Subject: DATA WORKING GROUP - Daily Team Meeting

Location: Microsoft Teams Meeting

Start: Thu 4/9/2020 10:00 AM **End:** Thu 4/9/2020 11:00 AM

Show Time As: Tentative

Recurrence: (none)

Organizer: Susan Miller

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Please decide if this event is the best use of your time, and join when you are able...

For those who have not already done this please <u>add your contact information here</u> – it will **take you less than 1 minute** and is the main way I know folks need to be on this team

WORKING GROUP MEETING: Covid-19 DATA TEAM (not all hands, just Data Team)

AGENDA EVOLVING

Current Holdings

Review Draft spreadsheet for missing datasets

Expanded Data Requirements

- Are we missing any MISSION CRITICAL data? (mission critical, in support of Governors Task Force)
- Obstacles?

Additional Needs

- What support would help us? (e.g. automations, manipulations, spatial data)
- Do we need anything from the Data Visualization Team?

Updates

- Tasks / Owners
- Collaboration Space
 - o MS Teams
 - o Data Hub

Join Microsoft Teams Meeting

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Conference ID: 322 270 606#

Local numbers | Reset PIN | Learn more about Teams | Meeting options

From: Crozer, William F. EOP/WHO <William.F.Crozer@who.eop.gov>

Sent: Wednesday, April 15, 2020 12:49 PM

Subject: Mental Health and COVID-19 - Resources and Guidance for State and Local Leaders

Attachments: ONDCP COVID Fact Sheet.pdf

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State and Local Leaders,

President Donald J. Trump is committed to providing Americans with the unprecedented mental health resources they need during this challenging time. On Thursday, April 9, President. Trump, Vice President Mike Pence, First Lady Melania Trump, and Second Lady Karen Pence spoke by telephone with hundreds of American mental health professionals, leaders, and advocates to discuss the effects COVID-19 is having on the American people. This COVID-19 call was the first to bring these four influential leaders together on one issue. The President recognized that a great number of Americans are enduring hardships – including loneliness from social distancing, despair from being out of work, anxiety from the danger of the virus, and grief from the loss of a loved one. President Trump thanked the doctors, counselors, and many other mental health professionals for providing vital mental health services during this time through tele-health.





The White House and Administration are committed to providing Americans with vital mental health resources and services especially through expanding telehealth services, continuing the Administration's efforts to combat drug demand and the opioid crisis. Below, please find additional information and resources. Attached,

also find a helpful Fact Sheet from the White House Office of National Drug Control Policy (ONDCP) outlining efforts and resources to ensure that prevention, treatment, recovery support services, and safe and effective pain management remain available nationwide. We also want to share examples of State and Local leaders addressing mental health needs in their communities and welcome awareness and engagement around your efforts.

Sincerely,

The White House Office of Intergovernmental Affairs

William F. Crozer
Special Assistant to the President/Deputy Director
White House Office of Intergovernmental Affairs
O: 202-456-8491 | C: 202-881-8545 | E: William.F.Crozer@who.eop.gov

STATE AND LOCAL COVID-19 MENTAL HEALTH INITIATIVES

Below are examples of State and Local leaders promoting mental health awareness and resources aid the COVID-19 pandemic. We welcome awareness over your own respective initiatives.

Ohio Governor DeWine <u>urged support groups</u> to check in with people with serious mental illness or addiction and highlighted the need to get the suicide hotline sent out to more people.

Rhode Island Governor Gina Raimondo offered resources to those struggling with mental health during this time.

Tennessee Governor Bill Lee <u>addressed</u> the collateral impact on mental health that COVID-19 takes and highlighted the state's crisis hotline while working with the Tennessee Department of Mental Health and Substance Abuse Services to expand telehealth access.

Indiana Governor Eric Holcomb <u>said</u> that mental health crisis calls are increasing and will issue guidance for Hoosiers on the tools available to help them out with mental health issues and will increase staffing at these centers.

Minnesota Governor Tim Walz <u>signed</u> an Executive order expanding mental health counseling options for Minnesotans. Specifically, the Executive Order authorized out-of-state mental health providers to treat Minnesota patients via telehealth services

Illinois Governor J.B. Pritzker <u>announced</u> the launch of a new Remote Patient Monitoring Program and mental health support line. Call4Calm, operated by the Illinois Department of Human Services' Mental Health Division, is a free-of-charge emotional support text line for Illinois residents experiencing stress and mental health issues related to COVID-19.

The Michigan Department of Health and Human Services <u>launched</u> a warmline to help Michiganders with persistent mental health issues amid the COVID-19 pandemic. The peer-operated warmline is intended to act as a resource for people experiencing depression, anxiety, or other mental illnesses.

The Texas Health & Human Services Commission <u>established</u> a hotline and texting service on Mental Health.

San Diego, California Mayor Kevin Faulconer and **San Diego County Supervisors** <u>announced</u> a \$25 Million partnership for a Behavioral Health Fund dedicated to assessment, treatment, detoxification, crisis stabilization, residential treatment and supportive housing.

San Jose, California Mayor Sam Liccardo hosted a <u>Facebook Live</u> session on mental health during the coronavirus crisis.

The Los Angeles County Department of Mental Health (DMH), the largest county mental health department in the United States, has scaled resources and provided coronavirus-specific guidance for individuals during the pandemic. More here.

In **Coconino County**, **Arizona**, the Emergency Operation Center (EOC) Liaisons <u>distributed</u> Mental Health resource listing (including crisis line) to numerous.

Pima County, Arizona worked with SoAZ NAMI (<u>National Alliance for Mental Illness</u>) to put their "Ending the Silence" online, and to market it to local schools, public (traditional and charter) and private. Ending the Silence is a National Program, usually taught in person to Middle and High School Students

In **Arapahoe County, Colorado**, Aurora Mental Health continues to <u>provide</u> all core services. Crisis, withdrawal management (detox), and residential services are face-to-face, and all other services have transitioned to phone (allowed in Colorado for indigent and Medicaid clients) and telehealth.

In **Tennessee**, **Shelby County** is **offering** free teletherapy services to all county employees.

In **Indiana**, **Noblesville Mayor Chris Jensen** held a <u>Facebook Live</u> with a licensed therapist in his city to discuss tips on how families and individuals can care for their mental health.

In **Georgia**, **Athens-Clarke County Mayor Kelly Girtz** gave a brief <u>video update</u> on the County's response to COVID-19 and highlighted mental health considerations & shelter-in-place orders.

In **Georgia**, **the DeKalb Community Service Board (CSB)** has gone to telehealth services for clients that wish to maintain social isolation while accessing mental health services. The CSB pharmacy services have arranged for same-day delivery of medication refill to their homes for all clients using telehealth access. More information **here**.

In **Florida**, **Tallahassee Mayor John Dailey** <u>led a discussion</u> about anxiety and new routines citizens can take to keep up on their mental health.

DuPage County, Illinois <u>established</u> an on-site 12 bed crisis residential program that remains open and available to community members who are having a mental health crisis and not in need of an inpatient level of care as well as implementation of a health screening for anyone in need.

FEDERAL RESOURCES AND GUIDANCE



Resources and Initiatives

- **Telehealth**: Under the President's leadership and at the direction of the White House Task Force, the Trump Administration has taken historic steps to expand Americans' access to telehealth, so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility (*read more from Surgeon General Jerome Adams and CMS Administrator Seema Verma* **Telehealth Plays Big Role in Coronavirus Cure**). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. The Centers for Medicare & Medicaid Services (CMS) has issued guidance on telehealth reimbursement and coverage options in the Medicaid program <a href="health:heal
- Supplemental Grant Funding: On April 3, SAMHSA announced it will fund \$110 million in emergency grants to provide treatment for substance use disorders/serious mental illness during the coronavirus pandemic. The grants are available to State governments, the District of Columbia, Territories, and Federally recognized American Indian and Alaska Native Tribes. As the Trump administration responds to meet the needs of Americans affected by the coronavirus pandemic, the Substance Abuse and Mental Health Services Administration (SAMHSA) is announcing emergency grants to help Americans dealing with substance use disorders and/or serious mental illness. The agency has announced it is accepting applications for fiscal year (FY) 2020 Emergency Grants to Address Mental and Substance Use Disorders During COVID-19 (Short Title: Emergency COVID-19). The grants total \$110 million and will provide up to \$2 million for successful state applicants and up to \$500,000 for successful territory and tribal applicants for 16 months. More details here.
- **Move Your Way Campaign**: *Move Your Way* is a physical activity campaign from the U.S. Department of Health and Human Services to promote the recommendations from the Physical Activity Guidelines for Americans. The Move Your Way tools, videos, and fact sheets on this page have tips that make it easier to get a little more active. And small changes can add up to big health benefits! Learn more **here**.
- Office of National Drug Control Policy COVID-19 Fact Sheet: During the COVID-19 crisis, the White House Office of National Drug Control Policy (ONDCP) is leading efforts to ensure that prevention, treatment, recovery support services, and safe and effective pain management remain available nationwide. The Trump Administration is mobilizing the Federal Government to ensure the approximately 20 million Americans who struggle with the disease of addiction can access and continue to receive treatment and recovery support services, while keeping themselves and healthcare professionals safe from unnecessary exposure to COVID-19. See attached.
- The President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS): On Friday, April 3, Second Lady Karen Pence announced her new role as lead ambassador

for PREVENTS on behalf of the White House Coronavirus Task Force (see Second Lady Karen Pence Taking Lead Role in Suicide Prevention Initiative During Coronavirus Outbreak). PREVENTS focuses on a holistic public health approach to ending Veteran suicide. The Initiative seeks to change the culture surrounding mental health and suicide prevention through enhanced community integration, prioritized research activities, and implementation strategies that emphasize improved overall health and well-being. The goal of PREVENTS is to prevent suicide — among not just Veterans but all Americans. By adopting a holistic public health approach, PREVENTS is acting on the knowledge that suicide prevention is everyone's business, and that by working together, locally and nationally, we can prevent suicide. Learn more here.

Guidance

- Managing & Recognizing Stress: The outbreak of COVID-19 may be stressful for people. Fear and anxiety about a disease can be overwhelming and cause strong emotions in adults and children. Coping with stress will make you, the people you care about, and your community stronger. Sharing the facts about COVID-19 and understanding the actual risk to yourself and people you care about can make an outbreak less stressful. When you share accurate information about COVID-19 you can help make people feel less stressed and allow you to connect with them. Learn more about taking care of your emotional health. Everyone reacts differently to stressful situations. How you respond to the outbreak can depend on your background, the things that make you different from other people, and the community you live in. Substance Abuse and Mental Health Services Administration's (SAMHSA's) Disaster Distress Helpline: 1-800-985-5990 or text TalkWithUs to 66746. (TTY 1-800-846-8517)
- **Guidance for Parents and Caregivers**: Children and teens react, in part, on what they see from the adults around them. When parents and caregivers deal with the COVID-19 calmly and confidently, they can provide the best support for their children. Parents can be more reassuring to others around them, especially children, if they are better prepared. There are many things you can do to support your child: Take time to talk with your child or teen about the COVID-19 outbreak. Answer questions and **share facts** about COVID-19 in a way that your child or teen can understand. Learn more about **helping children cope**.
- **Guidance for Responders and Providers**: Responding to COVID-19 can take an emotional toll on you. There are things you can do to reduce secondary traumatic stress (STS) reactions: Acknowledge that STS can impact anyone helping families after a traumatic event; and learn the symptoms including physical (fatigue, illness) and mental (fear, withdrawal, guilt) Learn more **tips for taking care of yourself** during emergency response.
- **Guidance for Persons Released from Quarantine**: Being separated from others if a healthcare provider thinks you may have been exposed to COVID-19 can be stressful, even if you do not get sick. Everyone feels differently after coming out of quarantine. Some feelings include: Sadness, anger, or frustration because friends or loved ones have unfounded fears of contracting the disease from contact with you, even though you have been determined not to be contagious; and guilt about not being able to perform normal work or parenting duties during quarantine. Children may also feel upset or have other strong emotions if they, or someone they know, has been released from quarantine. **You can help your child cope**.
- **Digital Mental Health Innovating in a Time of High Anxiety**: In this time of <u>increased anxiety and physical distancing</u> due to the <u>coronavirus (COVID-19) pandemic</u>, many people are looking for digital technology solutions to help them manage their mental health. Mental health apps are one of the fastest-growing sectors of the digital marketplace, with more than 10,000 apps available. These apps claim to, among other things, boost your mood, increase your sleep, and even help you manage your addiction. The National Institute of Mental Health takes a look <u>here</u>.
- U.S. Department of Veterans Affairs Resource How To Manage Stress and Anxiety During the COVID-19 Outbreak: Taking care of your well-being, including your mental health, is essential during this time. Everyone reacts differently to stressful situations. Many people may experience stress, fear, anxiety, or feelings of depression. This is normal. There are things that you can do to manage your stress and anxiety. VA has provided resources here.

From: FEMA-IGA <FEMA-IGA@fema.dhs.gov>
Sent: Wednesday, April 15, 2020 2:19 PM

To: FEMA-IGA

Subject: FEMA Advisory: COVID-19 FEMA Advisory Daily Briefing Points (April 15, 2020)

Attachments: FEMA_Advisory_COVID19_DailyBriefingPoints_20200415.pdf; ESF15_DailyBriefingPoints_

20200415 FINAL.pdf

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FEMA ADVISORY - APRIL 15, 2020

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

Attached you will find today's FEMA Daily Briefing Points for the Whole-of-America response to coronavirus (COVID-19) pandemic. These briefing points include Topline Messages, as well as Supply Chain Task Force; By the Numbers; FEMA and Department of Health and Human Services Response; and Guidance from Federal Agencies.

Topline messaging includes:

- 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 FEMA Project Airbridge.
- 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 has 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.
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 - The expanded list of diagnostic supplies will include supplies to support the three components needed for COVID-19 testing: sample kits, extraction kits and test kits.

Contact Us

If you have any questions, please contact FEMA Office of External Affairs, Congressional and Intergovernmental Affairs Division:

- Congressional Affairs at (202) 646-4500 or at FEMA-Congressional-Affairs@fema.dhs.gov
- Intergovernmental Affairs at (202) 646-3444 or at FEMA-IGA@fema.dhs.gov
- Tribal Affairs at (202) 646-3444 or at FEMA-Tribal@fema.dhs.gov
- Private Sector Engagement at (202) 646-3444 at nbeoc@max.gov

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Also, follow Administrator Pete Gaynor on Twitter @FEMA_Pete.

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To help people before, during, and after disasters.



From: Woody Radcliffe < Woody.Radcliffe@gema.ga.gov>

Sent: Wednesday, April 15, 2020 2:19 PM

To: Bryson, Homer

Cc: Noggle, Caylee;Joey Greene;mark.sexton;Thomas Moore;Chuck Ray;Will Lanxton;Wilson,

Richard D BG USARMY NG GAARNG (USA);LTC Louis Perino;Hovis, Scott M COL

USARMY NG GAARNG (USA);Lairet, Julio R Col USAF 116 ACW (USA);Baffic, Stephen P Lt

Col USAF 116 ACW (USA);Poole, Anthony B (Tony) COL USARMY NG GAARNG (USA);Will Lanxton;Lamar McEwen;Timothy Head;Manny Haldopoulos;Loke,

Ryan;tdignam@cdc.gov;Jeff Dickerson;Parker McGee;jay.harvey@sloan.mit.edu;Ashley

Larrow

Subject:Medical Facility EEI Status Report for April 15, 2020Attachments:Medical Facility EEI Status Report 04-15-2020.xlsx

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Director Bryson,

See attached Medical Facility Essential Elements of Information Status Tracker information for April 15, 2020.

Respectfully,

Woody

Woody Radcliffe
Planning Section Chief
Georgia Emergency Management and Homeland Security Agency (GEMA/HS)
935 United Avenue SE
Atlanta. GA 30316

Office: (404) 635-7512 Mobile: (404) 807-1621 woody.radcliffe@gema.ga.gov

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935 United Avenue SE
Atlanta. GA 30316

Office: (404) 635-7512 Mobile: (404) 807-1621 woody.radcliffe@gema.ga.gov

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:19 PM

To: Whitaker, Skylar

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 15

Attachments: ESF15_DailyBriefingPoints_20200415_FINAL.pdf

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U.S. DEPARTMENT OF HOMELAND SECURITY

Intergovernmental Affairs

Please see the advisory below from our partners in the Federal Emergency Management Agency (FEMA) regarding an update on the Whole-of-America response to COVID-19.

April 15, 2020

FEMA Advisory

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:19 PM

To: Caraway, lan

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 15

Attachments: ESF15_DailyBriefingPoints_20200415_FINAL.pdf

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:19 PM

To: Herron, Robin

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 15

Attachments: ESF15_DailyBriefingPoints_20200415_FINAL.pdf

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:19 PM

To: Loke, Ryan

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 15

Attachments: ESF15_DailyBriefingPoints_20200415_FINAL.pdf

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U.S. DEPARTMENT OF HOMELAND SECURITY

Intergovernmental Affairs

Please see the advisory below from our partners in the Federal Emergency Management Agency (FEMA) regarding an update on the Whole-of-America response to COVID-19.

April 15, 2020

FEMA Advisory

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- 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 FEMA Project Airbridge.
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Sent: Wednesday, April 15, 2020 3:19 PM

To: Broce, Candice

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 15

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Sent: Wednesday, April 15, 2020 3:19 PM

To: Fleming, Tim

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 15

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Herron, Kobin	
From: Sent: To: Subject: Attachments:	Jeffrey Dickerson Wednesday, April 15, 2020 3:25 PM Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Jeffrey Dickerson; Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas B. Rice; mark.sexton; Marshall, Kris J COL USARMY NG GAARNG (USA); Matthew Hicks; Noggle, Caylee; Tim Dignam FW: Georgia World Congress Center Covid Acceptance Letter Covid Variance GWCC.pdf
Importance:	High
CAUTION: This email originate recognize the sender and known	ed from outside of the organization. Do not click links or open attachments unless you ow the content is safe.
Team - FYSA, approved variar Jeff	nce for smoke barrier omission is attached.
Jeff Dickerson GA DOD Interagency Coording Email: Cell:	ator for COVID-19 Response
·	020 1:32 PM
Variance Approval.	
Original Message From: ALaberteaux@oci.ga.gr	ov <alaberteaux@oci.ga.gov></alaberteaux@oci.ga.gov>

1

Sent: Wednesday, April 15, 2020 1:28 PM

To: jonathan.parker@gema.ga.gov

Cc: Jimmy.H.Luo@usace.army.mil; Shannon, Matthew <MShannon@GWCC.com>

Subject: Georgia World Congress Center Covid Acceptance Letter

Importance: High

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Dear Mr. Parker,

Please see attached acceptance letter regarding the use of Georgia World Congress Center for Covid-19 response. Should you require anything further from this office, please don;t hesitate to contact me.

Regards,

Allen LaBerteaux Engineering & Inspections Georgia Fire Marshal's Office

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Original Message From: ALaberteaux@oci.ga.gr	ov <alaberteaux@oci.ga.gov></alaberteaux@oci.ga.gov>

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Caraway, lan

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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U.S. DEPARTMENT OF HOMELAND SECURITY

Office of Public Affairs

DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of America's Food Supply

Department to Temporarily Amend Certain H-2A Requirements During COVID-19 National Emergency

WASHINGTON— The Department of Homeland Security, with the support of the U.S. Department of Agriculture (USDA), has announced a temporary final rule to change certain H-2A requirements to help U.S. agricultural employers avoid disruptions in lawful agricultural-related employment, protect the nation's food supply chain, and lessen impacts from the coronavirus (COVID-19) public health emergency. These temporary flexibilities will not weaken or eliminate protections for U.S. workers.

Under this temporary final rule, an H-2A petitioner with a valid temporary labor certification who is concerned that workers will be unable to enter the country due to travel restrictions can start employing certain foreign workers who are currently in H-2A status in the United States immediately after United States Citizenship and Immigration Services (USCIS) receives the H-2A petition, but no earlier than the start date of employment listed on the petition. To take advantage of this time-limited change in regulatory requirements, the H-2A worker seeking to change employers must already be in the United States and in valid H-2A status.

Additionally, USCIS is temporarily amending its regulations to protect the country's food supply chain by allowing H-2A workers to stay beyond the three-year maximum allowable period of stay in the United States. These temporary changes will encourage and facilitate the continued lawful employment of foreign temporary and seasonal agricultural workers during the COVID-19 national emergency. Agricultural employers should utilize this streamlined process if they are concerned with their ability to bring in the temporary workers who were previously authorized to work for the employer in H-2A classification. At no point is it acceptable for employers to hire illegal aliens.

"This Administration has determined that continued agricultural employment, currently threatened by the COVID-19 pandemic, is vital to maintaining and securing the country's critical food supply chain. The temporary changes announced by USCIS provide the needed stability during this unprecedented crisis," said Acting Secretary of Homeland Security Chad F. Wolf.

"USDA welcomes these additional flexibilities provided by the Department of Homeland Security today," said Secretary of Agriculture Sonny Perdue. "Providing flexibility for H-2A employers to utilize H-2A workers that are currently in the United States is critically important as we continue to see travel and border restrictions as a result of COVID-19. USDA continues to work with the Department of Homeland Security, the Department of Labor and the Department of State to minimize disruption and make sure farmers have access to these critical workers necessary to maintain the integrity in our food supply."

The temporary final rule is effective immediately upon publication in the Federal Register. If the new petition is approved, the H-2A worker will be able to stay in the United States for a period of time not to exceed the validity period of the Temporary Labor Certification. DHS will issue a new temporary final rule in the Federal Register to amend the termination date of these new procedures in the event DHS determines that circumstances demonstrate a continued need for the temporary changes to the H-2A regulations.

The H-2A nonimmigrant classification applies to alien workers seeking to perform agricultural labor or services of a temporary or seasonal nature in the United States, usually lasting no longer than one year, for which able, willing, and qualified U.S. workers are not available.

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Fleming, Tim

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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U.S. DEPARTMENT OF HOMELAND SECURITY

Office of Public Affairs

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Whitaker, Skylar

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Herron, Robin

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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"USDA welcomes these additional flexibilities provided by the Department of Homeland Security today," said Secretary of Agriculture Sonny Perdue. "Providing flexibility for H-2A employers to utilize H-2A workers that are currently in the United States is critically important as we continue to see travel and border restrictions as a result of COVID-19. USDA continues to work with the Department of Homeland Security, the Department of Labor and the Department of State to minimize disruption and make sure farmers have access to these critical workers necessary to maintain the integrity in our food supply."

The temporary final rule is effective immediately upon publication in the Federal Register. If the new petition is approved, the H-2A worker will be able to stay in the United States for a period of time not to exceed the validity period of the Temporary Labor Certification. DHS will issue a new temporary final rule in the Federal Register to amend the termination date of these new procedures in the event DHS determines that circumstances demonstrate a continued need for the temporary changes to the H-2A regulations.

The H-2A nonimmigrant classification applies to alien workers seeking to perform agricultural labor or services of a temporary or seasonal nature in the United States, usually lasting no longer than one year, for which able, willing, and qualified U.S. workers are not available.

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Broce, Candice

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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U.S. DEPARTMENT OF HOMELAND SECURITY

Office of Public Affairs

DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of America's Food Supply

Department to Temporarily Amend Certain H-2A Requirements During COVID-19 National Emergency

WASHINGTON— The Department of Homeland Security, with the support of the U.S. Department of Agriculture (USDA), has announced a temporary final rule to change certain H-2A requirements to help U.S. agricultural employers avoid disruptions in lawful agricultural-related employment, protect the nation's food supply chain, and lessen impacts from the coronavirus (COVID-19) public health emergency. These temporary flexibilities will not weaken or eliminate protections for U.S. workers.

Under this temporary final rule, an H-2A petitioner with a valid temporary labor certification who is concerned that workers will be unable to enter the country due to travel restrictions can start employing certain foreign workers who are currently in H-2A status in the United States immediately after United States Citizenship and Immigration Services (USCIS) receives the H-2A petition, but no earlier than the start date of employment listed on the petition. To take advantage of this time-limited change in regulatory requirements, the H-2A worker seeking to change employers must already be in the United States and in valid H-2A status.

Additionally, USCIS is temporarily amending its regulations to protect the country's food supply chain by allowing H-2A workers to stay beyond the three-year maximum allowable period of stay in the United States. These temporary changes will encourage and facilitate the continued lawful employment of foreign temporary and seasonal agricultural workers during the COVID-19 national emergency. Agricultural employers should utilize this streamlined process if they are concerned with their ability to bring in the temporary workers who were previously authorized to work for the employer in H-2A classification. At no point is it acceptable for employers to hire illegal aliens.

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U.S. Department of Homeland Security www.dhs.gov

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Loke, Ryan

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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Jeffrey Dickerson From:

Sent: Wednesday, April 15, 2020 4:00 PM To: 'Shannon, Matthew'; 'Vincent, Marc'

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Jeffrey

Dickerson; Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas B.

Rice;mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Matthew

Hicks; Noggle, Caylee; Tim Dignam

Subject: RE: Georgia World Congress Center Covid Acceptance Letter

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Matt - Excellent! Thank you!

Jeff

Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email: Cell:

From: Shannon, Matthew [mailto:MShannon@GWCC.com]

Sent: Wednesday, April 15, 2020 3:57 PM To: Vincent, Marc < MVincent@GWCC.com>

Subject: Re: Georgia World Congress Center Covid Acceptance Letter

Jeff.

Myself and one of the State Fire Marshal Inspectors will be doing a final inspection Friday morning before the hospital will be accepting patients.



Matthew Shannon

Campus Safety Officer Public Safety

O: (404) 223-4905 | C: (470) 808-1571





f www.gwcca.org

285 Andrew Young International Blvd., N.W. Atlanta, GA 30313

Stay up on the latest news about the No. 1 convention, sports, and entertainment destination in the world - check out the Authority's blog, unConventional.

On Apr 15, 2020, at 3:50 PM, Vincent, Marc < MVincent@gwcc.com > wrote:

Sent from my iPhone

<gwcca-logobig2_4db8d469-239a-4bbf-b6fc-6a138c6774af.gif> <2020_TWP2_19587468d5eb-4958-a4e9-6f77705f0957.png>

Marc Vincent

Emergency Preparedness Manager Public Safety

0: (404) 223-4964 | **C:** (404) 353-6043

<facebookicon_90331aa7f35b-4e6c-a9d4-58f35e4c7606.gif>

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Begin forwarded message:

From: Jeffrey Dickerson

Date: April 15, 2020 at 15:25:52 EDT

To: "Vincent, Marc" < MVincent@GWCC.com >, Mark Sexton

<mark.sexton@gema.ga.gov>

Subject: RE: Georgia World Congress Center Covid Acceptance Letter

Marc - Thanks! Who is handling the completion of the stipulations in the waiver?

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Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email:

Cell:

----Original Message----

From: Vincent, Marc [mailto:MVincent@GWCC.com]

Sent: Wednesday, April 15, 2020 1:36 PM

To: Mark Sexton <mark.sexton@gema.ga.gov>; Jeff Dickerson

Subject: FW: Georgia World Congress Center Covid Acceptance Letter

Importance: High

----Original Message----

From: Shannon, Matthew < MShannon@GWCC.com >

Sent: Wednesday, April 15, 2020 1:32 PM
To: Vincent, Marc < <u>MVincent@GWCC.com</u>>

Cc: Guerrucci, Paul < <u>PGuerrucci@GWCC.com</u>>; McKinney, Joe

<<u>JMcKinney@GWCC.com</u>>

Subject: FW: Georgia World Congress Center Covid Acceptance Letter

Importance: High

Variance Approval.

----Original Message----

From: <u>ALaberteaux@oci.ga.gov</u> <<u>ALaberteaux@oci.ga.gov</u>>

Sent: Wednesday, April 15, 2020 1:28 PM

To: jonathan.parker@gema.ga.gov

Cc: Jimmy.H.Luo@usace.army.mil; Shannon, Matthew

<MShannon@GWCC.com>

Subject: Georgia World Congress Center Covid Acceptance Letter

Importance: High

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From: Pottebaum, Nic D. EOP/WHO < Nicholas.D.Pottebaum@who.eop.gov>

Sent: Wednesday, April 15, 2020 4:22 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Obenshain, Tucker T. EOP/OVP;Swint, Zachariah D.

EOP/WHO; Campana, Ariella M. EOP/WHO

Subject: RE: 4/13 Follow-Up - Governors Briefing on COVID-19

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Governors and Senior Staff,

As a follow-up to Monday's briefing, I wanted to make you aware of today's announcement from CMS Administrator Seem Verma.

Under President Trump's leadership, CMS announced Medicare will nearly double payment to \$100 for certain lab tests that use high-throughput technologies to rapidly diagnose COVID-19. This is another action the Trump Administration is taking to rapidly expand COVID-19 testing, particularly for those with Medicare, including nursing home residents who are among the most vulnerable to COVID-19. This technology allows for increased testing capacity and faster results, to more effectively combat the spread of the virus. Increasing Medicare payment for these tests that can process a high volume at once will help labs to test in nursing home communities that are vulnerable to the spread of COVID-19. This builds steps CMS already took to allow Medicare to pay labs to perform tests for people at home, including those in nursing homes. These actions taken together expand capacity to test more vulnerable populations, quickly and provide results faster.

<u>Additional Details – CMS Increases Medicare Payment for High-Production Coronavirus Lab</u> Tests

CMS announced **Medicare will nearly double payment for certain lab tests that use high-throughput technologies to rapidly diagnose large numbers of COVID-19 cases**. Medicare will pay the higher payment of \$100 for COVID-19 clinical diagnostic lab tests making use of high-throughput technologies developed by the private sector that allow for increased testing capacity, faster results, and more effective means of combating the spread of the virus. High-throughput lab tests can process more than two hundred specimens a day using highly sophisticated equipment that requires specially trained technicians and more time-intensive processes to assure quality. Medicare will pay laboratories for the tests at \$100 effective April 14, 2020, through the duration of the COVID-19 national emergency. Increasing Medicare payment for these tests will help laboratories test in nursing home communities that are vulnerable to the spread of COVID-19. Additional information here.

As a reminder, on March 30, CMS announced that Medicare **will pay new specimen collection fees for COVID-19 testing for homebound and non-hospital inpatients**, to help facilitate the testing of homebound individuals and those unable to travel. As a result of these actions, laboratories will have expanded capability to test more vulnerable populations, like nursing home patients, quickly and provide results faster. Additional information here.

Thanks, Nic

--

Nicholas D. Pottebaum Special Assistant to the President and Deputy Director O: 202-456-2132 | C: 202-881-7803 | E: Nicholas.D.Pottebaum@who.eop.gov

Slow the Spread

From: Pottebaum, Nic D. EOP/WHO Sent: Monday, April 13, 2020 9:00 PM

To: Nic Pottebaum (Nicholas.D.Pottebaum@who.eop.gov) < Nicholas.D.Pottebaum@who.eop.gov>

Cc: Douglas.L.Hoelscher@who.eop.gov; Obenshain, Tucker T. EOP/OVP <Anne.T.Obenshain@ovp.eop.gov>; Swint,

Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>; Campana, Ariella M. EOP/WHO

<Ariella.M.Campana@who.eop.gov>

Subject: 4/13 Follow-Up - Governors Briefing on COVID-19



Governors and Senior Staff,

Thank you for your efforts in the whole-of-America approach to respond to and mitigate the effects of COVID-19. Below and attached are follow-up items from today's briefing.

Data & Reporting Ask from the Vice President

The Vice President has asked each governor to ensure their State is reporting key information to the Federal Government to get resources to the right place, at the right time. Friday, the Vice President wrote a letter to governors asking them to ensure their State is reporting broad healthcare capacity and personal protective equipment data to FEMA. Over 45 States are now reporting quality healthcare capacity data on a daily basis. *Please continue to ensure your State is reporting answers to the questions below on a daily basis. Attached you will find the letter from the Vice President.*

• Separately, HHS Secretary Azar sent a <u>letter</u> on hospital utilization and lab data reporting to hospital administrators. States can waive hospitals from reporting directly to the Federal Government if the State takes over the Federal reporting responsibilities.

<u>Testing 101 – Operationalizing COVID 19 Testing For Diagnosis & Surveillance</u>

Ambassador Birx led a presentation on operationalizing COVID 19 testing for diagnosis and surveillance. The Vice President has asked each governor to develop an integrated public-private testing strategy. Medium- and high-throughput testing platforms are running at only 40% capacity. Please work with your public and private labs to utilize the full capacity of these systems. **Attached you will find the 8-page slide deck from the presentation**. We will provide more details on testing including CMS reimbursement for technical support and collection, along with additional guidance to guide your outreach to your laboratories shortly.

Key Recommendations for Long-Term Care Facilities

We thank our nation's governors for taking action to protect patients and healthcare workers in long-term care facilities. You can find more details about Gov. Hogan's (MD) Statewide strike team efforts (here) and Gov. Baker's (MA) nursing home mobilize testing program (here). We know there countless other leading practices from governors and we welcome hearing about your efforts.

• Recent Centers for Medicare & Medicaid Services (CMS) Guidance on supplies, infection control procedures, screening, staffing, and managing facilities: **Here**.

Readout from the April 13 Briefing with Governors

Today, Vice President Mike Pence led a discussion with the chief executives of approximately 50 States, territories, and Washington, DC, and their State emergency managers and health officials to provide an update on the all-of-America approach to respond to and mitigate the effects of COVID-19.

The Vice President, Ambassador Debi Birx, FEMA Administrator Pete Gaynor, CMS Administrator Seema Verma, and Rear Adm. John Polowczyk with the Joint Chiefs of Staff, and all 10 FEMA Regional Administrators urged State, local, and tribal leaders to continue to regularly highlight community mitigation efforts to "Slow the Spread." Participants also discussed the Federal government's historic efforts to support State, local, and tribal leaders including, already approving 55 major disaster declaration requests and approximately 40 Title 32 requests to 100% federally fund State National Guard activities related to COVID-19 response efforts. The Vice President discussed his letter to America's governors on data reporting for healthcare capacity, personal protective equipment, and hospital utilization and lab testing. The importance of the \$150 billion of CARES Act funding for States to effectively respond to COVID-19 was discussed.

Participants discussed CDC guidance on implementing safety practices for critical infrastructure workers, the significant increase in testing capacity and discussed strategies State and local leaders can take to further increase testing capacity through proactive partnerships with the private sector and various laboratories in their State. Multiple States shared examples of best practices they are taking to regarding caring for people in long-term care facilities nursing homes. Administrator Gaynor and Admiral Polowczyk discussed their supply chain support efforts to get critical supplies to the healthcare providers. Administrator Verma discussed expanding telehealth options through Medicaid and the importance of CARES Act funding for hospitals and Americans impacted by COVID-19.

The leadership of governors, mayors, county commissioners, and tribal officials is vital for effective emergency management. Emergency management in America is locally-executed, State-managed, and Federally supported, which allows for innovative solutions to be identified at the local and State level for the majority of issues. Since January 2020, the Trump Administration has held nearly 144 briefings – including 12 governors briefings – with over 66,000 State, local, and tribal leaders in every State and territory in the Nation. Leaders at every level of government and the private sector are working in partnership to bend the curve.

Treasury Eligibility Guidance on CARES Act Funding to State Governments

The U.S. Department of the Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation on <u>Treasury's portal</u> no later than April 17. Additional guidance on eligible uses of Fund disbursements by governments will be posted as it becomes available.

Below, you will find additional information and resources mentioned on today's briefing call:

- Contacting Your FEMA Regional Administrator
- Implementing Safety Practices for Critical Infrastructure Workers
- Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk
- Maximizing Testing Resources & Medical Supplies
- Guidance on Telehealth Reimbursement & Coverage Options
- Assistance for Small Businesses & American Families

If you have any additional questions, please reach out to the Office of the Vice President or White House Intergovernmental Affairs Office.

Intergovernmental Affairs Office

Name	Cell Phone	Email
Doug Hoelscher	202-881-8950	Douglas.L.Hoelscher@who.eop.gov
Nic Pottebaum	202-881-7803	Nicholas.D.Pottebaum@who.eop.gov
Zach Swint	202-881-6717	Zachariah.D.Swint2@who.eop.gov
Ella Campana	202-881-7298	Ariella.M.Campana@who.eop.gov

Office of the Vice President

Name	Cell Phone	Email
Tucker Obenshain	202-881-6217	Anne.T.Obenshain@ovp.eop.gov

Thanks, Nic

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Nicholas D. Pottebaum Special Assistant to the President and Deputy Director White House Office of Intergovernmental Affairs

O: 202-456-2132 | C: 202-881-7803 | E: Nicholas.D.Pottebaum@who.eop.gov

Slow the Spread

ADDITIONAL INFORMATION

Contacting Your FEMA Regional Administrator

The Federal Emergency Management Agency (FEMA) has activated the National Response Coordination Center (NRCC) 24/7. All requests to the Federal government *must be formally communicated* by your **State emergency manager** to your **FEMA Regional Administrator.** This is the same process as natural disasters (e.g., hurricane recovery, flood recovery, tornado recovery, etc.).

Implementing Safety Practices for Critical Infrastructure Workers

CDC has released has released guidance on implementing safety practices for critical infrastructure workers who may have had exposure to a person with suspected or confirmed COVID-19. This is for Federal, State, & local law enforcement; 911 call center employees; Fusion Center employees; hazardous material responders from government and the private sector; janitorial staff and other custodial staff; workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities. To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. More guidance on prescreening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces here.

<u>Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk (see graphics at</u> end of the email)

Joint Chiefs of Staff Rear Adm. John Polowczyk's provided an update to governors on rapidly increasing supply and expanding domestic production of medical supplies and equipment.

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Guidance on Telehealth Reimbursement & Coverage Options

The Trump Administration has taken historic steps to expand Americans' access to telehealth, so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility. Keeping vulnerable patients at home whenever possible will help to limit community spread of the virus, and States should examine your own policies to determine if there are undue barriers to maximizing telehealth service delivery for your residents in this time of national emergency. In particular, States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. CMS is available assist you in utilizing all available flexibilities as we fight this pandemic together.

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Cc: Hoelscher, Douglas L. EOP/WHO;Obenshain, Tucker T. EOP/OVP;Swint, Zachariah D.

EOP/WHO; Campana, Ariella M. EOP/WHO

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The Vice President, Ambassador Debi Birx, FEMA Administrator Pete Gaynor, CMS Administrator Seema Verma, and Rear Adm. John Polowczyk with the Joint Chiefs of Staff, and all 10 FEMA Regional Administrators urged State, local, and tribal leaders to continue to regularly highlight community mitigation efforts to "Slow the Spread." Participants also discussed the Federal government's historic efforts to support State, local, and tribal leaders including, already approving 55 major disaster declaration requests and approximately 40 Title 32 requests to 100% federally fund State National Guard activities related to COVID-19 response efforts. The Vice President discussed his letter to America's governors on data reporting for healthcare capacity, personal protective equipment, and hospital utilization and lab testing. The importance of the \$150 billion of CARES Act funding for States to effectively respond to COVID-19 was discussed.

Participants discussed CDC guidance on implementing safety practices for critical infrastructure workers, the significant increase in testing capacity and discussed strategies State and local leaders can take to further increase testing capacity through proactive partnerships with the private sector and various laboratories in their State. Multiple States shared examples of best practices they are taking to regarding caring for people in long-term care facilities nursing homes. Administrator Gaynor and Admiral Polowczyk discussed their supply chain support efforts to get critical supplies to the healthcare providers. Administrator Verma discussed expanding telehealth options through Medicaid and the importance of CARES Act funding for hospitals and Americans impacted by COVID-19.

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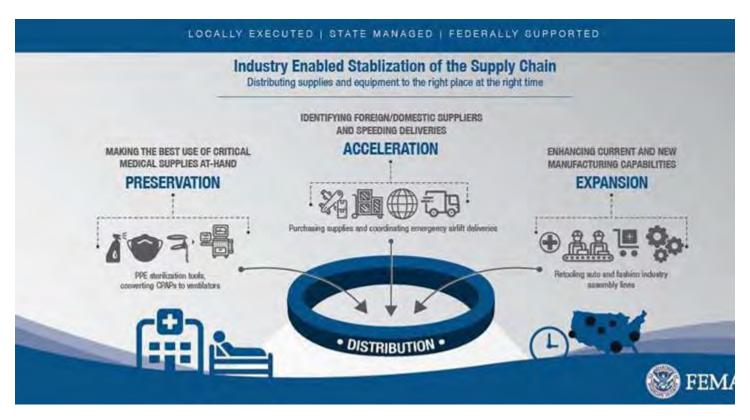
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The Trump Administration has taken historic steps to expand Americans' access to telehealth, so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility. Keeping vulnerable patients at home whenever possible will help to limit community spread of the virus, and States should examine your own policies to determine if there are undue barriers to maximizing telehealth service delivery for your residents in this time of national emergency. In particular, States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. CMS is available assist you in utilizing all available flexibilities as we fight this pandemic together.

- CMS issued telehealth reimbursement guidance and coverage options in the Medicaid program <u>here</u>.
- Op-Ed from Surgeon General Jerome Adams and CMS Administrator Seema Verma on Telehealth (Telehealth Plays Big Role in Coronavirus Cure).
- Federal Community Commissioner \$200 million COVID-19 Telehealth Program (here).

Maximizing Testing Resources & Medical Supplies

- **Swab Flexibilities**: Initially, collecting specimen required using a specific type of swab (nasopharyngeal), however the U.S. Food & Drug Administration (FDA) is now permitting the use of other available swabs including oropharyngeal, mid-turbinate, or anterior nares. We will provide additional swab flexibility guidance soon. If you are having swab supply needs, please make sure labs in your State are utilizing all available swab supplies and techniques. More information **here**.
- **Reagent Flexibilities**: FDA has provided flexibilities on alternative reagent supplies. Labs in your State can utilize several alternative methods to meet your reagent supply needs. If your State has reagent supply needs, you can develop alternative reagent supplies. More information here.
- **Commercial Testing**: We would encourage all governors to focus on utilizing and expanding commercial testing options. If you have not yet connected with the representatives from Abbott, Roche, and Thermofisher, Hologic, and Expert other private sector testing platforms, we would encourage you to do so as that is where the high-speed testing solution is moving forward.
- Additional Testing Resources: FDA <u>Frequently Asked Questions (FAQ)</u> and 24/7 technical assistance for labs (1-888-463-6332).
- Strategies to **Optimize the Supply of PPE** (extend capacity and supply) (more <u>here</u>).
- Strategies for **Optimizing the Supply of N95 Respirators** (more <u>here</u>).
- **Maximizing the Types of Ventilators**: The FDA has issued an emergency use authorization for ventilators allowing anesthesia gas machines and positive pressure breathing devices to be modified for use as ventilators. The 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 (more here).

Assistance for Small Businesses & American Families

- Paycheck Protection Program prioritizes millions of Americans employed by small businesses by authorizing up to \$349 billion toward job retention and certain other expenses. Small businesses and eligible nonprofit organizations, Veterans organizations, and Tribal businesses described in the Small Business Act, as well as individuals who are self-employed or are independent contractors, are eligible if they also meet program size standards. (FAQ here). For more information and updates, visit Treasury.gov/CARES and SBA.gov/PayCheckProtection.
- **Economic Impact Payments**: Americans will begin seeing fast and direct relief in the form of Economic Impact Payments. More information here.





From: Pottebaum, Nic D. EOP/WHO < Nicholas.D.Pottebaum@who.eop.gov>

Sent: Wednesday, April 15, 2020 4:22 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Obenshain, Tucker T. EOP/OVP;Swint, Zachariah D.

EOP/WHO;Campana, Ariella M. EOP/WHO

Subject: RE: 4/13 Follow-Up - Governors Briefing on COVID-19

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Governors and Senior Staff,

As a follow-up to Monday's briefing, I wanted to make you aware of today's announcement from CMS Administrator Seem Verma.

Under President Trump's leadership, CMS announced Medicare will nearly double payment to \$100 for certain lab tests that use high-throughput technologies to rapidly diagnose COVID-19. This is another action the Trump Administration is taking to rapidly expand COVID-19 testing, particularly for those with Medicare, including nursing home residents who are among the most vulnerable to COVID-19. This technology allows for increased testing capacity and faster results, to more effectively combat the spread of the virus. Increasing Medicare payment for these tests that can process a high volume at once will help labs to test in nursing home communities that are vulnerable to the spread of COVID-19. This builds steps CMS already took to allow Medicare to pay labs to perform tests for people at home, including those in nursing homes. These actions taken together expand capacity to test more vulnerable populations, quickly and provide results faster.

<u>Additional Details – CMS Increases Medicare Payment for High-Production Coronavirus Lab</u> Tests

CMS announced **Medicare will nearly double payment for certain lab tests that use high-throughput technologies to rapidly diagnose large numbers of COVID-19 cases**. Medicare will pay the higher payment of \$100 for COVID-19 clinical diagnostic lab tests making use of high-throughput technologies developed by the private sector that allow for increased testing capacity, faster results, and more effective means of combating the spread of the virus. High-throughput lab tests can process more than two hundred specimens a day using highly sophisticated equipment that requires specially trained technicians and more time-intensive processes to assure quality. Medicare will pay laboratories for the tests at \$100 effective April 14, 2020, through the duration of the COVID-19 national emergency. Increasing Medicare payment for these tests will help laboratories test in nursing home communities that are vulnerable to the spread of COVID-19. Additional information here.

As a reminder, on March 30, CMS announced that Medicare **will pay new specimen collection fees for COVID-19 testing for homebound and non-hospital inpatients**, to help facilitate the testing of homebound individuals and those unable to travel. As a result of these actions, laboratories will have expanded capability to test more vulnerable populations, like nursing home patients, quickly and provide results faster. Additional information here.

Thanks, Nic

--

Nicholas D. Pottebaum Special Assistant to the President and Deputy Director O: 202-456-2132 | C: 202-881-7803 | E: Nicholas.D.Pottebaum@who.eop.gov

Slow the Spread

From: Pottebaum, Nic D. EOP/WHO Sent: Monday, April 13, 2020 9:00 PM

To: Nic Pottebaum (Nicholas.D.Pottebaum@who.eop.gov) < Nicholas.D.Pottebaum@who.eop.gov>

Cc: Douglas.L.Hoelscher@who.eop.gov; Obenshain, Tucker T. EOP/OVP <Anne.T.Obenshain@ovp.eop.gov>; Swint,

Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>; Campana, Ariella M. EOP/WHO

<Ariella.M.Campana@who.eop.gov>

Subject: 4/13 Follow-Up - Governors Briefing on COVID-19



Governors and Senior Staff,

Thank you for your efforts in the whole-of-America approach to respond to and mitigate the effects of COVID-19. Below and attached are follow-up items from today's briefing.

Data & Reporting Ask from the Vice President

The Vice President has asked each governor to ensure their State is reporting key information to the Federal Government to get resources to the right place, at the right time. Friday, the Vice President wrote a letter to governors asking them to ensure their State is reporting broad healthcare capacity and personal protective equipment data to FEMA. Over 45 States are now reporting quality healthcare capacity data on a daily basis. *Please continue to ensure your State is reporting answers to the questions below on a daily basis. Attached you will find the letter from the Vice President.*

• Separately, HHS Secretary Azar sent a <u>letter</u> on hospital utilization and lab data reporting to hospital administrators. States can waive hospitals from reporting directly to the Federal Government if the State takes over the Federal reporting responsibilities.

<u>Testing 101 – Operationalizing COVID 19 Testing For Diagnosis & Surveillance</u>

Ambassador Birx led a presentation on operationalizing COVID 19 testing for diagnosis and surveillance. The Vice President has asked each governor to develop an integrated public-private testing strategy. Medium- and high-throughput testing platforms are running at only 40% capacity. Please work with your public and private labs to utilize the full capacity of these systems. **Attached you will find the 8-page slide deck from the presentation**. We will provide more details on testing including CMS reimbursement for technical support and collection, along with additional guidance to guide your outreach to your laboratories shortly.

Key Recommendations for Long-Term Care Facilities

We thank our nation's governors for taking action to protect patients and healthcare workers in long-term care facilities. You can find more details about Gov. Hogan's (MD) Statewide strike team efforts (here) and Gov. Baker's (MA) nursing home mobilize testing program (here). We know there countless other leading practices from governors and we welcome hearing about your efforts.

• Recent Centers for Medicare & Medicaid Services (CMS) Guidance on supplies, infection control procedures, screening, staffing, and managing facilities: **Here**.

Readout from the April 13 Briefing with Governors

Today, Vice President Mike Pence led a discussion with the chief executives of approximately 50 States, territories, and Washington, DC, and their State emergency managers and health officials to provide an update on the all-of-America approach to respond to and mitigate the effects of COVID-19.

The Vice President, Ambassador Debi Birx, FEMA Administrator Pete Gaynor, CMS Administrator Seema Verma, and Rear Adm. John Polowczyk with the Joint Chiefs of Staff, and all 10 FEMA Regional Administrators urged State, local, and tribal leaders to continue to regularly highlight community mitigation efforts to "Slow the Spread." Participants also discussed the Federal government's historic efforts to support State, local, and tribal leaders including, already approving 55 major disaster declaration requests and approximately 40 Title 32 requests to 100% federally fund State National Guard activities related to COVID-19 response efforts. The Vice President discussed his letter to America's governors on data reporting for healthcare capacity, personal protective equipment, and hospital utilization and lab testing. The importance of the \$150 billion of CARES Act funding for States to effectively respond to COVID-19 was discussed.

Participants discussed CDC guidance on implementing safety practices for critical infrastructure workers, the significant increase in testing capacity and discussed strategies State and local leaders can take to further increase testing capacity through proactive partnerships with the private sector and various laboratories in their State. Multiple States shared examples of best practices they are taking to regarding caring for people in long-term care facilities nursing homes. Administrator Gaynor and Admiral Polowczyk discussed their supply chain support efforts to get critical supplies to the healthcare providers. Administrator Verma discussed expanding telehealth options through Medicaid and the importance of CARES Act funding for hospitals and Americans impacted by COVID-19.

The leadership of governors, mayors, county commissioners, and tribal officials is vital for effective emergency management. Emergency management in America is locally-executed, State-managed, and Federally supported, which allows for innovative solutions to be identified at the local and State level for the majority of issues. Since January 2020, the Trump Administration has held nearly 144 briefings – including 12 governors briefings – with over 66,000 State, local, and tribal leaders in every State and territory in the Nation. Leaders at every level of government and the private sector are working in partnership to bend the curve.

Treasury Eligibility Guidance on CARES Act Funding to State Governments

The U.S. Department of the Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation on <u>Treasury's portal</u> no later than April 17. Additional guidance on eligible uses of Fund disbursements by governments will be posted as it becomes available.

Below, you will find additional information and resources mentioned on today's briefing call:

- Contacting Your FEMA Regional Administrator
- Implementing Safety Practices for Critical Infrastructure Workers
- Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk
- Maximizing Testing Resources & Medical Supplies
- Guidance on Telehealth Reimbursement & Coverage Options
- Assistance for Small Businesses & American Families

If you have any additional questions, please reach out to the Office of the Vice President or White House Intergovernmental Affairs Office.

Intergovernmental Affairs Office

Name	Cell Phone	Email
Doug Hoelscher	202-881-8950	Douglas.L.Hoelscher@who.eop.gov
Nic Pottebaum	202-881-7803	Nicholas.D.Pottebaum@who.eop.gov
Zach Swint	202-881-6717	Zachariah.D.Swint2@who.eop.gov
Ella Campana	202-881-7298	Ariella.M.Campana@who.eop.gov

Office of the Vice President

Name	Cell Phone	Email
Tucker Obenshain	202-881-6217	Anne.T.Obenshain@ovp.eop.gov

Thanks, Nic

--

Nicholas D. Pottebaum Special Assistant to the President and Deputy Director White House Office of Intergovernmental Affairs

O: 202-456-2132 | C: 202-881-7803 | E: Nicholas.D.Pottebaum@who.eop.gov

Slow the Spread

ADDITIONAL INFORMATION

Contacting Your FEMA Regional Administrator

The Federal Emergency Management Agency (FEMA) has activated the National Response Coordination Center (NRCC) 24/7. All requests to the Federal government *must be formally communicated* by your **State emergency manager** to your **FEMA Regional Administrator.** This is the same process as natural disasters (e.g., hurricane recovery, flood recovery, tornado recovery, etc.).

Implementing Safety Practices for Critical Infrastructure Workers

CDC has released has released guidance on implementing safety practices for critical infrastructure workers who may have had exposure to a person with suspected or confirmed COVID-19. This is for Federal, State, & local law enforcement; 911 call center employees; Fusion Center employees; hazardous material responders from government and the private sector; janitorial staff and other custodial staff; workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities. To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. More guidance on prescreening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces here.

Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk (see graphics at end of the email)

Joint Chiefs of Staff Rear Adm. John Polowczyk's provided an update to governors on rapidly increasing supply and expanding domestic production of medical supplies and equipment.

- **Project Air-Bridge**: FEMA is expediting movement of critical supplies from the global market to medical distributors in various locations across the U.S. As of April 13, 37 flights have landed containing critical PPE and then distributing in areas of greatest need; then, the remainder will be infused into the broader U.S. supply chain. Prioritization is given to hospitals, health care facilities, and nursing homes around the country. An additional 43 flights are scheduled over the next three weeks. As of April 12th, FEMA has coordinated the delivery of the following to areas in greatest need: 38 million N95 respirators, 32.6 million surgical masks, 5.5 million face shields, 4.7 million surgical gowns, 30.3 million gloves, 212,000 coveralls, and 10,448 ventilators.
- **Obligations to States**: FEMA has obligated nearly \$5.2 billion in support of COVID-19 response efforts.
- **Ventilator Distribution**: FEMA is distributing ventilators to hard hit States. As of April 12, FEMA and HHS have provided or are currently shipping 10,888 ventilators from the Strategic National Stockpile (SNS) and the Defense Department. FEMA through the Regional Administrators are tracking data closely provided by your State to understand data-based needs. For more information, please call your FEMA Regional Administrator.

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From: Yanick, Brittany M. EOP/WHO <Brittany.M.Yanick@who.eop.gov>

Sent:Wednesday, April 15, 2020 4:58 PMTo:Yanick, Brittany M. EOP/WHOCc:Pottebaum, Nic D. EOP/WHO

Subject: What You Need To Know | President Trump Is Demanding Accountability From The

WHO

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

What You Need To Know | President Trump Is Demanding Accountability From The WHO

"I will never hesitate to take any necessary steps to protect the lives, health, and safety of the American people. I will always put the well-being of America first." - President Trump

ACCOUNTABILITY FOR AMERICAN TAXPAYERS: President Donald J. Trump is holding the World Health Organization (WHO) accountable by putting a hold on United States funding.

- President Trump is placing a hold on all funding to the WHO while its mismanagement of the coronavirus pandemic is investigated.
- The American taxpayers provide \$400 million to \$500 million in funding to the WHO each year, but the WHO has failed them.
 - China, on the other hand, provides just around one-tenth of the funding that the United States provides.
- The American people deserve better from the WHO, and no more funding will be provided until its mismanagement, cover-ups, and failures can be investigated.
- President Trump will continue fighting the coronavirus outbreak and will redirect global health aid to others directly engaged in the fight.

INVESTIGATING THE WHO'S FAILED RESPONSE: The WHO's response to the coronavirus outbreak has been filled with one misstep and cover-up after another.

- Despite the fact that China provides just a small fraction of the funding that the United States does, the WHO has shown a dangerous bias towards the Chinese government.
- The WHO repeatedly parroted the Chinese government's claims that the coronavirus was not spreading between humans, despite warnings by doctors and health officials that it was.
 - o Taiwan contacted the WHO on December 31 after seeing reports of human-to-human transmission of the coronavirus, but the WHO kept it from the public.
 - The WHO praised the Chinese government's response throughout January and claimed there was no human-to-human transmission, despite the fact that doctors in Wuhan were warning there was.

- The WHO decided on January 22 that the coronavirus did not pose a Public Health Emergency of International Concern, all while praising China's response.
- The WHO put political correctness over life-saving measures by opposing travel restrictions.
 - The WHO made the disastrous decision to oppose travel restrictions from China and other countries – despite applauding travel restrictions within China itself – leading to further spread of the virus internationally.

STRUCTURAL ISSUES AND NECESSARY REFORMS: The WHO has longstanding structural issues that must be addressed before the organization can be trusted again.

- The WHO has shown it was not prepared to prevent, detect, and respond to a severe infectious disease crisis like this.
- The WHO lacks the structure to ensure accurate information and transparent data sharing from members, which makes it vulnerable to misinformation and political influence.
- The United States seeks to refocus the WHO on fulfilling its core missions of preparedness, response, and stakeholder coordination.
- The United States is also calling for reforms to promote transparency and data sharing, hold member states accountable for abiding by the International Health Regulations, increase access to medicines, and counter China's outsized influence on the organization.

###

From: Jeffrey Dickerson

Sent: Wednesday, April 15, 2020 6:23 PM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas

Rice;mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Noggle, Caylee;Tim Dignam;Wilson, Richard D BG USARMY NG GAARNG (USA);Simmons, Randall V Jr BG

USARMY NG GAARNG (USA);Irice@ldxsolutions.com;Darryl Graham;Matthew

Hicks; Jeffrey Dickerson

Subject: Interagency COVID-19 Response Planning Team Update, 151800APR20 **Attachments:** GWCC ACF-Atlanta and Alt Med Facility Progress Update_151800APR20.pptx

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Sir – Today's update is outlined below, along with attached slides depicting progress status for GWCC ACF-Atlanta and Alternate Medical Facilities at Rome, Macon, Albany, and Gainesville.

1. <u>GWCC ACF-Atlanta</u>: Great progress again today, with construction completed for both patient units and bathrooms. Services contracts walked the site today in preparation for turn-on in next the 24-28 hours. Medical personnel orientation and onsite training is scheduled for Friday, as well as a final walk-thru for decontamination plan, and Grady Hospital will conduct a dry-run/rehearsal with AMI/PAE for the admission process on Friday afternoon or Saturday morning.

The buildup of the individual rooms is complete; electrical connectivity is established; showers and toilets installation are complete; beds are inside the units; the remainder of durable medical equipment is due in tomorrow; and 5 days' supply of PPE is on site. Clinical staff started arriving yesterday with 60 % expected to be on site by the end of today, with the remainder scheduled to arrive tomorrow. On track for initial operational capability on Saturday afternoon and fully operational on Sunday morning. We received a waiver for the omission of smoke barriers from the State Insurance Commissioner's office. Inspectors will inspect the facility on Friday, 17APR20. We refined the MOUs/interagency agreements/funding processes between DCH, GEMA, and GWCC. We along with PAE and AMI Teams are planning/prepared for the Governor's site visit at 1330 on Thursday, 16APR20.

- 2. <u>Additional Hospital Staffing:</u> We conducted a regional staffing capabilities call with Region B hospitals today, and they have no current/expected staffing shortfalls. We will continue with regional staffing capabilities calls tomorrow, focused on Region F (central Ga) to assess their staffing shortfalls and identify hospitals that need additional assistance. We are also assessing staffing shortfalls at Appling Healthcare in Appling County and Pine Hill Nursing Home in Dooly County. We're deploying additional staffing augmentation to Crisp Regional and Memorial Hospital in Bainbridge.
- 3. <u>DBHDD:</u> NO CHANGE: 16 additional staffing personnel should arrive at Central State Hospital on Thursday, 16APR20 in order to fill staffing shortages.

4. Additional Augmentation Efforts:

Rome: We conducted a site coordination visit today and made coordination with the Facility leadership and maintenance personnel; the last concrete pillars were poured today. The containers arrive on Saturday with placement complete by Monday morning. Expected FOC 25APR.

Albany: Containers arrived on site and are being placed today. Reports from the site are that things are moving smoothly and coordination among all parties is good. No issues. Expected FOC 28APR.

Macon: No issues with the construction of the containers. On site coordination improved with input from Governors' staff, and site work has been initiated. Administrative staff there are very concerned with MOU status, and we will be working on those details over the next 2 days. No constraints for the physical construction and preparation of the units. Expected FOC 5MAY.

Gainesville: We conducted an initial coordination call today – there are no issues with the construction of the containers and no issues regarding the site and preparation. NE GA Medical initially said they would cover the coordination and expense of the utilities tie in; however, they now say that they do not plan on covering that expense. We will roll that site preparation into the MODs contract, similar to Rome. Their administrative staff are interested in more details regarding staffing personnel and medical administration issues, as well as the details of the durable medical equipment to support the 20 rooms. No constraints for the physical construction and preparation of the units. Expected FOC 5MAY.

<u>OTHER:</u> DCH is now the lead for daily reporting on long term care facilities, utilizing the joint database created by GA DOD and DCH/HSRD.

Jeff
Jeff Dickerson
GA DOD Interagency Coordinator for COVID-19 Response
Email:

Vr,

Cell:

From: Jeffrey Dickerson

Sent: Wednesday, April 15, 2020 6:23 PM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

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Email:
Cell:

Vr, Jeff

From: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

 $<\!thomas.m.carden.mil@mail.mil\!>$

Sent: Wednesday, April 15, 2020 6:28 PM

To: Jeffrey Dickerson

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

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Subject: Re: [Non-DoD Source] Interagency COVID-19 Response Planning Team Update,

151800APR20

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Sent from my iPhone

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GA DOD Interagency Coordinator for COVID-19 Response
Email:
Cell:
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From: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

<thomas.m.carden.mil@mail.mil>

Sent: Wednesday, April 15, 2020 6:28 PM

To: Jeffrey Dickerson

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas

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151800APR20

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Cc: Berry, Frank <frank.berry@dch.ga.gov>; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA) <emmanuel.haldopoulos.mil@mail.mil>; Joseph Hood <joseph.hood@dch.ga.gov>; Lairet, Julio R Col USAF 116 ACW (USA) <julio.r.lairet.mil@mail.mil>; Loke, Ryan <ryan.loke@georgia.gov>; Lucas Rice <lrice@ldxsolutions.com>; Mark Sexton <mark.sexton@gema.ga.gov>; Marshall, Kris J COL USARMY NG GAARNG (USA) <kris.j.marshall2.mil@mail.mil>; Noggle, Caylee <caylee.noggle@georgia.gov>; Tim Dignam <tdignam@cdc.gov>; Wilson, Richard D BG USARMY NG GAARNG (USA) <richard.d.wilson.mil@mail.mil>; Simmons, Randall V Jr BG USARMY NG GAARNG (USA) <randall.v.simmons.mil@mail.mil>; Irice@ldxsolutions.com; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>

Subject: Re: [Non-DoD Source] Interagency COVID-19 Response Planning Team Update, 151800APR20

Thanks .. do you have the flow of events for the visit tomorrow?

Sent from my iPhone

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GA DOD Interagency Coordinator for COVID-19 Response
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151800APR20

Importance: High

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Team – Please see MG Carden's comments – aka guidance – below.

Please provide some info regarding details of how we'll receive the GOV, where he'll go first, sequence, timeline, briefers, key points of interest, etc.

Caylee/Ryan – we'll certainly defer to and lean on your experience for input.

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Roger .. Need that as early as possible. I am sure his PAO has a plan... we just need to offer an option .. I am sure he will want to go straight to the area and view the progress. If someone could give him an overview on the "floor" and walk him from patient arrival through admission etc.. also show him the hot/cold zone control.

Supplies, Security, Food Service, Landry, back up power and other key wrap around. All of this and more is likely already in your plan. Thanks, **TMC** Sent from my iPhone On Apr 15, 2020, at 6:31 PM, Jeffrey Dickerson wrote: All active links contained in this email were disabled. Please verify the identity of the sender, and confirm the authenticity of all links contained within the message prior to copying and pasting the address to a Web browser. Sir – We've done some initial legwork and can have a detailed VIP Visit Concept prior to your 1000 call in the morning – we'll strive for sooner. Vr, Jeff Jeff Dickerson GA DOD Interagency Coordinator for COVID-19 Response Email: Cell: From: Carden, Thomas M Jr MG USARMY NG GAARNG (USA) [Cautionmailto:thomas.m.carden.mil@mail.mil] Sent: Wednesday, April 15, 2020 6:28 PM **To:** Jeffrey Dickerson Cc: Berry, Frank <frank.berry@dch.ga.gov>; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA) <emmanuel.haldopoulos.mil@mail.mil>; Joseph Hood <joseph.hood@dch.ga.gov>; Lairet, Julio R Col USAF 116 ACW (USA) < julio.r.lairet.mil@mail.mil>; Loke, Ryan < ryan.loke@georgia.gov>; Lucas Rice <Irice@Idxsolutions.com>; Mark Sexton <mark.sexton@gema.ga.gov>; Marshall, Kris J COL USARMY NG GAARNG (USA) kris.j.marshall2.mil@mail.mil; Noggle, Caylee <caylee.noggle@georgia.gov>; Tim Dignam < tdignam@cdc.gov >; Wilson, Richard D BG USARMY NG GAARNG (USA) <ri>chard.d.wilson.mil@mail.mil>; Simmons, Randall V Jr BG USARMY NG GAARNG (USA)</ri> <randall.v.simmons.mil@mail.mil>; Irice@ldxsolutions.com; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>

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GA DOD Interagency Coordinator for COVID-19 Response

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Sent: Wednesday, April 15, 2020 6:40 PM

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CLASSIFICATION: UNCLASSIFIED

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Sent: Wednesday, April 15, 2020 7:05 PM

To: Loke, Ryan

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

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Subject: DATA WORKING GROUP - Daily Team Meeting

Location: Microsoft Teams Meeting

Start: Thu 4/16/2020 9:30 AM **End:** Thu 4/16/2020 10:30 AM

Show Time As: Tentative

Recurrence: (none)

Organizer: Susan Miller

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Dear Data Team... we are moving our dialing Work Group call to 9:30am. The All-hands Daily Briefing at 9:00am will transition directly into this daily Data Team Work Group call.

To summarize our current schedule:

- 9-9:30: All Hands Daily Briefing (same as the meeting info below)
- 9:30-10:30: Data Team Daily Call (meeting info below)
- 2:30-3:30: *Modeling Team Daily Call* (Natalie and I consult our contact info survey (linked in blue below) to create our meeting invitations, so please fill it out if you haven't)

Please decide if this event is the best use of your time, and join when you are able...

For those who have not already done this please <u>add your contact information here</u> – it will take you less than 1 minute and is the main way I know folks need to be on this team

WORKING GROUP MEETING: Covid-19 DATA TEAM (not all hands, just Data Team)

AGENDA EVOLVING

Current Holdings

• Review Draft spreadsheet for missing datasets

Expanded Data Requirements

- Are we missing any MISSION CRITICAL data? (mission critical, in support of Governors Task Force)
- Obstacles?

Additional Needs

- What support would help us? (e.g. automations, manipulations, spatial data)
- Do we need anything from the Modeling or Data Visualization Teams?

Updates

- Tasks / Owners
- Collaboration Space
 - o MS Teams
 - o Data Hub

Join Microsoft Teams Meeting

United States, Atlanta (Toll)

Conference ID:

Local numbers | Reset PIN | Learn more about Teams | Meeting options

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>

Sent: Wednesday, April 15, 2020 8:19 PM **To:** Swint, Zachariah D. EOP/WHO

Cc: Pottebaum, Nic D. EOP/WHO;Campana, Ariella M. EOP/WHO

Subject: Mental Health and COVID-19 - Resources and Guidance for State and Local Leaders

Attachments: ONDCP COVID Fact Sheet.pdf

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Cc: Pottebaum, Nic D. EOP/WHO;Campana, Ariella M. EOP/WHO

Subject: Mental Health and COVID-19 - Resources and Guidance for State and Local Leaders

Attachments: ONDCP COVID Fact Sheet.pdf

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Attachments: ONDCP COVID Fact Sheet.pdf

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State and Local Leaders,

President Donald J. Trump is committed to providing Americans with the unprecedented mental health resources they need during this challenging time. On Thursday, April 9, President. Trump, Vice President Mike Pence, First Lady Melania Trump, and Second Lady Karen Pence spoke by telephone with hundreds of American mental health professionals, leaders, and advocates to discuss the effects COVID-19 is having on the American people. This COVID-19 call was the first to bring these four influential leaders together on one issue. The President recognized that a great number of Americans are enduring hardships – including loneliness from social distancing, despair from being out of work, anxiety from the danger of the virus, and grief from the loss of a loved one. President Trump thanked the doctors, counselors, and many other mental health professionals for providing vital mental health services during this time through tele-health.



The White House and Administration are committed to providing Americans with vital mental health resources and services especially through expanding telehealth services, continuing the Administration's efforts to combat drug demand and the opioid crisis. Below, please find additional information and resources. Attached, also find a helpful Fact Sheet from the White House Office of National Drug Control Policy (ONDCP) outlining efforts and resources to ensure that prevention, treatment, recovery support services, and safe and effective pain management remain available nationwide. We also want to share examples of State and Local leaders addressing mental health needs in their communities and welcome awareness and engagement around your efforts.

Sincerely,

The White House Office of Intergovernmental Affairs

Zach Swint
Office of Intergovernmental Affairs
The White House
C: (202) 881-6717 | E: Zachariah.D.Swint2@who.eop.gov

STATE AND LOCAL COVID-19 MENTAL HEALTH INITIATIVES

Below are examples of State and Local leaders promoting mental health awareness and resources aid the COVID-19 pandemic. We welcome awareness over your own respective initiatives.

Ohio Governor DeWine <u>urged support groups</u> to check in with people with serious mental illness or addiction and highlighted the need to get the suicide hotline sent out to more people.

Rhode Island Governor Gina Raimondo offered resources to those struggling with mental health during this time.

Tennessee Governor Bill Lee <u>addressed</u> the collateral impact on mental health that COVID-19 takes and highlighted the state's crisis hotline while working with the Tennessee Department of Mental Health and Substance Abuse Services to expand telehealth access.

Indiana Governor Eric Holcomb <u>said</u> that mental health crisis calls are increasing and will issue guidance for Hoosiers on the tools available to help them out with mental health issues and will increase staffing at these centers.

Minnesota Governor Tim Walz <u>signed</u> an Executive order expanding mental health counseling options for Minnesotans. Specifically, the Executive Order authorized out-of-state mental health providers to treat Minnesota patients via telehealth services

Illinois Governor J.B. Pritzker <u>announced</u> the launch of a new Remote Patient Monitoring Program and mental health support line. Call4Calm, operated by the Illinois Department of Human Services' Mental Health Division, is a free-of-charge emotional support text line for Illinois residents experiencing stress and mental health issues related to COVID-19.

The Michigan Department of Health and Human Services <u>launched</u> a warmline to help Michiganders with persistent mental health issues amid the COVID-19 pandemic. The peer-operated warmline is intended to act as a resource for people experiencing depression, anxiety, or other mental illnesses.

The Texas Health & Human Services Commission <u>established</u> a hotline and texting service on Mental Health.

San Diego, California Mayor Kevin Faulconer and **San Diego County Supervisors** <u>announced</u> a \$25 Million partnership for a Behavioral Health Fund dedicated to assessment, treatment, detoxification, crisis stabilization, residential treatment and supportive housing.

San Jose, California Mayor Sam Liccardo hosted a <u>Facebook Live</u> session on mental health during the coronavirus crisis.

The Los Angeles County Department of Mental Health (DMH), the largest county mental health department in the United States, has scaled resources and provided coronavirus-specific guidance for individuals during the pandemic. More here.

In **Coconino County**, **Arizona**, the Emergency Operation Center (EOC) Liaisons <u>distributed</u> Mental Health resource listing (including crisis line) to numerous.

Pima County, Arizona worked with SoAZ NAMI (<u>National Alliance for Mental Illness</u>) to put their "Ending the Silence" online, and to market it to local schools, public (traditional and charter) and private. Ending the Silence is a National Program, usually taught in person to Middle and High School Students

In **Arapahoe County, Colorado**, Aurora Mental Health continues to **provide** all core services. Crisis, withdrawal management (detox), and residential services are face-to-face, and all other services have transitioned to phone (allowed in Colorado for indigent and Medicaid clients) and telehealth.

In **Tennessee**, **Shelby County** is **offering** free teletherapy services to all county employees.

In **Indiana**, **Noblesville Mayor Chris Jensen** held a <u>Facebook Live</u> with a licensed therapist in his city to discuss tips on how families and individuals can care for their mental health.

In **Georgia**, **Athens-Clarke County Mayor Kelly Girtz** gave a brief <u>video update</u> on the County's response to COVID-19 and highlighted mental health considerations & shelter-in-place orders.

In **Georgia**, **the DeKalb Community Service Board (CSB)** has gone to telehealth services for clients that wish to maintain social isolation while accessing mental health services. The CSB pharmacy services have arranged for same-day delivery of medication refill to their homes for all clients using telehealth access. More information **here**.

In **Florida**, **Tallahassee Mayor John Dailey** <u>led a discussion</u> about anxiety and new routines citizens can take to keep up on their mental health.

DuPage County, Illinois <u>established</u> an on-site 12 bed crisis residential program that remains open and available to community members who are having a mental health crisis and not in need of an inpatient level of care as well as implementation of a health screening for anyone in need.

FEDERAL RESOURCES AND GUIDANCE



Resources and Initiatives

- **Telehealth**: Under the President's leadership and at the direction of the White House Task Force, the Trump Administration has taken historic steps to expand Americans' access to telehealth, so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility (*read more from Surgeon General Jerome Adams and CMS Administrator Seema Verma* **Telehealth Plays Big Role in Coronavirus Cure**). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. The Centers for Medicare & Medicaid Services (CMS) has issued guidance on telehealth reimbursement and coverage options in the Medicaid program here.
- Supplemental Grant Funding: On April 3, SAMHSA announced it will fund \$110 million in emergency grants to provide treatment for substance use disorders/serious mental illness during the coronavirus pandemic. The grants are available to State governments, the District of Columbia, Territories, and Federally recognized American Indian and Alaska Native Tribes. As the Trump administration responds to meet the needs of Americans affected by the coronavirus pandemic, the Substance Abuse and Mental Health Services Administration (SAMHSA) is announcing emergency grants to help Americans dealing with substance use disorders and/or serious mental illness. The agency has announced it is accepting applications for fiscal year (FY) 2020 Emergency Grants to Address Mental and Substance Use Disorders During COVID-19 (Short Title: Emergency COVID-19). The grants total \$110 million and will provide up to \$2 million for successful state applicants and up to \$500,000 for successful territory and tribal applicants for 16 months. More details here.
- **Move Your Way Campaign**: *Move Your Way* is a physical activity campaign from the U.S. Department of Health and Human Services to promote the recommendations from the Physical Activity Guidelines for Americans. The Move Your Way tools, videos, and fact sheets on this page have tips that make it easier to get a little more active. And small changes can add up to big health benefits! Learn more **here**.
- Office of National Drug Control Policy COVID-19 Fact Sheet: During the COVID-19 crisis, the White House Office of National Drug Control Policy (ONDCP) is leading efforts to ensure that prevention, treatment, recovery support services, and safe and effective pain management remain available nationwide. The Trump Administration is mobilizing the Federal Government to ensure the approximately 20 million Americans who struggle with the disease of addiction can access and continue to receive treatment and recovery support services, while keeping themselves and healthcare professionals safe from unnecessary exposure to COVID-19. See attached.
- The President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS): On Friday, April 3, Second Lady Karen Pence announced her new role as lead ambassador

for PREVENTS on behalf of the White House Coronavirus Task Force (see Second Lady Karen Pence Taking Lead Role in Suicide Prevention Initiative During Coronavirus Outbreak). PREVENTS focuses on a holistic public health approach to ending Veteran suicide. The Initiative seeks to change the culture surrounding mental health and suicide prevention through enhanced community integration, prioritized research activities, and implementation strategies that emphasize improved overall health and well-being. The goal of PREVENTS is to prevent suicide — among not just Veterans but all Americans. By adopting a holistic public health approach, PREVENTS is acting on the knowledge that suicide prevention is everyone's business, and that by working together, locally and nationally, we can prevent suicide. Learn more here.

Guidance

- Managing & Recognizing Stress: The outbreak of COVID-19 may be stressful for people. Fear and anxiety about a disease can be overwhelming and cause strong emotions in adults and children. Coping with stress will make you, the people you care about, and your community stronger. Sharing the facts about COVID-19 and understanding the actual risk to yourself and people you care about can make an outbreak less stressful. When you share accurate information about COVID-19 you can help make people feel less stressed and allow you to connect with them. Learn more about taking care of your emotional health. Everyone reacts differently to stressful situations. How you respond to the outbreak can depend on your background, the things that make you different from other people, and the community you live in. Substance Abuse and Mental Health Services Administration's (SAMHSA's) Disaster Distress Helpline: 1-800-985-5990 or text TalkWithUs to 66746. (TTY 1-800-846-8517)
- **Guidance for Parents and Caregivers**: Children and teens react, in part, on what they see from the adults around them. When parents and caregivers deal with the COVID-19 calmly and confidently, they can provide the best support for their children. Parents can be more reassuring to others around them, especially children, if they are better prepared. There are many things you can do to support your child: Take time to talk with your child or teen about the COVID-19 outbreak. Answer questions and **share facts** about COVID-19 in a way that your child or teen can understand. Learn more about **helping children cope**.
- **Guidance for Responders and Providers**: Responding to COVID-19 can take an emotional toll on you. There are things you can do to reduce secondary traumatic stress (STS) reactions: Acknowledge that STS can impact anyone helping families after a traumatic event; and learn the symptoms including physical (fatigue, illness) and mental (fear, withdrawal, guilt) Learn more **tips for taking care of yourself** during emergency response.
- **Guidance for Persons Released from Quarantine**: Being separated from others if a healthcare provider thinks you may have been exposed to COVID-19 can be stressful, even if you do not get sick. Everyone feels differently after coming out of quarantine. Some feelings include: Sadness, anger, or frustration because friends or loved ones have unfounded fears of contracting the disease from contact with you, even though you have been determined not to be contagious; and guilt about not being able to perform normal work or parenting duties during quarantine. Children may also feel upset or have other strong emotions if they, or someone they know, has been released from quarantine. **You can help your child cope**.
- **Digital Mental Health Innovating in a Time of High Anxiety**: In this time of <u>increased anxiety</u> <u>and physical distancing</u> due to the <u>coronavirus (COVID-19) pandemic</u>, many people are looking for digital technology solutions to help them manage their mental health. Mental health apps are one of the fastest-growing sectors of the digital marketplace, with more than 10,000 apps available. These apps claim to, among other things, boost your mood, increase your sleep, and even help you manage your addiction. The National Institute of Mental Health takes a look <u>here</u>.
- U.S. Department of Veterans Affairs Resource How To Manage Stress and Anxiety During
 the COVID-19 Outbreak: Taking care of your well-being, including your mental health, is essential
 during this time. Everyone reacts differently to stressful situations. Many people may experience stress,
 fear, anxiety, or feelings of depression. This is normal. There are things that you can do to manage your
 stress and anxiety. VA has provided resources here.

From: Latcham, Alexander S. EOP/WHO <Alexander.S.Latcham@who.eop.gov>

Sent: Thursday, April 16, 2020 12:00 AM **To:** Latcham, Alexander S. EOP/WHO

Subject: 04/15 COVID-19 Update

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good evening,

The Trump Administration continues to take extraordinary measures to lead a whole-of-government response to the unprecedented coronavirus epidemic. Within the last 24 hours, the Trump Administration provided the following updates and announcements:

- Today, President Trump hosted several calls with leaders of the <u>Great American Economic Revival Industry Groups</u> and thanked these members for working closely with the White House to coordinate the plan for a swift and powerful economic resurgence.
- President Trump instructed his administration to halt funding of the World Health Organization while a review is conducted to assess the Organization's role in severely mismanaging and covering up the spread of the coronavirus.
- Under the Paycheck Protection Plan, approximately 4800 lenders have disbursed loans to over 1.3 million eligible small businesses.
- As of today, the federal government has developed and delivered 39.4 million N95 masks, 431 million gloves, 57 million surgical masks, and 10.2 million gowns.
- U.S. Transportation Secretary Elaine Chao <u>announced \$10 billion in relief</u> to support continued operations of America's airports and their workers during the coronavirus epidemic.
- Secretary of Education Betsy DeVos yesterday <u>announced the availability of \$3 billion</u> in emergency block grants for governors to allocate at their discretion to support schools and colleges hard hit by the coronavirus.
- Secretary of the Treasury Steve Mnuchin and America's major airlines reached an agreement to participate in a payroll support program that will aid airline industry workers, preserve the vital role airlines play in our economy, and protect taxpayers.
- Over 3.3 million coronavirus tests have been administered in the United States to date, far more than any other nation.
- The federal government has certified 48 separate coronavirus tests and the FDA is rapidly working with 300 companies and labs to further expand the nation's testing capacity.
- <u>Abbott Labs announced</u> that it has developed an antibody test that will determine if someone has been previously infected with the coronavirus. These tests could be available to screen up to 20 million people by June.
- In an effort to increase the number of Americans eligible for coronavirus testing, <u>CMS announced</u> that Medicare will nearly double reimbursement for clinical laboratories doing high-volume testing.

Tomorrow at 8:30am ET, President Trump participates in a G7 Leaders' video teleconference on coordinated action in response to COVID-19. The President then hosts a phone call with members of the House of Representatives at 10:00am ET and with members of the Senate at 11:00am ET. The President delivers remarks celebrating America's Truckers at 1:30pm ET and participates in a video teleconference with Governors on COVID-19 response and economic revival at 3:00pm ET. Members of the Coronavirus Task Force hold a press briefing at 5:00pm ET.

Additional Guidance (as of 4.15, 5pm):

• WH - Memorandum on Providing Federal Support for Governors' Use of the National Guard to Respond to COVID-19 (Click here)

- WH President Donald J. Trump Announces Great American Economic Revival Industry Groups (Click here)
- WH President Donald J. Trump Has Led A Historic Mobilization To Combat The Coronavirus (Click here)
- WH Connecting Americans to Coronavirus Information Online (Click here)
- WH President Donald J. Trump Is Demanding Accountability From the World Health Organization (Click here)
- WH-ONDCP ONDCP COVID-19 Fact Sheet (Click here)
- HHS HHS Announces New Ventilator Contracts, Orders Now Totaling Over 130,000 Ventilators (Click here)
- **HHS** The Administration for Children and Families to Release Funding to Support the Child Care and Development Block Grant (<u>Click here</u>)
- HHS HHS Awards \$90 Million to Ryan White HIV/AIDS Program Recipients for COVID-19 Response (<u>Click here</u>)
- CMS 4/14 News Alert (Click here)
- CMS CMS Increases Medicare Payment for High-Production Coronavirus Lab Tests (Click here)
- FDA April 13 Daily Roundup and April 14 Daily Roundup
- NIH NIH study validates decontamination methods for re-use of N95 respirators (Click here)
- **DHS-FEMA** FEMA announces funding notice for Emergency Management Performance Grant Supplemental Allocation (Click here)
- DHS/USDA DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of America's Food Supply (<u>Click here</u>)
- Treasury Statement by Secretary Mnuchin on the Payroll Support Program (Click here)
- **Treasury** "Get My Payment" Web App Launched for Americans to Submit Direct Deposit Information and Track Payments (Click here)
- **Treasury** Supplemental Security Income Recipients Will Receive Automatic COVID-19 Economic Impact Payments (Click here)
- **DOT** Recommended Actions to Reduce the Risk of Coronavirus Disease 2019 (Covid-19) Among Transit Employees and Passengers (Click here)
- **DOL** Interim Enforcement Response Plan for Coronavirus Disease 2019 (Click here)
- **DOL** U.S. Department of Labor Takes Action to Help American Workers During the Coronavirus Pandemic (Click here)
- **DOL** U.S. Department of Labor Announces \$91.8 Million Funding Opportunity To Assist America's Migrant and Seasonal Farmworkers (Click here)
- **HUD** HUD Implements New CARES Act Multifamily Mortgage Payment Relief to Maintain and Preserve Affordable Rental Housing (Click here)
- HUD CARES Act Flexibilities for CDBG Funds Used to Support Coronavirus Response (Click here)
- **HUD** New Section 108 Q&A Document for Assisting Business Borrowers Experiencing Distress as a Result of the Coronavirus (Click here)
- **HUD** HUD Issues Memoranda on Suspensions and Waivers for HOME Program COVID-19 Response (<u>Click</u> here)
- **ED** Secretary DeVos Announces CTE Programs can Donate Unused Personal Protective Equipment, Medical Supplies to Support Coronavirus Response (<u>Click here</u>)
- ED Secretary DeVos Proposes Rethinking Teacher Professional Development by Empowering Teachers to Customize, Personalize their Continued Learning (Click here)
- **EPA** EPA Continues Efforts to Increase the Availability of Disinfectant Products for Use Against the Novel Coronavirus (<u>Click here</u>)
- DOE DOE Announces Crude Oil Storage Contracts to Help Alleviate U.S. Oil Industry Storage Crunch (<u>Click</u> here)
- **DOJ** Justice Department and Federal Trade Commission Jointly Issue Statement on COVID-19 and Competition in U.S. Labor Markets (<u>Click here</u>)
- **EXIM** EXIM Board Takes Action in Fight Against COVID-19 Pandemic by Temporarily Restricting Export Support for Needed U.S. Medical Supplies and Equipment (Click here)
- **DOD** DoD Contract for 60 N95 Critical Care Decontamination Units: \$415M Contract, Each Unit Can Decontaminate 80K N95 Masks Per Day (Click here)
- **DOD** DOD Learns Lessons for Future From Coronavirus Fight (Click here)
- DOD Growth in DOD Telework Capability May Outlive Coronavirus Pandemic (Click here)

- **DOD** Guard Assists Illinois Residents in COVID-19 Response (<u>Click here</u>)
- VA VA mobilizes 3D printing resources nationwide to fight COVID-19 (Click here)
- VA VA announces 'Fourth Mission,' actions to help America respond to COVID-19 (Click here)
- VA VA Secretary Wilkie thanks Wounded Warrior Project for \$10 Million commitment to aid Veterans (<u>Click here</u>)
- VA VA, Facebook and American Red Cross provide Portal video calling devices to Veterans, caregivers and families (<u>Click here</u>)

Alex Latcham Special Assistant to the President White House Office of Political Affairs

From: FEMA-IGA <FEMA-IGA@fema.dhs.gov>
Sent: Thursday, April 16, 2020 8:37 AM

To: FEMA-IGA

Subject: FEMA Advisory: Administrator Gaynor Second Letter to Emergency Managers

Attachments: SIGNED F1 FEMA_COVID EM Letter #2.pdf;

FEMA_Advisory_F1LettertoEmergencyManagers_FINAL_20200416.pdf

Importance: High

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FEMA ADVISORY - APRIL 16, 2020

Coronavirus (COVID-19) Pandemic: Administrator Letter to Emergency Managers

Attached is FEMA Administrator Pete Gaynor's April 15, 2020 letter to the Nation's Emergency Managers, which outlines lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic. In this letter, Administrator Gaynor addresses preservation and prioritization of scarce resources; use of data-driven decision making; utilization of key federal medical staff, Federal Medical Stations (FMS) and Large-Format Alternative Care Sites (ACS); Mitigation efforts to flatten the curve; strengthening the supply chain; as well as importance of busting myths.

Administrator Gaynor's guidance is a follow-on to his first letter to emergency managers, dated March 27, 2020, which requested key actions and outlined critical steps for the initial COVID-19 response.

The letter is available on the <u>FEMA website</u>, as well

Contact Us

If you have any questions, please contact FEMA Office of External Affairs, Congressional and Intergovernmental Affairs Division:

- Congressional Affairs at (202) 646-4500 or at FEMA-Congressional-Affairs@fema.dhs.gov
- Intergovernmental Affairs at (202) 646-3444 or at FEMA-IGA@fema.dhs.gov
- Tribal Affairs (202) 646-3444 or at FEMA-Tribal@fema.dhs.gov

• Private Sector Engagement at (202) 646-3444 or at nbeoc@max.gov

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FEMA Mission

To help people before, during, and after disasters.



From: Stevens, Lee (OS/IEA) <Lee.Stevens@hhs.gov>

Sent: Thursday, April 16, 2020 8:40 AM

To: Johnston, Darcie (HHS/IEA);Stevens, Lee (OS/IEA)

Subject: HHS COVID-19 Update, 4-15-2020

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Colleague:

We hope you are staying healthy and faring well in our various forms of lockdown. As always, we have a number of new COVID-19 items out today.

Testing and Treatment

Increased Reimbursement for High-Throughput Labs: Medicare will nearly double payment for certain lab tests that use high-throughput technologies to rapidly diagnose large numbers of 2019 Novel Coronavirus (COVID-19) cases. Medicare will pay the higher payment of \$100 for COVID-19 clinical diagnostic lab tests making use of high-throughput technologies developed by the private sector that allow for increased testing capacity, faster results, and more effective means of combating the spread of the virus. High-throughput lab tests can process more than two hundred specimens a day using highly sophisticated equipment that requires specially trained technicians and more time-intensive processes to assure quality. Medicare will pay laboratories for the tests at \$100 effective April 14, 2020, through the duration of the COVID-19 national emergency.

Information on At-Home Testing: This page provides answers to frequently asked questions relating to the <u>development and performance of diagnostic tests for SARS-CoV-2</u>. The FAQs provide clarity on FDA policies and information regarding at-home testing. At this time, the FDA has not authorized any COVID-19 test for at-home testing, including self-collection of a specimen with or without the use of telemedicine. The FDA is supportive of at-home testing for COVID-19, provided there is data and science to support consumer safety and test accuracy. We are actively working with developers toward the goal of authorizing EUAs for home use tests once appropriate validation has been completed. Home collection raises several issues of importance, including whether the lay user can safely and properly collect the specimen, whether the components of the specimen transport media are safe for use in the home environment (since some may be toxic), proper shipment, and adequate stability of the specimen given the time lapse between collection and testing and the potential impact of shipping conditions (such as, if the specimen sits in a hot truck). A physician watching the collection by way of telemedicine may address the issue of proper specimen collection (if the self-collection method does not raise safety concerns) but it does not address the other issues, and specimen stability and shipping conditions are still of concern.

Warning Against Fraud: The FDA and Federal Trade Commission (FTC) issued warning letters to three sellers of fraudulent COVID-19 products, as part of the agency's effort to protect both people and pets. There are currently no FDA-approved products to prevent or treat COVID-19. Consumers concerned about COVID-19 should consult with their health care provider: The first seller warned, Herbs of Kedem, sells unapproved and misbranded herbal products for the prevention and treatment of COVID-19. The second seller warned, the GBS dba Alpha Arogya India Pvt Ltd, offers unapproved and misbranded ayurvedic products including "Alpha 11" and "Alpha 21" for sale in the U.S. with misleading claims about the prevention or treatment of COVID-19. The third seller warned, Gaia Arise Farms Apothecary, offers unapproved and misbranded products including "True Viral Defense" also referred to as "Viral Defense Tincture." The company makes misleading claims the products are safe and/or effective for the treatment or prevention of COVID-19 in people.

Diagnostics Update to Date: During the COVID-19 pandemic, the FDA has worked with more than 300 test developers who have said they will be submitting emergency use authorizations (EUA) requests to FDA for tests that detect the virus. To date, 34 <u>emergency use authorizations</u> have been issued for diagnostic tests. The FDA has been notified that more than 180 laboratories have begun testing under the policies set forth in our COVID-19 Policy for Diagnostic Tests for Coronavirus Disease-2019 during the Public Health Emergency Guidance. The FDA also continues to keep its <u>COVID-19 Diagnostics FAQ</u> up to date.

Funding Announcements:

Ryan White HIV/AIDS Program Funding: HRSA awarded \$90 million for Ryan White HIV/AIDS Program recipients to respond to coronavirus (COVID-19). This funding is provided by the fiscal year 2020 Coronavirus Aid, Relief and Economic Security (CARES) Act, which President Trump signed into law on Friday, March 27, 2020 and will support 581 Ryan White HIV/AIDS Program recipients across the country, including city/county health departments, health clinics, community-based organizations, state health departments, and AIDS Education and Training Centers, in their efforts to prevent or minimize the impact of this pandemic on people with HIV.

Aging and Disability Resources Funding: ACL released an <u>FAQ on their Emergency Funding Operations</u> that includes information about the funding and the funding allocation by state for the funds.

Guidance for Specific Populations

How to Help: FDA updated their <u>How to Help</u> section on their COVID-19 webpage to include the ask to donate COVID-19 plasma if you are a recovered patient.

Guidance on Handling and Testing Specimens: CDC updated their Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 (COVID-19). Clinicians who have identified a potential PUI should immediately notify their state or local health department. Local and state public health staff will determine if the person is a PUI and whether testing for COVID-19 is indicated. This guidance provides information for clinicians on how to collect, store, and ship specimens appropriately, including during afterhours or on weekends/holidays. The updated guidance clarifies specimen collection procedures for all swab types and aligns with other respiratory disease specimen collection guidelines

Hospital Resource Package: ASPR posted a <u>Hospital Resource Package on TRACIE</u>. The online resource includes COVID-19 guidance and resources for hospital administrators, hospital emergency planners, and infection control practitioners in the following topical areas: hospital surge, crisis standards of care, staffing surge and resilience, workforce protection, regulatory relief, equipment supply surge, and telemedicine.

Management of COVID-19 in Correctional and Detention Facilities: CDC released a presentation that includes <u>Guidance on Management of COVID-19 in Correctional and Detention Facilities</u>. The presentation outlines all of the resources available for correctional facilities and the recommendations included in those resources.

Information for People at Higher Risk for Coronavirus: CDC updated their information on people who are at higher risk for severe illness. The updated information includes extra precautions that this population should take as well as a video to watch on the topic. CDC released <u>updated information for higher risk populations</u> with specific steps to take depending on your risk factors that helps to explain the risk profile and actions to take in case an individual becomes sick.

What to Do if You Become Sick: CDC updated their information on what to do if you are sick or caring for someone who is sick. If an individual in your home is sick, CDC also released updated information with recommendations for caring for someone at home. Recommended steps include if you are caring for someone at home, how to monitor for emergency signs, prevent the spread of germs, treat symptoms, and carefully consider when to end home isolation.

Videos from HHS Leadership: The White House and Administration are committed to providing Americans with vital mental health resources and services especially through expanding telehealth services, continuing the Administration's

efforts to combat drug demand and the opioid crisis. The Surgeon General released a <u>video on mental health</u>. Additionally, <u>Indian Health Service Administrator Admiral Weahkee released a Public Service Announcement</u> to speaking to the prevention, protection, and response efforts to COVID-19 in Indian Country.

Questions? Send them to our Director of Intergovernmental Affairs, Darcie.Johnston@hhs.gov.

Laura

Laura C. Trueman
Director, Office of Intergovernmental and External Affairs
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington D.C. 20201
Laura.Trueman@hhs.gov
202-690-6060 (main office)

From:	Jeffrey Dickerson	

Sent: Thursday, April 16, 2020 9:03 AM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Jeffrey

Dickerson; Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas B.

Rice; mark.sexton; Marshall, Kris J COL USARMY NG GAARNG (USA); Matthew

Hicks; Noggle, Caylee; Tim Dignam

Subject:Governor's GWCC ACF-Atlanta Site Visit TimelineAttachments:GWCC ACF-Atlanta Governor's Visit_16APR20.pptx

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Sir – The attached timeline depicts the key events for the Governor's visit today. All activities will occur on the floor. All briefing aids – plans/drawings/diagrams will displayed there. The Governor will arrive at the patient entrance – the big roll-up doors – where you'll greet him.

From there, you would walk into the ACF area where Mike Smith, Nick Visconti, John Haupert, and our team will be present and prepared to provide him with an overview and update of the project. Once that's complete, the PAE team will lead a tour of the facility for the Governor and accompanying entourage. After completion of the tour, Ryan and Candice will supervise a media Q&A/photo session prior to the Governor's departure at approximately 1430. Caylee confirmed that he will be on site for one hour.

Thanks,

Jeff

Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email

Cell:

From:	Jeffrey Dickerson	

Sent: Thursday, April 16, 2020 9:03 AM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Jeffrey

Dickerson; Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas B.

Rice; mark.sexton; Marshall, Kris J COL USARMY NG GAARNG (USA); Matthew

Hicks; Noggle, Caylee; Tim Dignam

Subject:Governor's GWCC ACF-Atlanta Site Visit TimelineAttachments:GWCC ACF-Atlanta Governor's Visit_16APR20.pptx

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Sir – The attached timeline depicts the key events for the Governor's visit today. All activities will occur on the floor. All briefing aids – plans/drawings/diagrams will displayed there. The Governor will arrive at the patient entrance – the big roll-up doors – where you'll greet him.

From there, you would walk into the ACF area where Mike Smith, Nick Visconti, John Haupert, and our team will be present and prepared to provide him with an overview and update of the project. Once that's complete, the PAE team will lead a tour of the facility for the Governor and accompanying entourage. After completion of the tour, Ryan and Candice will supervise a media Q&A/photo session prior to the Governor's departure at approximately 1430. Caylee confirmed that he will be on site for one hour.

Thanks,

Jeff

Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email:

Cell:

Cell:

Sent: To: Cc: Subject: Attachments:	Thursday, April 16, 2020 9:11 AM Carden, Thomas M Jr MG USARMY NG GAARNG (USA) Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas B. Rice; mark.sexton; Marshall, Kris J COL USARMY NG GAARNG (USA); Matthew Hicks; Noggle, Caylee; Tim Dignam CORRECTED Governor's GWCC ACF-Atlanta Site Visit Timeline GWCC ACF-Atlanta Governor's Visit_V2_16APR20.pptx
CAUTION: This email originated from sender and know the content is said	om outside of the organization. Do not click links or open attachments unless you recognize the fe.
Sir/All – Please use this copy. I c Vr, Jeff	corrected a typo and added COL Rice to the overview event brief.
Jeff Dickerson GA DOD Interagency Coordinate Email: Cell:	or for COVID-19 Response
Cc: Berry, Frank <frank.berry@c <emmanuel.haldopoulos.mil@r <joseph.hood@dch.ga.gov>; La <ryan.loke@georgia.gov>; Luca Kris J COL USARMY NG GAARNO</ryan.loke@georgia.gov></joseph.hood@dch.ga.gov></emmanuel.haldopoulos.mil@r </frank.berry@c 	SARMY NG GAARNG (USA) <thomas.m.carden.mil@mail.mil> Schch.ga.gov>; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA) mail.mil>; Jeffrey Dickerson <jcdickerson@icloud.com>; Joseph Hood iret, Julio R Col USAF 116 ACW (USA) <julio.r.lairet.mil@mail.mil>; Loke, Ryan s B. Rice <lrice@ldxsolutions.com>; Mark Sexton <mark.sexton@gema.ga.gov>; Marshall i (USA) <kris.j.marshall2.mil@mail.mil>; Matthew Hicks <mhicks@gmh.edu>; Noggle, i.gov>; Tim Dignam <tdignam@cdc.gov></tdignam@cdc.gov></mhicks@gmh.edu></kris.j.marshall2.mil@mail.mil></mark.sexton@gema.ga.gov></lrice@ldxsolutions.com></julio.r.lairet.mil@mail.mil></jcdickerson@icloud.com></thomas.m.carden.mil@mail.mil>
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Jeff Dickerson GA DOD Interagency Coordinate Email:	or for COVID-19 Response

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Cc: Berry, Frank <frank.berry@dc <emmanuel.haldopoulos.mil@ma<joseph.hood@dch.ga.gov="">; Laire <ryan.loke@georgia.gov>; Lucas Kris J COL USARMY NG GAARNG (</ryan.loke@georgia.gov></frank.berry@dc>	ARMY NG GAARNG (USA) <thomas.m.carden.mil@mail.mil> h.ga.gov>; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA) ail.mil>; Jeffrey Dickerson <</thomas.m.carden.mil@mail.mil>
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Jeff Dickerson GA DOD Interagency Coordinator Email: Cell:	for COVID-19 Response

From: Jeffrey Dickerson

Sent: Thursday, April 16, 2020 9:13 AM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas

Rice;mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Noggle, Caylee;Tim Dignam;Wilson, Richard D BG USARMY NG GAARNG (USA);Simmons, Randall V Jr BG USARMY NG GAARNG (USA);Irice@Idxsolutions.com;Darryl Graham;Matthew Hicks

Subject: Interagency COVID-19 Response Planning Team Update, 160930APR20

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Sir – We will start pushing daily analytics reporting data tomorrow. We are working with the GWCC Staff/Security Team and PAE to prepare and rehearse for the Governor's visit at 1330 today. No other significant updates from last night's brief.

1. **GWCC ACF-Atlanta**: A significant number of supplies arrive today, and we anticipate a large movement on that percentage by COB today.

Great progress again today, with construction completed for both patient units and bathrooms. Services contracts walked the site today in preparation for turn-on in next the 24-28 hours. Medical personnel orientation and onsite training is scheduled for Friday, as well as a final walk-thru for decontamination plan, and Grady Hospital will conduct a dry-run/rehearsal with AMI/PAE for the admission process on Friday afternoon or Saturday morning.

The buildup of the individual rooms is complete; electrical connectivity is established; showers and toilets installation are complete; beds are inside the units; the remainder of durable medical equipment is due in tomorrow; and 5 days' supply of PPE is on site. Clinical staff started arriving yesterday with 60 % expected to be on site by the end of today, with the remainder scheduled to arrive tomorrow. On track for initial operational capability on Saturday afternoon and fully operational on Sunday morning. We received a waiver for the omission of smoke barriers from the State Insurance Commissioner's office. Inspectors will inspect the facility on Friday, 17APR20. We refined the MOUs/interagency agreements/funding processes between DCH, GEMA, and GWCC. We along with PAE and AMI Teams are planning/prepared for the Governor's site visit at 1330 on Thursday, 16APR20.

- 2. <u>Additional Hospital Staffing:</u> We conducted a regional staffing capabilities call with Region B hospitals today, and they have no current/expected staffing shortfalls. We will continue with regional staffing capabilities calls tomorrow, focused on Region F (central Ga) to assess their staffing shortfalls and identify hospitals that need additional assistance. We are also assessing staffing shortfalls at Appling Healthcare in Appling County and Pine Hill Nursing Home in Dooly County. We're deploying additional staffing augmentation to Crisp Regional and Memorial Hospital in Bainbridge.
- 3. <u>DBHDD:</u> NO CHANGE: 16 additional staffing personnel should arrive at Central State Hospital on Thursday, 16APR20 in order to fill staffing shortages.

4. Additional Augmentation Efforts:

Rome: We conducted a site coordination visit today and made coordination with the Facility leadership and maintenance personnel; the last concrete pillars were poured today. The containers arrive on Saturday with placement complete by Monday morning. Expected FOC 25APR.

Albany: Containers arrived on site and are being placed today. Reports from the site are that things are moving smoothly and coordination among all parties is good. No issues. Expected FOC 28APR.

Macon: No issues with the construction of the containers. On site coordination improved with input from Governors' staff, and site work has been initiated. Administrative staff there are very concerned with MOU status, and we will be working on those details over the next 2 days. No constraints for the physical construction and preparation of the units. Expected FOC 5MAY.

Gainesville: We conducted an initial coordination call today – there are no issues with the construction of the containers and no issues regarding the site and preparation. NE GA Medical initially said they would cover the coordination and expense of the utilities tie in; however, they now say that they do not plan on covering that expense. We will roll that site preparation into the MODs contract, similar to Rome. Their administrative staff are interested in more details regarding staffing personnel and medical administration issues, as well as the details of the durable medical equipment to support the 20 rooms. No constraints for the physical construction and preparation of the units. Expected FOC 5MAY.

<u>OTHER:</u> DCH is now the lead for daily reporting on long term care facilities, utilizing the joint database created by GA DOD and DCH/HSRD.

Vr, Jeff

Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email: Cell:

From: Jeffrey Dickerson [mailto

Sent: Wednesday, April 15, 2020 6:23 PM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA) <thomas.m.carden.mil@mail.mil>

Cc: Berry, Frank <frank.berry@dch.ga.gov>; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA) <emmanuel.haldopoulos.mil@mail.mil>; Joseph Hood <joseph.hood@dch.ga.gov>; Lairet, Julio R Col USAF 116 ACW (USA) <julio.r.lairet.mil@mail.mil>; Loke, Ryan <ryan.loke@georgia.gov>; Lucas Rice <lri>lucas Rice <lri>lrice@ldxsolutions.com>; Mark Sexton <mark.sexton@gema.ga.gov>; Marshall, Kris J COL USARMY NG GAARNG (USA) <kris.j.marshall2.mil@mail.mil>; Noggle, Caylee <caylee.noggle@georgia.gov>; Tim Dignam <tdignam@cdc.gov>; Wilson, Richard D BG USARMY NG GAARNG (USA) <rri>GAARNG (USA) <rri>lrichard.d.wilson.mil@mail.mil>; Simmons, Randall V Jr BG USARMY NG GAARNG (USA) (randall.v.simmons.mil@mail.mil) <randall.v.simmons.mil@mail.mil>; 'Irice@ldxsolutions.com' <lri>lrice@ldxsolutions.com>; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>; Jeffrey Dickerson <jcdickerson@icloud.com>

Subject: Interagency COVID-19 Response Planning Team Update, 151800APR20

Sir – Today's update is outlined below, along with attached slides depicting progress status for GWCC ACF-Atlanta and Alternate Medical Facilities at Rome, Macon, Albany, and Gainesville.

1. <u>GWCC ACF-Atlanta</u>: Great progress again today, with construction completed for both patient units and bathrooms. Services contracts walked the site today in preparation for turn-on in next the 24-28 hours. Medical personnel orientation and onsite training is scheduled for Friday, as well as a final walk-thru for decontamination plan, and Grady Hospital will conduct a dry-run/rehearsal with AMI/PAE for the admission process on Friday afternoon or Saturday morning.

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- 2. <u>Additional Hospital Staffing:</u> We conducted a regional staffing capabilities call with Region B hospitals today, and they have no current/expected staffing shortfalls. We will continue with regional staffing capabilities calls tomorrow, focused on Region F (central Ga) to assess their staffing shortfalls and identify hospitals that need additional assistance. We are also assessing staffing shortfalls at Appling Healthcare in Appling County and Pine Hill Nursing Home in Dooly County. We're deploying additional staffing augmentation to Crisp Regional and Memorial Hospital in Bainbridge.
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OTHER: DCH is now the lead for daily reporting on long term care facilities, utilizing the joint database created by GA DOD and DCH/HSRD.

Jeff	
Jeff Dickerson	
GA DOD Interagency Coordinator for COVID-19 Resp	onse
Email:	
Cell:	

Vr,

From: Jeffrey Dickerson

Sent: Thursday, April 16, 2020 9:13 AM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas

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/r,
eff
eff Dickerson
GA DOD Interagency Coordinator for COVID-19 Response
Email:
Cell:

From: Loke, Ryan

Sent: Thursday, April 16, 2020 10:49 AM **To:** Crozer, William F. EOP/WHO

Cc: ann@coreresponse.org;Jerome Lebleu;Matthew O'Connell;Piet deVries

Subject: Re: Connecting re COVID-19 Testing

Thanks William!

Ann & team - great to connect. Would yall be able to do a call with me and our Chief Management Officer - Caylee Noggle - after 3pm EST today to discuss?

From: Crozer, William F. EOP/WHO < William.F. Crozer@who.eop.gov>

Sent: Wednesday, April 15, 2020 12:27 PM **To:** Loke, Ryan <rp><rp>
Ryan

Cc: ann@coreresponse.org <ann@coreresponse.org>; Jerome Lebleu <jerome@coreresponse.org>; Matthew O'Connell

<mattoconnellintl@gmail.com>; Piet deVries <piet.devries@coreresponse.org>

Subject: RE: Connecting re COVID-19 Testing

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Correcting Ryan's email!

From: Crozer, William F. EOP/WHO

Sent: Wednesday, April 15, 2020 11:10 AM

To: 'ryan.lole@georgia.gov' <ryan.lole@georgia.gov>

Cc: 'ann@coreresponse.org' <ann@coreresponse.org>; Jerome Lebleu <jerome@coreresponse.org>; Matthew

O'Connell ; Piet deVries < piet.devries@coreresponse.org>

Subject: RE: Connecting re COVID-19 Testing

Ann – adding in your team members to the below email. Thank you!

From: Crozer, William F. EOP/WHO Sent: Tuesday, April 14, 2020 10:25 AM

To: 'ryan.lole@georgia.gov' <ryan.lole@georgia.gov>

Cc: ann@coreresponse.org

Subject: Connecting re COVID-19 Testing

Ann – I am connecting you with Ryan Loke, Governor Kemp's health policy advisor, regarding possibilities for increasing testing capacity in and around Atlanta. The Governor's office has been working through the Georgia Emergency Management Agency and in conjunction with the Federal Emergency Management Agency for COVID-19 response and recovery – this includes for the procurement of testing supplies, personal protective equipment, etc. The Governor's office and GEMA have also been leveraging resources from the private sector, including commercial labs.

Thank you!

William F. Crozer

Special Assistant to the President/Deputy Director

White House Office of Intergovernmental Affairs

O: 202-456-8491 | C: 202-881-8545 | E: William.F.Crozer@who.eop.gov

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>

Sent: Thursday, April 16, 2020 12:10 PM **To:** Swint, Zachariah D. EOP/WHO

Cc: Pottebaum, Nic D. EOP/WHO;Campana, Ariella M. EOP/WHO;Obenshain, Tucker T.

EOP/OVP

Subject: Confirmation -- Governor-Only Briefing with the President Today, Thursday April 16 at

3:00 p.m. ET

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



Good Morning,

Your Governor is **CONFIRMED** to participate in today's (Thursday, April 16) briefing at 3:00 p.m. ET with the President. The President will be joined by Vice President Mike Pence, Secretary Steve Mnuchin, Secretary Alex Azar, Director Tony Fauci (National Institute of Allergy & Infectious Diseases), Dr. Stephen Hahn (Commissioner, Food & Drug Administration), Dr. Robert Redfield (Director, Centers for Disease Control and Prevention), Vice Admiral Jerome Adams (Surgeon General, Dept. of Health & Human Services), and Ambassador Debi Birx, M.D. (White House Coronavirus Coordinator). The call is closed press.

As a reminder, this is a governors-only briefing call/VTC (i.e., one call-in per state). Participation in this call is for governors only, but we encourage governors to be joined by their respective state health officer, homeland security advisor, emergency manager, and other key state leaders in the state's preparedness and response efforts to COVID-19. Interactions will be limited only to governors and Federal leaders.

NOTE: Please let us know if your Governor will not be on the call at any point from 3:00 – 4:00 PM ET. If not, we will expect your Governor is on the call the entire time to potentially provide an update.

Call-In Information

You or a member of your team has already registered your Governor for call-in information via a link. That step resulted in receiving call-in information via email from Audio Conference Notification (noreply@event-services.com). Please reference that email for call-in information. That email provided:

- o Dial-In Number
- o Access Code
- Attendee ID

Video-Teleconference Option

If your Governor is participating via video-teleconference (VTC), please reference the VTC dial-in information. <u>Please remember to mute your line after speaking so there are no audio issues.</u>

If you have any questions, please let me know.

Name	Cell Phone	Email
Zach Swint	202-881-6717	Zachariah.D.Swint2@who.eop.gov
Ella Campana	202-881-7298	Ariella.M.Campana@who.eop.gov

Thanks, Zach

__

Zach Swint Office of Intergovernmental Affairs The White House

C: (202) 881-6717 | E: <u>Zachariah.D.Swint2@who.eop.gov</u>

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>

Sent: Thursday, April 16, 2020 12:10 PM **To:** Swint, Zachariah D. EOP/WHO

Cc: Pottebaum, Nic D. EOP/WHO;Campana, Ariella M. EOP/WHO;Obenshain, Tucker T.

EOP/OVP

Subject: Confirmation -- Governor-Only Briefing with the President Today, Thursday April 16 at

3:00 p.m. ET

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Good Morning,

Your Governor is **CONFIRMED** to participate in today's (Thursday, April 16) briefing at 3:00 p.m. ET with the President. The President will be joined by Vice President Mike Pence, Secretary Steve Mnuchin, Secretary Alex Azar, Director Tony Fauci (National Institute of Allergy & Infectious Diseases), Dr. Stephen Hahn (Commissioner, Food & Drug Administration), Dr. Robert Redfield (Director, Centers for Disease Control and Prevention), Vice Admiral Jerome Adams (Surgeon General, Dept. of Health & Human Services), and Ambassador Debi Birx, M.D. (White House Coronavirus Coordinator). The call is closed press.

As a reminder, this is a governors-only briefing call/VTC (i.e., one call-in per state). Participation in this call is for governors only, but we encourage governors to be joined by their respective state health officer, homeland security advisor, emergency manager, and other key state leaders in the state's preparedness and response efforts to COVID-19. Interactions will be limited only to governors and Federal leaders.

NOTE: Please let us know if your Governor will not be on the call at any point from 3:00 – 4:00 PM ET. If not, we will expect your Governor is on the call the entire time to potentially provide an update.

Call-In Information

You or a member of your team has already registered your Governor for call-in information via a link. That step resulted in receiving call-in information via email from Audio Conference Notification (noreply@event-services.com). Please reference that email for call-in information. That email provided:

- o Dial-In Number
- o Access Code
- Attendee ID

Video-Teleconference Option

If your Governor is participating via video-teleconference (VTC), please reference the VTC dial-in information. <u>Please remember to mute your line after speaking so there are no audio issues.</u>

If you have any questions, please let me know.

Name	Cell Phone	Email
Zach Swint	202-881-6717	Zachariah.D.Swint2@who.eop.gov
Ella Campana	202-881-7298	Ariella.M.Campana@who.eop.gov

Thanks, Zach

--

Zach Swint Office of Intergovernmental Affairs The White House

C: (202) 881-6717 | E: <u>Zachariah.D.Swint2@who.eop.gov</u>

From: Yanick, Brittany M. EOP/WHO <Brittany.M.Yanick@who.eop.gov>

Sent:Thursday, April 16, 2020 12:20 PMTo:Yanick, Brittany M. EOP/WHOCc:Pottebaum, Nic D. EOP/WHO

Subject: Democrats' Reckless Political Games Deprive Small Businesses of Needed Relief

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What You Need To Know | Democrats' Reckless Political Games Deprive Small Businesses of Needed Relief

Today, as a result of Democrats' reckless political games and disregard for working Americans, funding for new Paycheck Protection Program applications has run out.



Just a week ago, Senate Democrats blocked additional funding for this program, which helps small businesses keep workers on payroll.



Senate Democrats block Republicans' \$250 billion PPP injection

A second

Instead of helping small businesses and workers who are hurting due to the coronavirus, Nancy Pelosi questioned the need for additional PPP funding now, claiming "they haven't spent even a third of that."

• <u>PELOSI LAST WEEK</u>: "Eventually, will we need more for PPP? Okay, let's see the data. But, right now, they haven't spent even a third of that. Say they have spent a third; they still have two-thirds of it left."

President Trump will continue to fight for Americans affected by this unprecedented crisis. It's time for Congressional Democrats to stop playing politics and do the same.

• Statement from White House Deputy Press Secretary Judd Deere following today's unemployment numbers: "As hardworking Americans continue to answer the President's call to slow the spread of COVID-19, they are also making great sacrifices to protect themselves and their loved ones every day. Even through these tough times the American spirit is second to none. The President and his Administration will continue to prioritize relief for all those affected by this unprecedented crisis, which is why Congressional Democrats must stop playing politics and blocking additional emergency relief for our Nation's small businesses."

###

From: FEMA-IGA <FEMA-IGA@fema.dhs.gov>
Sent: Thursday, April 16, 2020 1:21 PM

To: FEMA-IGA

Subject: FEMA ADVISORY: Coronavirus (COVID-19) Pandemic Whole-of America Response

(APRIL 16, 2020)

Attachments: FEMA_Advisory_COVID19DailyBriefingPoints_20200416_FINAL.pdf; ESF15

_DailyBriefingPoints_20200416 FINAL.pdf

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FEMA ADVISORY - APRIL 16, 2020

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

Attached you will find today's FEMA Daily Briefing Points for the Whole-of-America response to coronavirus (COVID-19) pandemic. These briefing points include Topline Messages, as well as Supply Chain Task Force; By the Numbers; FEMA and Department of Health and Human Services Response; and Guidance from Federal Agencies.

Topline messaging includes:

- 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 <u>Project Airbridge</u>.
- Last night, FEMA Administrator Pete Gaynor issued a letter to the nation's emergency managers outlining
 lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus
 (COVID-19) pandemic.
 - Specifically, the letter addresses preservation and prioritization of scarce resources; use of datadriven decision making; utilization of key federal medical staff, Federal Medical Stations and Large-Format Alternative Care Sites; mitigation efforts to flatten the curve; strengthening the supply chain; as well as the importance of busting myths.
 - o 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.

- The White House announced a new collaboration by Schema.org to help Americans find the most up-to-date public health guidance and the most relevant information on testing facilities in their communities.
 - Standard tags were created that can be added to any website's code, making it easier to find COVID-19 prevention measures, disease spread statistics, quarantine rules and travel guidance, and testing information through online search engine results.
 - All federal websites will incorporate these new Schema.org standard tags. The private sector, state and local governments, and the academic community are encouraged to do the same.

Contact Us

If you have any questions, please contact FEMA Office of External Affairs, Congressional and Intergovernmental Affairs Division:

- Congressional Affairs at (202) 646-4500 or at FEMA-Congressional-Affairs@fema.dhs.gov
- Intergovernmental Affairs at (202) 646-3444 or at FEMA-IGA@fema.dhs.gov
- Tribal Affairs at (202) 646-3444 or at <u>FEMA-Tribal@fema.dhs.gov</u>
- Private Sector Engagement at (202) 646-3444 or at nbeoc@max.gov

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To help people before, during, and after disasters.



From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Thursday, April 16, 2020 1:47 PM

To: Broce, Candice

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 16

Attachments: ESF15_DailyBriefingPoints_20200416_FINAL.pdf

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Intergovernmental Affairs

Please see the advisory below from our partners in the Federal Emergency Management Agency (FEMA) regarding an update on the Whole-of-America response to COVID-19.

April 16, 2020

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Thursday, April 16, 2020 1:47 PM

To: Fleming, Tim

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 16

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Thursday, April 16, 2020 1:47 PM

To: Whitaker, Skylar

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 16

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Thursday, April 16, 2020 1:47 PM

To: Herron, Robin

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 16

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Thursday, April 16, 2020 1:47 PM

To: Loke, Ryan

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 16

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Thursday, April 16, 2020 1:47 PM

To: Caraway, lan

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 16

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From: Woody Radcliffe <Woody.Radcliffe@gema.ga.gov>

Sent: Thursday, April 16, 2020 2:48 PM

To: Bryson, Homer

Cc: Noggle, Caylee;Joey Greene;mark.sexton;Thomas Moore;Chuck Ray;Will Lanxton;Wilson,

Richard D BG USARMY NG GAARNG (USA);LTC Louis Perino;Hovis, Scott M COL

USARMY NG GAARNG (USA);Lairet, Julio R Col USAF 116 ACW (USA);Baffic, Stephen P Lt

Col USAF 116 ACW (USA);Poole, Anthony B (Tony) COL USARMY NG GAARNG (USA);Will Lanxton;Lamar McEwen;Timothy Head;Manny Haldopoulos;Loke,

Ryan;tdignam@cdc.gov;Jeff Dickerson;Parker McGee;jay.harvey@sloan.mit.edu;Ashley

Larrow

Subject:Medical Facility EEI Status Report for April 16, 2020Attachments:Medical Facility EEI Status Report 04-16-2020.xlsx

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Director Bryson,

See attached Medical Facility Essential Elements of Information Status Tracker information for April 16, 2020.

Respectfully,

Woody

Woody Radcliffe
Planning Section Chief
Georgia Emergency Management and Homeland Security Agency (GEMA/HS)
935 United Avenue SE
Atlanta, GA 30316

Office: (404) 635-7512 Mobile: (404) 807-1621

woody.radcliffe@gema.ga.gov

From: Woody Radcliffe < Woody.Radcliffe@gema.ga.gov>

Sent: Thursday, April 16, 2020 2:48 PM

To: Bryson, Homer

Cc: Noggle, Caylee;Joey Greene;mark.sexton;Thomas Moore;Chuck Ray;Will Lanxton;Wilson,

Richard D BG USARMY NG GAARNG (USA);LTC Louis Perino;Hovis, Scott M COL

USARMY NG GAARNG (USA);Lairet, Julio R Col USAF 116 ACW (USA);Baffic, Stephen P Lt

Col USAF 116 ACW (USA);Poole, Anthony B (Tony) COL USARMY NG GAARNG (USA);Will Lanxton;Lamar McEwen;Timothy Head;Manny Haldopoulos;Loke,

Ryan;tdignam@cdc.gov;Jeff Dickerson;Parker McGee;jay.harvey@sloan.mit.edu;Ashley

Larrow

Subject:Medical Facility EEI Status Report for April 16, 2020Attachments:Medical Facility EEI Status Report 04-16-2020.xlsx

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Director Bryson,

See attached Medical Facility Essential Elements of Information Status Tracker information for April 16, 2020.

Respectfully,

Woody

Woody Radcliffe
Planning Section Chief
Georgia Emergency Management and Homeland Security Agency (GEMA/HS)
935 United Avenue SE
Atlanta, GA 30316

Office: (404) 635-7512 Mobile: (404) 807-1621

woody.radcliffe@gema.ga.gov

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>

Sent: Thursday, April 16, 2020 3:27 PM **To:** Swint, Zachariah D. EOP/WHO

Cc: Pottebaum, Nic D. EOP/WHO;Campana, Ariella M. EOP/WHO;Obenshain, Tucker T.

EOP/OVP

Subject: RE: Confirmation -- Governor-Only Briefing with the President Today, Thursday April 16

at 3:00 p.m. ET

Attachments: Guidelines PDF.pdf

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Please see the attached "Guidelines for Opening Up America Again".

Regards,

Zach Swint
Office of Intergovernmental Affairs
The White House

C: (202) 881-6717 | E: Zachariah.D.Swint2@who.eop.gov

From: Swint, Zachariah D. EOP/WHO Sent: Thursday, April 16, 2020 12:10 PM

To: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>

Cc: Pottebaum, Nic D. EOP/WHO <Nicholas.D.Pottebaum@who.eop.gov>; Campana, Ariella M. EOP/WHO <Ariella.M.Campana@who.eop.gov>; Obenshain, Tucker T. EOP/OVP <Anne.T.Obenshain@ovp.eop.gov> **Subject:** Confirmation -- Governor-Only Briefing with the President Today, Thursday April 16 at 3:00 p.m. ET



Good Morning,

Your Governor is **CONFIRMED** to participate in today's (Thursday, April 16) briefing at 3:00 p.m. ET with the President. The President will be joined by Vice President Mike Pence, Secretary Steve Mnuchin, Secretary Alex Azar, Director Tony Fauci (National Institute of Allergy & Infectious Diseases), Dr. Stephen Hahn (Commissioner, Food & Drug Administration), Dr. Robert Redfield (Director, Centers for Disease Control and Prevention), Vice Admiral Jerome Adams (Surgeon General, Dept. of Health & Human Services), and Ambassador Debi Birx, M.D. (White House Coronavirus Coordinator). The call is closed press.

As a reminder, this is a governors-only briefing call/VTC (i.e., one call-in per state). Participation in this call is for governors only, but we encourage governors to be joined by their respective state health officer, homeland security advisor, emergency manager, and other key state leaders in the state's preparedness and response efforts to COVID-19. Interactions will be limited only to governors and Federal leaders.

NOTE: Please let us know if your Governor will not be on the call at any point from 3:00 – 4:00 PM ET. If not, we will expect your Governor is on the call the entire time to potentially provide an update.

Call-In Information

You or a member of your team has already registered your Governor for call-in information via a link. That step resulted in receiving call-in information via email from Audio Conference Notification (noreply@event-services.com). Please reference that email for call-in information. That email provided:

- o Dial-In Number
- Access Code
- o Attendee ID

Video-Teleconference Option

If your Governor is participating via video-teleconference (VTC), please reference the VTC dial-in information. <u>Please remember to mute your line after speaking so there are no audio issues.</u>

If you have any questions, please let me know.

Name	Cell Phone	Email
Zach Swint	202-881-6717	Zachariah.D.Swint2@who.eop.gov
Ella Campana	202-881-7298	Ariella.M.Campana@who.eop.gov

Thanks, Zach

--

Zach Swint
Office of Intergovernmental Affairs
The White House

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Cc: Pottebaum, Nic D. EOP/WHO <Nicholas.D.Pottebaum@who.eop.gov>; Campana, Ariella M. EOP/WHO <Ariella.M.Campana@who.eop.gov>; Obenshain, Tucker T. EOP/OVP <Anne.T.Obenshain@ovp.eop.gov> **Subject:** Confirmation -- Governor-Only Briefing with the President Today, Thursday April 16 at 3:00 p.m. ET



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Ella Campana	202-881-7298	Ariella.M.Campana@who.eop.gov

Thanks, Zach

--

Zach Swint
Office of Intergovernmental Affairs
The White House

C: (202) 881-6717 | E: <u>Zachariah.D.Swint2@who.eop.gov</u>

From: Jeffrey Dickerson

Sent: Thursday, April 16, 2020 6:27 PM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas

Rice;mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Noggle, Caylee;Tim Dignam;Wilson, Richard D BG USARMY NG GAARNG (USA);Simmons, Randall V Jr BG

USARMY NG GAARNG (USA); Irice@ldxsolutions.com; Darryl Graham; Matthew

Hicks; Jeffrey Dickerson

Subject: Interagency COVID-19 Response Planning Team Update, 161800APR20

Attachments: GWCC ACF-Atlanta Progress Update_161800APR20.pptx

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Sir – This evening's update is outlined below:

- 1. <u>GWCC ACF-Atlanta</u>: PAE expects to be IOC at 0800, Saturday, 18APR20 24 hours ahead of schedule. the only outstanding deliverable is the medical equipment, which began arriving this afternoon. Additionally, the N95 masks are expected this evening. We expect equipment and PPE to be resolved tomorrow. We'll conduct a walk-thru rehearsal tomorrow at 1730hrs, and if there are no issues, the site will implement "hot zone" standards with the site being IOC (ready to receive patients) at 0800hrs Saturday. Considering the likely availability of 200 beds at the ACF on Saturday morning, coupled with the increased demand/strain in Region K (southwest GA), we are considering recommending that Region K consider transferring patients to the ACF on 18APR. The construction of units is complete; medical beds are 80% installed; medical equipment arrived throughout the day; and medical staff (182 personnel) continued to arrive and began training today. The Fire Marshal Inspector arrives to inspect the site at 1100 Friday morning. GWCC Police will increase security posture tomorrow evening and will soon need additional staffing; therefore, we submitted a WEBEOC request on behalf of GWCC for additional personnel to man 6 x security posts with sworn officers and vehicles. We also conducted a site walkthrough with the Grady Health Leadership team today, while Grady Health Informatics Team met with AMI and finalized the rollout for the Grady health electronic health records. We also met with Grady EMS regarding flow of patients into the ACF. Expect IOC 180800APR20.
- 2. <u>Additional Hospital Staffing:</u> We have concerns that delays in Jackson staffing deployments to Phoebe Putney in Albany could delay their ability to open their Phoebe North ICU on 20APR. These staffing shortfalls may be due to the unwillingness of some contracted medical professionals to work in Region K considering the severity of the situation there. With the additional ventilators due to arrive there tomorrow, coupled with sufficient staffing, Phoebe North could by operational on Monday, 20APR.

We conducted a regional staffing capabilities call with Region F hospitals today, and they have no current/expected staffing shortfalls. We will continue with regional staffing capabilities calls tomorrow, focused on Region C, to assess their staffing shortfalls and identify hospitals that need additional assistance. We are deploying additional staffing to fill staffing shortfalls at Appling Healthcare in Appling County and Pine Hill Nursing Home in Dooly County. We're also deploying additional staffing augmentation to Crisp Regional and Memorial Hospital in Bainbridge.

3. **DBHDD:** 6 of 16 additional staffing personnel arrived at Central State Hospital today in order to fill staffing shortages.

4. Additional Augmentation Efforts:

Albany: The last temporary medical units are scheduled to depart Lawrenceville this evening, and we expect the last units to be placed no later than 18APR. No issues. FOC expected 28APR.

Rome: The electrical tie-in for the GA Power extension was completed today, and the first units are scheduled to be delivered overnight, arriving Friday. Installation/placement of units begins Saturday, 18APR, with placement scheduled to be complete on the morning of 20 APR. No issues. FOC expected 25APR.

Gainesville: Follow up calls with NE GA Medical Center and the MODS team cleared up several issues regarding the site work and the equipment locations. We're still working on durable medical equipment requirements and planned sourcing. No issues. FOC expected 5MAY.

Macon: Follow up calls with Navicent Medical Center and the MODS team cleared up several issues regarding the site work and the equipment locations. We received an e-mail confirmation regarding the status of permitting issues, and we're still working on durable medical equipment requirements and planned sourcing. No issues. FOC expected 5MAY.

Vr, Jeff

Jeff Dickerson
GA DOD Interagency Coordinator for COVID-19 Response
Email:
Cell:

From: Jeffrey Dickerson

Sent: Thursday, April 16, 2020 6:27 PM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

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Jeff Dickerson
GA DOD Interagency Coordinator for COVID-19 Response
Email:
Cell:

From: FEMA-IGA <FEMA-IGA@fema.dhs.gov>
Sent: Thursday, April 16, 2020 6:38 PM

Subject: FEMA Advisory: Disaster Financial Management Guide (April 16, 2020)

Attachments: FEMA_Advisory_COVID19_Disaster Financial Management Guide_20200416.pdf

Importance: High

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FEMA ADVISORY - APRIL 16, 2020

Disaster Financial Management Guide

On Thursday, April 16, FEMA released the "Disaster Financial Management Guide" to support jurisdictions in establishing and implementing sound disaster financial management practices, which are critical for successful response and recovery. The guide takes an all-hazards approach and addresses a broad range of issues and contains concepts, principles and resources applicable to the coronavirus (COVID-19) pandemic response environment.

The guide identifies the capabilities and activities necessary to prepare and successfully implement disaster financial management while maintaining fiscal responsibility throughout response and recovery operations. This includes considerations and practices necessary to track, calculate and justify the costs of an emergency; support local reimbursement reconciliation; avoid de-obligation of grant funding; and effectively fund and implement recovery projects and priorities. The principles, concepts and resources contained in the guide can support jurisdictions in identifying the resources needed to support their community, increase the efficiency of recovery efforts, and reduce the likelihood of audits and financial penalties for the jurisdiction.

To view the guide, please visit https://www.fema.gov/plan.

Contact Us

If you have any questions regarding this FEMA Advisory, please contact FEMA Office of External Affairs, Congressional and Intergovernmental Affairs Division:

- Congressional Affairs at (202) 646-4500 or at FEMA-Congressional-Affairs@fema.dhs.gov
- Intergovernmental Affairs at (202) 646-3444 or at FEMA-IGA@fema.dhs.gov
- Tribal Affairs at (202) 646-3444 or at FEMA-Tribal@fema.dhs.gov

Private Sector Engagement at (202) 646-3444 or at nbeoc@max.gov

Follow Us

Follow FEMA on social media at: FEMA online, on Twitter @FEMA or @FEMAEspanol, on FEMA Facebook page or FEMA Espanol page and at FEMA YouTube channel.

Also, follow Administrator Pete Gaynor on Twitter @FEMA_Pete.

FEMA Mission

To help people before, during, and after disasters.



From: Crozer, William F. EOP/WHO <William.F.Crozer@who.eop.gov>

Sent: Thursday, April 16, 2020 8:42 PM

Subject: Follow-Up: COVID-19 National Briefing Call with State-Local-Tribal Leaders (April 15) &

Guidelines for Opening Up America Again!

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



State, Local, and Tribal Leaders -

Thank you for joining the White House COVID-19 National Briefing Call with State, Local, and Tribal Leaders on April 15. To date, the White House has coordinated 165 briefings that have helped inform over 74,000 State, Local, and Tribal leaders. And we look forward to continuing the partnership and robust coordination and outreach with you. Below, please find a recap of the briefing call. We also want to highlight the recently announced *Guidelines for Opening Up America Again!*

Today, President Donald J. Trump unveiled the *Guidelines for Opening Up America Again!* (*slide deck*). Developed by the top medical experts from across the Government and based on verifiable metrics regarding the situation on the ground, the guidelines outline a phased return to reopening and include specific steps for State, Local, and Tribal officials to follow in tailoring their response. The criteria include showing a downward trajectory of COVID-like symptoms reported over 14 days in a given state or region, as well as a decline in documented cases or positive tests during the same 14-day window. They also set clear benchmarks on new cases, testing, and hospital resources for States to meet to proceed toward a phased reopening. State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, the guidelines recommend Governors working on a regional basis to satisfy outlined criteria and to progress through the tiered phases. In the days and weeks ahead, the Administration plans to continue robust coordination and outreach with State, Local, and Tribal leaders as we collectively work to reopen the country. Find a Fact Sheet here: President Donald J. Trump Is Beginning the Next Phase In Our Fight Against Coronavirus - Guidelines for Opening Up America Again.



COVID-19: Important Resources for State, Local, and Tribal Officials

- Coronavirus Guidelines for America: On Tuesday, March 31, the White House announced updated Coronavirus Guidelines for America (Español), extending social distancing efforts through April 30. On April 3, the Centers for Disease Control and Prevention (CDC) issued guidance recommending individuals wear cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g. grocery stores and pharmacies, particularly in areas of significant community-based transmission. On April 8, CDC also provided guidelines regarding when people in critical infrastructure roles can return to work after being exposed to a confirmed or suspected case of COVID-19. Additional information on critical infrastructure below.
- **Up-To-Date Information**: The most up-to-date, verified information and guidance can be found via the Centers for Disease Control and Prevention Coronavirus Disease 2019 website **www.coronavirus.gov**. The Coronavirus Task Force holds frequent briefings, which can be viewed live **here**.
- COVID-19 Response and Recovery Primer: Response and recovery efforts are locally executed, state managed, and federally supported. It is important that requests for assistance, including for critical supplies, get routed through the proper channels as soon as possible. Learn more about the response and recovery process via this important resource <u>Coronavirus (COVID-19) Pandemic: Response and Recovery Through Federal-State-Local-Tribal Partnership</u>. FEMA's public assistance guidance for COVID-19 response efforts can be found <u>here</u>. Guidance for Tribal Governments can be found <u>here</u>.
- **Critical Infrastructure Workforce Guidelines**: On March 16th, the Department of Homeland Security (DHS) issued updated critical infrastructure guidance in response to the COVID-19 emergency. DHS issued revised guidance on March 28th (see **Memorandum on Identification of Essential Critical Infrastructure Workers During COVID-19 Response**). The **guidance**, and accompanying list, is intended to help State, local, tribal and territorial officials as they work to protect their communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security. The list is advisory in nature and is not a federal directive or standard.
- **Rural Resource Guide**: USDA and Federal partners have programs that can be used to provide immediate and long term assistance to rural communities affected by the COVID-19 pandemic. These programs can support recovery efforts for rural residents, businesses, and communities. USDA developed a resource guide for State, Local, and Tribal leaders, and other stakeholders, which can be found here: **COVID-19 Federal Rural Resource Guide**.
- Coronavirus Fact vs. Myth: Rumors can easily circulate within communities during a crisis. FEMA setup a <u>website</u> to help the public distinguish between rumors and facts regarding the response to the coronavirus pandemic.

- Fraud & Scam Protection: The Department of Justice is remaining vigilant in detecting, investigating, and prosecuting wrongdoing related to the crisis. Find out how you can protect yourself and helpful resources on DOJ's Coronavirus Fraud Prevention website. The Federal Trade Commission has also established a website with helpful information to help consumers avoid coronavirus-related scams.
- Social Media Resources: Download the <u>Apple COVID-19 Screening Tool</u>. Follow the White House on <u>Twitter</u> and <u>Facebook</u>. Also follow HHS (<u>Twitter/Facebook</u>) and CDC (<u>Twitter/Facebook</u>) You can also find informational videos from Coronavirus Task Force members on mitigation, social distancing, etc. on the White House's <u>YouTube</u> page.
- Mental Health Resources: Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. The Substance Abuse and Mental Health Administration's (SAMHSA) Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Learn more about the Disaster Distress Helpline here.
- Administration Actions and Federal Agency Resources: USA.gov is cataloging all U.S. government activities related to coronavirus. From actions on health and safety to travel, immigration, and transportation to education, find pertinent actions here. Each Federal Agency has also established a dedicated coronavirus website, where you can find important information and guidance. They include: Health and Human Services (<a href="https://https:

Thank you again for your partnership in this whole-of-government, All-of-America effort to defeat the coronavirus. The White House Office of Intergovernmental Affairs (WH IGA) will continue to share pertinent information as it becomes available. Please do not hesitate to reach out to our office if we can be of assistance. As a reminder, WH IGA is the primary liaison between the White House and the country's State and Local elected officials and Tribal Governments.

The White House Office of Intergovernmental Affairs

William F. Crozer Special Assistant to the President/Deputy Director White House Office of Intergovernmental Affairs



Download the COVID-19 App

White House COVID-19 National Briefing Call Readout *April 15, 2020*



Recovery and Response Update

Federal Emergency Management Agency (FEMA)

- FEMA, HHS, and 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 has all 10 emergency response regions activated. President Trump has approved major disaster declarations for every State in the country. The President has also approved 43 Title 32 requests for the National Guard providing 100 percent federal cost-share for States. These actions have opened up unprecedented resources and capabilities for States to respond to COVID-19.
- Wednesday, FEMA Administrator Pete Gaynor issued a <u>letter</u> to the nation's emergency managers outlining lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic.
- FEMA continues to coordinate the transportation of critically needed personal protective equipment (PPE) across the country through **Project Air Bridge**. The air bridge is helping reduce the time it takes for U.S. medical supply distributors to receive PPE and other critical supplies into the country for health care professionals and other key professionals, including law enforcement. From March 29 to April 15, Project Air Bridge has completed 52 flights with an additional 50 scheduled. Total supplies delivered to the U.S. and into the private sector supply chains include more than 530,000 N95 masks, 451 million gloves, 25 million surgical masks, 5 million gowns, 74,000 face shields, and 80,000 thermometers. Project Air Bridge deliveries are in addition to the PPE that has been distributed from the Strategic National Stockpile.

U.S. Department of Health and Human Services (HHS)

- **Topline**: As of April 15, the State/Local Public Health Laboratories, Commercial Laboratories, Hospital Laboratories, CDC, and VA have performed approximately 3.5 million COVID-19 tests. In order to strengthen and expand our testing across the U.S., the White House Coronavirus Task Force is coordinating a major interagency initiative to strengthen our national diagnostic infrastructure. This effort includes working with the States, Territories and Tribal communities and test manufacturers to expand our ability to maximize available testing platforms and increase our diagnostic assay inventory.
- CDC International Reagent Resource (IRR)
 - The <u>CDC IRR</u> is distributing COVID-19 diagnostic tests, reagents and associated supplies to state and county public health laboratories. This has provided states with the flexibility to obtain diagnostic materials, specifically items needed for diagnostic sample collection, extraction and then diagnostic testing, through the IRR first, and while simultaneously retaining the option to procure needed supplies through the commercial marketplace.

- HHS is working to stand up the CDC IRR for this purpose by ensuring adequate inventory of diagnostic materials to support the needs of state and public health laboratories and working with manufacturers of diagnostic supplies (equipment and reagents) to bolster the supply chain to meet the needs for U.S. testing.
- Commercial and academic/hospital diagnostic laboratories not registered with the IRR currently
 can and should procure through their normal mechanisms via the commercial market.

• Abbott ID NOW Diagnostic Instruments

- As part of the federal government's response to COVID-19, HHS provided 6,000 ID NOW instruments and tests for distribution to Public Health Laboratories (PHLs), the Indian Health Service (IHS) and other key partners. In April, PHLs began to receive their instruments and test kits.
- 250 Abbott ID Now machines and kits for 10,000 tests were provided to the Indian Health Service, for dissemination to Indian Country.
- PHLs can obtain additional ID NOW COVID-19 test kits through the CDC IRR.

• Serological Diagnostic Testing

- Serological diagnostic testing, or evaluating sera through blood collection or finger sticks for evidence of an immune response to COVID-19 infection, provides an exciting opportunity to broaden the diagnostic testing capacity in the United States.
- As of April 15th, The FDA has issued three EUA's for serological tests for COVID-19 as of April 15. Serological testing will be an important part of testing strategies for COVID-19 moving forward.

Indian Health Service (IHS)

- The Indian Health Service has distributed a total of \$734 million from COVID-19 supplemental appropriations. On April 3, IHS began distributing \$600 million of CARES Act funding to IHS, Tribal, and Urban Indian Organizations. On March 27, the IHS distributed \$134 million in the first round of Coronavirus response funding, this includes the full \$64 million provided in the second supplemental appropriation for COVID-19 testing. 95% of the funds allocated to tribal and urban Indian organization health programs have been obligated. More here.
- The IHS received 250 Abbott ID Now analyzers, and has distributed them through area offices to federal and tribal health care facilities throughout Indian Country. This test allows for medical diagnostic testing at the time and place of patient care, provides COVID-19 results in under 13 minutes and expands the capacity for coronavirus testing for individuals exhibiting symptoms as well as for healthcare professionals and the first responder community. More here.
- The IHS has <u>expanded</u> telehealth across the agency. Telehealth services means patients can stay home and reduce their risk of infection and also keep healthcare workers and others in waiting rooms and emergency departments safe from COVID-19.
- Find a recent Public Service Announcement from Rear Admiral and HIS Director Michael Weahkee here A Message to Indigenous Peoples (**Youtube** / **Twitter**); Thanks to HIS (**Youtube** / **Twitter**)
- For more, visit the HIS Coronavirus website here: www.ihs.gov/coronavirus/

Economy/CARES Act Update

U.S. Department of the Treasury

Economic Impact Payments

- Economic Impact Payments have gone out to upwards of 80 million Americans. More here.
- On April 15, Treasury and the IRS launched the "<u>Get My Payment</u>" web application. The app allows individuals to track the status of their payment. It also allows taxpayers who filed their tax return in 2018 or 2019, but did not provide their banking information on their return, to submit direct deposit information.
- Social Security recipients who do not file tax returns will automatically receive economic impact payments. More <u>here</u>.

 Treasury is also investigating ways to effectively get Economic Impact Payment funds into the hands of the unbanked.

Coronavirus Relief Fund

- The Coronavirus Relief Fund provides \$150 billion to States, Localities, and Tribal Governments. \$8 billion is dedicated for Tribal Governments.
- On April 13, Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. Treasury also launched a <u>distribution web portal</u> for States, Tribes, and <u>eligible units of local government</u>. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation via Treasury's portal not later than April 17, 2020.
- Treasury is developing guidance in advance of funding release regarding reimbursable expenses.

• Main Street Business Lending Program and Municipal Liquidity Facility

• Treasury launched a Main Street Business Lending program and a Municipal Liquidity Facility to support the flow of credit to American workers, businesses, States, counties, and cities impacted by the coronavirus pandemic. The Municipal Liquidity Facility (MLF) will provide up to \$500 billion in direct financing to states, counties, and cities to help ensure they have the funds necessary to provide essential services to citizens and respond to the coronavirus pandemic. More here. MLF term sheet and guidance can be found here.

U.S. Small Business Administration (SBA)

• Paycheck Protection Program

- The Paycheck Protection Program (PPP) launched on Friday, April 3. The PPP program, which provides forgivable loans to small businesses with under 500 employees. As of Wednesday, April 15, more than 1.2 million loans totaling over \$268 billion across nearly 4,800 lenders have been approved. In total, the SBA has processed more than 14 years' worth of loans in less than 14 days.
- In order to ensure that every business is able to take advantage of the PPP, the Administration has requested an increase in PPP commitments to \$600 billion—a \$250 billion increase and is waiting Congressional action. Read more here: Statement by Secretary Mnuchin and Administrator Carranza on the Paycheck Protection program and Economic Injury Disaster Loan Program.
- The Employee Retention Credit is available for businesses not eligible for the PPP. This is a refundable credit of up to \$5,000 per employee, who is retained instead of being laid off. More here.
- Updated guidance and frequently asked questions can be found <u>here</u>. A new lender application form can be found <u>here</u>.
- More information on the Paycheck Protection Program here.
- **SBA Regional Offices**: SBA maintains district, regional, and field offices throughout the country. Individuals with questions about the PPP, disaster loans, and other SBA programs are encouraged to contact one of **these offices**.

Wraparound Services Update

White House Office of National Drug Control Policy (ONDCP):

- The Office of National Drug Control Policy (ONDCP) is a component within the Executive Office of the President which works to reduce drug use and its consequences by leading and coordinating the development, implementation, and assessment of U.S. drug policy. ONDCP coordinates the federal government's antidrug efforts by developing a comprehensive National Drug Control Strategy which aims to reduce substance use through public health and public safety measures.
- The COVID-19 pandemic has created countless challenges for those delivering care to our most vulnerable populations. People with Substance Use Disorder (SUD) and Opioid Use Disorder (OUD) are especially at high risk suffering complications from COVID-19.

- ONDCP released a fact sheet that contains information on Federal actions to expand telemedicine and eprescribing, to increase flexibility for treatment with methadone and buprenorphine, to improve access to prescribed controlled substances, and to expand assistance to rural areas. More here.
- For additional information, please visit ONDCP's website **here**.

Office of the Administration of Children and Families (OCC)

- The Administration for Children and Families' Office of Child Care (OCC) administers the Child Care and Development Fund (CCDF), which is the largest dedicated federal funding source for child care in the country (\$8.7 billion federal funds, \$11.7 billion total if counting matching and maintenance of effort funds, and funds transferred from the Temporary Assistance for Needy Families (TANF) program). This funding goes out as a block grant to state, territory, and tribal governments, and is allocated by formula.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$3.5 billion in supplemental CCDF funds to State, Territory, and Tribal governments to help address COVID-19 impacts. The funding was distributed to State, Territory, and Tribal government grantees on April 13, 20. The funds have two main purposes: 1) First, provide child care to emergency/essential workers across the income range, and 2) Second, invest in the retention of child care workers and businesses so they will be there when the health crisis is over. More here.
- ACF worked closely with CDC to develop specific guidance for child care settings on policies and practices
 to better address safety and virus spread concerns. The CDC child care supplemental guidance can be
 accessed here.
- ACF developed and released a State-by-State guide to help emergency/essential workers find child care.

Administration for Community Living (ACL)

- The Administration for Community Living brings together various components for increasing access to community supports while focusing attention and resources on the unique needs of older Americans and people with disabilities across the lifespan.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$955 million in supplemental funding to support these populations. Funding will be distributed across various programs, including:
 - \$480m to expand home delivered meals
 - \$100m to support family caregiver training, education and respite
 - \$85m to support independent living and community transitions for people with disabilities
 - \$20m to support services for Native Americans
 - \$50m to expand information systems to help families and individuals access services
 - \$200m to expand home and community based services to assist with supply acquisition, transportation, chore service and other needed activities to support living at home.
 - \$20m for the Ombudsman program which oversees care quality in nursing homes
- ACL developed **guidance** for older adults and caregivers on COVID-19. ACL also published a list of **frequently asked questions** to provide guidance to the ACL recipient community.
- ACL maintains the Eldercare Locator, a public service connecting elder Americans to services for older adults and their families. The Eldercare Locator can be accessed here and via phone at 1-800-677-1116.

Department of Health and Human Services (HHS)/Substance Abuse and Mental Health Services Administration (SAMHSA)

- The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services (HHS) that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.
- The White House and Administration are committed to providing Americans with vital mental health resources and services, especially through expanding telehealth services. Under the President's leadership and at the direction of the White House Task Force, the Trump Administration has taken historic steps to expand Americans' access to telehealth so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility (read more from Surgeon General

Jerome Adams and CMS Administrator Seema Verma – <u>Telehealth Plays Big Role in Coronavirus</u> <u>Cure</u>). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. The Centers for Medicare & Medicaid Services (CMS) has issued guidance on telehealth reimbursement and coverage options in the Medicaid program <u>here</u>.

- Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. SAMHSA's Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Read more about the Disaster Distress Helpline here.
- SAMHSA is allowing flexibility for grant recipients affected by the loss of operational capacity and increased costs due to the COVID-19 crisis. These flexibilities are available during this emergency time period. Flexibility may be reassessed upon issuance of new guidance by the Office of Management and Budget post the emergency time period. Read more here.
- On April 3, SAMHSA announced \$110 million in emergency grants to provide treatment for substance use disorders/serious mental illness during the coronavirus pandemic. The grants were available to State governments, the District of Columbia, Territories, and Federally recognized American Indian and Alaska Native Tribes. More details here.
- For additional information, please visit SAMHSA's coronavirus website here: https://www.samhsa.gov/coronavirus

From: Pottebaum, Nic D. EOP/WHO <Nicholas.D.Pottebaum@who.eop.gov>

Sent: Thursday, April 16, 2020 9:01 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Obenshain, Tucker T. EOP/OVP;Swint, Zachariah D.

EOP/WHO; Campana, Ariella M. EOP/WHO

Subject: 4/16 Follow-Up - Governors Briefing on COVID-19

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



Governors and Senior Staff,

Thank you for your efforts in the whole-of-America approach to respond to and mitigate the effects of COVID-19. Below are follow-up items from today's briefing.

Guidelines for Opening Up American Again

As discussed on today's briefing call with the President and Vice President, <u>HERE</u> (20-page slide deck; <u>Opening America</u>) are the *Guidelines for Opening Up American Again*. The guidelines give States gating criteria in a proposed three phased approach based on:

- Up-to-Date Data and Readiness
- Mitigates Risk of Resurgence
- Protects the Most Vulnerable
- Implementable on Statewide or County-by-County Basis at Governors' Direction

Core State Preparedness Responsibilities Include: testing & contact tracing, healthcare system capacity, and plans. State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, governors can work on a regional basis to satisfy these criteria and to progress through the phases outlined.

These guidelines were developed by top healthcare experts in government, including at the U.S. Department of Health and Human Services and the Center for Disease Control and Prevention. Governors will continue to manage the situation in each State and develop robust reopening plans, working in close coordination with medical experts and key industries. As discussed, fully assessing and leveraging your State's entire testing capacity will be important, including roadmap to all locations and types of testing available in your States, and the capacity of State and local labs, hospitals and universities, and private labs; a lot of testing capacity has not yet been turned on in many of the States. A robust and strategic testing strategy should include a plan to immediately test individuals if there is an outbreak in a community with a focus on vulnerable populations.

Data & Reporting Ask from the Vice President

The Vice President has asked each governor to ensure their State is reporting key information from their State emergency manager to the FEMA Regional Administrator. Most States are reporting this data on a daily basis, which is appreciated and **we ask you to take action to ensure your State continues doing this on a regular basis**. This reporting includes:

- Daily broad healthcare capacity data reporting on key hospital capacity and ventilator use metrics.
- Daily State's stockpile inventory and hospital PPE supplies to assist with our prioritization of supplies and equipment deliveries to areas most in need.

Readout from the April 13 Briefing with Governors

Today, President Donald J. Trump and Vice President Mike Pence led a discussion with the chief executives of 54 State, territory, and the city of Washington, DC, to provide an update on the all-of-America approach to respond to COVID-19 and drive America's economic revival.

The President and Vice President urged governors to leverage increased testing capacity and develop strategic testing plans for their State and to improve transparency on all testing options. Federal leaders also encouraged the chief executives to continue bolstering contact tracing capabilities and to continue improving supply chain management of critical resources and healthcare capacity. Federal and the State leaders also discussed various re-open and economic recovery strategies that will be driven in close coordination with private sector partners across the Nation.

The following Federal leaders joined the President and Vice President:

Secretary Steven Mnuchin, U.S. Department of Treasury

Secretary Alex Azar, U.S. Department of Health & Human Services

Director Anthony Fauci, M.D., National Institute of Allergy & Infectious Diseases

Dr. Stephen Hahn, M.D., Commissioner, Food & Drug Administration

Dr. Robert Redfield, Director, Centers for Disease Control and Prevention

Vice Admiral Jerome Adams, M.D., Surgeon General, Dept. of Health & Human Services

Ambassador Debi Birx, M.D., White House Coronavirus Coordinator

Rear Admiral John Polowczyk, Vice Director for Logistics, Joint Chiefs of Staff

Mark Meadows, Assistant to the President & Chief of Staff

Jared Kushner, Assistant to the President & Senior Advisor

Marc Short, Assistant to the President & Chief of Staff to the Vice President

Kellyanne Conway, Assistant to the President & Senior Counselor

ADM Brett Giroir, M.D., Assistant Secretary for Health, U.S. Department of Health & Human Services

Doug Hoelscher, Deputy Assistant to the President & Director, Intergovernmental Affairs

Olivia Troye, Special Advisor to the Vice President for Homeland Security

Nic Pottebaum, Special Assistant to the President & Deputy Director, Intergovernmental Affairs

Federal, State, local, and tribal leaders to continue to regularly highlight community mitigation efforts to "Slow the Spread." Participants also discussed the Federal government's historic efforts to support State, local, and tribal leaders including, historic financial support and regulatory flexibilities, already approving 55 major disaster declaration requests and approximately 43 Title 32 requests to 100% federally fund National Guard activities related to COVID-19 response and re-open efforts.

The leadership of governors, mayors, county commissioners, and tribal officials is vital for effective emergency management. Emergency management in America is locally-executed, State-managed, and Federally supported, which allows for innovative solutions to be identified at the local and State level for the majority of issues. Since January 2020, the Trump Administration has held over 160 briefings – including 13 governors' briefings – with over 74,000 State, local, and tribal leaders. Leaders at every level of government and the private sector are working in partnership to bend the curve and plan our Nation's economic revival.

Below, you will find additional information and resources mentioned on today's briefing call:

- Contacting Your FEMA Regional Administrator
- Treasury Eligibility Guidance on CARES Act Funding to State Governments
- Key Recommendations for Long-Term Care Facilities
- CMS Increases Medicare Payment for High-Production Coronavirus Lab Tests
- Implementing Safety Practices for Critical Infrastructure Workers
- Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk
- Maximizing Testing Resources & Medical Supplies

- Assistance for Small Businesses & American Families
- Connecting Americans to Coronavirus Information Online

If you have any additional questions, please reach out to the Office of the Vice President or White House Intergovernmental Affairs Office.

Intergovernmental Affairs Office

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Thanks, Nic

--

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Slow the Spread

ADDITIONAL INFORMATION

Contacting Your FEMA Regional Administrator

The Federal Emergency Management Agency (FEMA) has activated the National Response Coordination Center (NRCC) 24/7. All requests to the Federal government *must be formally communicated* by your **State emergency manager** to your **FEMA Regional Administrator**. This is the same process as natural disasters (e.g., hurricane recovery, flood recovery, tornado recovery, etc.).

• **FEMA Administrator Gaynor Second Letter to Emergency Managers**: **Here** is FEMA Administrator Pete Gaynor's April 15 letter to the Nation's Emergency Managers, which outlines lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic. In this letter, Administrator Gaynor addresses preservation and prioritization of scarce resources; use of data-driven decision making; utilization of key federal medical staff, Federal Medical Stations (FMS) and Large-Format Alternative Care Sites (ACS); Mitigation efforts to flatten the curve; strengthening the supply chain; as well as importance of busting myths.

Treasury Eligibility Guidance on CARES Act Funding to State Governments

The U.S. Department of the Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation on <u>Treasury's portal</u> no later than Friday, April 17. Additional guidance on eligible uses of Fund disbursements by governments will be posted as it becomes available.

Key Recommendations for Long-Term Care Facilities

We thank our nation's governors for taking action to protect patients and healthcare workers in long-term care facilities. Recent Centers for Medicare & Medicaid Services (CMS) Guidance on supplies, infection control procedures, screening, staffing, and managing facilities: **Here**.

CMS announced Medicare will nearly double payment for certain lab tests that use high-throughput technologies to rapidly diagnose large numbers of COVID-19 cases. Medicare will pay the higher payment of \$100 for COVID-19 clinical diagnostic lab tests making use of high-throughput technologies developed by the private sector that allow for increased testing capacity, faster results, and more effective means of combating the spread of the virus. High-throughput lab tests can process more than two hundred specimens a day using highly sophisticated equipment that requires specially trained technicians and more time-intensive processes to assure quality. Medicare will pay laboratories for the tests at \$100 effective April 14, 2020, through the duration of the COVID-19 national emergency. Increasing Medicare payment for these tests will help laboratories test in nursing home communities that are vulnerable to the spread of COVID-19. Additional information here.

As a reminder, on March 30, CMS announced that Medicare will pay new specimen collection fees
for COVID-19 testing for homebound and non-hospital inpatients, to help facilitate the testing of
homebound individuals and those unable to travel. As a result of these actions, laboratories will have
expanded capability to test more vulnerable populations, like nursing home patients, quickly and provide
results faster. Additional information here.

Implementing Safety Practices for Critical Infrastructure Workers

CDC has released has released guidance on implementing safety practices for critical infrastructure workers who may have had exposure to a person with suspected or confirmed COVID-19. This is for Federal, State, & local law enforcement; 911 call center employees; Fusion Center employees; hazardous material responders from government and the private sector; janitorial staff and other custodial staff; workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities. To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. More guidance on prescreening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces here.

Maximizing Testing Resources & Medical Supplies

- **Swab Flexibilities**: Initially, collecting specimen required using a specific type of swab (nasopharyngeal), however the U.S. Food & Drug Administration (FDA) is now permitting the use of other available swabs including oropharyngeal, mid-turbinate, or anterior nares. We will provide additional swab flexibility guidance soon. If you are having swab supply needs, please make sure labs in your State are utilizing all available swab supplies and techniques. More information here.
- **Reagent Flexibilities**: FDA has provided flexibilities on alternative reagent supplies. Labs in your State can utilize several alternative methods to meet your reagent supply needs. If your State has reagent supply needs, you can develop alternative reagent supplies. More information here.
- **Commercial Testing**: We would encourage all governors to focus on utilizing and expanding commercial testing options. If you have not yet connected with the representatives from Abbott, Roche, and Thermofisher, Hologic, and Expert other private sector testing platforms, we would encourage you to do so as that is where the high-speed testing solution is moving forward.
- Additional Testing Resources: FDA <u>Frequently Asked Questions (FAQ)</u> and 24/7 technical assistance for labs (1-888-463-6332).
- Strategies to **Optimize the Supply of PPE** (extend capacity and supply) (more **here**).
- Strategies for **Optimizing the Supply of N95 Respirators** (more <u>here</u>).
- **Maximizing the Types of Ventilators**: The FDA has issued an emergency use authorization for ventilators allowing anesthesia gas machines and positive pressure breathing devices to be modified for use as ventilators. The 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 (more **here**).

Assistance for Small Businesses & American Families

- Paycheck Protection Program (PPP) prioritizes millions of Americans employed by small businesses by authorizing up to \$349 billion toward job retention and certain other expenses. Small businesses and eligible nonprofit organizations, Veterans organizations, and Tribal businesses described in the Small Business Act, as well as individuals who are self-employed or are independent contractors, are eligible if they also meet program size standards. (FAQ here). For more information and updates, visit Treasury.gov/CARES and SBA.gov/PayCheckProtection.
- **State-Level Data** PPP Report can be found **here**.
- **Economic Impact Payments**: Americans will begin seeing fast and direct relief in the form of Economic Impact Payments. More information here.

Connecting Americans to Coronavirus Information Online

The White House announced a new collaboration by Schema.org to help Americans find the most up-to-date public health guidance and the most relevant information on testing facilities in their communities. Standard tags were created that can be added to any website's code, making it easier to find COVID-19 prevention measures, disease spread statistics, quarantine rules and travel guidance, and testing information through online search engine results. All federal websites will incorporate these new Schema.org standard tags. The private sector, State and local governments, and the academic community are encouraged to do the same. More information here.

From: Pottebaum, Nic D. EOP/WHO <Nicholas.D.Pottebaum@who.eop.gov>

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Intergovernmental Affairs Office

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Thanks, Nic

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Key Recommendations for Long-Term Care Facilities

We thank our nation's governors for taking action to protect patients and healthcare workers in long-term care facilities. Recent Centers for Medicare & Medicaid Services (CMS) Guidance on supplies, infection control procedures, screening, staffing, and managing facilities: **Here**.

CMS announced Medicare will nearly double payment for certain lab tests that use high-throughput technologies to rapidly diagnose large numbers of COVID-19 cases. Medicare will pay the higher payment of \$100 for COVID-19 clinical diagnostic lab tests making use of high-throughput technologies developed by the private sector that allow for increased testing capacity, faster results, and more effective means of combating the spread of the virus. High-throughput lab tests can process more than two hundred specimens a day using highly sophisticated equipment that requires specially trained technicians and more time-intensive processes to assure quality. Medicare will pay laboratories for the tests at \$100 effective April 14, 2020, through the duration of the COVID-19 national emergency. Increasing Medicare payment for these tests will help laboratories test in nursing home communities that are vulnerable to the spread of COVID-19. Additional information here.

As a reminder, on March 30, CMS announced that Medicare will pay new specimen collection fees
for COVID-19 testing for homebound and non-hospital inpatients, to help facilitate the testing of
homebound individuals and those unable to travel. As a result of these actions, laboratories will have
expanded capability to test more vulnerable populations, like nursing home patients, quickly and provide
results faster. Additional information here.

Implementing Safety Practices for Critical Infrastructure Workers

CDC has released has released guidance on implementing safety practices for critical infrastructure workers who may have had exposure to a person with suspected or confirmed COVID-19. This is for Federal, State, & local law enforcement; 911 call center employees; Fusion Center employees; hazardous material responders from government and the private sector; janitorial staff and other custodial staff; workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities. To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. More guidance on prescreening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces here.

Maximizing Testing Resources & Medical Supplies

- **Swab Flexibilities**: Initially, collecting specimen required using a specific type of swab (nasopharyngeal), however the U.S. Food & Drug Administration (FDA) is now permitting the use of other available swabs including oropharyngeal, mid-turbinate, or anterior nares. We will provide additional swab flexibility guidance soon. If you are having swab supply needs, please make sure labs in your State are utilizing all available swab supplies and techniques. More information here.
- **Reagent Flexibilities**: FDA has provided flexibilities on alternative reagent supplies. Labs in your State can utilize several alternative methods to meet your reagent supply needs. If your State has reagent supply needs, you can develop alternative reagent supplies. More information here.
- **Commercial Testing**: We would encourage all governors to focus on utilizing and expanding commercial testing options. If you have not yet connected with the representatives from Abbott, Roche, and Thermofisher, Hologic, and Expert other private sector testing platforms, we would encourage you to do so as that is where the high-speed testing solution is moving forward.
- Additional Testing Resources: FDA <u>Frequently Asked Questions (FAQ)</u> and 24/7 technical assistance for labs (1-888-463-6332).
- Strategies to **Optimize the Supply of PPE** (extend capacity and supply) (more <u>here</u>).
- Strategies for **Optimizing the Supply of N95 Respirators** (more <u>here</u>).
- **Maximizing the Types of Ventilators**: The FDA has issued an emergency use authorization for ventilators allowing anesthesia gas machines and positive pressure breathing devices to be modified for use as ventilators. The 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 (more **here**).

Assistance for Small Businesses & American Families

- Paycheck Protection Program (PPP) prioritizes millions of Americans employed by small businesses by authorizing up to \$349 billion toward job retention and certain other expenses. Small businesses and eligible nonprofit organizations, Veterans organizations, and Tribal businesses described in the Small Business Act, as well as individuals who are self-employed or are independent contractors, are eligible if they also meet program size standards. (FAQ here). For more information and updates, visit Treasury.gov/CARES and SBA.gov/PayCheckProtection.
- **State-Level Data** PPP Report can be found <u>here</u>.
- **Economic Impact Payments**: Americans will begin seeing fast and direct relief in the form of Economic Impact Payments. More information here.

Connecting Americans to Coronavirus Information Online

The White House announced a new collaboration by Schema.org to help Americans find the most up-to-date public health guidance and the most relevant information on testing facilities in their communities. Standard tags were created that can be added to any website's code, making it easier to find COVID-19 prevention measures, disease spread statistics, quarantine rules and travel guidance, and testing information through online search engine results. All federal websites will incorporate these new Schema.org standard tags. The private sector, State and local governments, and the academic community are encouraged to do the same. More information here.

From: Pottebaum, Nic D. EOP/WHO <Nicholas.D.Pottebaum@who.eop.gov>

Sent: Thursday, April 16, 2020 9:01 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Obenshain, Tucker T. EOP/OVP;Swint, Zachariah D.

EOP/WHO; Campana, Ariella M. EOP/WHO

Subject: 4/16 Follow-Up - Governors Briefing on COVID-19

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



Governors and Senior Staff,

Thank you for your efforts in the whole-of-America approach to respond to and mitigate the effects of COVID-19. Below are follow-up items from today's briefing.

Guidelines for Opening Up American Again

As discussed on today's briefing call with the President and Vice President, <u>HERE</u> (20-page slide deck; <u>Opening America</u>) are the *Guidelines for Opening Up American Again*. The guidelines give States gating criteria in a proposed three phased approach based on:

- Up-to-Date Data and Readiness
- Mitigates Risk of Resurgence
- Protects the Most Vulnerable
- Implementable on Statewide or County-by-County Basis at Governors' Direction

Core State Preparedness Responsibilities Include: testing & contact tracing, healthcare system capacity, and plans. State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, governors can work on a regional basis to satisfy these criteria and to progress through the phases outlined.

These guidelines were developed by top healthcare experts in government, including at the U.S. Department of Health and Human Services and the Center for Disease Control and Prevention. Governors will continue to manage the situation in each State and develop robust reopening plans, working in close coordination with medical experts and key industries. As discussed, fully assessing and leveraging your State's entire testing capacity will be important, including roadmap to all locations and types of testing available in your States, and the capacity of State and local labs, hospitals and universities, and private labs; a lot of testing capacity has not yet been turned on in many of the States. A robust and strategic testing strategy should include a plan to immediately test individuals if there is an outbreak in a community with a focus on vulnerable populations.

Data & Reporting Ask from the Vice President

The Vice President has asked each governor to ensure their State is reporting key information from their State emergency manager to the FEMA Regional Administrator. Most States are reporting this data on a daily basis, which is appreciated and **we ask you to take action to ensure your State continues doing this on a regular basis**. This reporting includes:

- Daily broad healthcare capacity data reporting on key hospital capacity and ventilator use metrics.
- Daily State's stockpile inventory and hospital PPE supplies to assist with our prioritization of supplies and equipment deliveries to areas most in need.

Readout from the April 13 Briefing with Governors

Today, President Donald J. Trump and Vice President Mike Pence led a discussion with the chief executives of 54 State, territory, and the city of Washington, DC, to provide an update on the all-of-America approach to respond to COVID-19 and drive America's economic revival.

The President and Vice President urged governors to leverage increased testing capacity and develop strategic testing plans for their State and to improve transparency on all testing options. Federal leaders also encouraged the chief executives to continue bolstering contact tracing capabilities and to continue improving supply chain management of critical resources and healthcare capacity. Federal and the State leaders also discussed various re-open and economic recovery strategies that will be driven in close coordination with private sector partners across the Nation.

The following Federal leaders joined the President and Vice President:

Secretary Steven Mnuchin, U.S. Department of Treasury

Secretary Alex Azar, U.S. Department of Health & Human Services

Director Anthony Fauci, M.D., National Institute of Allergy & Infectious Diseases

Dr. Stephen Hahn, M.D., Commissioner, Food & Drug Administration

Dr. Robert Redfield, Director, Centers for Disease Control and Prevention

Vice Admiral Jerome Adams, M.D., Surgeon General, Dept. of Health & Human Services

Ambassador Debi Birx, M.D., White House Coronavirus Coordinator

Rear Admiral John Polowczyk, Vice Director for Logistics, Joint Chiefs of Staff

Mark Meadows, Assistant to the President & Chief of Staff

Jared Kushner, Assistant to the President & Senior Advisor

Marc Short, Assistant to the President & Chief of Staff to the Vice President

Kellyanne Conway, Assistant to the President & Senior Counselor

ADM Brett Giroir, M.D., Assistant Secretary for Health, U.S. Department of Health & Human Services

Doug Hoelscher, Deputy Assistant to the President & Director, Intergovernmental Affairs

Olivia Troye, Special Advisor to the Vice President for Homeland Security

Nic Pottebaum, Special Assistant to the President & Deputy Director, Intergovernmental Affairs

Federal, State, local, and tribal leaders to continue to regularly highlight community mitigation efforts to "Slow the Spread." Participants also discussed the Federal government's historic efforts to support State, local, and tribal leaders including, historic financial support and regulatory flexibilities, already approving 55 major disaster declaration requests and approximately 43 Title 32 requests to 100% federally fund National Guard activities related to COVID-19 response and re-open efforts.

The leadership of governors, mayors, county commissioners, and tribal officials is vital for effective emergency management. Emergency management in America is locally-executed, State-managed, and Federally supported, which allows for innovative solutions to be identified at the local and State level for the majority of issues. Since January 2020, the Trump Administration has held over 160 briefings – including 13 governors' briefings – with over 74,000 State, local, and tribal leaders. Leaders at every level of government and the private sector are working in partnership to bend the curve and plan our Nation's economic revival.

Below, you will find additional information and resources mentioned on today's briefing call:

- Contacting Your FEMA Regional Administrator
- Treasury Eligibility Guidance on CARES Act Funding to State Governments
- Key Recommendations for Long-Term Care Facilities
- CMS Increases Medicare Payment for High-Production Coronavirus Lab Tests
- Implementing Safety Practices for Critical Infrastructure Workers
- Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk
- Maximizing Testing Resources & Medical Supplies

- Assistance for Small Businesses & American Families
- Connecting Americans to Coronavirus Information Online

If you have any additional questions, please reach out to the Office of the Vice President or White House Intergovernmental Affairs Office.

Intergovernmental Affairs Office

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Ella Campana	202-881-7298	Ariella.M.Campana@who.eop.gov

Office of the Vice President

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Tucker Obenshain	202-881-6217	Anne.T.Obenshain@ovp.eop.gov

Thanks, Nic

--

Nicholas D. Pottebaum Special Assistant to the President and Deputy Director White House Office of Intergovernmental Affairs

O: 202-456-2132 | C: 202-881-7803 | E: Nicholas.D.Pottebaum@who.eop.gov

Slow the Spread

ADDITIONAL INFORMATION

Contacting Your FEMA Regional Administrator

The Federal Emergency Management Agency (FEMA) has activated the National Response Coordination Center (NRCC) 24/7. All requests to the Federal government *must be formally communicated* by your **State emergency manager** to your **FEMA Regional Administrator**. This is the same process as natural disasters (e.g., hurricane recovery, flood recovery, tornado recovery, etc.).

• **FEMA Administrator Gaynor Second Letter to Emergency Managers**: **Here** is FEMA Administrator Pete Gaynor's April 15 letter to the Nation's Emergency Managers, which outlines lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic. In this letter, Administrator Gaynor addresses preservation and prioritization of scarce resources; use of data-driven decision making; utilization of key federal medical staff, Federal Medical Stations (FMS) and Large-Format Alternative Care Sites (ACS); Mitigation efforts to flatten the curve; strengthening the supply chain; as well as importance of busting myths.

Treasury Eligibility Guidance on CARES Act Funding to State Governments

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From: Crozer, William F. EOP/WHO <William.F.Crozer@who.eop.gov>

Sent: Thursday, April 16, 2020 8:48 PM

Subject: Follow-Up: COVID-19 National Briefing Call with State-Local-Tribal Leaders (April 15) &

Guidelines for Opening Up America Again!

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



State, Local, and Tribal Leaders -

Thank you for joining the White House COVID-19 National Briefing Call with State, Local, and Tribal Leaders on April 15. To date, the White House has coordinated 165 briefings that have helped inform over 74,000 State, Local, and Tribal leaders. And we look forward to continuing the partnership and robust coordination and outreach with you. Below, please find a recap of the briefing call. We also want to highlight the recently announced *Guidelines for Opening Up America Again!*

Today, President Donald J. Trump unveiled the *Guidelines for Opening Up America Again!* (*slide deck*). Developed by the top medical experts from across the Government and based on verifiable metrics regarding the situation on the ground, the guidelines outline a phased return to reopening and include specific steps for State, Local, and Tribal officials to follow in tailoring their response. The criteria include showing a downward trajectory of COVID-like symptoms reported over 14 days in a given state or region, as well as a decline in documented cases or positive tests during the same 14-day window. They also set clear benchmarks on new cases, testing, and hospital resources for States to meet to proceed toward a phased reopening. State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, the guidelines recommend Governors working on a regional basis to satisfy outlined criteria and to progress through the tiered phases. In the days and weeks ahead, the Administration plans to continue robust coordination and outreach with State, Local, and Tribal leaders as we collectively work to reopen the country. Find a Fact Sheet here: President Donald J. Trump Is Beginning the Next Phase In Our Fight Against Coronavirus - Guidelines for Opening Up America Again.



COVID-19: Important Resources for State, Local, and Tribal Officials

- Coronavirus Guidelines for America: On Tuesday, March 31, the White House announced updated Coronavirus Guidelines for America (Español), extending social distancing efforts through April 30. On April 3, the Centers for Disease Control and Prevention (CDC) issued guidance recommending individuals wear cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g. grocery stores and pharmacies, particularly in areas of significant community-based transmission. On April 8, CDC also provided guidelines regarding when people in critical infrastructure roles can return to work after being exposed to a confirmed or suspected case of COVID-19. Additional information on critical infrastructure below.
- **Up-To-Date Information**: The most up-to-date, verified information and guidance can be found via the Centers for Disease Control and Prevention Coronavirus Disease 2019 website **www.coronavirus.gov**. The Coronavirus Task Force holds frequent briefings, which can be viewed live **here**.
- COVID-19 Response and Recovery Primer: Response and recovery efforts are locally executed, state managed, and federally supported. It is important that requests for assistance, including for critical supplies, get routed through the proper channels as soon as possible. Learn more about the response and recovery process via this important resource <u>Coronavirus (COVID-19) Pandemic: Response and Recovery Through Federal-State-Local-Tribal Partnership</u>. FEMA's public assistance guidance for COVID-19 response efforts can be found <u>here</u>. Guidance for Tribal Governments can be found <u>here</u>.
- **Critical Infrastructure Workforce Guidelines**: On March 16th, the Department of Homeland Security (DHS) issued updated critical infrastructure guidance in response to the COVID-19 emergency. DHS issued revised guidance on March 28th (see **Memorandum on Identification of Essential Critical Infrastructure Workers During COVID-19 Response**). The **guidance**, and accompanying list, is intended to help State, local, tribal and territorial officials as they work to protect their communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security. The list is advisory in nature and is not a federal directive or standard.
- **Rural Resource Guide**: USDA and Federal partners have programs that can be used to provide immediate and long term assistance to rural communities affected by the COVID-19 pandemic. These programs can support recovery efforts for rural residents, businesses, and communities. USDA developed a resource guide for State, Local, and Tribal leaders, and other stakeholders, which can be found here: **COVID-19 Federal Rural Resource Guide**.
- Coronavirus Fact vs. Myth: Rumors can easily circulate within communities during a crisis. FEMA setup a <u>website</u> to help the public distinguish between rumors and facts regarding the response to the coronavirus pandemic.

- Fraud & Scam Protection: The Department of Justice is remaining vigilant in detecting, investigating, and prosecuting wrongdoing related to the crisis. Find out how you can protect yourself and helpful resources on DOJ's Coronavirus Fraud Prevention website. The Federal Trade Commission has also established a website with helpful information to help consumers avoid coronavirus-related scams.
- Social Media Resources: Download the <u>Apple COVID-19 Screening Tool</u>. Follow the White House on <u>Twitter</u> and <u>Facebook</u>. Also follow HHS (<u>Twitter/Facebook</u>) and CDC (<u>Twitter/Facebook</u>) You can also find informational videos from Coronavirus Task Force members on mitigation, social distancing, etc. on the White House's <u>YouTube</u> page.
- Mental Health Resources: Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. The Substance Abuse and Mental Health Administration's (SAMHSA) Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Learn more about the Disaster Distress Helpline here.
- Administration Actions and Federal Agency Resources: USA.gov is cataloging all U.S. government activities related to coronavirus. From actions on health and safety to travel, immigration, and transportation to education, find pertinent actions here. Each Federal Agency has also established a dedicated coronavirus website, where you can find important information and guidance. They include: Health and Human Services (<a href="https://https://https://https://hitsp.com/here. Centers of Medicare and Medicaid (<a href="https://hitsp.com/h

Thank you again for your partnership in this whole-of-government, All-of-America effort to defeat the coronavirus. The White House Office of Intergovernmental Affairs (WH IGA) will continue to share pertinent information as it becomes available. Please do not hesitate to reach out to our office if we can be of assistance. As a reminder, WH IGA is the primary liaison between the White House and the country's State and Local elected officials and Tribal Governments.

The White House Office of Intergovernmental Affairs

William F. Crozer Special Assistant to the President/Deputy Director White House Office of Intergovernmental Affairs



White House COVID-19 National Briefing Call Readout April 15, 2020



Recovery and Response Update

Federal Emergency Management Agency (FEMA)

- FEMA, HHS, and 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 has all 10 emergency response regions activated. President Trump has approved major disaster declarations for every State in the country. The President has also approved 43 Title 32 requests for the National Guard providing 100 percent federal cost-share for States. These actions have opened up unprecedented resources and capabilities for States to respond to COVID-19.
- Wednesday, FEMA Administrator Pete Gaynor issued a <u>letter</u> to the nation's emergency managers outlining lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic.
- FEMA continues to coordinate the transportation of critically needed personal protective equipment (PPE) across the country through **Project Air Bridge**. The air bridge is helping reduce the time it takes for U.S. medical supply distributors to receive PPE and other critical supplies into the country for health care professionals and other key professionals, including law enforcement. From March 29 to April 15, Project Air Bridge has completed 52 flights with an additional 50 scheduled. Total supplies delivered to the U.S. and into the private sector supply chains include more than 530,000 N95 masks, 451 million gloves, 25 million surgical masks, 5 million gowns, 74,000 face shields, and 80,000 thermometers. Project Air Bridge deliveries are in addition to the PPE that has been distributed from the Strategic National Stockpile.

U.S. Department of Health and Human Services (HHS)

- **Topline**: As of April 15, the State/Local Public Health Laboratories, Commercial Laboratories, Hospital Laboratories, CDC, and VA have performed approximately 3.5 million COVID-19 tests. In order to strengthen and expand our testing across the U.S., the White House Coronavirus Task Force is coordinating a major interagency initiative to strengthen our national diagnostic infrastructure. This effort includes working with the States, Territories and Tribal communities and test manufacturers to expand our ability to maximize available testing platforms and increase our diagnostic assay inventory.
- CDC International Reagent Resource (IRR)
 - The <u>CDC IRR</u> is distributing COVID-19 diagnostic tests, reagents and associated supplies to state and county public health laboratories. This has provided states with the flexibility to obtain diagnostic materials, specifically items needed for diagnostic sample collection, extraction and then diagnostic testing, through the IRR first, and while simultaneously retaining the option to procure needed supplies through the commercial marketplace.

- HHS is working to stand up the CDC IRR for this purpose by ensuring adequate inventory of diagnostic materials to support the needs of state and public health laboratories and working with manufacturers of diagnostic supplies (equipment and reagents) to bolster the supply chain to meet the needs for U.S. testing.
- Commercial and academic/hospital diagnostic laboratories not registered with the IRR currently
 can and should procure through their normal mechanisms via the commercial market.

• Abbott ID NOW Diagnostic Instruments

- As part of the federal government's response to COVID-19, HHS provided 6,000 ID NOW instruments and tests for distribution to Public Health Laboratories (PHLs), the Indian Health Service (IHS) and other key partners. In April, PHLs began to receive their instruments and test kits.
- 250 Abbott ID Now machines and kits for 10,000 tests were provided to the Indian Health Service, for dissemination to Indian Country.
- PHLs can obtain additional ID NOW COVID-19 test kits through the CDC IRR.

• Serological Diagnostic Testing

- Serological diagnostic testing, or evaluating sera through blood collection or finger sticks for evidence of an immune response to COVID-19 infection, provides an exciting opportunity to broaden the diagnostic testing capacity in the United States.
- As of April 15th, The FDA has issued three EUA's for serological tests for COVID-19 as of April 15. Serological testing will be an important part of testing strategies for COVID-19 moving forward.

Indian Health Service (IHS)

- The Indian Health Service has distributed a total of \$734 million from COVID-19 supplemental appropriations. On April 3, IHS began distributing \$600 million of CARES Act funding to IHS, Tribal, and Urban Indian Organizations. On March 27, the IHS distributed \$134 million in the first round of Coronavirus response funding, this includes the full \$64 million provided in the second supplemental appropriation for COVID-19 testing. 95% of the funds allocated to tribal and urban Indian organization health programs have been obligated. More here.
- The IHS received 250 Abbott ID Now analyzers, and has distributed them through area offices to federal and tribal health care facilities throughout Indian Country. This test allows for medical diagnostic testing at the time and place of patient care, provides COVID-19 results in under 13 minutes and expands the capacity for coronavirus testing for individuals exhibiting symptoms as well as for healthcare professionals and the first responder community. More here.
- The IHS has <u>expanded</u> telehealth across the agency. Telehealth services means patients can stay home and reduce their risk of infection and also keep healthcare workers and others in waiting rooms and emergency departments safe from COVID-19.
- Find a recent Public Service Announcement from Rear Admiral and HIS Director Michael Weahkee here –
 A Message to Indigenous Peoples (Youtube / Twitter); Thanks to HIS (Youtube / Twitter)
- For more, visit the HIS Coronavirus website here: www.ihs.gov/coronavirus/

Economy/CARES Act Update

U.S. Department of the Treasury

Economic Impact Payments

- Economic Impact Payments have gone out to upwards of 80 million Americans. More here.
- On April 15, Treasury and the IRS launched the "<u>Get My Payment</u>" web application. The app allows individuals to track the status of their payment. It also allows taxpayers who filed their tax return in 2018 or 2019, but did not provide their banking information on their return, to submit direct deposit information.
- Social Security recipients who do not file tax returns will automatically receive economic impact payments. More <u>here</u>.

 Treasury is also investigating ways to effectively get Economic Impact Payment funds into the hands of the unbanked.

Coronavirus Relief Fund

- The Coronavirus Relief Fund provides \$150 billion to States, Localities, and Tribal Governments. \$8 billion is dedicated for Tribal Governments.
- On April 13, Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. Treasury also launched a <u>distribution web portal</u> for States, Tribes, and <u>eligible units of local government</u>. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation via Treasury's portal not later than April 17, 2020.
- Treasury is developing guidance in advance of funding release regarding reimbursable expenses.

• Main Street Business Lending Program and Municipal Liquidity Facility

Treasury launched a Main Street Business Lending program and a Municipal Liquidity Facility to
support the flow of credit to American workers, businesses, States, counties, and cities impacted by
the coronavirus pandemic. The Municipal Liquidity Facility (MLF) will provide up to \$500 billion in
direct financing to states, counties, and cities to help ensure they have the funds necessary to
provide essential services to citizens and respond to the coronavirus pandemic. More here. MLF
term sheet and guidance can be found here.

U.S. Small Business Administration (SBA)

• Paycheck Protection Program

- The Paycheck Protection Program (PPP) launched on Friday, April 3. The PPP program, which provides forgivable loans to small businesses with under 500 employees. As of Wednesday, April 15, more than 1.2 million loans totaling over \$268 billion across nearly 4,800 lenders have been approved. In total, the SBA has processed more than 14 years' worth of loans in less than 14 days.
- In order to ensure that every business is able to take advantage of the PPP, the Administration has requested an increase in PPP commitments to \$600 billion—a \$250 billion increase and is waiting Congressional action. Read more here: Statement by Secretary Mnuchin and Administrator Carranza on the Paycheck Protection program and Economic Injury Disaster Loan Program.
- The Employee Retention Credit is available for businesses not eligible for the PPP. This is a refundable credit of up to \$5,000 per employee, who is retained instead of being laid off. More here.
- Updated guidance and frequently asked questions can be found <u>here</u>. A new lender application form can be found <u>here</u>.
- More information on the Paycheck Protection Program here.
- **SBA Regional Offices**: SBA maintains district, regional, and field offices throughout the country. Individuals with questions about the PPP, disaster loans, and other SBA programs are encouraged to contact one of **these offices**.

Wraparound Services Update

White House Office of National Drug Control Policy (ONDCP):

- The Office of National Drug Control Policy (ONDCP) is a component within the Executive Office of the President which works to reduce drug use and its consequences by leading and coordinating the development, implementation, and assessment of U.S. drug policy. ONDCP coordinates the federal government's antidrug efforts by developing a comprehensive National Drug Control Strategy which aims to reduce substance use through public health and public safety measures.
- The COVID-19 pandemic has created countless challenges for those delivering care to our most vulnerable populations. People with Substance Use Disorder (SUD) and Opioid Use Disorder (OUD) are especially at high risk suffering complications from COVID-19.

- ONDCP released a fact sheet that contains information on Federal actions to expand telemedicine and eprescribing, to increase flexibility for treatment with methadone and buprenorphine, to improve access to prescribed controlled substances, and to expand assistance to rural areas. More here.
- For additional information, please visit ONDCP's website **here**.

Office of the Administration of Children and Families (OCC)

- The Administration for Children and Families' Office of Child Care (OCC) administers the Child Care and Development Fund (CCDF), which is the largest dedicated federal funding source for child care in the country (\$8.7 billion federal funds, \$11.7 billion total if counting matching and maintenance of effort funds, and funds transferred from the Temporary Assistance for Needy Families (TANF) program). This funding goes out as a block grant to state, territory, and tribal governments, and is allocated by formula.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$3.5 billion in supplemental CCDF funds to State, Territory, and Tribal governments to help address COVID-19 impacts. The funding was distributed to State, Territory, and Tribal government grantees on April 13, 20. The funds have two main purposes: 1) First, provide child care to emergency/essential workers across the income range, and 2) Second, invest in the retention of child care workers and businesses so they will be there when the health crisis is over. More here.
- ACF worked closely with CDC to develop specific guidance for child care settings on policies and practices
 to better address safety and virus spread concerns. The CDC child care supplemental guidance can be
 accessed here.
- ACF developed and released a State-by-State guide to help emergency/essential workers find child care.

Administration for Community Living (ACL)

- The Administration for Community Living brings together various components for increasing access to community supports while focusing attention and resources on the unique needs of older Americans and people with disabilities across the lifespan.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$955 million in supplemental funding to support these populations. Funding will be distributed across various programs, including:
 - \$480m to expand home delivered meals
 - \$100m to support family caregiver training, education and respite
 - \$85m to support independent living and community transitions for people with disabilities
 - \$20m to support services for Native Americans
 - \$50m to expand information systems to help families and individuals access services
 - \$200m to expand home and community based services to assist with supply acquisition, transportation, chore service and other needed activities to support living at home.
 - \$20m for the Ombudsman program which oversees care quality in nursing homes
- ACL developed **guidance** for older adults and caregivers on COVID-19. ACL also published a list of **frequently asked questions** to provide guidance to the ACL recipient community.
- ACL maintains the Eldercare Locator, a public service connecting elder Americans to services for older adults and their families. The Eldercare Locator can be accessed here and via phone at 1-800-677-1116.

Department of Health and Human Services (HHS)/Substance Abuse and Mental Health Services Administration (SAMHSA)

- The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services (HHS) that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.
- The White House and Administration are committed to providing Americans with vital mental health resources and services, especially through expanding telehealth services. Under the President's leadership and at the direction of the White House Task Force, the Trump Administration has taken historic steps to expand Americans' access to telehealth so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility (read more from Surgeon General

Jerome Adams and CMS Administrator Seema Verma – <u>Telehealth Plays Big Role in Coronavirus</u> <u>Cure</u>). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. The Centers for Medicare & Medicaid Services (CMS) has issued guidance on telehealth reimbursement and coverage options in the Medicaid program <u>here</u>.

- Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. SAMHSA's Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Read more about the Disaster Distress Helpline here.
- SAMHSA is allowing flexibility for grant recipients affected by the loss of operational capacity and increased costs due to the COVID-19 crisis. These flexibilities are available during this emergency time period. Flexibility may be reassessed upon issuance of new guidance by the Office of Management and Budget post the emergency time period. Read more here.
- On April 3, SAMHSA announced \$110 million in emergency grants to provide treatment for substance use disorders/serious mental illness during the coronavirus pandemic. The grants were available to State governments, the District of Columbia, Territories, and Federally recognized American Indian and Alaska Native Tribes. More details here.
- For additional information, please visit SAMHSA's coronavirus website here: https://www.samhsa.gov/coronavirus

Herron, Robin

From: Pottebaum, Nic D. EOP/WHO <Nicholas.D.Pottebaum@who.eop.gov>

Sent: Thursday, April 16, 2020 9:01 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Obenshain, Tucker T. EOP/OVP;Swint, Zachariah D.

EOP/WHO; Campana, Ariella M. EOP/WHO

Subject: 4/16 Follow-Up - Governors Briefing on COVID-19

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



Governors and Senior Staff,

Thank you for your efforts in the whole-of-America approach to respond to and mitigate the effects of COVID-19. Below are follow-up items from today's briefing.

Guidelines for Opening Up American Again

As discussed on today's briefing call with the President and Vice President, <u>HERE</u> (20-page slide deck; <u>Opening America</u>) are the *Guidelines for Opening Up American Again*. The guidelines give States gating criteria in a proposed three phased approach based on:

- Up-to-Date Data and Readiness
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- Protects the Most Vulnerable
- Implementable on Statewide or County-by-County Basis at Governors' Direction

Core State Preparedness Responsibilities Include: testing & contact tracing, healthcare system capacity, and plans. State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, governors can work on a regional basis to satisfy these criteria and to progress through the phases outlined.

These guidelines were developed by top healthcare experts in government, including at the U.S. Department of Health and Human Services and the Center for Disease Control and Prevention. Governors will continue to manage the situation in each State and develop robust reopening plans, working in close coordination with medical experts and key industries. As discussed, fully assessing and leveraging your State's entire testing capacity will be important, including roadmap to all locations and types of testing available in your States, and the capacity of State and local labs, hospitals and universities, and private labs; a lot of testing capacity has not yet been turned on in many of the States. A robust and strategic testing strategy should include a plan to immediately test individuals if there is an outbreak in a community with a focus on vulnerable populations.

Data & Reporting Ask from the Vice President

The Vice President has asked each governor to ensure their State is reporting key information from their State emergency manager to the FEMA Regional Administrator. Most States are reporting this data on a daily basis, which is appreciated and **we ask you to take action to ensure your State continues doing this on a regular basis**. This reporting includes:

- Daily broad healthcare capacity data reporting on key hospital capacity and ventilator use metrics.
- Daily State's stockpile inventory and hospital PPE supplies to assist with our prioritization of supplies and equipment deliveries to areas most in need.

Readout from the April 13 Briefing with Governors

Today, President Donald J. Trump and Vice President Mike Pence led a discussion with the chief executives of 54 State, territory, and the city of Washington, DC, to provide an update on the all-of-America approach to respond to COVID-19 and drive America's economic revival.

The President and Vice President urged governors to leverage increased testing capacity and develop strategic testing plans for their State and to improve transparency on all testing options. Federal leaders also encouraged the chief executives to continue bolstering contact tracing capabilities and to continue improving supply chain management of critical resources and healthcare capacity. Federal and the State leaders also discussed various re-open and economic recovery strategies that will be driven in close coordination with private sector partners across the Nation.

The following Federal leaders joined the President and Vice President:

Secretary Steven Mnuchin, U.S. Department of Treasury

Secretary Alex Azar, U.S. Department of Health & Human Services

Director Anthony Fauci, M.D., National Institute of Allergy & Infectious Diseases

Dr. Stephen Hahn, M.D., Commissioner, Food & Drug Administration

Dr. Robert Redfield, Director, Centers for Disease Control and Prevention

Vice Admiral Jerome Adams, M.D., Surgeon General, Dept. of Health & Human Services

Ambassador Debi Birx, M.D., White House Coronavirus Coordinator

Rear Admiral John Polowczyk, Vice Director for Logistics, Joint Chiefs of Staff

Mark Meadows, Assistant to the President & Chief of Staff

Jared Kushner, Assistant to the President & Senior Advisor

Marc Short, Assistant to the President & Chief of Staff to the Vice President

Kellyanne Conway, Assistant to the President & Senior Counselor

ADM Brett Giroir, M.D., Assistant Secretary for Health, U.S. Department of Health & Human Services

Doug Hoelscher, Deputy Assistant to the President & Director, Intergovernmental Affairs

Olivia Troye, Special Advisor to the Vice President for Homeland Security

Nic Pottebaum, Special Assistant to the President & Deputy Director, Intergovernmental Affairs

Federal, State, local, and tribal leaders to continue to regularly highlight community mitigation efforts to "Slow the Spread." Participants also discussed the Federal government's historic efforts to support State, local, and tribal leaders including, historic financial support and regulatory flexibilities, already approving 55 major disaster declaration requests and approximately 43 Title 32 requests to 100% federally fund National Guard activities related to COVID-19 response and re-open efforts.

The leadership of governors, mayors, county commissioners, and tribal officials is vital for effective emergency management. Emergency management in America is locally-executed, State-managed, and Federally supported, which allows for innovative solutions to be identified at the local and State level for the majority of issues. Since January 2020, the Trump Administration has held over 160 briefings – including 13 governors' briefings – with over 74,000 State, local, and tribal leaders. Leaders at every level of government and the private sector are working in partnership to bend the curve and plan our Nation's economic revival.

Below, you will find additional information and resources mentioned on today's briefing call:

- Contacting Your FEMA Regional Administrator
- Treasury Eligibility Guidance on CARES Act Funding to State Governments
- Key Recommendations for Long-Term Care Facilities
- CMS Increases Medicare Payment for High-Production Coronavirus Lab Tests
- Implementing Safety Practices for Critical Infrastructure Workers
- Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk
- Maximizing Testing Resources & Medical Supplies

- Assistance for Small Businesses & American Families
- Connecting Americans to Coronavirus Information Online

If you have any additional questions, please reach out to the Office of the Vice President or White House Intergovernmental Affairs Office.

Intergovernmental Affairs Office

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Thanks, Nic

--

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Slow the Spread

ADDITIONAL INFORMATION

Contacting Your FEMA Regional Administrator

The Federal Emergency Management Agency (FEMA) has activated the National Response Coordination Center (NRCC) 24/7. All requests to the Federal government *must be formally communicated* by your **State emergency manager** to your **FEMA Regional Administrator**. This is the same process as natural disasters (e.g., hurricane recovery, flood recovery, tornado recovery, etc.).

• **FEMA Administrator Gaynor Second Letter to Emergency Managers**: **Here** is FEMA Administrator Pete Gaynor's April 15 letter to the Nation's Emergency Managers, which outlines lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic. In this letter, Administrator Gaynor addresses preservation and prioritization of scarce resources; use of data-driven decision making; utilization of key federal medical staff, Federal Medical Stations (FMS) and Large-Format Alternative Care Sites (ACS); Mitigation efforts to flatten the curve; strengthening the supply chain; as well as importance of busting myths.

Treasury Eligibility Guidance on CARES Act Funding to State Governments

The U.S. Department of the Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation on <u>Treasury's portal</u> no later than Friday, April 17. Additional guidance on eligible uses of Fund disbursements by governments will be posted as it becomes available.

Key Recommendations for Long-Term Care Facilities

We thank our nation's governors for taking action to protect patients and healthcare workers in long-term care facilities. Recent Centers for Medicare & Medicaid Services (CMS) Guidance on supplies, infection control procedures, screening, staffing, and managing facilities: **Here**.

CMS announced Medicare will nearly double payment for certain lab tests that use high-throughput technologies to rapidly diagnose large numbers of COVID-19 cases. Medicare will pay the higher payment of \$100 for COVID-19 clinical diagnostic lab tests making use of high-throughput technologies developed by the private sector that allow for increased testing capacity, faster results, and more effective means of combating the spread of the virus. High-throughput lab tests can process more than two hundred specimens a day using highly sophisticated equipment that requires specially trained technicians and more time-intensive processes to assure quality. Medicare will pay laboratories for the tests at \$100 effective April 14, 2020, through the duration of the COVID-19 national emergency. Increasing Medicare payment for these tests will help laboratories test in nursing home communities that are vulnerable to the spread of COVID-19. Additional information here.

As a reminder, on March 30, CMS announced that Medicare will pay new specimen collection fees
for COVID-19 testing for homebound and non-hospital inpatients, to help facilitate the testing of
homebound individuals and those unable to travel. As a result of these actions, laboratories will have
expanded capability to test more vulnerable populations, like nursing home patients, quickly and provide
results faster. Additional information here.

Implementing Safety Practices for Critical Infrastructure Workers

CDC has released has released guidance on implementing safety practices for critical infrastructure workers who may have had exposure to a person with suspected or confirmed COVID-19. This is for Federal, State, & local law enforcement; 911 call center employees; Fusion Center employees; hazardous material responders from government and the private sector; janitorial staff and other custodial staff; workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities. To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. More guidance on prescreening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces here.

Maximizing Testing Resources & Medical Supplies

- **Swab Flexibilities**: Initially, collecting specimen required using a specific type of swab (nasopharyngeal), however the U.S. Food & Drug Administration (FDA) is now permitting the use of other available swabs including oropharyngeal, mid-turbinate, or anterior nares. We will provide additional swab flexibility guidance soon. If you are having swab supply needs, please make sure labs in your State are utilizing all available swab supplies and techniques. More information here.
- **Reagent Flexibilities**: FDA has provided flexibilities on alternative reagent supplies. Labs in your State can utilize several alternative methods to meet your reagent supply needs. If your State has reagent supply needs, you can develop alternative reagent supplies. More information here.
- **Commercial Testing**: We would encourage all governors to focus on utilizing and expanding commercial testing options. If you have not yet connected with the representatives from Abbott, Roche, and Thermofisher, Hologic, and Expert other private sector testing platforms, we would encourage you to do so as that is where the high-speed testing solution is moving forward.
- Additional Testing Resources: FDA <u>Frequently Asked Questions (FAQ)</u> and 24/7 technical assistance for labs (1-888-463-6332).
- Strategies to **Optimize the Supply of PPE** (extend capacity and supply) (more **here**).
- Strategies for **Optimizing the Supply of N95 Respirators** (more <u>here</u>).
- **Maximizing the Types of Ventilators**: The FDA has issued an emergency use authorization for ventilators allowing anesthesia gas machines and positive pressure breathing devices to be modified for use as ventilators. The 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 (more **here**).

Assistance for Small Businesses & American Families

- Paycheck Protection Program (PPP) prioritizes millions of Americans employed by small businesses by authorizing up to \$349 billion toward job retention and certain other expenses. Small businesses and eligible nonprofit organizations, Veterans organizations, and Tribal businesses described in the Small Business Act, as well as individuals who are self-employed or are independent contractors, are eligible if they also meet program size standards. (FAQ here). For more information and updates, visit Treasury.gov/CARES and SBA.gov/PayCheckProtection.
- State-Level Data PPP Report can be found <u>here</u>.
- **Economic Impact Payments**: Americans will begin seeing fast and direct relief in the form of Economic Impact Payments. More information here.

Connecting Americans to Coronavirus Information Online

The White House announced a new collaboration by Schema.org to help Americans find the most up-to-date public health guidance and the most relevant information on testing facilities in their communities. Standard tags were created that can be added to any website's code, making it easier to find COVID-19 prevention measures, disease spread statistics, quarantine rules and travel guidance, and testing information through online search engine results. All federal websites will incorporate these new Schema.org standard tags. The private sector, State and local governments, and the academic community are encouraged to do the same. More information here.

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Intergovernmental Affairs Office

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Maximizing Testing Resources & Medical Supplies

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- **Reagent Flexibilities**: FDA has provided flexibilities on alternative reagent supplies. Labs in your State can utilize several alternative methods to meet your reagent supply needs. If your State has reagent supply needs, you can develop alternative reagent supplies. More information here.
- **Commercial Testing**: We would encourage all governors to focus on utilizing and expanding commercial testing options. If you have not yet connected with the representatives from Abbott, Roche, and Thermofisher, Hologic, and Expert other private sector testing platforms, we would encourage you to do so as that is where the high-speed testing solution is moving forward.
- Additional Testing Resources: FDA <u>Frequently Asked Questions (FAQ)</u> and 24/7 technical assistance for labs (1-888-463-6332).
- Strategies to **Optimize the Supply of PPE** (extend capacity and supply) (more **here**).
- Strategies for **Optimizing the Supply of N95 Respirators** (more <u>here</u>).
- **Maximizing the Types of Ventilators**: The FDA has issued an emergency use authorization for ventilators allowing anesthesia gas machines and positive pressure breathing devices to be modified for use as ventilators. The 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 (more here).

Assistance for Small Businesses & American Families

- Paycheck Protection Program (PPP) prioritizes millions of Americans employed by small businesses by authorizing up to \$349 billion toward job retention and certain other expenses. Small businesses and eligible nonprofit organizations, Veterans organizations, and Tribal businesses described in the Small Business Act, as well as individuals who are self-employed or are independent contractors, are eligible if they also meet program size standards. (FAQ here). For more information and updates, visit Treasury.gov/CARES and SBA.gov/PayCheckProtection.
- State-Level Data PPP Report can be found <u>here</u>.
- **Economic Impact Payments**: Americans will begin seeing fast and direct relief in the form of Economic Impact Payments. More information here.

Connecting Americans to Coronavirus Information Online

The White House announced a new collaboration by Schema.org to help Americans find the most up-to-date public health guidance and the most relevant information on testing facilities in their communities. Standard tags were created that can be added to any website's code, making it easier to find COVID-19 prevention measures, disease spread statistics, quarantine rules and travel guidance, and testing information through online search engine results. All federal websites will incorporate these new Schema.org standard tags. The private sector, State and local governments, and the academic community are encouraged to do the same. More information here.

Herron, Robin

From: Pottebaum, Nic D. EOP/WHO < Nicholas.D.Pottebaum@who.eop.gov>

Sent: Thursday, April 16, 2020 9:02 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Swint, Zachariah D. EOP/WHO;Campana, Ariella M.

EOP/WHO

Subject: COVID-19 Update & Resources Including Guidelines for Opening Up America Again

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State Leaders and Staff,

To date, the White House has coordinated 165 briefings that have helped inform over 74,000 State, Local, and Tribal leaders. We look forward to continuing the partnership and robust coordination and outreach with you. Below, please find a recap of a recent national briefing call with State, local, and tribal leaders. We also want to highlight the recently announced *Guidelines for Opening Up America Again*.

Today, President Donald J. Trump unveiled the <u>Guidelines for Opening Up America Again!</u> (<u>slide deck</u>). Developed by the top medical experts from across the Government and based on verifiable metrics regarding the situation on the ground, the guidelines outline a phased return to reopening and include specific steps for State, Local, and Tribal officials to follow in tailoring their response. The criteria include showing a downward trajectory of COVID-like symptoms reported over 14 days in a given state or region, as well as a decline in documented cases or positive tests during the same 14-day window. They also set clear benchmarks on new cases, testing, and hospital resources for States to meet to proceed toward a phased reopening. State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, the guidelines recommend Governors working on a regional basis to satisfy outlined criteria and to progress through the tiered phases. In the days and weeks ahead, the Administration plans to continue robust coordination and outreach with State, Local, and Tribal leaders as we collectively work to reopen the country. Find a Fact Sheet here: Persident Donald J. Trump America Again.



COVID-19: Important Resources for State, Local, and Tribal Officials

- Coronavirus Guidelines for America: On Tuesday, March 31, the White House announced updated Coronavirus Guidelines for America (Español), extending social distancing efforts through April 30. On April 3, the Centers for Disease Control and Prevention (CDC) issued guidance recommending individuals wear cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g. grocery stores and pharmacies, particularly in areas of significant community-based transmission. On April 8, CDC also provided guidelines regarding when people in critical infrastructure roles can return to work after being exposed to a confirmed or suspected case of COVID-19. Additional information on critical infrastructure below.
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- Administration Actions and Federal Agency Resources: USA.gov is cataloging all U.S. government activities related to coronavirus. From actions on health and safety to travel, immigration, and transportation to education, find pertinent actions here. Each Federal Agency has also established a dedicated coronavirus website, where you can find important information and guidance. They include: Health and Human Services (HHS), Centers of Medicare and Medicaid (CMS), Food and Drug Administration (FDA), Department of Education (DoED), Department of Agriculture (USDA), Small Business Administration (SBA), Department of Labor (DOL), Department of Homeland Security (DHS), Department of State (DOS), Department of Veterans Affairs (VA), Environmental Protection Agency (EPA), Department of Energy (DOE), Department of Commerce (DOC), Department of Justice (DOJ), Department of Housing and Urban Development (HUD), Department of the Treasury (USDT), Internal Revenue Service (IRS), Office of the Director of National Intelligence (ODNI), and U.S. Election Assistance Commission (EAC).

Thank you again for your partnership in this whole-of-government, All-of-America effort to defeat the coronavirus. The White House Office of Intergovernmental Affairs (WH IGA) will continue to share pertinent information as it becomes available. Please do not hesitate to reach out to our office if we can be of assistance. As a reminder, WH IGA is the primary liaison between the White House and the country's State and Local elected officials and Tribal Governments.

Thanks, Nic

Nicholas D. Pottebaum Special Assistant to the President and Deputy Director White House Office of Intergovernmental Affairs

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Slow the Spread

White House COVID-19 National Briefing Call Readout April 15, 2020



Recovery and Response Update

Federal Emergency Management Agency (FEMA)

- FEMA, HHS, and 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 has all 10 emergency response regions activated. President Trump has approved major disaster declarations for every State in the country. The President has also approved 43 Title 32 requests for the National Guard providing 100 percent federal cost-share for States. These actions have opened up unprecedented resources and capabilities for States to respond to COVID-19.
- Wednesday, FEMA Administrator Pete Gaynor issued a <u>letter</u> to the nation's emergency managers outlining lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic.
- FEMA continues to coordinate the transportation of critically needed personal protective equipment (PPE) across the country through **Project Air Bridge**. The air bridge is helping reduce the time it takes for U.S. medical supply distributors to receive PPE and other critical supplies into the country for health care professionals and other key professionals, including law enforcement. From March 29 to April 15, Project Air Bridge has completed 52 flights with an additional 50 scheduled. Total supplies delivered to the U.S. and into the private sector supply chains include more than 530,000 N95 masks, 451 million gloves, 25 million surgical masks, 5 million gowns, 74,000 face shields, and 80,000 thermometers. Project Air Bridge deliveries are in addition to the PPE that has been distributed from the Strategic National Stockpile.

U.S. Department of Health and Human Services (HHS)

- **Topline**: As of April 15, the State/Local Public Health Laboratories, Commercial Laboratories, Hospital Laboratories, CDC, and VA have performed approximately 3.5 million COVID-19 tests. In order to strengthen and expand our testing across the U.S., the White House Coronavirus Task Force is coordinating a major interagency initiative to strengthen our national diagnostic infrastructure. This effort includes working with the States, Territories and Tribal communities and test manufacturers to expand our ability to maximize available testing platforms and increase our diagnostic assay inventory.
- CDC International Reagent Resource (IRR)
 - The <u>CDC IRR</u> is distributing COVID-19 diagnostic tests, reagents and associated supplies to state and county public health laboratories. This has provided states with the flexibility to obtain diagnostic materials, specifically items needed for diagnostic sample collection, extraction and then diagnostic testing, through the IRR first, and while simultaneously retaining the option to procure needed supplies through the commercial marketplace.

- HHS is working to stand up the CDC IRR for this purpose by ensuring adequate inventory of diagnostic materials to support the needs of state and public health laboratories and working with manufacturers of diagnostic supplies (equipment and reagents) to bolster the supply chain to meet the needs for U.S. testing.
- Commercial and academic/hospital diagnostic laboratories not registered with the IRR currently can and should procure through their normal mechanisms via the commercial market.

• Abbott ID NOW Diagnostic Instruments

- As part of the federal government's response to COVID-19, HHS provided 6,000 ID NOW instruments and tests for distribution to Public Health Laboratories (PHLs), the Indian Health Service (IHS) and other key partners. In April, PHLs began to receive their instruments and test kits.
- 250 Abbott ID Now machines and kits for 10,000 tests were provided to the Indian Health Service, for dissemination to Indian Country.
- PHLs can obtain additional ID NOW COVID-19 test kits through the CDC IRR.

• Serological Diagnostic Testing

- Serological diagnostic testing, or evaluating sera through blood collection or finger sticks for evidence of an immune response to COVID-19 infection, provides an exciting opportunity to broaden the diagnostic testing capacity in the United States.
- As of April 15th, The FDA has issued three EUA's for serological tests for COVID-19 as of April 15. Serological testing will be an important part of testing strategies for COVID-19 moving forward.

Indian Health Service (IHS)

- The Indian Health Service has distributed a total of \$734 million from COVID-19 supplemental appropriations. On April 3, IHS began distributing \$600 million of CARES Act funding to IHS, Tribal, and Urban Indian Organizations. On March 27, the IHS distributed \$134 million in the first round of Coronavirus response funding, this includes the full \$64 million provided in the second supplemental appropriation for COVID-19 testing. 95% of the funds allocated to tribal and urban Indian organization health programs have been obligated. More here.
- The IHS received 250 Abbott ID Now analyzers, and has distributed them through area offices to federal and tribal health care facilities throughout Indian Country. This test allows for medical diagnostic testing at the time and place of patient care, provides COVID-19 results in under 13 minutes and expands the capacity for coronavirus testing for individuals exhibiting symptoms as well as for healthcare professionals and the first responder community. More here.
- The IHS has <u>expanded</u> telehealth across the agency. Telehealth services means patients can stay home and reduce their risk of infection and also keep healthcare workers and others in waiting rooms and emergency departments safe from COVID-19.
- Find a recent Public Service Announcement from Rear Admiral and HIS Director Michael Weahkee here A Message to Indigenous Peoples (**Youtube** / **Twitter**); Thanks to HIS (**Youtube** / **Twitter**)
- For more, visit the HIS Coronavirus website here: www.ihs.gov/coronavirus/

Economy/CARES Act Update

U.S. Department of the Treasury

Economic Impact Payments

- Economic Impact Payments have gone out to upwards of 80 million Americans. More here.
- On April 15, Treasury and the IRS launched the "<u>Get My Payment</u>" web application. The app allows individuals to track the status of their payment. It also allows taxpayers who filed their tax return in 2018 or 2019, but did not provide their banking information on their return, to submit direct deposit information.
- Social Security recipients who do not file tax returns will automatically receive economic impact payments. More <u>here</u>.

• Treasury is also investigating ways to effectively get Economic Impact Payment funds into the hands of the unbanked.

Coronavirus Relief Fund

- The Coronavirus Relief Fund provides \$150 billion to States, Localities, and Tribal Governments. \$8 billion is dedicated for Tribal Governments.
- On April 13, Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. Treasury also launched a <u>distribution web portal</u> for States, Tribes, and <u>eligible units of local government</u>. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation via Treasury's portal not later than April 17, 2020.
- Treasury is developing guidance in advance of funding release regarding reimbursable expenses.

• Main Street Business Lending Program and Municipal Liquidity Facility

Treasury launched a Main Street Business Lending program and a Municipal Liquidity Facility to
support the flow of credit to American workers, businesses, States, counties, and cities impacted by
the coronavirus pandemic. The Municipal Liquidity Facility (MLF) will provide up to \$500 billion in
direct financing to states, counties, and cities to help ensure they have the funds necessary to
provide essential services to citizens and respond to the coronavirus pandemic. More here. MLF
term sheet and guidance can be found here.

U.S. Small Business Administration (SBA)

• Paycheck Protection Program

- The Paycheck Protection Program (PPP) launched on Friday, April 3. The PPP program, which provides forgivable loans to small businesses with under 500 employees. As of Wednesday, April 15, more than 1.2 million loans totaling over \$268 billion across nearly 4,800 lenders have been approved. In total, the SBA has processed more than 14 years' worth of loans in less than 14 days.
- In order to ensure that every business is able to take advantage of the PPP, the Administration has requested an increase in PPP commitments to \$600 billion—a \$250 billion increase and is waiting Congressional action. Read more here: Statement by Secretary Mnuchin and Administrator Carranza on the Paycheck Protection program and Economic Injury Disaster Loan Program.
- The Employee Retention Credit is available for businesses not eligible for the PPP. This is a refundable credit of up to \$5,000 per employee, who is retained instead of being laid off. More here.
- Updated guidance and frequently asked questions can be found <u>here</u>. A new lender application form can be found <u>here</u>.
- More information on the Paycheck Protection Program here.
- **SBA Regional Offices**: SBA maintains district, regional, and field offices throughout the country. Individuals with questions about the PPP, disaster loans, and other SBA programs are encouraged to contact one of **these offices**.

Wraparound Services Update

White House Office of National Drug Control Policy (ONDCP):

- The Office of National Drug Control Policy (ONDCP) is a component within the Executive Office of the President which works to reduce drug use and its consequences by leading and coordinating the development, implementation, and assessment of U.S. drug policy. ONDCP coordinates the federal government's antidrug efforts by developing a comprehensive National Drug Control Strategy which aims to reduce substance use through public health and public safety measures.
- The COVID-19 pandemic has created countless challenges for those delivering care to our most vulnerable populations. People with Substance Use Disorder (SUD) and Opioid Use Disorder (OUD) are especially at high risk suffering complications from COVID-19.

- ONDCP released a fact sheet that contains information on Federal actions to expand telemedicine and eprescribing, to increase flexibility for treatment with methadone and buprenorphine, to improve access to prescribed controlled substances, and to expand assistance to rural areas. More here.
- For additional information, please visit ONDCP's website **here**.

Office of the Administration of Children and Families (OCC)

- The Administration for Children and Families' Office of Child Care (OCC) administers the Child Care and Development Fund (CCDF), which is the largest dedicated federal funding source for child care in the country (\$8.7 billion federal funds, \$11.7 billion total if counting matching and maintenance of effort funds, and funds transferred from the Temporary Assistance for Needy Families (TANF) program). This funding goes out as a block grant to state, territory, and tribal governments, and is allocated by formula.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$3.5 billion in supplemental CCDF funds to State, Territory, and Tribal governments to help address COVID-19 impacts. The funding was distributed to State, Territory, and Tribal government grantees on April 13, 20. The funds have two main purposes: 1) First, provide child care to emergency/essential workers across the income range, and 2) Second, invest in the retention of child care workers and businesses so they will be there when the health crisis is over. More here.
- ACF worked closely with CDC to develop specific guidance for child care settings on policies and practices
 to better address safety and virus spread concerns. The CDC child care supplemental guidance can be
 accessed here.
- ACF developed and released a State-by-State guide to help emergency/essential workers find child care.

Administration for Community Living (ACL)

- The Administration for Community Living brings together various components for increasing access to community supports while focusing attention and resources on the unique needs of older Americans and people with disabilities across the lifespan.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$955 million in supplemental funding to support these populations. Funding will be distributed across various programs, including:
 - \$480m to expand home delivered meals
 - \$100m to support family caregiver training, education and respite
 - \$85m to support independent living and community transitions for people with disabilities
 - \$20m to support services for Native Americans
 - \$50m to expand information systems to help families and individuals access services
 - \$200m to expand home and community based services to assist with supply acquisition, transportation, chore service and other needed activities to support living at home.
 - \$20m for the Ombudsman program which oversees care quality in nursing homes
- ACL developed **guidance** for older adults and caregivers on COVID-19. ACL also published a list of **frequently asked questions** to provide guidance to the ACL recipient community.
- ACL maintains the Eldercare Locator, a public service connecting elder Americans to services for older adults and their families. The Eldercare Locator can be accessed here and via phone at 1-800-677-1116.

Department of Health and Human Services (HHS)/Substance Abuse and Mental Health Services Administration (SAMHSA)

- The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services (HHS) that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.
- The White House and Administration are committed to providing Americans with vital mental health resources and services, especially through expanding telehealth services. Under the President's leadership and at the direction of the White House Task Force, the Trump Administration has taken historic steps to expand Americans' access to telehealth so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility (read more from Surgeon General

Jerome Adams and CMS Administrator Seema Verma – <u>Telehealth Plays Big Role in Coronavirus</u> <u>Cure</u>). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. The Centers for Medicare & Medicaid Services (CMS) has issued guidance on telehealth reimbursement and coverage options in the Medicaid program <u>here</u>.

- Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. SAMHSA's Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Read more about the Disaster Distress Helpline here.
- SAMHSA is allowing flexibility for grant recipients affected by the loss of operational capacity and increased costs due to the COVID-19 crisis. These flexibilities are available during this emergency time period. Flexibility may be reassessed upon issuance of new guidance by the Office of Management and Budget post the emergency time period. Read more here.
- On April 3, SAMHSA announced \$110 million in emergency grants to provide treatment for substance use disorders/serious mental illness during the coronavirus pandemic. The grants were available to State governments, the District of Columbia, Territories, and Federally recognized American Indian and Alaska Native Tribes. More details here.
- For additional information, please visit SAMHSA's coronavirus website here: https://www.samhsa.gov/coronavirus

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 - The <u>CDC IRR</u> is distributing COVID-19 diagnostic tests, reagents and associated supplies to state and county public health laboratories. This has provided states with the flexibility to obtain diagnostic materials, specifically items needed for diagnostic sample collection, extraction and then diagnostic testing, through the IRR first, and while simultaneously retaining the option to procure needed supplies through the commercial marketplace.

- HHS is working to stand up the CDC IRR for this purpose by ensuring adequate inventory of diagnostic materials to support the needs of state and public health laboratories and working with manufacturers of diagnostic supplies (equipment and reagents) to bolster the supply chain to meet the needs for U.S. testing.
- Commercial and academic/hospital diagnostic laboratories not registered with the IRR currently
 can and should procure through their normal mechanisms via the commercial market.

• Abbott ID NOW Diagnostic Instruments

- As part of the federal government's response to COVID-19, HHS provided 6,000 ID NOW instruments and tests for distribution to Public Health Laboratories (PHLs), the Indian Health Service (IHS) and other key partners. In April, PHLs began to receive their instruments and test kits
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- As of April 15th, The FDA has issued three EUA's for serological tests for COVID-19 as of April 15. Serological testing will be an important part of testing strategies for COVID-19 moving forward.

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- The Indian Health Service has distributed a total of \$734 million from COVID-19 supplemental appropriations. On April 3, IHS began distributing \$600 million of CARES Act funding to IHS, Tribal, and Urban Indian Organizations. On March 27, the IHS distributed \$134 million in the first round of Coronavirus response funding, this includes the full \$64 million provided in the second supplemental appropriation for COVID-19 testing. 95% of the funds allocated to tribal and urban Indian organization health programs have been obligated. More here.
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Economy/CARES Act Update

U.S. Department of the Treasury

Economic Impact Payments

- Economic Impact Payments have gone out to upwards of 80 million Americans. More here.
- On April 15, Treasury and the IRS launched the "<u>Get My Payment</u>" web application. The app allows individuals to track the status of their payment. It also allows taxpayers who filed their tax return in 2018 or 2019, but did not provide their banking information on their return, to submit direct deposit information.
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• Treasury is also investigating ways to effectively get Economic Impact Payment funds into the hands of the unbanked.

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- The Paycheck Protection Program (PPP) launched on Friday, April 3. The PPP program, which provides forgivable loans to small businesses with under 500 employees. As of Wednesday, April 15, more than 1.2 million loans totaling over \$268 billion across nearly 4,800 lenders have been approved. In total, the SBA has processed more than 14 years' worth of loans in less than 14 days.
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- The Employee Retention Credit is available for businesses not eligible for the PPP. This is a refundable credit of up to \$5,000 per employee, who is retained instead of being laid off. More here.
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Wraparound Services Update

White House Office of National Drug Control Policy (ONDCP):

- The Office of National Drug Control Policy (ONDCP) is a component within the Executive Office of the President which works to reduce drug use and its consequences by leading and coordinating the development, implementation, and assessment of U.S. drug policy. ONDCP coordinates the federal government's antidrug efforts by developing a comprehensive National Drug Control Strategy which aims to reduce substance use through public health and public safety measures.
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- The Administration for Children and Families' Office of Child Care (OCC) administers the Child Care and Development Fund (CCDF), which is the largest dedicated federal funding source for child care in the country (\$8.7 billion federal funds, \$11.7 billion total if counting matching and maintenance of effort funds, and funds transferred from the Temporary Assistance for Needy Families (TANF) program). This funding goes out as a block grant to state, territory, and tribal governments, and is allocated by formula.
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- The Administration for Community Living brings together various components for increasing access to community supports while focusing attention and resources on the unique needs of older Americans and people with disabilities across the lifespan.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$955 million in supplemental funding to support these populations. Funding will be distributed across various programs, including:
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Department of Health and Human Services (HHS)/Substance Abuse and Mental Health Services Administration (SAMHSA)

- The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services (HHS) that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.
- The White House and Administration are committed to providing Americans with vital mental health resources and services, especially through expanding telehealth services. Under the President's leadership and at the direction of the White House Task Force, the Trump Administration has taken historic steps to expand Americans' access to telehealth so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility (read more from Surgeon General

Jerome Adams and CMS Administrator Seema Verma – <u>Telehealth Plays Big Role in Coronavirus</u> <u>Cure</u>). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. The Centers for Medicare & Medicaid Services (CMS) has issued guidance on telehealth reimbursement and coverage options in the Medicaid program <u>here</u>.

- Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. SAMHSA's Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Read more about the Disaster Distress Helpline here.
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Herron, Robin

From: Pottebaum, Nic D. EOP/WHO < Nicholas.D.Pottebaum@who.eop.gov>

Sent: Thursday, April 16, 2020 9:02 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Swint, Zachariah D. EOP/WHO;Campana, Ariella M.

EOP/WHO

Subject: COVID-19 Update & Resources Including Guidelines for Opening Up America Again

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



State Leaders and Staff,

To date, the White House has coordinated 165 briefings that have helped inform over 74,000 State, Local, and Tribal leaders. We look forward to continuing the partnership and robust coordination and outreach with you. Below, please find a recap of a recent national briefing call with State, local, and tribal leaders. We also want to highlight the recently announced *Guidelines for Opening Up America Again*.

Today, President Donald J. Trump unveiled the *Guidelines for Opening Up America Again!* (*slide deck*). Developed by the top medical experts from across the Government and based on verifiable metrics regarding the situation on the ground, the guidelines outline a phased return to reopening and include specific steps for State, Local, and Tribal officials to follow in tailoring their response. The criteria include showing a downward trajectory of COVID-like symptoms reported over 14 days in a given state or region, as well as a decline in documented cases or positive tests during the same 14-day window. They also set clear benchmarks on new cases, testing, and hospital resources for States to meet to proceed toward a phased reopening. State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, the guidelines recommend Governors working on a regional basis to satisfy outlined criteria and to progress through the tiered phases. In the days and weeks ahead, the Administration plans to continue robust coordination and outreach with State, Local, and Tribal leaders as we collectively work to reopen the country. Find a Fact Sheet here: Persident Donald J. Trump America Again.



COVID-19: Important Resources for State, Local, and Tribal Officials

- Coronavirus Guidelines for America: On Tuesday, March 31, the White House announced updated Coronavirus Guidelines for America (Español), extending social distancing efforts through April 30. On April 3, the Centers for Disease Control and Prevention (CDC) issued guidance recommending individuals wear cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g. grocery stores and pharmacies, particularly in areas of significant community-based transmission. On April 8, CDC also provided guidelines regarding when people in critical infrastructure roles can return to work after being exposed to a confirmed or suspected case of COVID-19. Additional information on critical infrastructure below.
- **Up-To-Date Information**: The most up-to-date, verified information and guidance can be found via the Centers for Disease Control and Prevention Coronavirus Disease 2019 website **www.coronavirus.gov**. The Coronavirus Task Force holds frequent briefings, which can be viewed live **here**.
- **COVID-19 Response and Recovery Primer**: Response and recovery efforts are locally executed, state managed, and federally supported. It is important that requests for assistance, including for critical supplies, get routed through the proper channels as soon as possible. Learn more about the response and recovery process via this important resource **Coronavirus (COVID-19) Pandemic: Response and Recovery Through Federal-State-Local-Tribal Partnership**. FEMA's public assistance guidance for COVID-19 response efforts can be found **here**. Guidance for Tribal Governments can be found **here**.
- **Critical Infrastructure Workforce Guidelines**: On March 16th, the Department of Homeland Security (DHS) issued updated critical infrastructure guidance in response to the COVID-19 emergency. DHS issued revised guidance on March 28th (see **Memorandum on Identification of Essential Critical Infrastructure Workers During COVID-19 Response**). The **guidance**, and accompanying list, is intended to help State, local, tribal and territorial officials as they work to protect their communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security. The list is advisory in nature and is not a federal directive or standard.
- **Rural Resource Guide**: USDA and Federal partners have programs that can be used to provide immediate and long term assistance to rural communities affected by the COVID-19 pandemic. These programs can support recovery efforts for rural residents, businesses, and communities. USDA developed a resource guide for State, Local, and Tribal leaders, and other stakeholders, which can be found here: **COVID-19 Federal Rural Resource Guide**.
- Coronavirus Fact vs. Myth: Rumors can easily circulate within communities during a crisis. FEMA setup a <u>website</u> to help the public distinguish between rumors and facts regarding the response to the coronavirus pandemic.

- Fraud & Scam Protection: The Department of Justice is remaining vigilant in detecting, investigating, and prosecuting wrongdoing related to the crisis. Find out how you can protect yourself and helpful resources on DOJ's Coronavirus Fraud Prevention website. The Federal Trade Commission has also established a website with helpful information to help consumers avoid coronavirus-related scams.
- Social Media Resources: Download the <u>Apple COVID-19 Screening Tool</u>. Follow the White House on <u>Twitter</u> and <u>Facebook</u>. Also follow HHS (<u>Twitter/Facebook</u>) and CDC (<u>Twitter/Facebook</u>) You can also find informational videos from Coronavirus Task Force members on mitigation, social distancing, etc. on the White House's <u>YouTube</u> page.
- Mental Health Resources: Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. The Substance Abuse and Mental Health Administration's (SAMHSA) Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Learn more about the Disaster Distress Helpline here.

Thank you again for your partnership in this whole-of-government, All-of-America effort to defeat the coronavirus. The White House Office of Intergovernmental Affairs (WH IGA) will continue to share pertinent information as it becomes available. Please do not hesitate to reach out to our office if we can be of assistance. As a reminder, WH IGA is the primary liaison between the White House and the country's State and Local elected officials and Tribal Governments.

Thanks, Nic

Nicholas D. Pottebaum Special Assistant to the President and Deputy Director White House Office of Intergovernmental Affairs

O: 202-456-2132 | C: 202-881-7803 | E: Nicholas.D.Pottebaum@who.eop.gov

Slow the Spread

White House COVID-19 National Briefing Call Readout April 15, 2020



Recovery and Response Update

Federal Emergency Management Agency (FEMA)

- FEMA, HHS, and 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 has all 10 emergency response regions activated. President Trump has approved major disaster declarations for every State in the country. The President has also approved 43 Title 32 requests for the National Guard providing 100 percent federal cost-share for States. These actions have opened up unprecedented resources and capabilities for States to respond to COVID-19.
- Wednesday, FEMA Administrator Pete Gaynor issued a <u>letter</u> to the nation's emergency managers outlining lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic.
- FEMA continues to coordinate the transportation of critically needed personal protective equipment (PPE) across the country through **Project Air Bridge**. The air bridge is helping reduce the time it takes for U.S. medical supply distributors to receive PPE and other critical supplies into the country for health care professionals and other key professionals, including law enforcement. From March 29 to April 15, Project Air Bridge has completed 52 flights with an additional 50 scheduled. Total supplies delivered to the U.S. and into the private sector supply chains include more than 530,000 N95 masks, 451 million gloves, 25 million surgical masks, 5 million gowns, 74,000 face shields, and 80,000 thermometers. Project Air Bridge deliveries are in addition to the PPE that has been distributed from the Strategic National Stockpile.

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Herron, Robin

From: Pottebaum, Nic D. EOP/WHO < Nicholas.D.Pottebaum@who.eop.gov>

Sent: Thursday, April 16, 2020 9:02 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Swint, Zachariah D. EOP/WHO;Campana, Ariella M.

EOP/WHO

Subject: COVID-19 Update & Resources Including Guidelines for Opening Up America Again

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State Leaders and Staff,

To date, the White House has coordinated 165 briefings that have helped inform over 74,000 State, Local, and Tribal leaders. We look forward to continuing the partnership and robust coordination and outreach with you. Below, please find a recap of a recent national briefing call with State, local, and tribal leaders. We also want to highlight the recently announced *Guidelines for Opening Up America Again*.

Today, President Donald J. Trump unveiled the *Guidelines for Opening Up America Again!* (*slide deck*). Developed by the top medical experts from across the Government and based on verifiable metrics regarding the situation on the ground, the guidelines outline a phased return to reopening and include specific steps for State, Local, and Tribal officials to follow in tailoring their response. The criteria include showing a downward trajectory of COVID-like symptoms reported over 14 days in a given state or region, as well as a decline in documented cases or positive tests during the same 14-day window. They also set clear benchmarks on new cases, testing, and hospital resources for States to meet to proceed toward a phased reopening. State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, the guidelines recommend Governors working on a regional basis to satisfy outlined criteria and to progress through the tiered phases. In the days and weeks ahead, the Administration plans to continue robust coordination and outreach with State, Local, and Tribal leaders as we collectively work to reopen the country. Find a Fact Sheet here: Persident Donald J. Trump America Again.



COVID-19: Important Resources for State, Local, and Tribal Officials

- Coronavirus Guidelines for America: On Tuesday, March 31, the White House announced updated Coronavirus Guidelines for America (Español), extending social distancing efforts through April 30. On April 3, the Centers for Disease Control and Prevention (CDC) issued guidance recommending individuals wear cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g. grocery stores and pharmacies, particularly in areas of significant community-based transmission. On April 8, CDC also provided guidelines regarding when people in critical infrastructure roles can return to work after being exposed to a confirmed or suspected case of COVID-19. Additional information on critical infrastructure below.
- **Up-To-Date Information**: The most up-to-date, verified information and guidance can be found via the Centers for Disease Control and Prevention Coronavirus Disease 2019 website **www.coronavirus.gov**. The Coronavirus Task Force holds frequent briefings, which can be viewed live **here**.
- **COVID-19 Response and Recovery Primer**: Response and recovery efforts are locally executed, state managed, and federally supported. It is important that requests for assistance, including for critical supplies, get routed through the proper channels as soon as possible. Learn more about the response and recovery process via this important resource **Coronavirus (COVID-19) Pandemic: Response and Recovery Through Federal-State-Local-Tribal Partnership**. FEMA's public assistance guidance for COVID-19 response efforts can be found **here**. Guidance for Tribal Governments can be found **here**.
- **Critical Infrastructure Workforce Guidelines**: On March 16th, the Department of Homeland Security (DHS) issued updated critical infrastructure guidance in response to the COVID-19 emergency. DHS issued revised guidance on March 28th (see **Memorandum on Identification of Essential Critical Infrastructure Workers During COVID-19 Response**). The **guidance**, and accompanying list, is intended to help State, local, tribal and territorial officials as they work to protect their communities, while ensuring continuity of functions critical to public health and safety, as well as economic and national security. The list is advisory in nature and is not a federal directive or standard.
- **Rural Resource Guide**: USDA and Federal partners have programs that can be used to provide immediate and long term assistance to rural communities affected by the COVID-19 pandemic. These programs can support recovery efforts for rural residents, businesses, and communities. USDA developed a resource guide for State, Local, and Tribal leaders, and other stakeholders, which can be found here: **COVID-19 Federal Rural Resource Guide**.
- Coronavirus Fact vs. Myth: Rumors can easily circulate within communities during a crisis. FEMA setup a <u>website</u> to help the public distinguish between rumors and facts regarding the response to the coronavirus pandemic.

- Fraud & Scam Protection: The Department of Justice is remaining vigilant in detecting, investigating, and prosecuting wrongdoing related to the crisis. Find out how you can protect yourself and helpful resources on DOJ's Coronavirus Fraud Prevention website. The Federal Trade Commission has also established a website with helpful information to help consumers avoid coronavirus-related scams.
- Social Media Resources: Download the <u>Apple COVID-19 Screening Tool</u>. Follow the White House on <u>Twitter</u> and <u>Facebook</u>. Also follow HHS (<u>Twitter/Facebook</u>) and CDC (<u>Twitter/Facebook</u>) You can also find informational videos from Coronavirus Task Force members on mitigation, social distancing, etc. on the White House's <u>YouTube</u> page.
- Mental Health Resources: Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. The Substance Abuse and Mental Health Administration's (SAMHSA) Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Learn more about the Disaster Distress Helpline here.
- Administration Actions and Federal Agency Resources: USA.gov is cataloging all U.S. government activities related to coronavirus. From actions on health and safety to travel, immigration, and transportation to education, find pertinent actions <a href="https://hearth.com/hearth.co

Thank you again for your partnership in this whole-of-government, All-of-America effort to defeat the coronavirus. The White House Office of Intergovernmental Affairs (WH IGA) will continue to share pertinent information as it becomes available. Please do not hesitate to reach out to our office if we can be of assistance. As a reminder, WH IGA is the primary liaison between the White House and the country's State and Local elected officials and Tribal Governments.

Thanks, Nic

Nicholas D. Pottebaum Special Assistant to the President and Deputy Director White House Office of Intergovernmental Affairs

O: 202-456-2132 | C: 202-881-7803 | E: <u>Nicholas.D.Pottebaum@who.eop.gov</u>

Slow the Spread

White House COVID-19 National Briefing Call Readout April 15, 2020



Recovery and Response Update

Federal Emergency Management Agency (FEMA)

- FEMA, HHS, and 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 has all 10 emergency response regions activated. President Trump has approved major disaster declarations for every State in the country. The President has also approved 43 Title 32 requests for the National Guard providing 100 percent federal cost-share for States. These actions have opened up unprecedented resources and capabilities for States to respond to COVID-19.
- Wednesday, FEMA Administrator Pete Gaynor issued a <u>letter</u> to the nation's emergency managers outlining lessons learned from the first 30 days of FEMA leading the "Whole-of-America" response to the coronavirus (COVID-19) pandemic.
- FEMA continues to coordinate the transportation of critically needed personal protective equipment (PPE) across the country through **Project Air Bridge**. The air bridge is helping reduce the time it takes for U.S. medical supply distributors to receive PPE and other critical supplies into the country for health care professionals and other key professionals, including law enforcement. From March 29 to April 15, Project Air Bridge has completed 52 flights with an additional 50 scheduled. Total supplies delivered to the U.S. and into the private sector supply chains include more than 530,000 N95 masks, 451 million gloves, 25 million surgical masks, 5 million gowns, 74,000 face shields, and 80,000 thermometers. Project Air Bridge deliveries are in addition to the PPE that has been distributed from the Strategic National Stockpile.

U.S. Department of Health and Human Services (HHS)

- **Topline**: As of April 15, the State/Local Public Health Laboratories, Commercial Laboratories, Hospital Laboratories, CDC, and VA have performed approximately 3.5 million COVID-19 tests. In order to strengthen and expand our testing across the U.S., the White House Coronavirus Task Force is coordinating a major interagency initiative to strengthen our national diagnostic infrastructure. This effort includes working with the States, Territories and Tribal communities and test manufacturers to expand our ability to maximize available testing platforms and increase our diagnostic assay inventory.
- CDC International Reagent Resource (IRR)
 - The <u>CDC IRR</u> is distributing COVID-19 diagnostic tests, reagents and associated supplies to state and county public health laboratories. This has provided states with the flexibility to obtain diagnostic materials, specifically items needed for diagnostic sample collection, extraction and then diagnostic testing, through the IRR first, and while simultaneously retaining the option to procure needed supplies through the commercial marketplace.

- HHS is working to stand up the CDC IRR for this purpose by ensuring adequate inventory of diagnostic materials to support the needs of state and public health laboratories and working with manufacturers of diagnostic supplies (equipment and reagents) to bolster the supply chain to meet the needs for U.S. testing.
- Commercial and academic/hospital diagnostic laboratories not registered with the IRR currently
 can and should procure through their normal mechanisms via the commercial market.

• Abbott ID NOW Diagnostic Instruments

- As part of the federal government's response to COVID-19, HHS provided 6,000 ID NOW instruments and tests for distribution to Public Health Laboratories (PHLs), the Indian Health Service (IHS) and other key partners. In April, PHLs began to receive their instruments and test kits.
- 250 Abbott ID Now machines and kits for 10,000 tests were provided to the Indian Health Service, for dissemination to Indian Country.
- PHLs can obtain additional ID NOW COVID-19 test kits through the CDC IRR.

• Serological Diagnostic Testing

- Serological diagnostic testing, or evaluating sera through blood collection or finger sticks for evidence of an immune response to COVID-19 infection, provides an exciting opportunity to broaden the diagnostic testing capacity in the United States.
- As of April 15th, The FDA has issued three EUA's for serological tests for COVID-19 as of April 15. Serological testing will be an important part of testing strategies for COVID-19 moving forward.

Indian Health Service (IHS)

- The Indian Health Service has distributed a total of \$734 million from COVID-19 supplemental appropriations. On April 3, IHS began distributing \$600 million of CARES Act funding to IHS, Tribal, and Urban Indian Organizations. On March 27, the IHS distributed \$134 million in the first round of Coronavirus response funding, this includes the full \$64 million provided in the second supplemental appropriation for COVID-19 testing. 95% of the funds allocated to tribal and urban Indian organization health programs have been obligated. More here.
- The IHS received 250 Abbott ID Now analyzers, and has distributed them through area offices to federal and tribal health care facilities throughout Indian Country. This test allows for medical diagnostic testing at the time and place of patient care, provides COVID-19 results in under 13 minutes and expands the capacity for coronavirus testing for individuals exhibiting symptoms as well as for healthcare professionals and the first responder community. More here.
- The IHS has <u>expanded</u> telehealth across the agency. Telehealth services means patients can stay home and reduce their risk of infection and also keep healthcare workers and others in waiting rooms and emergency departments safe from COVID-19.
- Find a recent Public Service Announcement from Rear Admiral and HIS Director Michael Weahkee here –
 A Message to Indigenous Peoples (Youtube / Twitter); Thanks to HIS (Youtube / Twitter)
- For more, visit the HIS Coronavirus website here: www.ihs.gov/coronavirus/

Economy/CARES Act Update

U.S. Department of the Treasury

Economic Impact Payments

- Economic Impact Payments have gone out to upwards of 80 million Americans. More here.
- On April 15, Treasury and the IRS launched the "<u>Get My Payment</u>" web application. The app allows individuals to track the status of their payment. It also allows taxpayers who filed their tax return in 2018 or 2019, but did not provide their banking information on their return, to submit direct deposit information.
- Social Security recipients who do not file tax returns will automatically receive economic impact payments. More <u>here</u>.

• Treasury is also investigating ways to effectively get Economic Impact Payment funds into the hands of the unbanked.

Coronavirus Relief Fund

- The Coronavirus Relief Fund provides \$150 billion to States, Localities, and Tribal Governments. \$8 billion is dedicated for Tribal Governments.
- On April 13, Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. Treasury also launched a <u>distribution web portal</u> for States, Tribes, and <u>eligible units of local government</u>. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation via Treasury's portal not later than April 17, 2020.
- Treasury is developing guidance in advance of funding release regarding reimbursable expenses.

• Main Street Business Lending Program and Municipal Liquidity Facility

Treasury launched a Main Street Business Lending program and a Municipal Liquidity Facility to
support the flow of credit to American workers, businesses, States, counties, and cities impacted by
the coronavirus pandemic. The Municipal Liquidity Facility (MLF) will provide up to \$500 billion in
direct financing to states, counties, and cities to help ensure they have the funds necessary to
provide essential services to citizens and respond to the coronavirus pandemic. More here. MLF
term sheet and guidance can be found here.

U.S. Small Business Administration (SBA)

• Paycheck Protection Program

- The Paycheck Protection Program (PPP) launched on Friday, April 3. The PPP program, which provides forgivable loans to small businesses with under 500 employees. As of Wednesday, April 15, more than 1.2 million loans totaling over \$268 billion across nearly 4,800 lenders have been approved. In total, the SBA has processed more than 14 years' worth of loans in less than 14 days.
- In order to ensure that every business is able to take advantage of the PPP, the Administration has requested an increase in PPP commitments to \$600 billion—a \$250 billion increase and is waiting Congressional action. Read more here: Statement by Secretary Mnuchin and Administrator Carranza on the Paycheck Protection program and Economic Injury Disaster Loan Program.
- The Employee Retention Credit is available for businesses not eligible for the PPP. This is a refundable credit of up to \$5,000 per employee, who is retained instead of being laid off. More here.
- Updated guidance and frequently asked questions can be found <u>here</u>. A new lender application form can be found <u>here</u>.
- More information on the Paycheck Protection Program here.
- **SBA Regional Offices**: SBA maintains district, regional, and field offices throughout the country. Individuals with questions about the PPP, disaster loans, and other SBA programs are encouraged to contact one of **these offices**.

Wraparound Services Update

White House Office of National Drug Control Policy (ONDCP):

- The Office of National Drug Control Policy (ONDCP) is a component within the Executive Office of the President which works to reduce drug use and its consequences by leading and coordinating the development, implementation, and assessment of U.S. drug policy. ONDCP coordinates the federal government's antidrug efforts by developing a comprehensive National Drug Control Strategy which aims to reduce substance use through public health and public safety measures.
- The COVID-19 pandemic has created countless challenges for those delivering care to our most vulnerable populations. People with Substance Use Disorder (SUD) and Opioid Use Disorder (OUD) are especially at high risk suffering complications from COVID-19.

- ONDCP released a fact sheet that contains information on Federal actions to expand telemedicine and eprescribing, to increase flexibility for treatment with methadone and buprenorphine, to improve access to prescribed controlled substances, and to expand assistance to rural areas. More here.
- For additional information, please visit ONDCP's website **here**.

Office of the Administration of Children and Families (OCC)

- The Administration for Children and Families' Office of Child Care (OCC) administers the Child Care and Development Fund (CCDF), which is the largest dedicated federal funding source for child care in the country (\$8.7 billion federal funds, \$11.7 billion total if counting matching and maintenance of effort funds, and funds transferred from the Temporary Assistance for Needy Families (TANF) program). This funding goes out as a block grant to state, territory, and tribal governments, and is allocated by formula.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$3.5 billion in supplemental CCDF funds to State, Territory, and Tribal governments to help address COVID-19 impacts. The funding was distributed to State, Territory, and Tribal government grantees on April 13, 20. The funds have two main purposes: 1) First, provide child care to emergency/essential workers across the income range, and 2) Second, invest in the retention of child care workers and businesses so they will be there when the health crisis is over. More here.
- ACF worked closely with CDC to develop specific guidance for child care settings on policies and practices
 to better address safety and virus spread concerns. The CDC child care supplemental guidance can be
 accessed here.
- ACF developed and released a State-by-State guide to help emergency/essential workers find child care.

Administration for Community Living (ACL)

- The Administration for Community Living brings together various components for increasing access to community supports while focusing attention and resources on the unique needs of older Americans and people with disabilities across the lifespan.
- The Coronavirus Aid, Relief, and Economic Security (CARES) Act provided \$955 million in supplemental funding to support these populations. Funding will be distributed across various programs, including:
 - \$480m to expand home delivered meals
 - \$100m to support family caregiver training, education and respite
 - \$85m to support independent living and community transitions for people with disabilities
 - \$20m to support services for Native Americans
 - \$50m to expand information systems to help families and individuals access services
 - \$200m to expand home and community based services to assist with supply acquisition, transportation, chore service and other needed activities to support living at home.
 - \$20m for the Ombudsman program which oversees care quality in nursing homes
- ACL developed **guidance** for older adults and caregivers on COVID-19. ACL also published a list of **frequently asked questions** to provide guidance to the ACL recipient community.
- ACL maintains the Eldercare Locator, a public service connecting elder Americans to services for older adults and their families. The Eldercare Locator can be accessed here and via phone at 1-800-677-1116.

Department of Health and Human Services (HHS)/Substance Abuse and Mental Health Services Administration (SAMHSA)

- The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services (HHS) that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.
- The White House and Administration are committed to providing Americans with vital mental health resources and services, especially through expanding telehealth services. Under the President's leadership and at the direction of the White House Task Force, the Trump Administration has taken historic steps to expand Americans' access to telehealth so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility (read more from Surgeon General

Jerome Adams and CMS Administrator Seema Verma – <u>Telehealth Plays Big Role in Coronavirus</u> <u>Cure</u>). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. The Centers for Medicare & Medicaid Services (CMS) has issued guidance on telehealth reimbursement and coverage options in the Medicaid program <u>here</u>.

- Natural disasters including such pandemics as the coronavirus outbreak can be overwhelming and also can seriously affect emotional health. SAMHSA's Disaster Distress Helpline 1-800-985-5990 (or text TalkWithUs to 66746) provides 24/7, 365-day-a-year crisis counseling and support to anyone who is seeking help in coping with the mental or emotional effects caused by developments related to the coronavirus pandemic. Read more about the Disaster Distress Helpline here.
- SAMHSA is allowing flexibility for grant recipients affected by the loss of operational capacity and increased costs due to the COVID-19 crisis. These flexibilities are available during this emergency time period. Flexibility may be reassessed upon issuance of new guidance by the Office of Management and Budget post the emergency time period. Read more here.
- On April 3, SAMHSA announced \$110 million in emergency grants to provide treatment for substance use disorders/serious mental illness during the coronavirus pandemic. The grants were available to State governments, the District of Columbia, Territories, and Federally recognized American Indian and Alaska Native Tribes. More details here.
- For additional information, please visit SAMHSA's coronavirus website here: https://www.samhsa.gov/coronavirus

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:19 PM

To: Fleming, Tim

Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 15

Attachments: ESF15_DailyBriefingPoints_20200415_FINAL.pdf

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U.S. DEPARTMENT OF HOMELAND SECURITY

Intergovernmental Affairs

Please see the advisory below from our partners in the Federal Emergency Management Agency (FEMA) regarding an update on the Whole-of-America response to COVID-19.

April 15, 2020

FEMA Advisory

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

Attached you will find today's FEMA Daily Briefing Points for the Whole-of-America response to coronavirus (COVID-19) pandemic. These briefing points include Topline Messages, as well as Supply Chain Task Force; By the Numbers; FEMA and Department of Health and Human Services Response; and Guidance from Federal Agencies.

Topline messaging includes:

- 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 FEMA Project Airbridge.
- 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 has 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.
- 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.
- o Hospital administrators across the country are being asked to provide daily reports on testing, capacity, supplies, utilization, and patient flows to facilitate the ongoing public health response.
- o The seven new ventilator contracts announced by HHS this month will supply 6,190 ventilators for the Strategic National Stockpile by May 8 and 29,510 by June 1.
- HHS and FEMA have expanded the items supplied by the <u>International Reagent Resource (IRR)</u> to help public health labs access diagnostics supplies and reagents for COVID-19 testing free of charge.
 - o Consolidating testing supplies under the IRR simplifies the resource request process for states and territories and alleviates the burden on public health labs of the need to work with separate, individual suppliers for swabs, reagents and other diagnostic testing supplies.
 - The expanded list of diagnostic supplies will include supplies to support the three components needed for COVID-19 testing: sample kits, extraction kits and test kits.

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Also, follow Administrator Pete Gaynor on Twitter <u>@FEMA Pete</u>.

FEMA Mission

To help people before, during and after disasters.

###

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Herron, Robin	
From: Sent: To: Subject: Attachments:	Jeffrey Dickerson Wednesday, April 15, 2020 3:25 PM Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Jeffrey Dickerson; Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas B. Rice; mark.sexton; Marshall, Kris J COL USARMY NG GAARNG (USA); Matthew Hicks; Noggle, Caylee; Tim Dignam FW: Georgia World Congress Center Covid Acceptance Letter Covid Variance GWCC.pdf
Importance:	High
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Team - FYSA, approved variar Jeff	nce for smoke barrier omission is attached.
Jeff Dickerson GA DOD Interagency Coordin Email: Cell:	ator for COVID-19 Response
•	020 1:32 PM
Variance Approval.	
Original Message From: ALaberteaux@oci.ga.g	ov <alaberteaux@oci.ga.gov></alaberteaux@oci.ga.gov>

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Sent: Wednesday, April 15, 2020 1:28 PM

To: jonathan.parker@gema.ga.gov

Cc: Jimmy.H.Luo@usace.army.mil; Shannon, Matthew <MShannon@GWCC.com>

Subject: Georgia World Congress Center Covid Acceptance Letter

Importance: High

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Mr. Parker,

Please see attached acceptance letter regarding the use of Georgia World Congress Center for Covid-19 response. Should you require anything further from this office, please don;t hesitate to contact me.

Regards,

Allen LaBerteaux Engineering & Inspections Georgia Fire Marshal's Office

Jeffrey Dickerson From: Wednesday, April 15, 2020 3:25 PM Sent: To: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Jeffrey Dickerson; Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas B. Rice;mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Matthew Hicks; Noggle, Caylee; Tim Dignam **Subject:** FW: Georgia World Congress Center Covid Acceptance Letter **Attachments:** Covid Variance GWCC.pdf High Importance: CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe. Team - FYSA, approved variance for smoke barrier omission is attached. Jeff Jeff Dickerson GA DOD Interagency Coordinator for COVID-19 Response Email: Cell: ----Original Message-----From: Vincent, Marc [mailto:MVincent@GWCC.com] Sent: Wednesday, April 15, 2020 1:36 PM To: Mark Sexton <mark.sexton@gema.ga.gov>; Jeff Dickerson Subject: FW: Georgia World Congress Center Covid Acceptance Letter Importance: High ----Original Message-----From: Shannon, Matthew < MShannon@GWCC.com> Sent: Wednesday, April 15, 2020 1:32 PM To: Vincent, Marc < MVincent@GWCC.com> Cc: Guerrucci, Paul <PGuerrucci@GWCC.com>; McKinney, Joe <JMcKinney@GWCC.com> Subject: FW: Georgia World Congress Center Covid Acceptance Letter Importance: High Variance Approval. ----Original Message-----From: ALaberteaux@oci.ga.gov < ALaberteaux@oci.ga.gov >

3

Sent: Wednesday, April 15, 2020 1:28 PM

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Allen LaBerteaux Engineering & Inspections Georgia Fire Marshal's Office

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Caraway, lan

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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U.S. DEPARTMENT OF HOMELAND SECURITY

Office of Public Affairs

DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of America's Food Supply

Department to Temporarily Amend Certain H-2A Requirements During COVID-19 National Emergency

WASHINGTON— The Department of Homeland Security, with the support of the U.S. Department of Agriculture (USDA), has announced a temporary final rule to change certain H-2A requirements to help U.S. agricultural employers avoid disruptions in lawful agricultural-related employment, protect the nation's food supply chain, and lessen impacts from the coronavirus (COVID-19) public health emergency. These temporary flexibilities will not weaken or eliminate protections for U.S. workers.

Under this temporary final rule, an H-2A petitioner with a valid temporary labor certification who is concerned that workers will be unable to enter the country due to travel restrictions can start employing certain foreign workers who are currently in H-2A status in the United States immediately after United States Citizenship and Immigration Services (USCIS) receives the H-2A petition, but no earlier than the start date of employment listed on the petition. To take advantage of this time-limited change in regulatory requirements, the H-2A worker seeking to change employers must already be in the United States and in valid H-2A status.

Additionally, USCIS is temporarily amending its regulations to protect the country's food supply chain by allowing H-2A workers to stay beyond the three-year maximum allowable period of stay in the United States. These temporary changes will encourage and facilitate the continued lawful employment of foreign temporary and seasonal agricultural workers during the COVID-19 national emergency. Agricultural employers should utilize this streamlined process if they are concerned with their ability to bring in the temporary workers who were previously authorized to work for the employer in H-2A classification. At no point is it acceptable for employers to hire illegal aliens.

"This Administration has determined that continued agricultural employment, currently threatened by the COVID-19 pandemic, is vital to maintaining and securing the country's critical food supply chain. The temporary changes announced by USCIS provide the needed stability during this unprecedented crisis," said Acting Secretary of Homeland Security Chad F. Wolf.

"USDA welcomes these additional flexibilities provided by the Department of Homeland Security today," said Secretary of Agriculture Sonny Perdue. "Providing flexibility for H-2A employers to utilize H-2A workers that are currently in the United States is critically important as we continue to see travel and border restrictions as a result of COVID-19. USDA continues to work with the Department of Homeland Security, the Department of Labor and the Department of State to minimize disruption and make sure farmers have access to these critical workers necessary to maintain the integrity in our food supply."

The temporary final rule is effective immediately upon publication in the Federal Register. If the new petition is approved, the H-2A worker will be able to stay in the United States for a period of time not to exceed the validity period of the Temporary Labor Certification. DHS will issue a new temporary final rule in the Federal Register to amend the termination date of these new procedures in the event DHS determines that circumstances demonstrate a continued need for the temporary changes to the H-2A regulations.

The H-2A nonimmigrant classification applies to alien workers seeking to perform agricultural labor or services of a temporary or seasonal nature in the United States, usually lasting no longer than one year, for which able, willing, and qualified U.S. workers are not available.

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Fleming, Tim

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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U.S. DEPARTMENT OF HOMELAND SECURITY

Office of Public Affairs

DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of America's Food Supply

Department to Temporarily Amend Certain H-2A Requirements During COVID-19 National Emergency

WASHINGTON— The Department of Homeland Security, with the support of the U.S. Department of Agriculture (USDA), has announced a temporary final rule to change certain H-2A requirements to help U.S. agricultural employers avoid disruptions in lawful agricultural-related employment, protect the nation's food supply chain, and lessen impacts from the coronavirus (COVID-19) public health emergency. These temporary flexibilities will not weaken or eliminate protections for U.S. workers.

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Whitaker, Skylar

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Herron, Robin

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Broce, Candice

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>

Sent: Wednesday, April 15, 2020 3:51 PM

To: Loke, Ryan

Subject: DHS and USDA Move to Protect American Farmers and Ensure Continued Flow of

America's Food Supply

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Jeffrey Dickerson From:

Sent: Wednesday, April 15, 2020 4:00 PM To: 'Shannon, Matthew'; 'Vincent, Marc'

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Jeffrey

Dickerson; Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas B.

Rice;mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Matthew

Hicks; Noggle, Caylee; Tim Dignam

Subject: RE: Georgia World Congress Center Covid Acceptance Letter

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Matt - Excellent! Thank you!

Jeff

Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email: Cell:

From: Shannon, Matthew [mailto:MShannon@GWCC.com]

Sent: Wednesday, April 15, 2020 3:57 PM To: Vincent, Marc < MVincent@GWCC.com>

Subject: Re: Georgia World Congress Center Covid Acceptance Letter

Jeff.

Myself and one of the State Fire Marshal Inspectors will be doing a final inspection Friday morning before the hospital will be accepting patients.



Matthew Shannon

Campus Safety Officer Public Safety

O: (404) 223-4905 | C: (470) 808-1571





f www.gwcca.org

285 Andrew Young International Blvd., N.W. Atlanta, GA 30313

Stay up on the latest news about the No. 1 convention, sports, and entertainment destination in the world - check out the Authority's blog, unConventional.

On Apr 15, 2020, at 3:50 PM, Vincent, Marc < MVincent@gwcc.com > wrote:

Sent from my iPhone

<gwcca-logobig2_4db8d469-239a-4bbf-b6fc-6a138c6774af.gif> <2020_TWP2_19587468d5eb-4958-a4e9-6f77705f0957.png>

Marc Vincent

Emergency Preparedness Manager Public Safety

0: (404) 223-4964 | **C:** (404) 353-6043

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<insta-

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8a0115b8cb1a.gif>

285 Andrew Young International Blvd., N.W. Atlanta, GA 30313

Stay up on the latest news about the No. 1 convention, sports, and entertainment destination in the world – check out the Authority's blog, <u>unConventional</u>.

Begin forwarded message:

From: Jeffrey Dickerson

Date: April 15, 2020 at 15:25:52 EDT

To: "Vincent, Marc" < MVincent@GWCC.com >, Mark Sexton

<mark.sexton@gema.ga.gov>

Subject: RE: Georgia World Congress Center Covid Acceptance Letter

Marc - Thanks! Who is handling the completion of the stipulations in the waiver?

Jeff

Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email:

Cell:

----Original Message----

From: Vincent, Marc [mailto:MVincent@GWCC.com]

Sent: Wednesday, April 15, 2020 1:36 PM

To: Mark Sexton <mark.sexton@gema.ga.gov>; Jeff Dickerson

Subject: FW: Georgia World Congress Center Covid Acceptance Letter

Importance: High

----Original Message----

From: Shannon, Matthew < MShannon@GWCC.com >

Sent: Wednesday, April 15, 2020 1:32 PM
To: Vincent, Marc < <u>MVincent@GWCC.com</u>>

Cc: Guerrucci, Paul < <u>PGuerrucci@GWCC.com</u>>; McKinney, Joe

<<u>JMcKinney@GWCC.com</u>>

Subject: FW: Georgia World Congress Center Covid Acceptance Letter

Importance: High

Variance Approval.

----Original Message----

From: <u>ALaberteaux@oci.ga.gov</u> <<u>ALaberteaux@oci.ga.gov</u>>

Sent: Wednesday, April 15, 2020 1:28 PM

To: jonathan.parker@gema.ga.gov

Cc: Jimmy.H.Luo@usace.army.mil; Shannon, Matthew

<MShannon@GWCC.com>

Subject: Georgia World Congress Center Covid Acceptance Letter

Importance: High

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Dear Mr. Parker,

Please see attached acceptance letter regarding the use of Georgia World Congress Center for Covid-19 response. Should you require anything further from this office, please don;t hesitate to contact me.

Regards,

Allen LaBerteaux Engineering & Inspections Georgia Fire Marshal's Office

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<facebookicon_90331aa7f35b-4e6c-a9d4-58f35e4c7606.gif>

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11c0-413b-80ab- www.gwcca.org

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<insta-

icon_ca1ff275-

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Regards,

Allen LaBerteaux Engineering & Inspections Georgia Fire Marshal's Office

From: Pottebaum, Nic D. EOP/WHO < Nicholas.D.Pottebaum@who.eop.gov>

Sent: Wednesday, April 15, 2020 4:22 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Obenshain, Tucker T. EOP/OVP;Swint, Zachariah D.

EOP/WHO; Campana, Ariella M. EOP/WHO

Subject: RE: 4/13 Follow-Up - Governors Briefing on COVID-19

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Governors and Senior Staff,

As a follow-up to Monday's briefing, I wanted to make you aware of today's announcement from CMS Administrator Seem Verma.

Under President Trump's leadership, CMS announced Medicare will nearly double payment to \$100 for certain lab tests that use high-throughput technologies to rapidly diagnose COVID-19. This is another action the Trump Administration is taking to rapidly expand COVID-19 testing, particularly for those with Medicare, including nursing home residents who are among the most vulnerable to COVID-19. This technology allows for increased testing capacity and faster results, to more effectively combat the spread of the virus. Increasing Medicare payment for these tests that can process a high volume at once will help labs to test in nursing home communities that are vulnerable to the spread of COVID-19. This builds steps CMS already took to allow Medicare to pay labs to perform tests for people at home, including those in nursing homes. These actions taken together expand capacity to test more vulnerable populations, quickly and provide results faster.

<u>Additional Details – CMS Increases Medicare Payment for High-Production Coronavirus Lab</u> Tests

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As a reminder, on March 30, CMS announced that Medicare **will pay new specimen collection fees for COVID-19 testing for homebound and non-hospital inpatients**, to help facilitate the testing of homebound individuals and those unable to travel. As a result of these actions, laboratories will have expanded capability to test more vulnerable populations, like nursing home patients, quickly and provide results faster. Additional information here.

Thanks, Nic

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Nicholas D. Pottebaum Special Assistant to the President and Deputy Director O: 202-456-2132 | C: 202-881-7803 | E: Nicholas.D.Pottebaum@who.eop.gov

Slow the Spread

From: Pottebaum, Nic D. EOP/WHO Sent: Monday, April 13, 2020 9:00 PM

To: Nic Pottebaum (Nicholas.D.Pottebaum@who.eop.gov) < Nicholas.D.Pottebaum@who.eop.gov>

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Governors and Senior Staff,

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The Vice President has asked each governor to ensure their State is reporting key information to the Federal Government to get resources to the right place, at the right time. Friday, the Vice President wrote a letter to governors asking them to ensure their State is reporting broad healthcare capacity and personal protective equipment data to FEMA. Over 45 States are now reporting quality healthcare capacity data on a daily basis. *Please continue to ensure your State is reporting answers to the questions below on a daily basis. Attached you will find the letter from the Vice President.*

• Separately, HHS Secretary Azar sent a <u>letter</u> on hospital utilization and lab data reporting to hospital administrators. States can waive hospitals from reporting directly to the Federal Government if the State takes over the Federal reporting responsibilities.

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Ambassador Birx led a presentation on operationalizing COVID 19 testing for diagnosis and surveillance. The Vice President has asked each governor to develop an integrated public-private testing strategy. Medium- and high-throughput testing platforms are running at only 40% capacity. Please work with your public and private labs to utilize the full capacity of these systems. **Attached you will find the 8-page slide deck from the presentation**. We will provide more details on testing including CMS reimbursement for technical support and collection, along with additional guidance to guide your outreach to your laboratories shortly.

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We thank our nation's governors for taking action to protect patients and healthcare workers in long-term care facilities. You can find more details about Gov. Hogan's (MD) Statewide strike team efforts (here) and Gov. Baker's (MA) nursing home mobilize testing program (here). We know there countless other leading practices from governors and we welcome hearing about your efforts.

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Today, Vice President Mike Pence led a discussion with the chief executives of approximately 50 States, territories, and Washington, DC, and their State emergency managers and health officials to provide an update on the all-of-America approach to respond to and mitigate the effects of COVID-19.

The Vice President, Ambassador Debi Birx, FEMA Administrator Pete Gaynor, CMS Administrator Seema Verma, and Rear Adm. John Polowczyk with the Joint Chiefs of Staff, and all 10 FEMA Regional Administrators urged State, local, and tribal leaders to continue to regularly highlight community mitigation efforts to "Slow the Spread." Participants also discussed the Federal government's historic efforts to support State, local, and tribal leaders including, already approving 55 major disaster declaration requests and approximately 40 Title 32 requests to 100% federally fund State National Guard activities related to COVID-19 response efforts. The Vice President discussed his letter to America's governors on data reporting for healthcare capacity, personal protective equipment, and hospital utilization and lab testing. The importance of the \$150 billion of CARES Act funding for States to effectively respond to COVID-19 was discussed.

Participants discussed CDC guidance on implementing safety practices for critical infrastructure workers, the significant increase in testing capacity and discussed strategies State and local leaders can take to further increase testing capacity through proactive partnerships with the private sector and various laboratories in their State. Multiple States shared examples of best practices they are taking to regarding caring for people in long-term care facilities nursing homes. Administrator Gaynor and Admiral Polowczyk discussed their supply chain support efforts to get critical supplies to the healthcare providers. Administrator Verma discussed expanding telehealth options through Medicaid and the importance of CARES Act funding for hospitals and Americans impacted by COVID-19.

The leadership of governors, mayors, county commissioners, and tribal officials is vital for effective emergency management. Emergency management in America is locally-executed, State-managed, and Federally supported, which allows for innovative solutions to be identified at the local and State level for the majority of issues. Since January 2020, the Trump Administration has held nearly 144 briefings – including 12 governors briefings – with over 66,000 State, local, and tribal leaders in every State and territory in the Nation. Leaders at every level of government and the private sector are working in partnership to bend the curve.

Treasury Eligibility Guidance on CARES Act Funding to State Governments

The U.S. Department of the Treasury released <u>eligibility guidance</u> for CARES Act funding to State, Local, and Tribal Governments. States, Tribes, and eligible local governments are encouraged to provide payment information and required supporting documentation on <u>Treasury's portal</u> no later than April 17. Additional guidance on eligible uses of Fund disbursements by governments will be posted as it becomes available.

Below, you will find additional information and resources mentioned on today's briefing call:

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- Implementing Safety Practices for Critical Infrastructure Workers
- Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk
- Maximizing Testing Resources & Medical Supplies
- Guidance on Telehealth Reimbursement & Coverage Options
- Assistance for Small Businesses & American Families

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Intergovernmental Affairs Office

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Implementing Safety Practices for Critical Infrastructure Workers

CDC has released has released guidance on implementing safety practices for critical infrastructure workers who may have had exposure to a person with suspected or confirmed COVID-19. This is for Federal, State, & local law enforcement; 911 call center employees; Fusion Center employees; hazardous material responders from government and the private sector; janitorial staff and other custodial staff; workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities. To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. More guidance on prescreening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces here.

<u>Medical Supplies "Control Tower" Updates from FEMA & RADM Polowczyk (see graphics at end of the email)</u>

Joint Chiefs of Staff Rear Adm. John Polowczyk's provided an update to governors on rapidly increasing supply and expanding domestic production of medical supplies and equipment.

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Guidance on Telehealth Reimbursement & Coverage Options

The Trump Administration has taken historic steps to expand Americans' access to telehealth, so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility. Keeping vulnerable patients at home whenever possible will help to limit community spread of the virus, and States should examine your own policies to determine if there are undue barriers to maximizing telehealth service delivery for your residents in this time of national emergency. In particular, States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. CMS is available assist you in utilizing all available flexibilities as we fight this pandemic together.

- CMS issued telehealth reimbursement guidance and coverage options in the Medicaid program <u>here</u>.
- Op-Ed from Surgeon General Jerome Adams and CMS Administrator Seema Verma on Telehealth (Telehealth Plays Big Role in Coronavirus Cure).
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- **Swab Flexibilities**: Initially, collecting specimen required using a specific type of swab (nasopharyngeal), however the U.S. Food & Drug Administration (FDA) is now permitting the use of other available swabs including oropharyngeal, mid-turbinate, or anterior nares. We will provide additional swab flexibility guidance soon. If you are having swab supply needs, please make sure labs in your State are utilizing all available swab supplies and techniques. More information here.
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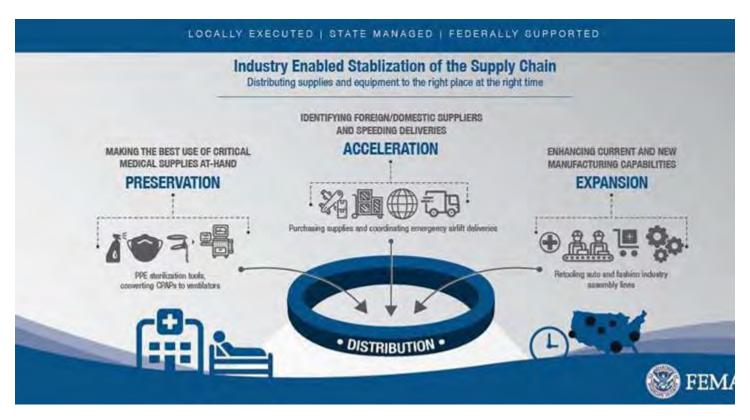
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Thanks, Nic

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Nicholas D. Pottebaum Special Assistant to the President and Deputy Director O: 202-456-2132 | C: 202-881-7803 | E: Nicholas.D.Pottebaum@who.eop.gov

Slow the Spread

From: Pottebaum, Nic D. EOP/WHO Sent: Monday, April 13, 2020 9:00 PM

To: Nic Pottebaum (Nicholas.D.Pottebaum@who.eop.gov) < Nicholas.D.Pottebaum@who.eop.gov>

Cc: Douglas.L.Hoelscher@who.eop.gov; Obenshain, Tucker T. EOP/OVP <Anne.T.Obenshain@ovp.eop.gov>; Swint,

Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>; Campana, Ariella M. EOP/WHO

<Ariella.M.Campana@who.eop.gov>

Subject: 4/13 Follow-Up - Governors Briefing on COVID-19



Governors and Senior Staff,

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The Vice President has asked each governor to ensure their State is reporting key information to the Federal Government to get resources to the right place, at the right time. Friday, the Vice President wrote a letter to governors asking them to ensure their State is reporting broad healthcare capacity and personal protective equipment data to FEMA. Over 45 States are now reporting quality healthcare capacity data on a daily basis. *Please continue to ensure your State is reporting answers to the questions below on a daily basis. Attached you will find the letter from the Vice President.*

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Today, Vice President Mike Pence led a discussion with the chief executives of approximately 50 States, territories, and Washington, DC, and their State emergency managers and health officials to provide an update on the all-of-America approach to respond to and mitigate the effects of COVID-19.

The Vice President, Ambassador Debi Birx, FEMA Administrator Pete Gaynor, CMS Administrator Seema Verma, and Rear Adm. John Polowczyk with the Joint Chiefs of Staff, and all 10 FEMA Regional Administrators urged State, local, and tribal leaders to continue to regularly highlight community mitigation efforts to "Slow the Spread." Participants also discussed the Federal government's historic efforts to support State, local, and tribal leaders including, already approving 55 major disaster declaration requests and approximately 40 Title 32 requests to 100% federally fund State National Guard activities related to COVID-19 response efforts. The Vice President discussed his letter to America's governors on data reporting for healthcare capacity, personal protective equipment, and hospital utilization and lab testing. The importance of the \$150 billion of CARES Act funding for States to effectively respond to COVID-19 was discussed.

Participants discussed CDC guidance on implementing safety practices for critical infrastructure workers, the significant increase in testing capacity and discussed strategies State and local leaders can take to further increase testing capacity through proactive partnerships with the private sector and various laboratories in their State. Multiple States shared examples of best practices they are taking to regarding caring for people in long-term care facilities nursing homes. Administrator Gaynor and Admiral Polowczyk discussed their supply chain support efforts to get critical supplies to the healthcare providers. Administrator Verma discussed expanding telehealth options through Medicaid and the importance of CARES Act funding for hospitals and Americans impacted by COVID-19.

The leadership of governors, mayors, county commissioners, and tribal officials is vital for effective emergency management. Emergency management in America is locally-executed, State-managed, and Federally supported, which allows for innovative solutions to be identified at the local and State level for the majority of issues. Since January 2020, the Trump Administration has held nearly 144 briefings – including 12 governors briefings – with over 66,000 State, local, and tribal leaders in every State and territory in the Nation. Leaders at every level of government and the private sector are working in partnership to bend the curve.

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Intergovernmental Affairs Office

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Office of the Vice President

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CDC has released has released guidance on implementing safety practices for critical infrastructure workers who may have had exposure to a person with suspected or confirmed COVID-19. This is for Federal, State, & local law enforcement; 911 call center employees; Fusion Center employees; hazardous material responders from government and the private sector; janitorial staff and other custodial staff; workers – including contracted vendors – in food and agriculture, critical manufacturing, informational technology, transportation, energy and government facilities. To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue work following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. More guidance on prescreening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces here.

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Joint Chiefs of Staff Rear Adm. John Polowczyk's provided an update to governors on rapidly increasing supply and expanding domestic production of medical supplies and equipment.

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Guidance on Telehealth Reimbursement & Coverage Options

The Trump Administration has taken historic steps to expand Americans' access to telehealth, so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility. Keeping vulnerable patients at home whenever possible will help to limit community spread of the virus, and States should examine your own policies to determine if there are undue barriers to maximizing telehealth service delivery for your residents in this time of national emergency. In particular, States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. CMS is available assist you in utilizing all available flexibilities as we fight this pandemic together.

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From: Pottebaum, Nic D. EOP/WHO < Nicholas.D.Pottebaum@who.eop.gov>

Sent: Wednesday, April 15, 2020 4:22 PM **To:** Pottebaum, Nic D. EOP/WHO

Cc: Hoelscher, Douglas L. EOP/WHO;Obenshain, Tucker T. EOP/OVP;Swint, Zachariah D.

EOP/WHO;Campana, Ariella M. EOP/WHO

Subject: RE: 4/13 Follow-Up - Governors Briefing on COVID-19

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From: Yanick, Brittany M. EOP/WHO <Brittany.M.Yanick@who.eop.gov>

Sent:Wednesday, April 15, 2020 4:58 PMTo:Yanick, Brittany M. EOP/WHOCc:Pottebaum, Nic D. EOP/WHO

Subject: What You Need To Know | President Trump Is Demanding Accountability From The

WHO

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What You Need To Know | President Trump Is Demanding Accountability From The WHO

"I will never hesitate to take any necessary steps to protect the lives, health, and safety of the American people. I will always put the well-being of America first." - President Trump

ACCOUNTABILITY FOR AMERICAN TAXPAYERS: President Donald J. Trump is holding the World Health Organization (WHO) accountable by putting a hold on United States funding.

- President Trump is placing a hold on all funding to the WHO while its mismanagement of the coronavirus pandemic is investigated.
- The American taxpayers provide \$400 million to \$500 million in funding to the WHO each year, but the WHO has failed them.
 - China, on the other hand, provides just around one-tenth of the funding that the United States provides.
- The American people deserve better from the WHO, and no more funding will be provided until its mismanagement, cover-ups, and failures can be investigated.
- President Trump will continue fighting the coronavirus outbreak and will redirect global health aid to others directly engaged in the fight.

INVESTIGATING THE WHO'S FAILED RESPONSE: The WHO's response to the coronavirus outbreak has been filled with one misstep and cover-up after another.

- Despite the fact that China provides just a small fraction of the funding that the United States does, the WHO has shown a dangerous bias towards the Chinese government.
- The WHO repeatedly parroted the Chinese government's claims that the coronavirus was not spreading between humans, despite warnings by doctors and health officials that it was.
 - o Taiwan contacted the WHO on December 31 after seeing reports of human-to-human transmission of the coronavirus, but the WHO kept it from the public.
 - The WHO praised the Chinese government's response throughout January and claimed there was no human-to-human transmission, despite the fact that doctors in Wuhan were warning there was.

- The WHO decided on January 22 that the coronavirus did not pose a Public Health Emergency of International Concern, all while praising China's response.
- The WHO put political correctness over life-saving measures by opposing travel restrictions.
 - The WHO made the disastrous decision to oppose travel restrictions from China and other countries – despite applauding travel restrictions within China itself – leading to further spread of the virus internationally.

STRUCTURAL ISSUES AND NECESSARY REFORMS: The WHO has longstanding structural issues that must be addressed before the organization can be trusted again.

- The WHO has shown it was not prepared to prevent, detect, and respond to a severe infectious disease crisis like this.
- The WHO lacks the structure to ensure accurate information and transparent data sharing from members, which makes it vulnerable to misinformation and political influence.
- The United States seeks to refocus the WHO on fulfilling its core missions of preparedness, response, and stakeholder coordination.
- The United States is also calling for reforms to promote transparency and data sharing, hold member states accountable for abiding by the International Health Regulations, increase access to medicines, and counter China's outsized influence on the organization.

###

From: Jeffrey Dickerson

Sent: Wednesday, April 15, 2020 6:23 PM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas

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USARMY NG GAARNG (USA);Irice@ldxsolutions.com;Darryl Graham;Matthew

Hicks; Jeffrey Dickerson

Subject: Interagency COVID-19 Response Planning Team Update, 151800APR20 **Attachments:** GWCC ACF-Atlanta and Alt Med Facility Progress Update_151800APR20.pptx

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Vr,
Jeff

Jeff Dickerson
GA DOD Interagency Coordinator for COVID-19 Response
Email:
Cell:

<GWCC ACF-Atlanta and Alt Med Facility Progress Update_151800APR20.pptx>

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Sent:	Wednesday, April 15, 2020 6:40 PM
To:	Jeffrey Dickerson
Cc:	Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood, Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; Lucas Rice; mark.sexton; Marshall, Kris J COL USARMY NG GAARNG (USA); Noggle, Caylee; Tim Dignam; Wilson, Richard D BG USARMY NG GAARNG (USA); Simmons, Randall V Jr BG USARMY NG GAARNG (USA); Irice@ldxsolutions.com; Darryl Graham; Matthew Hicks
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Supplies, Security, Foo	od Service, Landry, back up power and other key wrap around.
All of this and more is	likely already in your plan.
Thanks,	
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Importance: High

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Caylee/Ryan – we'll certainly defer to and lean on your experience for input.

Lucas – we'll need your input from your coordination with PAE and AMI.

We'll provide MG Carden with something similar to this:

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VP – Ken Dowd and/or Project Manager – Nick Visconti)

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GA DOD Interagency Cool	dinator for COV	ID-19 Response	
Email			
Cell:			

<GWCC ACF-Atlanta and Alt Med Facility Progress Update_151800APR20.pptx>

From: Jeffrey Dickerson

Sent: Wednesday, April 15, 2020 6:45 PM

To: 'Carden, Thomas M Jr MG USARMY NG GAARNG (USA)'

Cc: Berry, Frank; 'Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA)'; Hood,

Joseph; 'Lairet, Julio R Col USAF 116 ACW (USA)'; Loke, Ryan; 'Lucas

Rice';mark.sexton;'Marshall, Kris J COL USARMY NG GAARNG (USA)';Noggle, Caylee;'Tim Dignam'; 'Wilson, Richard D BG USARMY NG GAARNG (USA)'; 'Simmons, Randall V Jr BG USARMY NG GAARNG (USA)'; Irice@Idxsolutions.com; 'Darryl Graham'; 'Matthew Hicks'

Subject: RE: [Non-DoD Source] Interagency COVID-19 Response Planning Team Update,

151800APR20

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<thomas.m.carden.mil@mail.mil>

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Vr,
Jeff

Jeff Dickerson
GA DOD Interagency Coordinator for COVID-19 Response
Email:

> Cell:

<GWCC ACF-Atlanta and Alt Med Facility Progress Update_151800APR20.pptx>

CLASSIFICATION: UNCLASSIFIED

From: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)

<thomas.m.carden.mil@mail.mil>

Sent: Wednesday, April 15, 2020 6:49 PM

To: 'Jeffrey Dickerson'

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Loke, Ryan; 'Lucas

Rice';mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Noggle, Caylee;'Tim Dignam';Wilson, Richard D BG USARMY NG GAARNG (USA);Simmons, Randall V Jr BG USARMY NG GAARNG (USA);Irice@ldxsolutions.com;'Darryl Graham';'Matthew Hicks'

Subject: RE: [Non-DoD Source] Interagency COVID-19 Response Planning Team Update,

151800APR20 (UNCLASSIFIED)

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Thanks Jeff

From: Jeffrey Dickerson

Sent: Wednesday, April 15, 2020 6:45 PM

To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA) <thomas.m.carden.mil@mail.mil>

Cc: 'Berry, Frank' <frank.berry@dch.ga.gov>; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA) <emmanuel.haldopoulos.mil@mail.mil>; 'Joseph Hood' <joseph.hood@dch.ga.gov>; Lairet, Julio R Col USAF 116 ACW (USA) <julio.r.lairet.mil@mail.mil>; 'Loke, Ryan' <ryan.loke@georgia.gov>; 'Lucas Rice' <lrice@ldxsolutions.com>; 'Mark Sexton' <mark.sexton@gema.ga.gov>; Marshall, Kris J COL USARMY NG GAARNG (USA) <kris.j.marshall2.mil@mail.mil>; 'Noggle, Caylee' <caylee.noggle@georgia.gov>; 'Tim Dignam' <tdignam@cdc.gov>; Wilson, Richard D BG USARMY NG GAARNG (USA) <richard.d.wilson.mil@mail.mil>; Simmons, Randall V Jr BG USARMY NG GAARNG (USA) <randall.v.simmons.mil@mail.mil>; Irice@ldxsolutions.com; 'Darryl Graham' <dgraham@gwcc.com>; 'Matthew Hicks' <mhicks@gmh.edu>

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Sir – roger. It is. COL Rice worked with PAE on it this afternoon. Here's a tentative timeline for the visit. The Team is working on and refining it.

1:30: GOV arrives GWCC ACF-ATL; received by on-site Gov's Ofc Staff & TAG

1:30-1:40: Gov's Ofc Staff/TAG brief and overview of GWCC ACF-ATL and introduce him to PAE/AMI Leadership (Senior VP – Ken Dowd and/or Project Manager – Nick Visconti)

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Jeff Dickerson	
GA DOD Interagency Coordinator for COVID-19 Response	
Email:	>
Cell:	

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Sent: Wednesday, April 15, 2020 6:40 PM

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Roger .. Need that as early as possible. I am sure his PAO has a plan... we just need to offer an option .. I am sure he will want to go straight to the area and view the progress. If someone could give him an overview on the "floor" and walk him from patient arrival through admission etc.. also show him the hot/cold zone control.

Supplies, Security, Food Service, Landry, back up power and other key wrap around.

All of this and more is likely already in your plan.

Thanks,

TMC

Sent from my iPhone

On Apr 15, 2020, at 6:31 PM, Jeffrey Dickerson > wrote:

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Sir – We've done some initial legwork and can have a detailed VIP Visit Concept prior to your 1000 call in the morning – we'll strive for sooner.

Vr,

Jeff

Jeff Dickerson

Email: > Cell:

From: Carden, Thomas M Jr MG USARMY NG GAARNG (USA) [Caution-Caution-

mailto:thomas.m.carden.mil@mail.mil] **Sent:** Wednesday, April 15, 2020 6:28 PM

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Email:

Cell:

<GWCC ACF-Atlanta and Alt Med Facility Progress Update_151800APR20.pptx>

CLASSIFICATION: UNCLASSIFIED

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Sent: Wednesday, April 15, 2020 6:53 PM

To: Jeffrey Dickerson; Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA

CRTC (USA);Hood, Joseph;Lairet, Julio R Col USAF 116 ACW (USA);Lucas B. Rice;mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Matthew

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<emmanuel.haldopoulos.mil@mail.mil>; Jeffrey Dickerson

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Sent: Wednesday, April 15, 2020 7:05 PM

To: Loke, Ryan

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Lucas B. Rice; mark.sexton; Marshall, Kris J

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Vr,
Jeff

Jeff Dickerson
GA DOD Interagency Coordinator for COVID-19 Response
Email:
Cell:

<GWCC ACF-Atlanta and Alt Med Facility Progress Update 151800APR20.pptx>

From: Loke, Ryan

Sent: Wednesday, April 15, 2020 7:21 PM

To: Jeffrey Dickerson

Cc: Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Hood,

Joseph; Lairet, Julio R Col USAF 116 ACW (USA); Lucas B. Rice; mark.sexton; Marshall, Kris J

COL USARMY NG GAARNG (USA);Matthew Hicks;Noggle, Caylee;Tim Dignam

Subject: Re: [Non-DoD Source] Interagency COVID-19 Response Planning Team Update,

151800APR20

John Haupert from Grady will be joining the VIP entourage as well.

From: Jeffrey Dickerson

Sent: Wednesday, April 15, 2020 7:04 PM **To:** Loke, Ryan <ryan.loke@georgia.gov>

Cc: Berry, Frank <frank.berry@dch.ga.gov>; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA) <emmanuel.haldopoulos.mil@mail.mil>; Hood, Joseph <joseph.hood@dch.ga.gov>; Lairet, Julio R Col USAF 116 ACW (USA) <julio.r.lairet.mil@mail.mil>; Lucas B. Rice <lrice@ldxsolutions.com>; mark.sexton <mark.sexton@gema.ga.gov>; Marshall, Kris J COL USARMY NG GAARNG (USA) <kris.j.marshall2.mil@mail.mil>; Matthew Hicks <mhicks@gmh.edu>; Noggle, Caylee <caylee.noggle@georgia.gov>; Tim Dignam <tdignam@cdc.gov>

Subject: Re: [Non-DoD Source] Interagency COVID-19 Response Planning Team Update, 151800APR20

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Thanks Ryan! I'll wicker that in. Jeff

Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

On Apr 15, 2020, at 6:53 PM, Loke, Ryan <ryan.loke@georgia.gov> wrote:

For background purposes here -

Media will arrive by 1315 (there are 6 reporters coming) and I will greet them and provide them PPE on arrival at the entrance off of Andrew Young Intl. Will escort them down to ACF floor and stage by Patient Entrance station. Gov will arrive at 1330 (expect them to be early) at the entrance bay for patient entrance.

Gov Staff would like everyone who is not GADOD who will be touring with him to have a mask on if available.

Will provide any additional details before walk-through tomorrow.

From: Jeffrey Dickerson

Sent: Wednesday, April 15, 2020 6:43 PM

Subject: FW: [Non-DoD Source] Interagency COVID-19 Response Planning Team Update, 151800APR20

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Team - Please see MG Carden's comments - aka guidance - below.

Please provide some info regarding details of how we'll receive the GOV, where he'll go first, sequence, timeline, briefers, key points of interest, etc.

Caylee/Ryan – we'll certainly defer to and lean on your experience for input.

Lucas - we'll need your input from your coordination with PAE and AMI.

We'll provide MG Carden with something similar to this:

1:30: GOV arrives GWCC ACF-ATL; received by on-site Gov's Ofc Staff & TAG

1:30-1:40: Gov's Ofc Staff/TAG brief and overview of GWCC ACF-ATL and introduce him to PAE/AMI

Leadership (Senior VP - Ken Dowd and/or Project Manager - Nick Visconti)

1:40-1:50: PAE/AMI Leadership provides project overview/status update to GOV

1:50-2:10: PAE/AMO Leadership and TAG/Gov's Ofc Staff conduct tour of the GWCC ACF-Atlanta site.

2:10-2:20: Media interviews/photo ops

2:20-2:30: Gov provides parting comments/guidance

2:30: Gov departs GWCC ACF-Atlanta

Please feel free to add/delete, etc.

Thanks, Jeff

Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email

Cell:

From: Carden, Thomas M Jr MG USARMY NG GAARNG (USA) [mailto:thomas.m.carden.mil@mail.mil]

Sent: Wednesday, April 15, 2020 6:28 PM

To: Jeffrey Dickerson

Cc: Berry, Frank <frank.berry@dch.ga.gov>; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA) <emmanuel.haldopoulos.mil@mail.mil>; Joseph Hood <joseph.hood@dch.ga.gov>; Lairet, Julio R Col USAF 116 ACW (USA) <julio.r.lairet.mil@mail.mil>; Loke, Ryan <ryan.loke@georgia.gov>; Lucas Rice <lrice@ldxsolutions.com>; Mark Sexton <mark.sexton@gema.ga.gov>; Marshall, Kris J COL USARMY NG GAARNG (USA) <kris.j.marshall2.mil@mail.mil>; Noggle, Caylee <caylee.noggle@georgia.gov>; Tim

Dignam <tdignam@cdc.gov>; Wilson, Richard D BG USARMY NG GAARNG (USA) <richard.d.wilson.mil@mail.mil>; Simmons, Randall V Jr BG USARMY NG GAARNG (USA) <randall.v.simmons.mil@mail.mil>; Irice@ldxsolutions.com; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>

Subject: Re: [Non-DoD Source] Interagency COVID-19 Response Planning Team Update, 151800APR20

Thanks .. do you have the flow of events for the visit tomorrow?

Sent from my iPhone

On Apr 15, 2020, at 6:24 PM, Jeffrey Dickerson	wrote
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All active links contained in this email were disabled. Please verify the identity of the sender, and confirm the authenticity of all links contained within the message prior to copying and pasting the address to a Web browser.

Sir – Today's update is outlined below, along with attached slides depicting progress status for GWCC ACF-Atlanta and Alternate Medical Facilities at Rome, Macon, Albany, and Gainesville.

- 1. GWCC ACF-Atlanta: Great progress again today, with construction completed for both patient units and bathrooms. Services contracts walked the site today in preparation for turn-on in next the 24-28 hours. Medical personnel orientation and onsite training is scheduled for Friday, as well as a final walk-thru for decontamination plan, and Grady Hospital will conduct a dry-run/rehearsal with AMI/PAE for the admission process on Friday afternoon or Saturday morning. The buildup of the individual rooms is complete; electrical connectivity is established; showers and toilets installation are complete; beds are inside the units; the remainder of durable medical equipment is due in tomorrow; and 5 days' supply of PPE is on site. Clinical staff started arriving yesterday with 60 % expected to be on site by the end of today, with the remainder scheduled to arrive tomorrow. On track for initial operational capability on Saturday afternoon and fully operational on Sunday morning. We received a waiver for the omission of smoke barriers from the State Insurance Commissioner's office. Inspectors will inspect the facility on Friday, 17APR20. We refined the MOUs/interagency agreements/funding processes between DCH, GEMA, and GWCC. We along with PAE and AMI Teams are planning/prepared for the Governor's site visit at 1330 on Thursday, 16APR20.
- 2. Additional Hospital Staffing: We conducted a regional staffing capabilities call with Region B hospitals today, and they have no current/expected staffing shortfalls. We will continue with regional staffing capabilities calls tomorrow, focused on Region F (central Ga) to assess their staffing shortfalls and identify hospitals that need additional assistance. We are also assessing staffing shortfalls at Appling Healthcare in Appling County and Pine Hill Nursing Home in Dooly County. We're deploying additional staffing augmentation to Crisp Regional and Memorial Hospital in Bainbridge.
- 3. <u>DBHDD:</u> NO CHANGE: 16 additional staffing personnel should arrive at Central State Hospital on Thursday, 16APR20 in order to fill staffing shortages.

4. Additional Augmentation Efforts:

Rome: We conducted a site coordination visit today and made coordination with the Facility leadership and maintenance personnel; the last concrete pillars were poured today. The containers arrive on Saturday with placement complete by Monday morning. Expected FOC 25APR.

Albany: Containers arrived on site and are being placed today. Reports from the site are that things are moving smoothly and coordination among all parties is good. No issues. Expected FOC 28APR.

Macon: No issues with the construction of the containers. On site coordination improved with input from Governors' staff, and site work has been initiated. Administrative staff there are very concerned with MOU status, and we will be working on those details over the next 2 days. No constraints for the physical construction and preparation of the units. Expected FOC 5MAY.

Gainesville: We conducted an initial coordination call today – there are no issues with the construction of the containers and no issues regarding the site and preparation. NE GA Medical initially said they would cover the coordination and expense of the utilities tie in; however, they now say that they do not plan on covering that expense. We will roll that site preparation into the MODs contract, similar to Rome. Their administrative staff are interested in more details regarding staffing personnel and medical administration issues, as well as the details of the durable medical equipment to support the 20 rooms. No constraints for the physical construction and preparation of the units. Expected FOC 5MAY.

<u>OTHER:</u> DCH is now the lead for daily reporting on long term care facilities, utilizing the joint database created by GA DOD and DCH/HSRD.

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Jeff

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Subject: DATA WORKING GROUP - Daily Team Meeting

Location: Microsoft Teams Meeting

Start: Thu 4/16/2020 9:30 AM **End:** Thu 4/16/2020 10:30 AM

Show Time As: Tentative

Recurrence: (none)

Organizer: Susan Miller

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Dear Data Team... we are moving our dialing Work Group call to 9:30am. The All-hands Daily Briefing at 9:00am will transition directly into this daily Data Team Work Group call.

To summarize our current schedule:

- 9-9:30: All Hands Daily Briefing (same as the meeting info below)
- 9:30-10:30: Data Team Daily Call (meeting info below)
- 2:30-3:30: *Modeling Team Daily Call* (Natalie and I consult our contact info survey (linked in blue below) to create our meeting invitations, so please fill it out if you haven't)

Please decide if this event is the best use of your time, and join when you are able...

For those who have not already done this please <u>add your contact information here</u> – it will take you less than 1 minute and is the main way I know folks need to be on this team

WORKING GROUP MEETING: Covid-19 DATA TEAM (not all hands, just Data Team)

AGENDA EVOLVING

Current Holdings

• Review Draft spreadsheet for missing datasets

Expanded Data Requirements

- Are we missing any MISSION CRITICAL data? (mission critical, in support of Governors Task Force)
- Obstacles?

Additional Needs

- What support would help us? (e.g. automations, manipulations, spatial data)
- Do we need anything from the Modeling or Data Visualization Teams?

Updates

- Tasks / Owners
- Collaboration Space
 - o MS Teams
 - o Data Hub

Join Microsoft Teams Meeting

United States, Atlanta (Toll)

Conference ID:

Local numbers | Reset PIN | Learn more about Teams | Meeting options

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>

Sent: Wednesday, April 15, 2020 8:19 PM **To:** Swint, Zachariah D. EOP/WHO

Cc: Pottebaum, Nic D. EOP/WHO;Campana, Ariella M. EOP/WHO

Subject: Mental Health and COVID-19 - Resources and Guidance for State and Local Leaders

Attachments: ONDCP COVID Fact Sheet.pdf

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



State and Local Leaders,

President Donald J. Trump is committed to providing Americans with the unprecedented mental health resources they need during this challenging time. On Thursday, April 9, President. Trump, Vice President Mike Pence, First Lady Melania Trump, and Second Lady Karen Pence spoke by telephone with hundreds of American mental health professionals, leaders, and advocates to discuss the effects COVID-19 is having on the American people. This COVID-19 call was the first to bring these four influential leaders together on one issue. The President recognized that a great number of Americans are enduring hardships – including loneliness from social distancing, despair from being out of work, anxiety from the danger of the virus, and grief from the loss of a loved one. President Trump thanked the doctors, counselors, and many other mental health professionals for providing vital mental health services during this time through tele-health.



1

The White House and Administration are committed to providing Americans with vital mental health resources and services especially through expanding telehealth services, continuing the Administration's efforts to combat drug demand and the opioid crisis. Below, please find additional information and resources. Attached, also find a helpful Fact Sheet from the White House Office of National Drug Control Policy (ONDCP) outlining efforts and resources to ensure that prevention, treatment, recovery support services, and safe and effective pain management remain available nationwide. We also want to share examples of State and Local leaders addressing mental health needs in their communities and welcome awareness and engagement around your efforts.

Sincerely,

The White House Office of Intergovernmental Affairs

Zach Swint
Office of Intergovernmental Affairs
The White House
C: (202) 881-6717 | E: Zachariah.D.Swint2@who.eop.gov

STATE AND LOCAL COVID-19 MENTAL HEALTH INITIATIVES

Below are examples of State and Local leaders promoting mental health awareness and resources aid the COVID-19 pandemic. We welcome awareness over your own respective initiatives.

Ohio Governor DeWine <u>urged support groups</u> to check in with people with serious mental illness or addiction and highlighted the need to get the suicide hotline sent out to more people.

Rhode Island Governor Gina Raimondo offered resources to those struggling with mental health during this time.

Tennessee Governor Bill Lee <u>addressed</u> the collateral impact on mental health that COVID-19 takes and highlighted the state's crisis hotline while working with the Tennessee Department of Mental Health and Substance Abuse Services to expand telehealth access.

Indiana Governor Eric Holcomb <u>said</u> that mental health crisis calls are increasing and will issue guidance for Hoosiers on the tools available to help them out with mental health issues and will increase staffing at these centers.

Minnesota Governor Tim Walz <u>signed</u> an Executive order expanding mental health counseling options for Minnesotans. Specifically, the Executive Order authorized out-of-state mental health providers to treat Minnesota patients via telehealth services

Illinois Governor J.B. Pritzker <u>announced</u> the launch of a new Remote Patient Monitoring Program and mental health support line. Call4Calm, operated by the Illinois Department of Human Services' Mental Health Division, is a free-of-charge emotional support text line for Illinois residents experiencing stress and mental health issues related to COVID-19.

The Michigan Department of Health and Human Services <u>launched</u> a warmline to help Michiganders with persistent mental health issues amid the COVID-19 pandemic. The peer-operated warmline is intended to act as a resource for people experiencing depression, anxiety, or other mental illnesses.

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The Los Angeles County Department of Mental Health (DMH), the largest county mental health department in the United States, has scaled resources and provided coronavirus-specific guidance for individuals during the pandemic. More here.

In **Coconino County**, **Arizona**, the Emergency Operation Center (EOC) Liaisons <u>distributed</u> Mental Health resource listing (including crisis line) to numerous.

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DuPage County, Illinois <u>established</u> an on-site 12 bed crisis residential program that remains open and available to community members who are having a mental health crisis and not in need of an inpatient level of care as well as implementation of a health screening for anyone in need.

FEDERAL RESOURCES AND GUIDANCE



Resources and Initiatives

- **Telehealth**: Under the President's leadership and at the direction of the White House Task Force, the Trump Administration has taken historic steps to expand Americans' access to telehealth, so that patients, particularly our Medicare beneficiaries, can receive a wider range of services without having to travel to a healthcare facility (*read more from Surgeon General Jerome Adams and CMS Administrator Seema Verma* **Telehealth Plays Big Role in Coronavirus Cure**). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad authority to deliver and reimburse Medicaid covered services through telehealth modalities, and additional federal approval is often not required to do so. The Centers for Medicare & Medicaid Services (CMS) has issued guidance on telehealth reimbursement and coverage options in the Medicaid program here.
- Supplemental Grant Funding: On April 3, SAMHSA announced it will fund \$110 million in emergency grants to provide treatment for substance use disorders/serious mental illness during the coronavirus pandemic. The grants are available to State governments, the District of Columbia, Territories, and Federally recognized American Indian and Alaska Native Tribes. As the Trump administration responds to meet the needs of Americans affected by the coronavirus pandemic, the Substance Abuse and Mental Health Services Administration (SAMHSA) is announcing emergency grants to help Americans dealing with substance use disorders and/or serious mental illness. The agency has announced it is accepting applications for fiscal year (FY) 2020 Emergency Grants to Address Mental and Substance Use Disorders During COVID-19 (Short Title: Emergency COVID-19). The grants total \$110 million and will provide up to \$2 million for successful state applicants and up to \$500,000 for successful territory and tribal applicants for 16 months. More details here.
- **Move Your Way Campaign**: *Move Your Way* is a physical activity campaign from the U.S. Department of Health and Human Services to promote the recommendations from the Physical Activity Guidelines for Americans. The Move Your Way tools, videos, and fact sheets on this page have tips that make it easier to get a little more active. And small changes can add up to big health benefits! Learn more here.
- Office of National Drug Control Policy COVID-19 Fact Sheet: During the COVID-19 crisis, the White House Office of National Drug Control Policy (ONDCP) is leading efforts to ensure that prevention, treatment, recovery support services, and safe and effective pain management remain available nationwide. The Trump Administration is mobilizing the Federal Government to ensure the approximately 20 million Americans who struggle with the disease of addiction can access and continue to receive treatment and recovery support services, while keeping themselves and healthcare professionals safe from unnecessary exposure to COVID-19. See attached.
- The President's Roadmap to Empower Veterans and End a National Tragedy of Suicide (PREVENTS): On Friday, April 3, Second Lady Karen Pence announced her new role as lead ambassador

for PREVENTS on behalf of the White House Coronavirus Task Force (see Second Lady Karen Pence Taking Lead Role in Suicide Prevention Initiative During Coronavirus Outbreak). PREVENTS focuses on a holistic public health approach to ending Veteran suicide. The Initiative seeks to change the culture surrounding mental health and suicide prevention through enhanced community integration, prioritized research activities, and implementation strategies that emphasize improved overall health and well-being. The goal of PREVENTS is to prevent suicide — among not just Veterans but all Americans. By adopting a holistic public health approach, PREVENTS is acting on the knowledge that suicide prevention is everyone's business, and that by working together, locally and nationally, we can prevent suicide. Learn more here.

Guidance

- Managing & Recognizing Stress: The outbreak of COVID-19 may be stressful for people. Fear and anxiety about a disease can be overwhelming and cause strong emotions in adults and children. Coping with stress will make you, the people you care about, and your community stronger. Sharing the facts about COVID-19 and understanding the actual risk to yourself and people you care about can make an outbreak less stressful. When you share accurate information about COVID-19 you can help make people feel less stressed and allow you to connect with them. Learn more about taking care of your emotional health. Everyone reacts differently to stressful situations. How you respond to the outbreak can depend on your background, the things that make you different from other people, and the community you live in. Substance Abuse and Mental Health Services Administration's (SAMHSA's) Disaster Distress Helpline: 1-800-985-5990 or text TalkWithUs to 66746. (TTY 1-800-846-8517)
- **Guidance for Parents and Caregivers**: Children and teens react, in part, on what they see from the adults around them. When parents and caregivers deal with the COVID-19 calmly and confidently, they can provide the best support for their children. Parents can be more reassuring to others around them, especially children, if they are better prepared. There are many things you can do to support your child: Take time to talk with your child or teen about the COVID-19 outbreak. Answer questions and **share facts** about COVID-19 in a way that your child or teen can understand. Learn more about **helping children cope**.
- **Guidance for Responders and Providers**: Responding to COVID-19 can take an emotional toll on you. There are things you can do to reduce secondary traumatic stress (STS) reactions: Acknowledge that STS can impact anyone helping families after a traumatic event; and learn the symptoms including physical (fatigue, illness) and mental (fear, withdrawal, guilt) Learn more **tips for taking care of yourself** during emergency response.
- **Guidance for Persons Released from Quarantine**: Being separated from others if a healthcare provider thinks you may have been exposed to COVID-19 can be stressful, even if you do not get sick. Everyone feels differently after coming out of quarantine. Some feelings include: Sadness, anger, or frustration because friends or loved ones have unfounded fears of contracting the disease from contact with you, even though you have been determined not to be contagious; and guilt about not being able to perform normal work or parenting duties during quarantine. Children may also feel upset or have other strong emotions if they, or someone they know, has been released from quarantine. **You can help your child cope**.
- **Digital Mental Health Innovating in a Time of High Anxiety**: In this time of <u>increased anxiety</u> <u>and physical distancing</u> due to the <u>coronavirus (COVID-19) pandemic</u>, many people are looking for digital technology solutions to help them manage their mental health. Mental health apps are one of the fastest-growing sectors of the digital marketplace, with more than 10,000 apps available. These apps claim to, among other things, boost your mood, increase your sleep, and even help you manage your addiction. The National Institute of Mental Health takes a look <u>here</u>.
- U.S. Department of Veterans Affairs Resource How To Manage Stress and Anxiety During the COVID-19 Outbreak: Taking care of your well-being, including your mental health, is essential during this time. Everyone reacts differently to stressful situations. Many people may experience stress, fear, anxiety, or feelings of depression. This is normal. There are things that you can do to manage your stress and anxiety. VA has provided resources here/beta/health/.

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Attachments: ONDCP COVID Fact Sheet.pdf

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The White House Office of Intergovernmental Affairs

Zach Swint
Office of Intergovernmental Affairs
The White House
C: (202) 881-6717 | E: Zachariah.D.Swint2@who.eop.gov

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Herron, Robin

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>

Sent: Wednesday, April 15, 2020 8:20 PM **To:** Swint, Zachariah D. EOP/WHO

Cc: Pottebaum, Nic D. EOP/WHO;Campana, Ariella M. EOP/WHO

Subject: Mental Health and COVID-19 - Resources and Guidance for State and Local Leaders

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