

Coronavirus (COVID-19) Pandemic

Whole-of-Government Response

Sunday, March 29, 2020

“WE ARE MARSHALLING THE FULL POWER OF THE AMERICAN NATION — ECONOMIC, SCIENTIFIC, MEDICAL, AND MILITARY — TO VANQUISH THE VIRUS.” – PRESIDENT TRUMP

Topline Messages

- The federal government continues taking aggressive and proactive steps to address the coronavirus (COVID-19) pandemic. The health and safety of the American people is our top priority.
- 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 government response to fight the COVID-19 pandemic and protect the public.
- The American people play a key role in the nation’s [15 Days to Slow the Spread](#) campaign to help slow the virus’ spread and keep our most high-risk populations safe.
 - The initiative presents the entire country with an opportunity to implement actions designed to slow and limit the spread of COVID-19, like staying home as much as possible, canceling or postponing gatherings of more than 10 people, and taking additional steps to distance themselves from other people.
 - 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.
- On March 27, President Trump signed the CARES Act into law. The CARES Act allocates \$2 trillion to COVID-19 response efforts.
- On March 22, President Trump directed the Secretary of Defense to permit full Federal reimbursement, by FEMA for the states of California, New York and Washington, for states’ use of their National Guard forces. On March 28, President Trump approved requests from Florida, Guam, Louisiana, Massachusetts, Maryland, New Jersey and Puerto Rico.
 - 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.
- As of March 28, FEMA, via the Strategic National Stockpile (SNS), has delivered, or is shipping: 11.6 million N-95 respirators, 26 million surgical masks, 5.2 million face shields, 4.3 million surgical gowns, 22 million gloves, 132, 000 coveralls and 8,100 ventilators.
- FEMA is expediting movement of critical supplies from the global market to medical distributors in various locations across the U.S.
 - Movement of supplies began on Saturday, March 28. The first flight will arrive on Sunday, March 29, with 80 tons of personal protection equipment (PPE) supplies

- including 130,000 N95 respirators, 1.8 million face masks and gowns, 30 million gloves and thousands of thermometers for New York, New Jersey and Connecticut.
- Additional flights are contracted to go to Illinois on Monday, March 30, and to Ohio on Tuesday, March 31. FEMA has scheduled 19 additional flights and is adding more daily.
- Twenty-four states and 12 tribes have issued stay at home orders.

Medical Hotspots

New York City, New York

- FEMA and HHS are working with the Governor of New York, and New York City officials to set up a medical station at the Javits Center in Manhattan to supplement local healthcare capabilities.
 - Set up of the first 1,000 bed portion is complete and is expected to be operational within 48 hours.
 - Once all phases of construction are complete, the Javits Convention Center will have a capacity of 2,910 beds.
 - The station will care for patients with non-COVID-19 healthcare needs.
 - Additional temporary hospital sites are being worked, including a 600-bed capacity nursing home facility in Brooklyn, and numerous floors of a high-rise building on Wall Street.
- The Comfort is en route and expected to arrive in New York City on Monday, March 30.
 - The Comfort will arrive at Pier 90 in Manhattan, approximately a mile away from the Javits Convention Center alternate care facility.
 - The Comfort is equipped with 12 operating rooms, 1,000 hospital beds, a medical laboratory, a pharmacy, an optometry lab, digital radiology services, a CAT-scan, two oxygen producing plants, a helicopter deck and a crew of nearly 1,200 U.S. military personnel.
 - The crew onboard will provide critically needed medical surge capacity for New York Metropolitan area. Their mission will be to care for New Yorkers who do not have COVID-19, but who require urgent medical care.
- FEMA issued a \$350 million Mission Assignment to the U.S. Army Corps of Engineers for construction of additional alternate care facilities in New York. Four sites have been selected.
 - The U.S. Army Corps of Engineers awarded contracts for three New York state priorities for alternate care facility conversions at State University (SUNY) Stony Brook, SUNY Old Westbury, and for the Westchester Community Center.
 - In total, the alternative care facilities in New York will expand hospital capacity by approximately 6,000 beds.
- At the request of New York state, FEMA issued a \$6 million Mission Assignment to HHS to provide round the clock medical staff to care for non-critical patients in the state.
- Supplies from the Strategic National Stockpile have arrived in New York for distribution to medical facilities in the most impacted areas. Supplies delivered include 2,000 ventilators for the State and 2,400 ventilators for New York City.

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- Requests currently being processed include 250 ambulances for New York City and assistance from the Disaster Mortuary Operational Response Team (DMORT) for 85 refrigerated storage units and mortuary affairs teams.
- As of March 28, FEMA has obligated \$1.3 billion in federal support for the New York State.

California

- The U.S. Army Corps of Engineers has completed the assessment of eight state-selected facilities to develop large-scale, supplemental hospital space as the state works to expand existing hospital capacity by up to 50,000 beds.
- The USNS Mercy hospital ship is operational and ready to receive patients in Los Angeles and will care for patients with non-COVID-19 health needs to relieve strains on local hospital systems.
- Supplies from the Strategic National Stockpile have arrived in California and are being distributed to medical facilities throughout the state.
- FEMA completed the sale of 105 travel trailers to the state to support a State COVID-19 housing initiative for impacted individuals.
- As of March 28, FEMA had obligated \$390 million in federal support for the state of California. On March 28, FEMA obligated an additional \$468 million to the state to reimburse costs related to the COVID-19 response.

Washington

- Department of Defense sourced the 627th Hospital Center/10th Field Hospital to support COVID-19 response in Washington.
 - The field hospital includes 148 bed capacity with ability to increase to 250 beds and 366 trained medical personnel
- Field hospital/alternate medical facility assessments are underway in Washington.
 - Assessment teams are evaluating four potential sites for alternate medical facilities. Teams are comprised of members from DOD, USACE, FEMA, HHS, and state, county, and local officials.
- Force deployment to Washington was approved for one field hospital, plus augment units, totaling 248 beds.
- As of March 28, FEMA has obligated \$222 million in federal support for the state of Washington.

New Orleans, Louisiana

- Three Community Based Testing Sites are open and operational in New Orleans.
- An epidemiology team from the Centers for Disease Control and Prevention (CDC) arrived at the Louisiana Emergency Operations Center on March 26.
- Additional support being sent to the state to increase state hospital capacity includes two 250-bed Federal Medical Stations and U.S. Army Corps of Engineers support for assessment and evaluation of alternative care facilities.
 - A 3,000-bed alternate care site is being established at the New Orleans Convention Center to be operational by April 2.

- As of March 28, FEMA has obligated \$36 million in federal support for the state of Louisiana for the response to COVID-19.

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 16 tribes are working directly with FEMA under the nationwide emergency declaration for COVID-19.
 - States, tribal and territorial governments do not need to request separate emergency declarations to receive FEMA assistance under this nationwide declaration. 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.
- In addition, the states of California, Colorado, Connecticut, Florida, Illinois, Iowa, Kentucky, Louisiana, New Jersey, New York, North Carolina, Maryland, Massachusetts, Michigan, Missouri, Oregon, South Carolina, Texas, Washington, the commonwealth of Puerto Rico, and the territory of Guam were approved for major disaster declarations to assist with additional needs identified in these states.
- FEMA has obligated over \$2.1B in support of COVID-19 efforts, with major obligations including:
 - \$468M to California on March 28 to reimburse expenses.
 - \$237M to Texas on March 28 to reimburse expenses.
 - \$434M for deployable temporary medical treatment facilities for NY.
 - \$225M for DOD to provide personnel and equipment to assist state in executing emergency protective measures to mitigate disaster operations for NY.
 - \$110M to purchase up to 500 million N95 or equivalent masks for NY.
- It is important that requests for assistance, especially for critical supplies, get 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.
- Federal agencies are working to meet demands for personal protective equipment (PPE) through new acquisition, DOD allocation and the Strategic National Stockpile.
 - 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.

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- 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 N-95 respirators over the next 18 months. This purchase will encourage manufacturers to increase production of N-95 respirators now, with a guarantee that companies will not be left with excess supplies if private sector orders are cancelled once the COVID-19 response subsides.
 - Additionally, a Request for Information has been issued to the private sector for ventilators.
 - FEMA issued a [request for quotation](#) on March 26, 2020, for vendors who have medical equipment and supplies to sell to the agency. The RFQ can be found on www.sam.gov.
- 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 February 13 and June 15 to 120 days.
 - Specifically, the grace period extension means that policyholders will be allowed to renew their policies up to 120 days after the expiration date without facing a lapse in coverage.
- As of March 27, 15 states, the District of Columbia, one tribe and one U.S. territory have sent a total of 61 text messages to cell phones containing information on COVID-19 via the Wireless Emergency Alert system, and 24 messages to broadcast stations via the Emergency Alert System.
- 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.
- 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.
- 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 United States, monitor their health, and practice social distancing.

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 the states of California, New York and Washington, for 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.

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- On March 28, President Trump approved requests from Florida, Guam, Louisiana, Massachusetts, Maryland, New Jersey and Puerto Rico.
 - The Administration has received requests from additional States seeking approval of federal support for use of their 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% 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% cost share to assess whether an extension of this level of support is needed.

Community-Based Testing Sites

- To date, more than 802,000 tests have been performed for COVID-19 in state and local public health and commercial laboratories throughout the U.S.
- Federal officials and the U.S. Public Health Service are working closely with state, local and private sector partners to bolster testing capabilities and supplies. We're working to make testing more easily accessible to high risk populations: healthcare facility workers, and first responders. There are currently 92 sites open in 50 states, the District of Columbia, Guam and Puerto Rico.
- Community-based Testing Sites (CBTSs) are focused on testing our nation's frontline heroes, healthcare facility workers and first responders, who are working around the clock to provide care, compassion, and safety to Americans.
- 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

- The Strategic National Stockpile (SNS) continues to ship medical equipment nationwide.
- FEMA is beginning to process another allocation of personal protective equipment (PPE) from the SNS and we expect it to arrive to the states over the course of the next week. These shipments will be sent across the country with prioritization given to areas in greatest need
- As of March 28, the SNS has delivered or is currently shipping the following personal protective equipment and supplies to support public health authorities across the U.S. and its territories:
 - 11.6 million N-95 respirators, 26 million surgical masks, 5.2 million face shields, 4.3 million surgical gowns, 22 million gloves, 132,000 coveralls and 8,100 ventilators.

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.

Defense Production Act

- 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 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](#), designating a lead prosecutor in each of the 93 Offices of United States Attorneys across the nation to actively look for and act on hoarding and price gouging.
 - 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.
- The National Guard is activated in 32 states, providing medical testing, assessments, logistics, planning and liaison support.
 - To date, more than 14,000 National Guard troops have activated to help with testing and other response efforts.
- 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 completed 14 reconnaissance missions. As of March 28, 960 USACE personnel are activated to support the COVID-19 mission.
- The Small Business Administration is providing low-interest loans to small businesses and nonprofits severely impacted by the Coronavirus (COVID-19). The SBA also announced deferments on all SBA disaster loans from previous disasters, effective through Dec. 31.
- 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 Food and Drug Administration approved a Phase-3 clinical trial using a rheumatoid arthritis drug for treatment of severe COVID-19 pneumonia.
- The Department of Homeland Security has extended the REAL ID enforcement deadline to Oct.1, 2021

Coping with Stress

- Stress during an infectious disease outbreak, like the COVID-19 pandemic, can cause fear and worry. You may feel overwhelmed by strong emotions.
- Taking care of yourself, your friends, and your family can help you cope with stress.

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- It's essential that during this time, as we make sure we are physically distancing ourselves from others, we keep up the social connection. This includes staying connected by phone, email, or chat in order to remain connected to family and friends.
- Helping others cope with their stress makes your community stronger.
- CDC has [recommendations](#) for things you can do to support yourself by managing your anxiety and stress.

Combating Disinformation and Rumors

- To help the American public distinguish between rumors and facts regarding the response to COVID-19, FEMA has created a Rumor Control page on FEMA.gov. The public can help control the spread of rumors by sharing our page: [fema.gov/coronavirus](https://www.fema.gov/coronavirus).
- Check the sources of information you see about COVID-19 by seeking out trusted, verified sources like www.coronavirus.gov or your state and local government's official accounts.
- Everyone can do their part to stop the spread of disinformation by doing three things; don't believe rumors, don't pass them along, and go to trusted sources of information to get the facts.

How to Help

- 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.
 - [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.
- Cash donations to the nonprofit of your choice IS THE BEST donation. Do not collect or distribute donations of supplies without understanding community needs.
- Businesses that have medical supplies or equipment to donate are asked to go to www.fema.gov and provide of the offer through our online medical supplies and equipment form.
- To sell medical supplies or equipment to the federal government, please submit a price quote under the [COVID-19 PPE and Medical Supplies Request for Quotation](#). Full details can be found in the solicitation ([Notice ID 70FA2020R00000011](#)).
- Licensed medical volunteers can offer their services by registering with [the Emergency System for Advance Registration of Volunteer Health Professionals](#). You can access a direct link to do so through [fema.gov](https://www.fema.gov).
- One thing people can do to help is to donate blood. Blood donation centers have the highest standards of safety and infection control. To find where you can donate blood, visit [redcross.org](https://www.redcross.org).