

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

Monday, April 6, 2020

“WE HAVE THE BEST DOCTORS, THE BEST MILITARY LEADERS, AND THE BEST LOGISTICS PROFESSIONALS ANYWHERE IN THE WORLD AND WE’RE ORCHESTRATING A MASSIVE FEDERAL RESPONSE UNLIKE ANYTHING OUR COUNTRY HAS EVER SEEN OR DONE.”
- PRESIDENT DONALD J. TRUMP

Topline Briefing Points and Messages

- Under the direction of the White House Coronavirus Task Force, FEMA, HHS and our federal partners are working with state, local, tribal and territorial governments to execute a whole-of-America response to fight the COVID-19 pandemic and protect the public.
- The number one priority is the health and safety of the American people.
- On March 31, the president extended the nation’s [Slow the Spread](#) campaign until April 30.
 - The American people play a key role in the campaign to help slow the virus’ spread and keep our most high-risk populations safe.
 - For the latest updates and information on how to protect yourself and what to do if you think you are sick is available at www.coronavirus.gov.
- FEMA is expediting movement of critical supplies from the global market to medical distributors in various locations across the U.S. through Project Air Bridge. FEMA is scheduling flights daily but does not have detailed visibility on the amount of PPE until the cargo is loaded.
 - Since March 29, flights have landed in New York, Chicago, Miami, Los Angeles, and Columbus, Ohio. On April 5, four additional flights landed in Chicago, Los Angeles, Columbus, Ohio and Louisville, Kentucky.
 - Each flight contains critical personal protective equipment (PPE), to include gloves, gowns, goggles, and masks.
 - Overseas flights are arriving at operational hub airports for distribution to hotspots and locations across the country through regular supply chains. Flight arrivals do not mean supplies will be distributed in the operational hub locations.
- To efficiently maintain the country’s existing medical supply chain infrastructure, FEMA is supplementing – not supplanting – the supply chain through a variety of strategies, including Project Airbridge.
 - The air bridge was created to shorten the amount of time it takes for U.S. medical supply distributors to get personal protective equipment and other critical supplies into the country for their respective customers.
 - FEMA is doing this by covering 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.
 - 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.
 - The remaining 50 percent is fed into that distributors' normal supply chain and onto their customers in other areas across the U.S.
- HHS is releasing \$160 million dollars in additional CDC funding to dozens of regional hotspots. These funds will be used to support areas hard-pressed by COVID-19 in their work to respond effectively to the worsening situation in their jurisdictions.
- The FDA issued an [Emergency Use Authorization of hydroxychloroquine sulfate](#) and an [Emergency Use Authorization of chloroquine phosphate](#) to treat certain patients hospitalized with COVID-19.
 - Hydroxychloroquine sulfate and chloroquine phosphate are oral prescription drugs approved to treat malaria and other diseases but both drugs have shown activity in laboratory studies against coronaviruses, including SARS-CoV-2 (the virus that causes COVID-19) and anecdotal reports suggest that these drugs may offer some benefit in the treatment of hospitalized COVID-19 patients.
 - The Strategic National Stockpile has begun shipping doses of hydroxychloroquine to New York and Los Angeles County based on their requests.
- Given the scarcity of the ventilators in the Strategic National Stockpile (SNS) and the current capacity of the private sector to meet the demand, the federal government has adopted a process to manage federal ventilator resources to ensure ventilators are shipped to the states in the amount needed to manage the immediate crisis.
 - At present, the federal government has 8,644 total ventilators available, which includes 8,044 in the Strategic National Stockpile and 600 available from the Department of Defense.
- As of April 4, FEMA and HHS have delivered ventilators from the Strategic National Stockpile to Alaska (60), California (170), Connecticut (50), Florida (200), Georgia (150), Illinois (600), Louisiana (350), Maryland (120), Massachusetts (100), Michigan (700), New Jersey (850), New York (4,400), and Washington (500).
 - 140 ventilators that had previously been delivered to Oregon were donated to New York by Gov. Kate Brown.
 - Additional allocations in process include a 250-bed Federal Medical Station and a Public Health strike team for Michigan; a 50-bed Federal Medical Station for the Metro D.C. area; 30 ventilators for Guam; and an 300 additional ventilators to New Jersey.
- Forty states, four territories and 23 tribes have issued stay at home orders.

FEMA and HHS Response

- On March 13, 2020, President Trump declared a nationwide emergency pursuant to Sec. 501(b) of Stafford Act to avoid governors needing to request individual emergency declarations.
- All 50 states, the District of Columbia, five territories and 21 tribes are working directly with FEMA under the nationwide emergency declaration for COVID-19.
 - 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.

DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- 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.
- In addition, 50 states and territories have been approved for major disaster declarations to assist with additional needs identified.
 - Those with major declarations approved include: Alabama, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, New Jersey, New York, North Carolina, Maine, Maryland, Massachusetts, Michigan, Mississippi, Missouri, Montana, New Hampshire, New Mexico, Nebraska, Nevada, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, West Virginia, Washington and Wisconsin, as well as Washington, D.C., the Commonwealth of Puerto Rico, and the territories of Guam, the Northern Mariana Islands and the U.S. Virgin Islands.
- FEMA has obligated \$4.1 billion in support of COVID-19 efforts, with major obligations in the last week including:
 - \$60 million to Washington D.C. to acquire PPE decontamination equipment.
 - \$54 million to Illinois to provide facility assessments and construction to address medical facility shortages.
 - \$60 million to New York to provide equipment, supplies and temporary staff.
- To date, 95 CDC, state and local public health labs have tested more than 1.67 million individuals.
- The FEMA/HHS Supply Chain Stabilization Task Force is focused on increasing the supply of medical supplies and equipment to healthcare workers on the front line.
 - 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.
- 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 is working with HHS to deliver supplies and ventilators using its logistics supply chain management system to procure and track commodities to supplement state and tribal purchases.
 - 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.
 - Additionally, a Request for Information has been issued to the private sector for ventilators.
 - 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.

DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- 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.
- 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 also has funding available, including [\\$80 million dollars specifically identified for tribes](#), tribal organizations, and tribal health service providers.
- The 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 April 3, CDC launched [COVIDView](#), a weekly report that summarizes and interprets key indicators from a number of existing surveillance systems.
- CDC has issued a [Global Level 3 Travel Health Notice](#), advising travelers to avoid all nonessential international travel. [Travelers returning from international destinations](#) should stay home for a period of 14 days after returning to the U.S., monitor their health and practice social distancing.
- CDC has 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.
- The U.S. Public Health Service has deployed more than 1,500 officers in support of nation-wide efforts to prepare for mitigating the virus's potential spread in the United States.
- The Food and Drug Administration approved a Phase-3 clinical trial using a rheumatoid arthritis drug for treatment of severe COVID-19 pneumonia.
- On March 28, the FDA issued an [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.
- National Institutes of Allergy and Infectious Diseases mobilized a rapid research response to quickly develop effective countermeasures for COVID-19, including diagnostics, vaccines and treatments.
- In response to concerns of undue financial hardships, FEMA's National Flood Insurance Program is extending the 30-day grace period for policies with expiration dates between Feb. 13 and June 15 to 120 days.
- As of April 5, 66 agencies across 24 states, the District of Columbia, one tribe and one U.S. territory have sent a total of 135 text messages to cell phones containing information on COVID-19 via the Wireless Emergency Alert system, and 36 messages to broadcast stations via the Emergency Alert System.

FEMA Disaster Response Capacity

- Even as FEMA is focused on responding to COVID-19, we are also preparing and maintaining readiness for other disasters to include spring flooding, severe weather and the upcoming hurricane season.

DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- FEMA currently has 2,578 employees supporting the COVID-19 pandemic response out of a total 20,550 agency employees who are prepared to respond to other emergencies should they occur.
- FEMA considers every employee an emergency manager, and each employee has regular and recurring emergency management responsibilities.
 - The agency has developed a series of online trainings to expand the cross-training of its workforce and build additional capacity.
- Should additional support be needed, FEMA is able to activate the Department of Homeland Security's surge capacity force composed of federal employees from DHS and other agencies.

Federal Funding of National Guard Under Title 32

- On March 22, President Trump directed the Secretary of Defense to permit full federal reimbursement, by FEMA, for some states' use of their National Guard forces.
 - The President's action provides Governors continued command of their National Guard forces, while being federally funded under Title 32, enabling these States to use the additional resources to meet the missions necessary in the COVID-19 response.
 - Each state's National Guard is still under the authority of the governor and is working in concert with the Department of Defense.
- To date, President Trump approved a total of 25 requests from California, Connecticut, Florida, Georgia, Guam, Hawaii, Illinois, Indiana, Louisiana, Massachusetts, Maryland, Michigan, Missouri, New Hampshire, New Jersey, New Mexico, New York, Ohio, Puerto Rico, Rhode Island, Tennessee, Texas, Washington, Washington, D.C., and the U.S. Virgin Islands.
 - Twenty-three requests are pending for approval of federal support for use of National Guard personnel in a Title 32 duty status.
- Title 32 requests from states and territories will be considered for approval by the President based on the following criteria:
 - A state or territory must have been approved for a Major Disaster declaration for the COVID-19 response or have submitted a Major Disaster Declaration request to FEMA for review.
 - The state or territory must have activated the lesser of 500 individuals or 2 percent of National Guard personnel in the state or territory in response to COVID-19.
 - A specific request for the reimbursement through Title 32 status must be submitted to the FEMA Administrator via the FEMA Regional Administrator, identifying specific emergency support functions the National Guard will carry out for COVID-19 support in accordance with the Stafford Act.
- For those states and territories that are approved under these criteria, FEMA will execute a fully reimbursable mission assignment to the Department of Defense, including reimbursement for pay and allowances of National Guard personnel serving in a Title 32 duty status in fulfillment of the FEMA mission assignment.
 - Pursuant to this approval, the federal government will fund 100 percent of the cost share for 30 days from the date of the authorizing Presidential Memorandum.
 - The Administration will continue to work with states approved for 100 percent cost share to assess whether an extension of this level of support is needed.
- The use of federal funding for Title 32 will not federalize command of the activated National Guard personnel. Each state's National Guard is still under the authority of the Governor and is working in concert with the Department of Defense.

DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- The National Guard is activated in 32 states, providing medical testing, assessments, logistics, planning and liaison support.
- To date, more than 12,000 National Guard troops have activated to help with testing and other response efforts.

Community-Based Testing Sites

- To date, 41 federal Community-Based Testing Sites (CBTS) have screened more than 60,000 individuals.
- Federal officials and the U.S. Public Health Service have been working closely with state, local and private sector partners to bolster testing capabilities and supplies.
- It is critical to test healthcare facility workers and first responders who are concerned that they may have been exposed to COVID-19, because they need to know their status as soon as possible in order to prevent infecting individuals in their care.
- People without symptoms who have not been exposed to COVID-19 should not be tested.
- CBTSs are another tool for states, local public health systems and healthcare systems to use as they work together to stop the spread of COVID-19 in their communities.

Strategic National Stockpile

- FEMA planning assumptions for COVID-19 pandemic response acknowledged that the Strategic National Stockpile alone could not fulfill all requirements at the State and tribal level.
 - As the Vice President stated on March 31, the federal government will exhaust all means to identify and attain medical and other supplies needed to combat the virus.
- In H.R. 748, “the Coronavirus Aid, Relief, and Economic Security Act” (CARES Act), \$27 billion was allocated for the development of vaccines and other response efforts, including \$16 billion to build up the SNS with critical supplies, including masks, respirators, and pharmaceuticals.
 - This amount is on top of the additional funding HHS received and executed over the last several weeks.
 - We remain committed to helping ensure key medical supplies expeditiously arrive at the front lines for our healthcare workers.
- Under the joint direction of FEMA and HHS in support of the COVID-19 response, the SNS is in the process of deploying all remaining personal protective equipment in its inventory.
 - These shipments will be sent across the country with prioritization given to areas in greatest need.
 - As of April 2, the SNS has delivered or is currently shipping: 11.6 million N95 respirators, 26.3 million surgical masks, 5.2 million face shields, 4.3 million surgical gowns, 22.4 million gloves, 144,000 coveralls, 7,640 ventilators and 8,450 federal medical station beds.

Hydroxychloroquine/Chloroquine

- HHS continues to speed the development of therapies derived from human blood that have the potential to lessen the severity or shorten the length of the illness.
- The FDA issued an [Emergency Use Authorization of hydroxychloroquine sulfate](#) and an [Emergency Use Authorization of chloroquine phosphate](#) to treat certain patients hospitalized with COVID-19.

DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- [HHS accepted](#) 30 million doses of hydroxychloroquine sulfate donated by Sandoz and one million doses of chloroquine phosphate donated by Bayer Pharmaceuticals for possible use in treating patients hospitalized with COVID-19 or for use in clinical trials.
- Hydroxychloroquine sulfate and chloroquine phosphate are oral prescription drugs approved to treat malaria and other diseases but both drugs have shown activity in laboratory studies against coronaviruses, including SARS-CoV-2 (the virus that causes COVID-19) and anecdotal reports suggest that these drugs may offer some benefit in the treatment of hospitalized COVID-19 patients.
 - Although there are no currently approved treatments for COVID-19, both drugs have shown activity in laboratory studies against coronaviruses, including SARS-CoV-2 (the virus that causes COVID-19).
 - Anecdotal reports suggest that these drugs may offer some benefit in the treatment of hospitalized COVID-19 patients. Clinical trials are needed to provide scientific evidence that these treatments are effective.
 - The Strategic National Stockpile has begun shipping doses of hydroxychloroquine to New York and Los Angeles County based on their requests.

FDA Ventilator Guidance

- On March 24, the FDA issued an [Emergency Use Authorization \(EUA\) for Ventilators](#).
 - The EUA allows anesthesia gas machines and positive pressure breathing devices to be modified for use as ventilators.
- The new guidance will also assist health care personnel on how to use other ventilators like CPAP devices for sleep apnea, with COVID-19 patients in respiratory distress, as well as on shelf life of existing ventilators.
- Additionally, the FDA is providing information for manufacturers on adding production lines or alternative sites, like automobile manufacturers, for making more ventilators during the COVID-19 public health emergency.

CDC Respirator Guidance

- CDC recognizes that—when N95 supplies are running low—crisis capacity or alternate [strategies to optimize the supply of respirators](#) in healthcare settings may be considered.
 - These strategies to conserve supply would come after the use of conventional and contingency capacity strategies.
 - These measures may include the use of respirators approved under standards used in other countries that are similar to NIOSH-approved N95 respirators.
- Respirators are quite complex and vary by manufacturer, making it challenging to develop a single disinfection method that would apply to all models.
 - At present, there are no CDC-approved methods for decontaminating disposable respirators prior to reuse.

Defense Production Act

- On April 2, President Trump invoked the Defense Production Act to increase ventilator production. The order directed the supply of materials to make ventilators to six companies.

DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- On March 18, President Trump issued an [Executive Order](#) outlining use of the Defense Production Act (DPA) in response to COVID-19 and supplementing Executive Order 13603, which delegates DPA authority to federal agencies.
 - The order provides federal departments with the authority to take actions implementing the DPA, if and as necessary.
- On March 27, President Trump directed the Secretary of Health and Human Services to use Defense Production Act authorities to require General Motors to accept, perform and prioritize federal contracts for ventilators.
 - The invocation of the DPA demonstrates that the President will not hesitate to use the full authority of the federal government to combat this crisis.
 - There continues to be an outpouring of support from the private sector, which has limited the need to use DPA.
- The President also signed an Executive Order on March 27 which clarifies and updates Presidential delegations to federal agencies under the Defense Production Act (DPA).
 - For the purposes of COVID-19 response, the EO delegates a number of DPA authorities jointly to the Secretary of Health and Human Services (HHS) and the Secretary of Homeland Security (DHS).
 - The EO also assigns the Assistant to the President for Trade and Manufacturing Policy (Peter Navarro) as the National Defense Production Act Policy Coordinator.

Other Federal Agencies

- On March 27, President Trump signed the CARES Act into law. The CARES Act allocates \$2 trillion to COVID-19 response efforts.
- On April 3, the [Small Business Administration Paycheck Protection Program](#) began offering nearly \$350 billion in loans to small businesses. More than 17,500 loans valued at over \$5.4 billion were approved on the first day of the Paycheck Protection Program.
 - If an employer maintains their workforce, the SBA will forgive the portion of the loan used to cover the first eight weeks of payroll and certain other expenses.
 - In addition to its traditional loan programs, the SBA is also providing Economic Injury Disaster Loans and forgiveness for up to six months of new and existing loans.
- 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.
- 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 28, the Centers for Medicare and Medicaid Services sent a letter to the nation’s hospitals requesting they report data to the U.S. Department of Health and Human Services, Centers for Disease Control, and CDC National Healthcare Safety Network (NHSN) COVID-19 Patient Impact and Hospital Capacity Module. These daily reports include bed capacity and supplies.
- On March 24, the Department of Justice created [a national task force](#) to actively look for and act on hoarding and price gouging.

DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- 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.
 - This includes about 192,000 N95 respirators, 598,000 medical grade gloves, and other supplies.
- On April 5, the Coast Guard facilitated the arrival of a cruise ship in Florida; disembarkation continued through April 6.
 - The Coast Guard continues to coordinate medical evacuations of COVID related critically ill crew members from cruise ships in and around Florida ports.
- On March 28, The Cybersecurity and Infrastructure Security Agency (CISA) published updated [guidance on essential critical infrastructure workers](#) during COVID-19 response.
- The U.S. Army Corps of Engineers received 25 mission assignments totaling approximately \$1.5 billion to design and build alternate care sites Arizona, California, Colorado, Florida, Illinois, Michigan, New Jersey, New Mexico, New York, Oregon, Pennsylvania, Washington and Wisconsin.
 - As of April 6, more than 1,815 USACE personnel are activated to support the COVID-19 mission, with more than 15,000 personnel engaged in additional response efforts.
- The 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.
- The U.S. Department of Labor [announced the 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.
- The Department of Homeland Security has [extended the REAL ID enforcement deadline](#) to Oct. 1, 2021

CDC Public Guidance

- Following state, tribal and local officials' instructions to stay at home is an important way to help. Social distancing not only protects you, but it protects the people you care about.
 - [COVID-19 spreads](#) between people who are in close contact with one another—that's why the CDC recommends staying at least 6 feet away from other people.
 - Staying home and limiting your interactions with people can break the chain of transmission and halt the spread of this new virus.
 - Wearing a cloth face mask in public is recommended when safe social distancing is difficult to maintain.

DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- People who are infected but do not have symptoms likely play an important role in the spread of COVID-19.
- Recent studies indicate that the virus can be spread by people before they develop symptoms (pre-symptomatic) or people who never develop symptoms (asymptomatic).
 - [CDC's recent article](#) about an outbreak in a skilled nursing facility in King County, Washington, underscores the importance of social distancing to break the train of COVID-19 transmission, especially when there is spread from people who have no symptoms.

Additional Resources

- Coping with stress: CDC has [recommendations](#) for things you can do to support yourself by managing your anxiety and stress.
- Combating Disinformation and Rumors: FEMA has created a Rumor Control page on FEMA.gov to help the American public distinguish between rumors and facts regarding the response to COVID-19. The public can help control the spread of rumors by sharing our page: [fema.gov/coronavirus](https://www.fema.gov/coronavirus).
- How to help: FEMA has information on how both the public and private sector can help. For more information, visit the page: [fema.gov/coronavirus/how-to-help](https://www.fema.gov/coronavirus/how-to-help)