Coronavirus (COVID-19) Pandemic
Whole-of-America Response

Friday, April 10, 2020

“JUST THIS WEEK, FEMA AND THE U.S. PUBLIC HEALTH SERVICE ANNOUNCED THAT WE WILL GIVE AN OPTION TO STATES TO TRANSITION FROM A FEDERAL TESTING SITE, DOZENS OF WHICH HAVE BEEN ASSEMBLED AROUND THE COUNTRY TO A STATE-MANAGED SITE. I WANT TO EMPHASIZE THAT THIS IS AN ‘OPTION.’ WE BELIEVE IT GIVES STATES GREATER FLEXIBILITY TO STYLE SITES OR MANAGE SITES IN AREAS THEY THINK ARE MOST IMPORTANT.”

- VICE PRESIDENT MIKE PENCE

Topline Briefing Points and Messages

▪ FEMA, HHS, and our federal partners work with state, local, tribal and territorial governments to execute a whole-of-America response to COVID-19 pandemic and protect the health and safety of the American people.

▪ FEMA continues to expedite movement of commercially pre-sourced and commercially procured critical supplies from the global market to medical distributors in various locations across the U.S. through Project Air Bridge.

▪ Beginning April 10, HHS and FEMA will work with states with federal Community-Based Testing Sites to clarify whether sites want to continue as they are now, or transition to full state control.
  □ Under state control, CBTS sites would still receive technical assistance from the federal government and be able to request supplies through the normal FEMA systems.
  □ Leadership at both HHS and FEMA will consider approving extension requests by states that need additional federal assistance to manage and operate sites. A formal notice to continue must be submitted to the CBTS Task Force Leader, by either the state’s Governor or his or her representative, no later than April 9.
  □ The federal government will continue supporting each site through the transition process to ensure that the states can fully manage and operate their CBTS program independently. This includes providing each site with enough supplies to continue to operate for 7-14 days after the agreed upon transition date.
  □ After transition, states can choose to source testing kits and supplies through their standard ordering process or to request assistance from FEMA using the standard Resource Request Process through the appropriate FEMA Region.
  □ States may also seek reimbursement for eligible expenses associated with running their sites through FEMA’s Public Assistance program. In general, activities local and state governments are conducting at CBTS are eligible for reimbursement under the Public Assistance program, subject to a cost share.
  □ To date, Community Based Testing Sites have screened over 85,000 individuals.

▪ On April 8, HHS announced the first contract for ventilator production rated under the Defense Production Act, to General Motors. A second contract was awarded to Philips on the same day for ventilator production.
  □ The Philips contract was for $646.7 million for the delivery of 2,500 ventilators to the Strategic National Stockpile by the end of May 2020 and a total of 43,000 ventilators to be delivered by the end of December 2020.
GM’s contract, at a total contract price of $489.4 million, is for 30,000 ventilators to be delivered to the Strategic National Stockpile by the end of August, with a production schedule allowing for the delivery of 6,132 ventilators by June 1.

- Data and information-sharing are critical for moving forward in this response and equipping areas expected to be the next medical hot spots.
- Considering both scarcity of ventilators in the Strategic National Stockpile (SNS) and current capacity of the private sector to meet demand, the federal government has adopted a process to manage allocation of federal ventilator resources to ensure the right amount of ventilators are shipped to the to the right states to sustain life within a 72-hour window.
- Emergency managers and public health officials submit requests for ventilators to FEMA/HHS, providing detailed data on total medical/ hospital beds; total acute care (ICU) beds; normal occupancy; predicted surge occupancy; and number of ventilators available in the state.
- States can send requests outside of the 72-hour window for consideration by the federal government; allocation decisions and/or shipments, however, should not be expected until the state is within the immediate 72-hour window.

- On April 8, HHS, through the Health Resources and Services Administration awarded more than $1.3 billion to 1,387 health centers. These centers will help communities across the country detect coronavirus; prevent, diagnose, and treat COVID-19; and maintain or increase health capacity and staffing levels to address this public health emergency.
- On April 3, President Trump issued “Memorandum on Allocating Certain Scarce or Threatened Health and Medical Resources to Domestic Use” directing DHS and FEMA, in consultation with the HHS, to use the Defense Production Act to keep scarce medical resources within the United States for domestic use. CBP is assisting FEMA in temporarily detaining export shipments of PPE. PPE subject to this policy includes: N95 respirators, and a variety of other respirators; surgical masks; and, surgical gloves.

### Supply Chain Task Force

- The FEMA/HHS Supply Chain Stabilization Task Force increases supply of medical supplies and equipment to front line healthcare workers.
  - Supply is executed through a four-pronged approach: Preservation, Acceleration, Expansion, and Allocation, to rapidly increase supply today and expand domestic production of medical supplies and equipment to increase supply long-term.
- As of April 9, Project Airbridge has completed 26 flights with an additional 54 scheduled for a total of approximately 80.
- Through Project Airbridge, the following supplies have been delivered from overseas manufacturers to the U.S. and into private sector supply chains from March 29 to April 9:
  - 370,000 N95 masks
    - 240,000 N95 masks into private sector supply chains, and
    - 130,000 N95 masks were purchased by FEMA from the first Airbridge flight, which landed at JFK March 29
  - 250.6 million gloves
  - 25.1 million surgical masks
  - 3.5 million gowns
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- 24,000 face shields

**Recent flights:**
- Three flights landed in Chicago on April 8 with a total of 34.4 million gloves, 8.7 million protective masks and 195,000 medical gowns.
- Three flights landed April 9 in Chicago (1), New York City (1) and Dallas (1) today, April 9, with a total of approximately 54.7 million gloves.
- It is important to note that any number of variables can affect international flight schedules, causing unexpected delays or cancellations.

**FEMA established the air bridge to shorten the amount of time it takes for U.S. medical supply distributors to get commercially sourced and procured personal protective equipment and other critical supplies into the country for their respective customers.**
- FEMA covers the cost to fly supplies into the U.S. from overseas factories, cutting the amount of time it takes to ship supplies from weeks to days. FEMA does not have detailed visibility on PPE amounts until the cargo is loaded.
- As part of the current agreement with distributors, 50 percent of the supplies on each plane are directed by the distributors to customers within hotspot areas with the most critical needs for those supplies. These areas are determined by HHS and FEMA based on CDC data.
- FEMA is providing distributors with up-to-date information on the locations across the country hardest hit by COVID-19 or in most need of resources now and in the future.
- The remaining 50 percent is fed into that distributors’ normal supply chain and onto their customers across the U.S. in order to not disrupt the current supply chain system.

- To date, 8.5 million N95 masks from the Department of Defense were distributed to cities prioritized by the White House Task Force; an additional 1.65 million were delivered to New York, Michigan, and Illinois.
- FEMA has awarded a contract with a manufacturer in South Korea to provide approximately 750,000 test kits. Flights carrying the test kits are expected to begin in the next couple of weeks.
  - The test kits will be distributed to states that can process them and have a need to augment their existing testing capability. Urgent needs will be given priority based on medical hot spot analysis.
- The Supply Chain Task Force is working with private sector companies to help augment the supply chain by facilitating conversion of their manufacturing lines to produce PPE such as masks, gowns and other items in need.
- Since Monday night, two shipments of critical Hydroxychloroquine medicine have departed the Strategic National Stockpile.
  - The first shipment of 9 million tablets is in support of New York City, Chicago, New Orleans and Detroit.
  - The second shipment of 10.1 million tablets is intended for St. Louis, Philadelphia, Pittsburg, Baltimore, Washington D.C., Milwaukee, Miami, Houston, Indianapolis, and Baton Rouge. A portion of this shipment will also support the Veterans Affairs Consolidated Mail Outpatient Pharmacy and the Department of Defense.

**By the Numbers**

- Forty-two states, four territories and more than 30 tribes have issued stay-at-home orders.
49 states, 4 territories, and Washington, D.C., have been approved for major disaster declarations to assist with additional needs identified.

As of April 8, FEMA and HHS have provided or are currently shipping 10,540 ventilators from the Strategic National Stockpile (SNS) and the Defense Department to: Alaska (60), California/LA County (170), Colorado (100), Connecticut (150), Delaware (50), Florida (200), Georgia (150), Guam (30), Illinois (400), Louisiana (350), Maryland (470), Massachusetts (400), Michigan (700), the Navajo Nation (50), Nevada (150), New Jersey (1,858), New York (4,400), Oregon (140), Washington (500) and the Federal Bureau of Prisons (20).

Governor Brown of Oregon sent the state’s 140 ventilators directly to New York; and,
Governor Inslee of Washington is returning 400 of the state’s 500 ventilators to the SNS to be deployed to areas of greatest need.
Governor Newsom of California is sending 500 state-owned ventilators to medical hotspots across the country through Emergency Management Assistance Compacts (EMAC). States that will receive these ventilators include New York (100), New Jersey (100), Illinois (100), Maryland (100), Delaware (50), Washington, D.C. (50), and Nevada (50).

The federal government has approximately 7,159 total ventilators available: 6,860 in the Strategic National Stockpile; 299 from the Department of Defense.

Department of Defense deployed 70 ventilators with USNS Mercy, 52 ventilators with USNS Comfort, and 36 ventilators with three Army field hospital personnel supporting Seattle and New York City.

As of April 9, FEMA and HHS have coordinated the delivery of or are currently shipping: 48.6 million N95 respirators, 57.6 million surgical masks, 5.5 million face shields, 9 million surgical gowns, 105 million gloves, 212,000 coveralls, 9,090 ventilators and 8,500 federal medical station beds.

FEMA obligated $5.02 billion in support of COVID-19 efforts. This week, major obligations include:
$55 million for Washington, D.C. for USACE to provide assessment and construction of alternate care facilities to support medical surge.
$50 million for Colorado to provide construction of alternate care facilities.
$33.7 million for Nevada for DOD to provide Title 32 personnel and equipment to assist states to execute emergency protective measures.
$26.1 million for New Jersey for the purchase of PPE and materials at the emergency operations center, and equipment purchases.

FEMA currently has 2,852 employees supporting COVID-19 pandemic response out of a total 20,550 agency employees ready to respond to other emergencies should they occur.

As of April 8, 69 agencies across 24 states, the District of Columbia, one tribe and one U.S. territory have sent: 152 text messages via the Wireless Emergency Alert system; 40 messages to broadcast stations via the Emergency Alert System.

To date, the President has approved 38 National Guard requests for federal support for the use of National Guard personnel in a Title 32 duty status. Eleven requests are pending approval.

Requests approved include: Arizona, California, Colorado, Connecticut, Florida, Georgia, Guam, Hawaii, Illinois, Kentucky, Indiana, Louisiana, Massachusetts, Maryland, Michigan, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South

- Pursuant to this approval, the Federal Government will fund 100 percent of the cost share for National Guard orders up to 31 days. These orders of duty must be effective no later than two weeks from the date of the Presidential Memorandum on April 6.
- This approach will allow National Guard members to receive the additional benefits associated with 31-day deployments as well as allow each state additional time to issue new orders.
- More than 23,000 National Guard troops have activated to help with testing and other response efforts.

- To date, CDC, state, and local public health labs and other laboratories have tested more than 2.07 million samples.
- The U.S. Public Health Service deployed more than 1,500 officers in support of nation-wide efforts to mitigate the virus’ potential spread.
- The U.S. Army Corps of Engineers received 40 mission assignments totaling approximately $1.7 billion to design and build alternate care sites in Alaska, American Samoa, Arizona, California, Colorado, Commonwealth of the Northern Mariana Islands, Florida, Guam, Hawaii, Idaho, Illinois, Iowa, Kentucky, Maine, Maryland, Michigan, Missouri, Montana, the Navajo Nation, Nevada, New Jersey, New Mexico, New York, North Dakota, Oregon, Pennsylvania, Utah, Virginia, Washington and Wisconsin.
  - As of April 9, more than 2,078 USACE personnel are activated to support the COVID-19 mission, with more than 15,000 personnel engaged in additional response efforts.

FEMA and HHS Response

FEMA

- On March 13, President Trump declared a nationwide emergency pursuant to Stafford Act
  - 50 states, the District of Columbia, five territories, and 26 tribes are working directly with FEMA
  - A tribal government may choose to be a subrecipient under a state that has chosen to be a recipient of FEMA assistance, or choose to be a direct recipient of FEMA.
  - FEMA activated all 10 Regional Response Coordination Centers to support ongoing response efforts across the country. Emergency operations centers in all states and territories are activated.

- Requests for assistance, especially for critical supplies, should be routed through the proper channels as soon as possible. The most efficient way to identify critical gaps and get results:
  - Consistent with the principle of locally executed, state managed, and federally supported response, requests for assistance at the local and county levels should first be routed to their respective state.
  - Any needs that cannot be met by the state or tribe should then be sent to the respective FEMA regional office. FEMA regions will direct requests to FEMA NRCC in Washington, D.C. for fulfillment.

- FEMA/HHS are delivering supplies and ventilators using its logistics supply chain management system to procure and track commodities to supplement state and tribal purchases.
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- FEMA issued a request for quotation on March 26, for vendors who have medical equipment and supplies to sell to the agency. The RFQ can be found on [www.sam.gov](http://www.sam.gov).
- On March 21, HHS awarded contracts to five companies to purchase approximately 600 million N95 respirators over the next 18 months.
- As of April 5, the FEMA/HHS Supply Chain Stabilization Task Force is validating responses from 11 manufacturers to identify viable supply sources for additional PPE.
  - On April 9, FEMA announced that it is suspending rent for disaster survivors who are living in FEMA-purchased temporary housing units in California, Florida, North Carolina and Texas. The temporary suspension means residents will not have to pay rent in April, May or June.

U.S. Department of Health and Human Services Agencies and Offices

- HHS is releasing $160 million dollars in additional CDC funding to dozens of regional hotspots for effective response to the worsening situation in their jurisdictions.
- On March 24, HHS announced $250 million in grants from the Administration for Community Living to help states, territories and tribes provide meals to older adults. Additionally, HHS awarded $100 million to support HHS health resources and services administration-funded health centers across the country to address screening and testing needs, acquire medical supplies and boost telehealth capacity.
- HHS identified $80 million dollars specifically for tribes, tribal organizations, and tribal health service providers.
- On March 21, HHS awarded contracts to five companies to purchase approximately 600 million N95 respirators over the next 18 months. This purchase encourages manufacturers to increase production of N95 respirators now, with a guarantee that companies will not be left with excess supplies if private sector orders are cancelled.

Centers for Disease Control and Prevention

- On March 31, the president extended the nation's Slow the Spread campaign until April 30.
- CDC released personal protective equipment optimization strategies for healthcare providers to optimize resources, deal with limited resources, and make contingency plans or alternative strategies when supplies are limited.
- On March 28, the Centers for Medicare and Medicaid Services sent a letter to the nation’s hospitals requesting they report data to HHS, CDC, and the CDC’s National Healthcare Safety Network (NHSN) COVID-19 Patient Impact and Hospital Capacity Module. These daily reports include bed capacity and supplies.
- On April 3, CDC launched COVIDView, a weekly report that summarizes and interprets key indicators from a number of existing surveillance systems.
- On April 8, CDC issued additional guidance to help ensure critical infrastructure workers can perform their jobs safely after potential exposure to the virus.
  - The guidance covers essential health care workers who’ve been exposed to the coronavirus.
  - Essential workers can, under certain circumstances, go back to work, if they’re asymptomatic and take the recommended actions of taking their temperature before they go to work, wearing a face mask at all times, and practicing social distancing when they’re at work.
On March 17, CDC issued a Level 3 Travel Health Notice for cruise ship travel. CDC recommends that all people defer travel on cruise ships, including river cruises, worldwide.

**Food and Drug Administration (FDA)**

- FDA approved a Phase-3 clinical trial using a rheumatoid arthritis drug for treatment of severe COVID-19 pneumonia.
- On March 28, FDA issued a **Emergency Use Authorization (EUA)** to allow hydroxychloroquine sulfate and chloroquine phosphate products donated to the Strategic National Stockpile to be distributed and used for certain hospitalized patients with COVID-19.
- FDA has granted 30 **Emergency Use Authorizations** of commercially available diagnostic tests, including one antibody test to be used in hospital laboratories.
- The National Institutes of Allergy and Infectious Diseases mobilized a rapid research response to quickly develop effective COVID-19 countermeasures, including diagnostics, vaccines, and treatments.

**Other Federal Agencies**

- President Donald J. Trump signed the bipartisan CARES Act to provide relief to American families, workers, and the heroic healthcare workers on the frontline of this outbreak.
  - $100 billion will go to healthcare providers, including hospitals on the front lines of the COVID-19 pandemic.
  - To expedite providers getting money as quickly as possible, $30 billion is being distributed immediately proportionate to providers’ share of Medicare fee-for-service reimbursements in 2019.
  - These initial payments will begin being delivered on April 10, with $26 of the $30 billion expected to be delivered to providers’ bank accounts that day.
  - As a condition to receiving these funds, providers must agree not to seek collection of out-of-pocket payments from a COVID-19 patient that are greater than what the patient would have otherwise been required to pay if the care had been provided by an in-network provider.
  - The Administration is rapidly working on future targeted distributions to hospitals and providers that will focus on providers in areas particularly impacted by COVID-19, rural providers, and providers with lower shares of Medicare reimbursement or who predominantly serve the Medicaid population.
- As of April 7, the Small Business Administration’s [Paycheck Protection Program](https://www.sba.gov/funding-programs/paycheck-protection-program) has processed more than $70 billion in loans for qualifying small businesses.
- On April 9, the U.S. Coast Guard was tracking one remaining cruise ship (Pacific Princess) to arrive in US port with 125 passengers.
- On March 28, the Office of Personnel Management announced the COVID-19 Surge Response Program. Under this program, agencies will be able to post rotational opportunities for federal employees to support the COVID-19 response.
- On March 24, the Department of Justice created a national task force to actively look for and act on hoarding and price gouging.

Learn more at fema.gov/coronavirus
The task force is a result of the March 23 Executive Order and HHS determination under the Defense Production Act that certain personal protective equipment (PPE) and medical supplies are scarce.

DOJ and HHS partnered to distribute medical supplies confiscated from price gougers to those on the frontline of the COVID-19 response in New York and New Jersey.

The Department of Homeland Security has extended the REAL ID enforcement deadline to Oct. 1, 2021.

American Red Cross is continuing to seek blood and convalescent plasma donations

- People who have fully recovered from COVID-19 have antibodies in their plasma that can attack the virus.
- The Red Cross has been asked by the U.S. Food and Drug Administration (FDA) to help identify prospective donors and manage the distribution of these products to hospitals treating patients in need. More information at RedCross.org.

Many telecommunication companies are working with the Federal Communications Commission to “Keep Americans Connected.” This pledge is designed to ensure that Americans do not lose their broadband or telephone connectivity during the COVID-19 response.

The Internal Revenue Service (IRS) donated 58,400 N95 respirators to the states of California, Kentucky, Maryland, Massachusetts, New York, Pennsylvania, Tennessee, Texas and Washington, D.C.

The U.S. Department of Labor announced availability of up to $100 million for Dislocated Worker Grants to help address the workforce-related impacts related to COVID-19.

The U.S. Department of Housing and Urban Development issued a moratorium on foreclosures and evictions for single family homeowners with FHA-insured mortgages for the next 60 days.

The U.S. Department of Agriculture is delivering one million meals per week to children in rural areas who are out of school.

The U.S. Department of Education announced all borrowers with federally held student loans will have zero interest rates for at least 60 days. Additionally, these borrowers will have the option to suspend their payments for at least two months to allow them greater flexibility.