

Emergency Prescription Assistance Program (EPAP) Overview Fact Sheet

August 2016

The Emergency Prescription Assistance Program (EPAP) is funded by the Stafford Act and designed to help disaster survivors access prescription medicines. EPAP can also be activated by the Public Health Service Act under the authority of the National Disaster Medical System (NDMS). The program utilizes normal business operations (e.g., electronic prescription claims processing, utilization of the normal pharmaceutical supply chain for distribution and dispensing) to pay for prescription medications for eligible persons.

What does EPAP Provide?

EPAP provides a 30-day supply of covered prescription medications and specific medical supplies (e.g., test strips) that can be renewed every 30 days for as long as EPAP is active. It also covers vaccines and durable medical equipment (DME) such as canes, crutches, wheelchairs and walkers. Affected populations can access these resources due to loss as a direct result of the declared emergency or as a secondary result of loss or damage caused while in transit from the emergency site to the designated shelter facility. EPAP coverage will be issued for populations from disaster-affected areas by zip code.

Why is EPAP Important?

There are many benefits associated with EPAP. For example, the program:

- Reduces barriers to access of care for pharmaceutical services based on ability to pay following a major disaster.
- Provides access to both acute and chronic care medicines for a significant number of patients.
- Helps to save the healthcare system time and resources by enabling compliance with medication therapies.
- Reduces the number and types of response resources (e.g., emergency medical services, state and federal response teams and equipment) needed in or near the impacted areas.
- Utilizes local businesses, which helps ensure the employment, business recovery, and tax revenue of these communities that could otherwise be even more devastated by delays in the recovery process.

What are the Program Requirements?

- Must be activated by the Stafford or Public Health Service Act.
- Must cover individuals whose pre-disaster residences are within the geographic area(s) designated by the program activation.
- Provides payment for a limited formulary of prescription medications, medical supplies, vaccines, DME under the following assumptions:
 - Resources will be provided at no cost or co-pay to the patient.
 - Eligible individuals must have no other drug, medical supply, vaccine, or DME coverage (e.g., private insurance or Medicare/Medicaid).
 - Initial fill and refills will be for no greater than a 30 day supply until EPAP is deactivated.
 - Services can be provided by any enrolled pharmacy nationwide.

What Data is Available through EPAP after an Emergency?

- Claims: Number and amount of paid claims for prescriptions, medical supplies, vaccines and DME.
- Patient Demographics: the number of individuals served by geographic distribution (Note: this information may not be available for all events).
- Pharmacy Demographics: pharmacies that participated in the program by location.
- Pharmacy Services: types of drugs, medical supplies, vaccines, and DME paid for by EPAP.

Access the [Emergency Prescription Assistance Program \(EPAP\) Superstorm Sandy Data Fact Sheet](#) for an example of how EPAP data is used after a disaster.

How Can I Find Out More About EPAP?

Visit the EPAP website at: <http://phe.gov/EPAP> to find out more about EPAP, why it is important, how patients can get assistance, and the 72,000+ pharmacies currently enrolled in the program.

For informational and planning purposes, state, local, tribal, or territorial planners should contact their [ASPR Regional Emergency Coordinator](#).

For additional questions or data requests, please contact the HHS/ASPR [Technical Resources, Assistance Center, and Information Exchange \(TRACIE\)](#) at askasprtracie@hhs.gov or 1844-5-TRACIE (587-2243).