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

Wednesday, May 6, 2020

"WE WILL LEVERAGE EVERY RESOURCE WE HAVE TO BRING SAFETY TO OUR TRIBAL COMMUNITIES, AND WE WILL NOT WAVER IN THIS MISSION." - PRESIDENT DONALD TRUMP

Topline Briefing Points and Messages

- On May 5, the Treasury Department began distributing \$4.8 billion in critical funds from the CARES act to tribal governments.
 - □ The CARES act provides a total of \$8 billion to address coronavirus preparedness, response, and recovery for American Indians and Alaska Natives.
 - The Administration has allocated over \$1 billion through the Indian Health Service (IHS), to support tribes, tribal organizations, and Urban Indian Organizations in their coronavirus response efforts.
- As of May 5, FEMA, HHS, and the private sector combined have coordinated the delivery of or are currently shipping: 75.1 million N95 respirators, 120.2 million surgical masks, 7.5 million face shields, 19.3 million surgical gowns, 947.7 million gloves, 10,663 ventilators and 8,450 federal medical station beds.
 - FEMA is coordinating two shipments totaling a 14-day supply of personal protective equipment to all 15,400 Medicaid and Medicare-certified nursing homes. The shipments are meant to supplement existing efforts to provide equipment to nursing homes.
- As of **May 5**, CDC, state, and local public health labs and other laboratories have tested more than 7.3 million samples.
 - HHS and FEMA have expanded items supplied by the <u>International Reagent Resource</u> (IRR) to help public health labs access free diagnostics supplies and reagents.
 - As of May 4, the FDA has issued 58 individual <u>emergency use authorizations</u> for test kit manufacturers and laboratories.
- On April 27, President Trump unveiled the <u>Opening Up America Again Testing Overview</u> and <u>Testing Blueprint</u> designed to facilitate state development and implementation of the robust testing plans and rapid response programs described in the President's <u>Guidelines for Opening</u> Up America Again.
 - The President's Testing Blueprint sets forth the partnership between federal, state, local, and tribal governments, along with the private-sector and professional associations, all of which play important roles in meeting the Nation's testing needs.
- To support the Administration's <u>Testing Blueprint</u>, FEMA is working to source and procure testing material – specifically, testing swabs and transport media.
 - The FEMA-sourced material will be provided to states, territories and tribes for a limited duration to help increase testing capacity in support of their individualized plans.

Supply Chain Task Force

- 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 <u>Project Airbridge</u>.
- As of **May 5**, Project Air Bridge has completed 119 flights with an additional 26 scheduled, or in transit, for a total of approximately 145 flights.
 - Two flight landed in Chicago yesterday, May 5.
 - Three flights are scheduled to land today, May 6: two in Chicago and one in San Francisco.
 - It is important to note that any number of variables can affect international flight schedules, causing unexpected delays or cancellations.
- The Air Bridge program delivers PPE to the point of greatest need through prioritized distributor supply chains nine times faster than movement by sea.
- Through Project Air Bridge, the following supplies have been delivered from overseas manufacturers to the U.S. and into private sector supply chains from March 29 through May 5:
 - □ More than 768,000 N95 respirators
 - More than 876 million gloves
 - Nearly 84 million surgical masks
 - 14.1 million surgical gowns
 - More than 2.3 million thermometers
 - □ 886,000 face shields
 - Nearly 342,000 coveralls
 - □ 109,000 stethoscopes
 - □ 370,000 oxygen masks
 - 250,000 swabs
 - □ More than 160,000 cannulas
- Since April 12, 40 flights carrying more than 35 million FEMA-procured masks and respirators from 3M landed in the U.S. The masks are inventoried at a warehouse and then distributed to prioritized areas as determined by FEMA and HHS.
- The strategy to allocate medical supplies and equipment is based on COVID-19 disease activity
 and its effects, as well as the need to facilitate distribution of limited supplies to areas where
 resources are needed most urgently.
 - Leveraging quantitative data sets provided by FEMA, HHS and CDC, FEMA's National Resource Prioritization Cell combines these data streams, analyzes the available COVID-19 disease activity data to determine current and potential future areas that most urgently require resources.
 - The team of experts works through this process every 96 hours to ensure resource prioritization recommendations are driven by the best available or most current data.
- The Defense Logistics Agency awarded a contract to Battelle for 60 Critical Care Decontamination System units for the sanitation and reuse of N95 respirators.
 - Thirty-nine systems have been delivered: four to Texas, two to California, Colorado, New York, and Virginia and one each to Arizona, Arkansas, Connecticut, Idaho, Indiana, Florida, Georgia, Illinois, Kansas, Kentucky, Louisiana, Maryland, Massachusetts,

- Michigan, Missouri, Montana, New Jersey, New Mexico, North Dakota, Nevada, Ohio, Pennsylvania, Rhode Island, Tennessee, Washington, Wisconsin and the District of Columbia.
- Additional systems are allocated to Alabama, Mississippi, Oregon, South Carolina, Texas (fifth unit), and Virginia (third unit).

By the Numbers

- All 50 states, five territories, and Washington, D.C. have been approved for major disaster declarations to assist with additional needs identified.
- As of May 6, 151,950 have been tested at Community Based Testing Sites.
- Combined, FEMA and HHS have obligated \$62.0 billion in support of COVID-19 efforts, which is an increase of \$10.9 billion in the last week.
- The federal government has approximately 13,188 total ventilators available: 12,106 in the Strategic National Stockpile; 1,082 from the Department of Defense.
- As of April 30, FEMA and HHS have provided or are currently shipping 10,663 ventilators from the Strategic National Stockpile and the Defense Department to states, tribes and territories.
- In support of the U.S. Department of Veterans Affairs and our nation's veterans, FEMA has coordinated shipments of more than 4.3 million respirator masks, 1 million surgical masks, 1.5 million gloves, and 14,000 face shields to facilities across the country. An additional 1 million surgical masks and 28,000 gowns are shipping this week.
- FEMA has 3,199 employees supporting COVID-19 pandemic response out of a total 20,605 agency employees ready to respond to other emergencies should they occur.
- As of May 5, FEMA has obligated \$5.8 billion in support of COVID-19 efforts.
- As of May 6, 86 agencies across 28 states, the District of Columbia, one tribe and one U.S. territory have sent 228 alerts with information on COVID-19 via the Wireless Emergency Alert system; 55 alerts to broadcast stations via the Emergency Alert System.
- To date, the President has approved 48 National Guard requests for federal support for the use of National Guard personnel in a Title 32 duty status.
 - Pursuant to this approval, the federal government will fund 100 percent of the cost share for T-32 National Guard orders through May 31.
 - As of May 5, 40,348 National Guard troops have activated in T-32 duty status and 848 troops have activated in State Active Duty status to help with testing and other response efforts.
- The CDC has nearly 4,300 personnel supporting the outbreak response.
- The U.S. Public Health Service deployed more than 1,500 officers in support of nation-wide efforts to mitigate the virus' potential spread.
- To date, the U.S. Department of Veterans Affairs has made more than 1,400 acute and intensive care hospital beds across the nation available to non-veteran patients, if necessary.
- The U.S. Army Corps of Engineers has awarded 37 contracts for the design and build of alternate care facilities in Alaska, Arizona, California, Colorado, District of Columbia, Florida, Illinois, Maryland, Michigan, Missouri, the Navajo Nation, New Jersey, New Mexico, New York, Oklahoma, Oregon, Tennessee, U.S. Virgin Islands, and Wisconsin.

As of **May 6, 1,268** 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, 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, HHS and the Cybersecurity Infrastructure and Security Agency (CISA) along with other federal agencies are distributing cloth face coverings for critical infrastructure workers as part of a multi-prong approach to re-open American economic activity while continuing to limit spread of COVID-19.
 - As of **May 4**, over 73.8 million cloth face coverings are being processed and distributed to state, local, tribal, private sector, and federal entities.
 - □ The federal government will provide additional face coverings in production to states, territories and tribes for distribution, with priority to emergency services, food production and distribution, and other sectors that support community lifelines.
 - FEMA and HHS are also providing face coverings to federal departments and agencies with mission essential functions to promote health and safety in the workplace and in their execution of public-facing missions.

FEMA

- On March 13, President Trump declared a nationwide emergency pursuant to the Stafford Act.
 - 50 states, the District of Columbia, five territories, and 40 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.
 - All 10 Regional Response Coordination Centers and emergency operations centers in all states and territories are active and supporting response efforts across the country.
- 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 the FEMA NRCC in Washington, D.C. for fulfillment.
- HHS and FEMA deployment of ventilators from the stockpile have helped ensure that hospitals in states such as New York have not run out of ventilator capacity while working to save lives.
 - The federal government adopted a process to manage allocation of federal ventilator resources to ensure the right number of ventilators are shipped 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.

- As of May 4, crisis counseling service grants have been made available to a total of 43 states and the District of Columbia to support programs providing free, confidential counseling through community-based outreach and educational services.
- On **May 4**, FEMA <u>announced</u> \$200 million in supplemental funding from the CARES act for grants through its Emergency Food and Shelter Program.
 - Combined with the \$120 million in annual funding appropriated by Congress, a total of \$320 million will be distributed beginning in early June to human service organizations assisting those in need throughout the country.
- On April 23, FEMA announced an additional \$100 million in funding for the Assistance to
 Firefighters Grant Program. This supplemental funding will provide financial assistance directly to
 eligible fire departments, non-affiliated emergency medical service organizations and State Fire
 Training Academies for critical PPE and supplies needed to respond to COVID-19. The application
 period begins April 28.
- On April 20, President Trump launched the Dynamic Ventilator Reserve Program, an innovative public-private partnership to access up to 65,000 additional ventilators in hospitals across the country that can be redeployed when not in use.
- On April 15, FEMA Administrator Pete Gaynor <u>issued a letter to the nation's emergency managers</u> outlining lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic.
 - This guidance is a follow-on to the Administrator's <u>first letter to emergency managers</u> on March 27, which requested key actions and outlined critical steps for the initial COVID-19 response.
- On April 15, FEMA's Office of Equal Rights issued a <u>bulletin outlining best practices</u> to assist state, local, tribal and territorial partners in anticipating and attending to civil rights concerns during the COVID-19 response and recovery.
- On April 13, The <u>Department of Homeland Security and FEMA announced</u> the funding notice for an additional \$100 million in supplemental Emergency Management Performance Grant Program funds.
- On April 12, FEMA <u>issued guidance</u> on the framework, policy details and requirements for determining the eligibility for FEMA reimbursement of states purchasing and distributing food to meet the immediate needs of those who do not have access to food as a result of COVID-19 and to protect the public from the spread of the virus.
- On **April 9**, FEMA announced that it is <u>suspending rent for disaster survivors</u> 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

- On May 1, HHS <u>announced</u> \$40 million of available funding for the development and coordination of a strategic network of national, state, territorial, tribal and local organizations to deliver important COVID-19 related information to minority, rural, and socially vulnerable communities hardest hit by the pandemic.
- On May 1, HHS began processing payments from the Provider Relief Fund to hospitals with large numbers of COVID-19 inpatient admissions through April 10, as well as to rural providers in support of the national response to COVID-19.

- □ These payments are being distributed to healthcare providers who have been hardest hit by the virus. Facilities admitting large numbers of COVID-19 patients received \$12 billion and providers in rural areas received \$10 billion.
- On April 30, HHS through the Health Resources and Services Administration, <u>awarded \$20</u> <u>million to increase telehealth access</u> and infrastructure for providers and families to help prevent and respond to COVID-19.
 - The funds will increase capability, capacity and access to telehealth and distant care services for providers, pregnant women, children, adolescents and families. It will assist telehealth providers with cross-state licensure to improve access to health care during the pandemic.
- On April 29, the National Institutes of Health announced positive results of a <u>trial using</u>
 Remdesivir; patients with advanced COVID-19 and lung involvement who received Remdesivir recovered, on average, faster than similar patients who received placebo.
- On April 29, the <u>National Institutes of Health announced</u> a new initiative, Rapid Acceleration of Diagnostics; aimed at speeding innovation, development, and commercialization of COVID 19 testing technologies and funded by \$1.5 billion from federal stimulus.
- On April 27, HHS, through the Health Resources and Services Administration (HRSA), launched a new <u>COVID-19 Uninsured Program Portal</u>, allowing health care providers who have conducted COVID-19 testing or provided treatment for uninsured COVID-19 individuals on or after Feb. 4 to submit claims for reimbursement.
- On April 24, the Substance Abuse and Mental Health Services Administration (SAMHSA)
 announced an additional \$250 million in emergency COVID-19 funding to increase access to and
 improve the quality of community mental and substance use disorder treatment services through
 the expansion of Certified Community Behavioral Health Clinics (CCBHC).
- As of April 24, the Biomedical Advanced Research and Development Authority (BARDA) within the HHS Office of the Assistant Secretary for Preparedness and Response (ASPR) has a COVID-19 Medical Countermeasure Portfolio that includes development of 26 products supported under public-private partnerships.
 - Of these, 15 are diagnostics, seven are treatments, three are vaccines, and one is a rapidly deployable capability to help protect the American people from COVID-19.
 - □ To date, BARDA has obligated \$39.8 million for diagnostics, \$334.9 million for treatments, more than \$979.3 million for vaccines.
- On April 23, HHS, through the through the Health Resources and Services Administration, awarded nearly \$5 million to Poison Control Centers across the country to improve their capacity to respond to increased calls due to the COVID-19 pandemic.
 - As more Americans heed cleaning recommendations to combat exposure to COVID-19, the nation's Poison Control Centers are seeing sharp increases in calls related to cleaners and disinfectants.
- On **April 22**, HHS launched <u>Telehealth.hhs.gov</u>. The site is a central source of information on telehealth resources and tools for patients and providers.
- On April 21, HHS announced \$955 million in grants from the Administration for Community Living to help meet the needs of older adults and people with disabilities. The grants will fund home-delivered meals, care services in the home, respite care and other support to families and caregivers, and other support services.

- On April 20, the <u>Substance Abuse and Mental Health Services Administration</u> under HHS began releasing \$110 million in emergency grant funding to strengthen access to treatments for substance use disorders and serious mental illnesses during the COVID-19 pandemic.
- On April 13, HHS announced five new contracts for ventilator production rated under the Defense Production Act (DPA), to General Electric, Hill-Rom, Medtronic, ResMed, and Vyaire, as well as two other contracts for ventilator production, to Hamilton and Zoll.
 - Combined with contracts with <u>General Motors</u>, <u>Philips</u> and <u>GE</u> rated under the DPA issued last week, the contracts will provide a total of 187,431 ventilators by the end of 2020.
- Beginning April 10, HHS and FEMA are working with states with federal Community-Based
 <u>Testing Sites</u> to clarify whether sites want to continue as they are now, or transition to full state
 control.
- On April 10, HHS began delivering the initial \$30 billion in relief funding to providers in support of the national response to COVID-19, with \$26 of the \$30 billion expected to be delivered to providers' bank accounts the same day.
- On April 10, HHS Secretary Azar sent a follow up letter to hospital administrators, reinforcing the need for data to be provided daily to facilitate planning, monitoring, and resource allocation in response to COVID-19.
- On April 8, HHS, through the Health Resources and Services Administration <u>awarded more than</u> \$1.3 <u>billion to 1.387 health centers</u>. 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 6, HHS <u>announced it will release \$186 million in additional CDC funding</u> to state and local jurisdictions with accelerating or rapidly accelerating COVID-19 cases to support response activities and surveillance capabilities.
- HHS identified \$80 million dollars specifically for tribes, tribal organizations, and tribal health service providers.

Centers for Disease Control and Prevention

- The nation's <u>Slow the Spread</u> campaign ended **April 30**. CDC continues to <u>recommend that</u> everyone use a cloth face covering in community settings to help reduce the spread of COVID-19.
- On April 28, the Centers for Disease Control and the Environmental Protection Agency issued guidance on for cleaning and disinfecting spaces when reopening America; the guidance offers step by step instructions on how Americans can reduce risk of exposure to COVID 19 and stay safe in public spaces, workplaces, businesses, schools, and homes.
- CDC continues to encourage use of <u>personal protective equipment optimization strategies</u> for healthcare providers to optimize resources, deal with limited resources, and make contingency plans or alternative strategies when supplies are limited.
- On April 26, CDC and the Occupational Safety and Health Administration (OSHA) <u>released</u> targeted guidance to help meat and poultry processing facilities implement infection control practices to reduce the risk of transmission and illness from COVID-19 in these facilities.
- On **April 8**, CDC issued <u>additional guidance</u> to help ensure critical infrastructure workers can perform their jobs safely after potential exposure to the virus.

Food and Drug Administration (FDA)

- FDA launched the Coronavirus Treatment Acceleration Program (CTAP) to speed approval of drugs and therapies. 72 therapies are now being tested, including hydroxychloroquine, and another 211 are in active planning for clinical trials.
- FDA published a <u>new blog post</u> on the <u>Coronavirus Treatment Acceleration Program</u>. The program uses every available method to move new treatments to patients as quickly as possible, while at the same time finding out whether the treatments are helpful or harmful.
- As of May 4, the FDA has issued 58 individual <u>Emergency Use Authorizations</u> (EUAs) for test kit manufacturers and laboratories. In addition, 25 authorized tests have been added to the EUA letter of authorization for high complexity molecular-based laboratory developed tests (LDTs).
- FDA has authorized four mask sterilizations systems to disinfect N95 masks, with one system that can decontaminate 4 million N95 masks per day.
- On May 1, the FDA issued an <u>emergency use authorization</u> for the investigational antiviral drug Remdesivir for the treatment of suspected or laboratory-confirmed COVID-19 in adults and children hospitalized with severe disease.
- On April 28, the FDA issued a new <u>video resource</u> explaining Emergency Use Authorizations
 (EUAs), one of several tools FDA uses to help make important medical products available quickly
 during public health emergencies like the COVID-19 pandemic.
 - EUAs provide more timely access to drugs, diagnostic tests and/or other critical medical products that can help diagnose, treat and/or prevent COVID-19.
- On April 27, the FDA released two new fact sheets for the food and agriculture sector outlining
 guidelines on use of disposable facemasks and cloth coverings, as well as summarizing key
 steps employers and coworkers can take to stay open, continue to slow the spread and support
 continuity of essential operations.
- During the April 24 White House Press Briefing, FDA Commissioner Dr. Stephen Hahn announced approval the first COVID-19 home collection test kit.
- On April 21, the FDA issued an emergency use authorization for IntelliVue Patient monitors intended to be used by healthcare professionals in the hospital environment for remote monitoring of adult, pediatric and neonate patients having or suspected of having COVID-19 to reduce healthcare provider exposure.
- On April 16, the FDA <u>announced an expansion of testing options</u> through use of synthetic swabs with a design similar to Q-tips to test patients by collecting a sample from the front of the nose.
- On April 14, the FDA issued a consumer update: <u>How You Can Make a Difference During the Coronavirus Pandemic</u>, outlining ways to help such as donating blood or saving PPE for frontline workers.
- The FDA released <u>food shopping information</u> to reassure consumers that there is currently no
 evidence of human or animal food or food packaging being associated with transmission of the
 coronavirus that causes COVID-19.

Other Federal Agencies

 American Red Cross and the American Association of Blood Banks (AABB) continue to seek blood and convalescent plasma donations. To find where you can donate blood, visit <u>aabb.org</u>.

- On May 5, CISA, along with the United Kingdom's National Cyber Security Centre (NCSC), <u>released</u>
 <u>a joint advisory</u> to international healthcare and medical research organizations providing an
 update on ongoing malicious cyber activity and new cyber threats related to COVID-19.
 - □ CISA and NCSC continue to see indications that advanced persistent threat (APT) groups are exploiting the COVID-19 pandemic as part of their cyber operations.
- On May 4, the <u>Small Business Administration (SBA) announced</u> that agricultural businesses are now eligible for the SBA Economic Injury Disaster Loans as part of the Paycheck Protection Program and Healthcare Enhancement Act.
 - SBA's <u>portal will reopen today</u> for farmers, ranchers and certain other agricultural businesses affected by the COVID-19 pandemic.
- On May 3, the U.S. Department of Treasury and the SBA <u>announced</u> that the second round of funding for the Paycheck Protection Program processed 2.2 million loans to small businesses <u>since it launched on April 27</u>. The total value of these loans is over \$175 billion.
 - Including the previous funding bill, more than \$670 billion is available for the loan program in total.
- On April 28, President Trump signed an executive order to keep meat processing plants open to
 ensure the continued supply of beef, pork, and poultry to the American people. The order uses
 the Defense Production Act to classify meat processing as critical infrastructure.
 - The Centers for Disease Control and Prevention and the Occupational Safety and Health Administration have put out guidance for plants to help ensure employee safety.
- On April 17, U.S. Department of Agriculture announced the <u>Coronavirus Food Assistance</u> <u>Program</u>, an immediate relief program that provides \$16 billion in direct support to farmers and ranchers as well as \$3 billion to purchase and distribute fresh produce, dairy and meat products to food banks, community and faith-based organizations and other non-profits.
- On April 17, the Cybersecurity and Infrastructure Security Agency released version 3.0 of the <u>Essential Critical Infrastructure Workers guidance</u> to help state and local jurisdictions and the private sector identify and manage their essential workforce while responding to COVID-19.
- On April 15, Immigration and Customs Enforcement Homeland Security Investigations launched Operation Stolen Promise to combat COVID-19 related fraud and other criminal activity.
- On April 23, the <u>U.S Department of Education announced</u> more than \$13.2 billion from the CARES Act is available to state and local education agencies to support continued learning for K-12 students whose educations have been disrupted by the coronavirus.
- The U.S. Department of Labor <u>announced availability of up to \$100 million for Dislocated Worker</u>
 <u>Grants</u> to help address the workforce-related impacts related to COVID-19.