Americans rely heavily on hospitals to provide 24/7 access to care for all types of patients, to serve as a safety net provider for vulnerable populations and to have the resources and skills needed to respond to disasters. These roles are not explicitly funded; instead they are built into a hospital’s overall cost structure and supported by revenues received from providing direct patient care. Other care sites don’t share these roles or bear these costs, yet some policymakers want to make total payment for a service provided in a hospital the same as when a service is provided in a physician office.

Hospitals must be prepared to respond to a range of natural and man-made disasters.

- 2013:
  - Moore, Oklahoma tornado with peak winds of 210 miles per hour kills 24 and injures 377 others.
  - Boston Marathon bombing kills 3 and injures 264.

- 2012:
  - Aurora, CO: Shooting at local theater kills 12 and injures 58.
  - Doswell, VA: Motor coach rolls over on highway kills four and injures 49.
  - Indianapolis, IN: Chemical spill prompts aquatic center evacuation. 79 people, mostly children, injured and taken to local hospitals.

Seven hurricanes/tropical storms have made landfall in the last two years, in addition to ongoing tornado and seismic activity.