will provide to the applicant throughout the appeal, this usually takes two forms:
 - The state supports the applicant's right to appeal without supporting the details of the appeal
 - The state supports the applicant's position and appeal and recommends FEMA grant the appeal
- Successful appeals typically depend upon the ability of the applicant to adequately demonstrate that FEMA's determination(s) is inconsistent with FEMA's position in similar circumstances or that the determination conflicts with published policy, guidance or requirements. Policy, guidance and requirements are referenced in the following order of precedence:
 - The Robert T. Stafford Act
 - Title 44 of the Code of Federal Regulations (44 CFR)

- Disaster-Specific Guidance
- FEMA Policies (9500 Series)
- Other FEMA Publications (e.g., FEMA 322, 321, etc.)
- It is not uncommon for a PNP to be denied funding based on a PW that cited, in general terms, FEMA Policy Guidebooks (e.g., FEMA 322, 321, etc.). Determinations of ineligibility based on these documents should be closely examined as they can be very subjective and are intended as field guides and can be open to interpretation.
- *NOTE:* When filing an appeal the applicant will inherently subject the entire PW to scrutiny. This has the potential to result in further eligibility determinations which can place other (previously eligible) portions of funding in jeopardy.

Reasons for Appeal:

- Costs deemed eligible are less than applicant believes necessary to complete the work
- A facility, item or project is deemed ineligible for disaster assistance
- Extension of time is not granted
- A portion of the costs claimed for the work is ineligible
- The applicant disagrees with the details provided in the Scope of Work
- The applicant incurs significant net cost overruns

Deadlines:

- Appeals must be filed within 60 days of the applicant's receipt of notice of the action that is being appealed.
- The FEMA Regional Administrator (first appeals) or the FEMA Assistant Administrator for the Disaster Assistance Directorate (second appeals) will notify the grantee in writing of the disposition of the appeal or the need for additional information. Should additional information be required, a date by which the information needs to be received will be provided. Within 90 days of the receipt of this information (or lack thereof) the state will be notified in writing of the disposition of the appeal. If the appeal is granted, the FEMA Regional Administrator will take appropriate implementing action.
 - FEMA will typically adhere to the timeframe for appeals that do not raise sensitive issues or are not overly complex. However, it is not uncommon for FEMA to request additional information for more complex or sensitive appeals, which can extend the process for long periods of time.
- Should the first appeal not be granted, the applicant has a right to submit a second appeal within 60 days of the receipt of notice of the disposition of the first appeal. The process for the second appeal remains the same; however the level at which the appeal is reviewed is higher in FEMA's chain of command.

Agreements and Coalitions

- All agreements for sharing of resources should be formalized and in effect prior to the declared disaster.
- Agreements cannot be contingent on a Federal Disaster Declaration; however, they may reference State or local disaster declarations as a contingency for enactment.
- Agreements can include ineligible applicants (e.g., for-profit organizations, etc.). These organizations may provide support or services to eligible applicants, the costs associated with these activities may be reimbursable providing they are associated with work performed as a result of the declared disaster and were the responsibility of an eligible applicant.
- Agreements can include municipal or State agencies.
- Reimbursements for costs associated with work performed under agreements will only be obligated and disbursed after the requestor has incurred and paid expenditures.
- Agreements must clearly define the following:
 - The entity or organization responsible for the cost
 - The entity or organization responsible for performing the work
 - Responsibilities for other expenditures (e.g. housing, feeding, etc.)
 - The entity or organization responsible for repairs to permanent facilities
 - The entity or organization responsible for site restoration (e.g., if a building is used as a shelter, the organization responsible for restoring that building once the shelter is closed, etc.)
- Nomenclature in agreements is very important. Agreements must be explicit as to the responsibility and circumstances of enactment as ambiguity may impact eligibility. For instance, an agreement that indicates “The hospital administrator *may* enact the MOA” would be more questionable than “Under a Governor declared State of Emergency the hospital administrator *shall* enact the agreement”. The agreement may go into effect without any services rendered in either case; however, the second instance is much less ambiguous.
- Reimbursement is granted for assistance provided at the request of the requesting entity or the incident commander, providing the work is eligible and the cost is reasonable.
- Self-deployment and standby are generally not eligible until any work is performed at the specific request of the requesting entity or the incident commander.
- Agreements may be made verbally at the time of the event and still be eligible for reimbursement; however, they must be formalized in writing within 30 days of the requestor’s Applicant Briefing.
- Costs that are ineligible for medical care or treatment are still ineligible, even if incurred under a pre-existing agreement.

Resources

Federal Laws:

- Title 44 of the Code of Federal Regulations (CFR) Part 206 and subparts C and G-L and Part 13 subparts A-D *Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments*
- Robert T. Stafford Disaster Relief and Emergency Assistance Act (the Stafford Act), Public Law 93-288, as amended, 42 U.S.C. Section 5121-5207

FEMA Public Assistance Guides

- FEMA Public Assistance Policy 9500, et. seq
- FEMA Public Assistance Policy 9570.4 SOP *Kickoff Meeting*, September 1999
- FEMA Public Assistance Policy Digest (FEMA 321)
- FEMA Public Assistance Guide (FEMA 322)
- FEMA Applicant's Handbook (FEMA 323)

Website:

FEMA Public Assistance Digest is available for online reading or download at:

<http://www.fema.gov/pdf/government/grant/pa/pdigest08.pdf>.

Acronyms

ACH	Acute Care Hospital
BCA	Benefit Cost Analysis
CEF	Cost Estimate Format - for Public Assistance large projects
CMF	Case Management File
HMGP	Hazard Mitigation Grant Program
INF	Immediate Needs Funding
PA	Public Assistance
PAC	Public Assistance Coordinator
PDA	Preliminary Damage Assessment
PNP	Private Non-profit (Emergency medical care facilities that provide direct patient care, including hospitals, clinics, outpatient services, etc.)
PW	Project Worksheet
RA	Regional Administrator (FEMA)
RPA	Request for Public Assistance