

Herron, Robin

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

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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 [Great American Economic Revival Industry Groups](#) 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 [announced \\$10 billion in relief](#) to support continued operations of America's airports and their workers during the coronavirus epidemic.
- Secretary of Education Betsy DeVos yesterday [announced the availability of \\$3 billion](#) 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.
- [Abbott Labs announced](#) 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, [CMS announced](#) 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 ([Click here](#))
- **HHS** - HHS Awards \$90 Million to Ryan White HIV/AIDS Program Recipients for COVID-19 Response ([Click here](#))
- **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 ([Click here](#))
- **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 ([Click here](#))
- **ED** - Secretary DeVos Announces CTE Programs can Donate Unused Personal Protective Equipment, Medical Supplies to Support Coronavirus Response ([Click here](#))
- **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 ([Click here](#))
- **DOE** - DOE Announces Crude Oil Storage Contracts to Help Alleviate U.S. Oil Industry Storage Crunch ([Click here](#))
- **DOJ** - Justice Department and Federal Trade Commission Jointly Issue Statement on COVID-19 and Competition in U.S. Labor Markets ([Click here](#))
- **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 ([Click here](#))
- **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 ([Click here](#))
- **VA** - VA, Facebook and American Red Cross provide Portal video calling devices to Veterans, caregivers and families ([Click here](#))

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

Herron, Robin

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 [FEMA website](#), 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.



FEMA

Herron, Robin

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 [development and performance of diagnostic tests for SARS-CoV-2](#). 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 [emergency use authorizations](#) 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 [COVID-19 Diagnostics FAQ](#) 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 [FAQ on their Emergency Funding Operations](#) 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 [How to Help](#) 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 [Hospital Resource Package on TRACIE](#). 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 [Guidance on Management of COVID-19 in Correctional and Detention Facilities](#). 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 [updated information for higher risk populations](#) 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 [video on mental health](#). Additionally, [Indian Health Service Administrator Admiral Weahkee released a Public Service Announcement](#) 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)

Herron, Robin

From: Jeffrey Dickerson [REDACTED]
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;Laird, 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 Timeline
Attachments: 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 Hauptert, 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 [REDACTED]
Cell: [REDACTED]

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To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)
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Email: [REDACTED]
Cell: [REDACTED]

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From: Jeffrey Dickerson [REDACTED]
Sent: Thursday, April 16, 2020 9:11 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 B. Rice;mark.sexton;Marshall, Kris J COL USARMY NG GAARNG (USA);Matthew Hicks;Noggle, Caylee;Tim Dignam
Subject: CORRECTED Governor's GWCC ACF-Atlanta Site Visit Timeline
Attachments: GWCC ACF-Atlanta Governor's Visit_V2_16APR20.pptx

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Sir/All – Please use this copy. I corrected a typo and added COL Rice to the overview event brief.

Vr,
Jeff

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GA DOD Interagency Coordinator for COVID-19 Response
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Cell: [REDACTED]

From: Jeffrey Dickerson [mailto:[REDACTED]]
Sent: Thursday, April 16, 2020 9:03 AM
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GA DOD Interagency Coordinator for COVID-19 Response
Email: [REDACTED]
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Herron, Robin

From: Jeffrey Dickerson [REDACTED]
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;Laird, 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);lrice@ldxsolutions.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. **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. **DBHDD:** 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.

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.

Vr,
Jeff

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

From: Jeffrey Dickerson [mailto:[REDACTED]]
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 CRTS (USA) <emmanuel.haldopoulos.mil@mail.mil>; Joseph Hood <joseph.hood@dch.ga.gov>; Lairt, Julio R Col USAF 116 ACW (USA) <julio.r.lairt.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) <randall.v.simmons.mil@mail.mil>; 'lrice@ldxsolutions.com' <lrice@ldxsolutions.com>; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>; Jeffrey Dickerson <[REDACTED]>
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. **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.

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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.

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Vr,
Jeff

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

Herron, Robin

From: Jeffrey Dickerson [REDACTED]
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;Laird, 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);lrice@ldxsolutions.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.

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Vr,
Jeff

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

Herron, Robin

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 <ryan.loke@georgia.gov>
Cc: ann@coreresponse.org <ann@coreresponse.org>; Jerome Lebleu <jerome@coreresponse.org>; Matthew O'Connell [REDACTED]; 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 [REDACTED]; 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

Herron, Robin

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:

- Dial-In Number
- Access Code
- Attendee ID

Video-Teleconference Option

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

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: Zachariah.D.Swint2@who.eop.gov

Herron, Robin

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
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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: Zachariah.D.Swint2@who.eop.gov

Herron, Robin

From: Yanick, Brittany M. EOP/WHO <Brittany.M.Yanick@who.eop.gov>
Sent: Thursday, April 16, 2020 12:20 PM
To: Yanick, Brittany M. EOP/WHO
Cc: Pottebaum, Nic D. EOP/WHO
Subject: Democrats' Reckless Political Games Deprive Small Businesses of Needed Relief

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 | 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

Continued from page 1

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.”

- [PELOSI LAST WEEK](#): “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.”

###

Herron, Robin

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

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.

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 [Project Airbridge](#).
- 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 data-driven 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.
 - This guidance is a follow-on to the Administrator's [first letter to emergency managers](#) 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 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 [@FEMA Espanol](#), 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.



Herron, Robin

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

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.

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 16, 2020

FEMA Advisory

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

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Herron, Robin

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
Attachments: ESF15_DailyBriefingPoints_20200416_FINAL.pdf

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April 16, 2020

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Herron, Robin

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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Sent: Thursday, April 16, 2020 1:47 PM
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Sent: Thursday, April 16, 2020 1:47 PM
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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);Laird, 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, 2020
Attachments: 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

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

Herron, Robin

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

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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



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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.

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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
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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: Zachariah.D.Swint2@who.eop.gov

Herron, Robin

From: Jeffrey Dickerson [REDACTED]
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;Laird, 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);lrice@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. **GWCC ACF-Atlanta:** 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. **Additional Hospital Staffing:** 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 be 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: [REDACTED]
Cell: [REDACTED]

Herron, Robin

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

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

Herron, Robin

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

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Also, follow Administrator Pete Gaynor on Twitter [@FEMA_Pete](#).

FEMA Mission

To help people before, during, and after disasters.



Herron, Robin

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

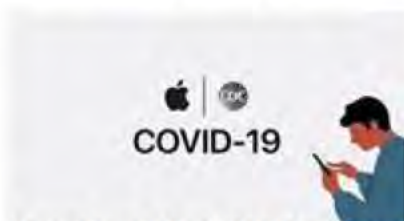
- **Coronavirus Guidelines for America:** On Tuesday, March 31, the White House announced updated [Coronavirus Guidelines for America \(Español\)](#), extending social distancing efforts through April 30. On April 3, the Centers for Disease Control and Prevention (CDC) issued [guidance](#) recommending 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 – [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 [website](#) 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 [Apple COVID-19 Screening Tool](#). Follow the White House on [Twitter](#) and [Facebook](#). Also follow HHS ([Twitter/Facebook](#)) and CDC ([Twitter/Facebook](#)) You can also find informational videos from Coronavirus Task Force members on mitigation, social distancing, etc. on the White House's [YouTube](#) 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 ([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.

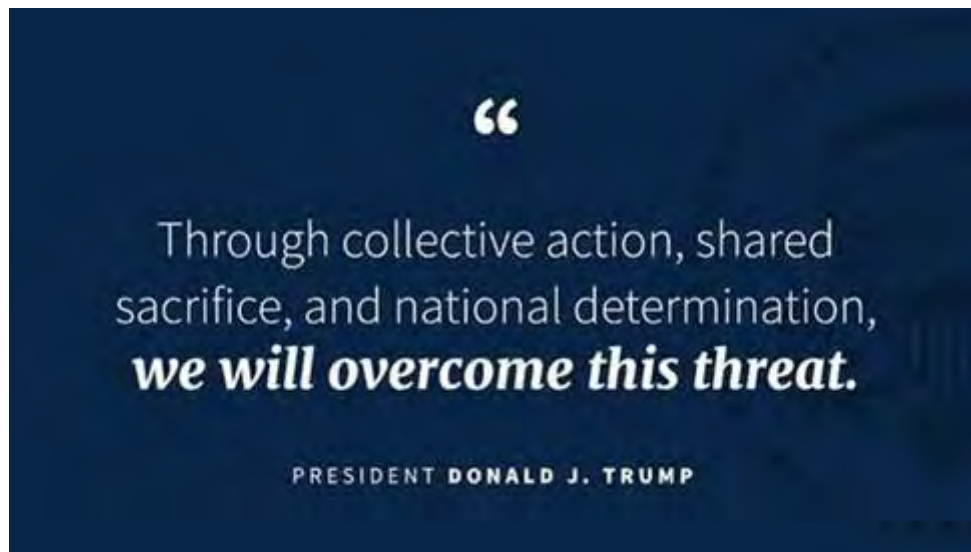
The White House Office of Intergovernmental Affairs

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 [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.
- 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 [CDC IRR](#) 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 [expanded](#) 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 “[Get My Payment](#)” 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 [here](#).

- 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 [eligibility guidance](#) for CARES Act funding to State, Local, and Tribal Governments. Treasury also launched a [distribution web portal](#) for States, Tribes, and [eligible units of local government](#). 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 [here](#). A new lender application form can be found [here](#).
 - 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 e-prescribing, 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 – [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](#).

- 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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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

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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:

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Intergovernmental Affairs Office

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White House Office of Intergovernmental Affairs
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[Slow the Spread](#)

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CDC 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 pre-screening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces [here](#).

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- 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 [eligibility guidance](#) 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 [Treasury's portal](#) 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 Increases Medicare Payment for High-Production Coronavirus Lab 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](#).

Implementing Safety Practices for Critical Infrastructure Workers

CDC 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 pre-screening, 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 [Frequently Asked Questions \(FAQ\)](#) 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 [here](#)).
- **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](https://www.treasury.gov/CARES) and [SBA.gov/PayCheckProtection](https://www.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](#).

Herron, Robin

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 – [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 [website](#) 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 [Apple COVID-19 Screening Tool](#). Follow the White House on [Twitter](#) and [Facebook](#). Also follow HHS ([Twitter/Facebook](#)) and CDC ([Twitter/Facebook](#)) You can also find informational videos from Coronavirus Task Force members on mitigation, social distancing, etc. on the White House's [YouTube](#) 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 ([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.

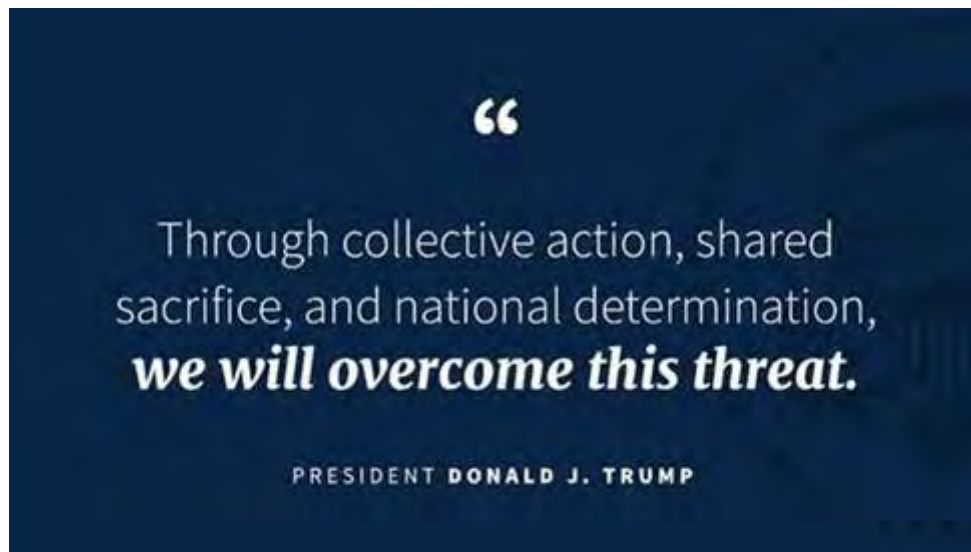
The White House Office of Intergovernmental Affairs

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 [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.
- 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 [CDC IRR](#) 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 [expanded](#) 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 “[Get My Payment](#)” 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 [here](#).

- 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 [eligibility guidance](#) for CARES Act funding to State, Local, and Tribal Governments. Treasury also launched a [distribution web portal](#) for States, Tribes, and [eligible units of local government](#). 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 [here](#). A new lender application form can be found [here](#).
 - 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 e-prescribing, 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 – [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](#).

- 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

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

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Guidelines for Opening Up American Again

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

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- 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*

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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.

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- 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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Doug Hoelscher	202-881-8950	Douglas.L.Hoelscher@who.eop.gov
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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

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White House Office of Intergovernmental Affairs
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[Slow the Spread](#)

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CDC 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 pre-screening, regulator monitoring, wearing a mask, social distancing, and dissenting and cleaning work spaces [here](#).

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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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- **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](https://www.treasury.gov/CARES) and [SBA.gov/PayCheckProtection](https://www.sba.gov/PayCheckProtection).
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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***.

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

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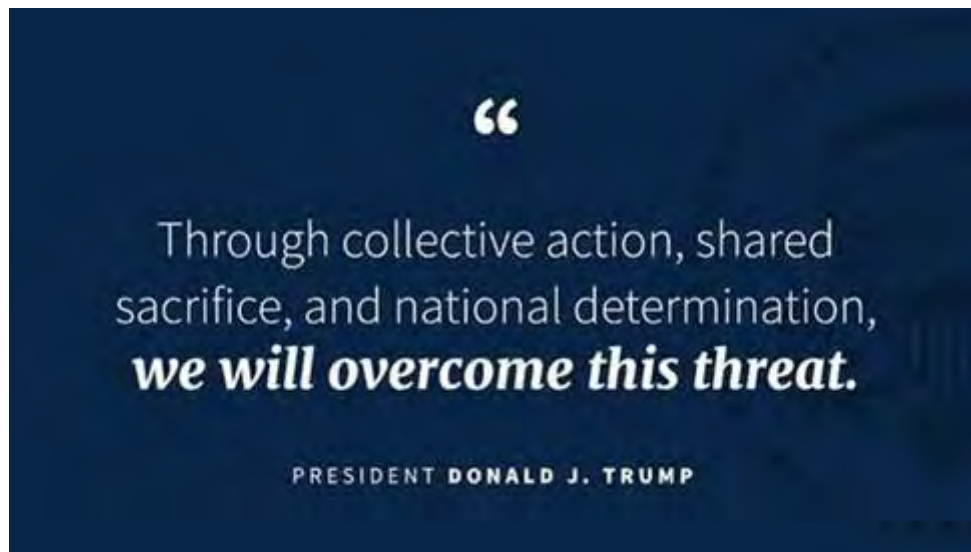
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White House COVID-19 National Briefing Call Readout *April 15, 2020*



Recovery and Response Update

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- 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.
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- **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.
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- 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 [expanded](#) 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 “[Get My Payment](#)” 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 [here](#).

- 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 [eligibility guidance](#) for CARES Act funding to State, Local, and Tribal Governments. Treasury also launched a [distribution web portal](#) for States, Tribes, and [eligible units of local government](#). 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 [here](#). A new lender application form can be found [here](#).
 - 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 e-prescribing, 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 – [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](#).

- 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 9:02 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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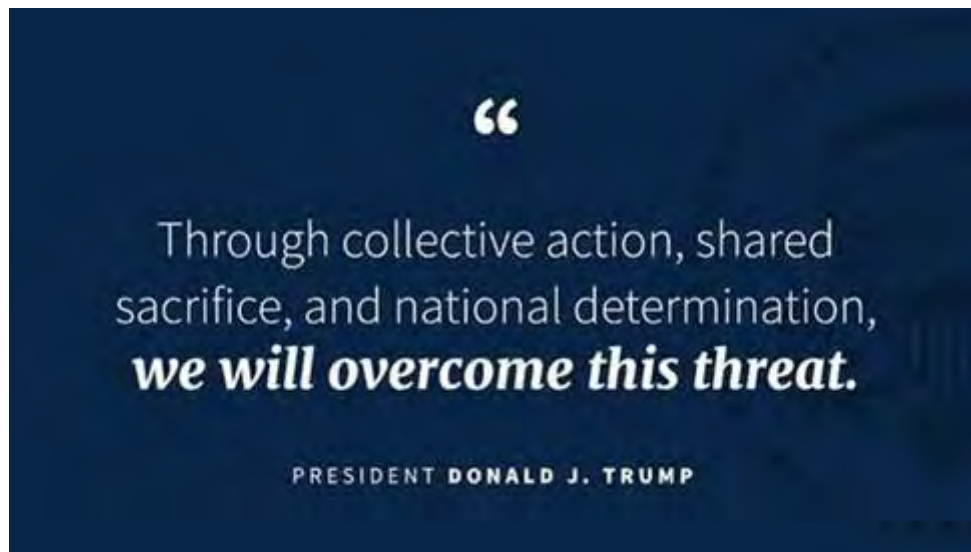
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Herron, Robin

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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: [***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 – [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 [website](#) 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 [Apple COVID-19 Screening Tool](#). Follow the White House on [Twitter](#) and [Facebook](#). Also follow HHS ([Twitter/Facebook](#)) and CDC ([Twitter/Facebook](#)) You can also find informational videos from Coronavirus Task Force members on mitigation, social distancing, etc. on the White House's [YouTube](#) 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 ([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

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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](#)

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 [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.
- 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 [CDC IRR](#) 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.
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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: [***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

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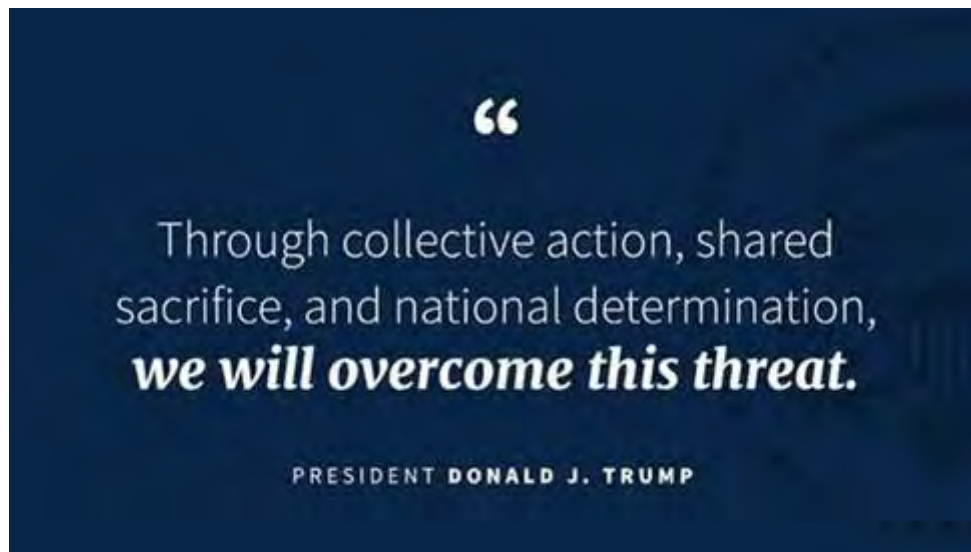
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White House COVID-19 National Briefing Call Readout *April 15, 2020*



Recovery and Response Update

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- 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.
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- **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.
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- 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 [expanded](#) 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 “[Get My Payment](#)” 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 [here](#).

- 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 [eligibility guidance](#) for CARES Act funding to State, Local, and Tribal Governments. Treasury also launched a [distribution web portal](#) for States, Tribes, and [eligible units of local government](#). 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 [here](#). A new lender application form can be found [here](#).
 - 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 e-prescribing, 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 – [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](#).

- 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>
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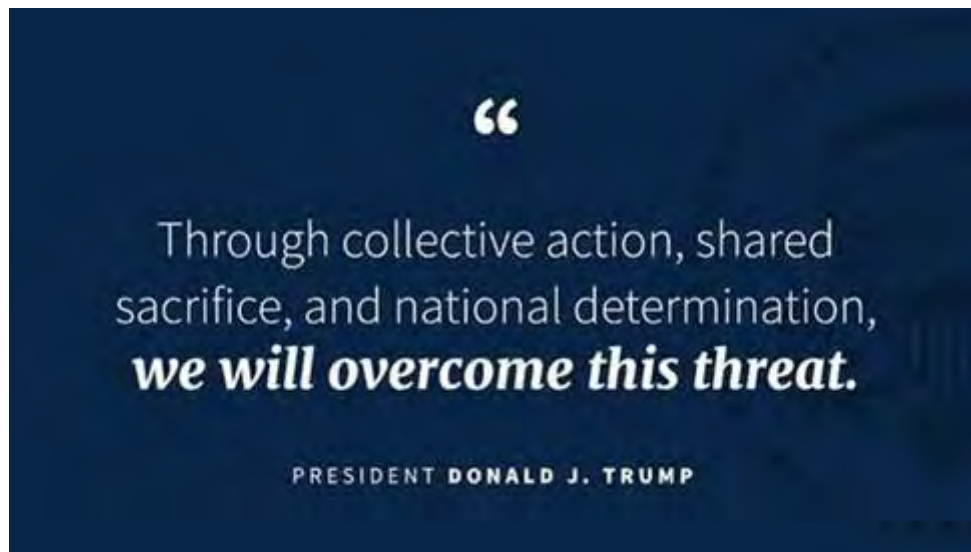
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Jerome Adams and CMS Administrator Seema Verma – [Telehealth Plays Big Role in Coronavirus Cure](#)). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents 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](#).

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- 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: Crozer, William F. EOP/WHO <William.F.Crozer@who.eop.gov>
Sent: Thursday, April 16, 2020 9:28 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 – [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 [website](#) 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 [Apple COVID-19 Screening Tool](#). Follow the White House on [Twitter](#) and [Facebook](#). Also follow HHS ([Twitter/Facebook](#)) and CDC ([Twitter/Facebook](#)) You can also find informational videos from Coronavirus Task Force members on mitigation, social distancing, etc. on the White House's [YouTube](#) 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 ([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.

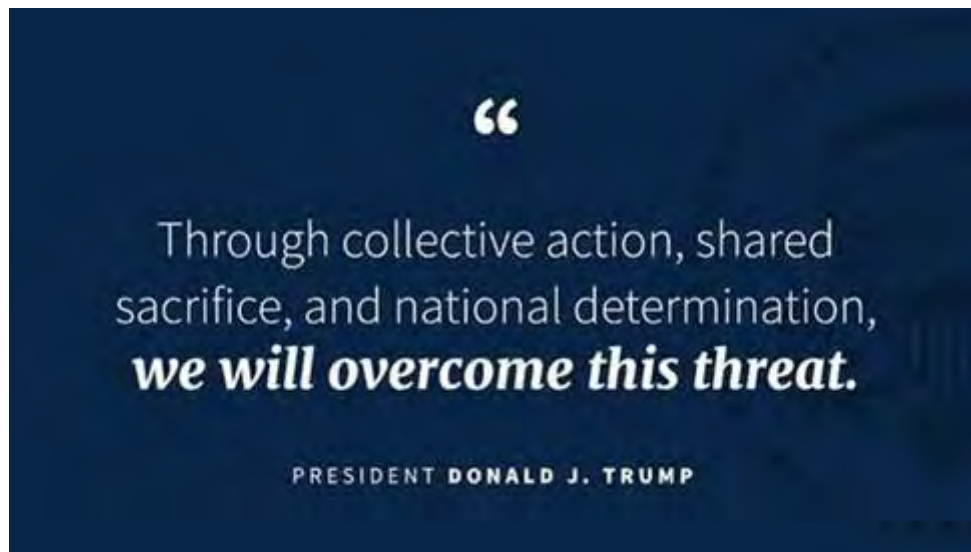
The White House Office of Intergovernmental Affairs

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 [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.
- 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 [CDC IRR](#) 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.
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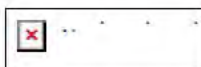
Jerome Adams and CMS Administrator Seema Verma – [Telehealth Plays Big Role in Coronavirus Cure](#)). States are also examining their own policies to determine if there are undue barriers to maximizing telehealth service delivery for their residents in this time of national emergency. States have broad 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](#).

- 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: Yanick, Brittany M. EOP/WHO <Brittany.M.Yanick@who.eop.gov>
Sent: Thursday, April 16, 2020 9:36 PM
To: Yanick, Brittany M. EOP/WHO
Cc: Pottebaum, Nic D. EOP/WHO
Subject: President Donald J. Trump Announces Guidelines for Opening Up America Again

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Office of the Press Secretary

FOR IMMEDIATE RELEASE

April 16, 2020

President Donald J. Trump Announces Guidelines for Opening Up America Again

This morning, President Donald J. Trump convened two bipartisan dialogues with Members of the Opening Up America Again Congressional Group to discuss the next chapter of the COVID-19 recovery. This afternoon the President celebrated the vital role truckers play in keeping America well-stocked. Later, the President discussed his health-based vision for putting our Nation back to work with America's Governors. This evening, President Trump continued his unprecedented level of access to the American people at a press conference where he presented his [guidelines](#) on the three phases of Opening Up America Again. President Trump remains a tireless fighter for the American people and will continue to take decisive actions to keep our Nation healthy and prosperous.

Learn more about the guidelines at [WhiteHouse.gov/OpeningAmerica](https://www.whitehouse.gov/OpeningAmerica).

###

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Herron, Robin

From: Latcham, Alexander S. EOP/WHO <Alexander.S.Latcham@who.eop.gov>
Sent: Thursday, April 16, 2020 10:31 PM
To: Latcham, Alexander S. EOP/WHO
Subject: 04/16 COVID-19 Update

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Good evening-

Today President Trump convened [Members of Congress](#) to serve on the Opening Up America Again Congressional Group.

Most notably, President Trump unveiled [Guidelines for Opening Up America Again](#), a three-phased approach based on the advice of public health experts. These steps will help state and local officials when reopening their economies, getting people back to work, and continuing to protect American lives.

Tomorrow, President Trump hosts a phone call with faith leaders on the great American economic revival at 4:00pm ET. Members of the Coronavirus Task Force hold a press briefing at 5:00pm ET.

Additional Guidance (as of 4.16, 5:45pm):

- **HHS** - HHS Announces Ventilator Contract with GE Under Defense Production Act ([Click here](#))
- **HHS** - OCR Resolves Civil Rights Complaint Against Pennsylvania After it Revises its Pandemic Health Care Triaging Policies to Protect Against Disability Discrimination ([Click here](#))
- **CDC** - Social Media Toolkit ([Click here](#))
- **CMS** - 4/16 News Alert ([Click here](#))
- **FDA** - April 15 Daily Roundup ([Click here](#))
- **FDA** - FDA Encourages Recovered Patients to Donate Plasma for Development of Blood-Related Therapies ([Click here](#))
- **DHS-FEMA** - FEMA Administrator April 15, 2020, letter to Emergency Managers ([Click here](#))
- **SBA/Treasury** - Statement by Secretary Mnuchin and Administrator Carranza on the Paycheck Protection Program and Economic Injury Disaster Loan Program ([Click here](#))
- **SBA/Treasury** - PPP Loans FAQs ([Click here](#))
- **Treasury** - U.S. Treasury Secretary Steven T. Mnuchin's Joint IMFC and Development Committee Statement ([Click here](#))
- **DOE** - COVID-19 Energy Sector Response Efforts and Frequently Asked Questions ([Click here](#))
- **DOL** - U.S. Department of Labor Awards More than \$131 Million in Dislocated Worker Grants in Response to Coronavirus Public Health Emergency ([Click here](#))
- **DOL** - Statement by Secretary of Labor Eugene Scalia on Unemployment Insurance Claims ([Click here](#))
- **DOL** - U.S. Department of Labor Issues Alert to Help Keep Manufacturing Workers Safe During Coronavirus Pandemic ([Click here](#))
- **DOD** - NATO Defense Ministers Discuss Alliance's COVID-19 Response ([Click here](#))
- **DOD** - Air Mobility Command Battle Staff Directs Around-the-Clock COVID Fight Support ([Click here](#))
- **State** - The United States is Continuing to Lead the Humanitarian and Health Assistance Response to COVID-19 ([Click here](#))

Alex Latcham

Office of the Press Secretary

FOR IMMEDIATE RELEASE

April 16, 2020

**PRESIDENT DONALD J. TRUMP IS BEGINNING THE NEXT PHASE IN OUR
FIGHT AGAINST CORONAVIRUS: GUIDELINES FOR OPENING UP AMERICA
AGAIN**

“All of American society is engaged and mobilized in the war against the invisible enemy. While we must remain vigilant, it is clear that our aggressive strategy is working.” – President Donald J. Trump

BEGINNING THE NEXT PHASE IN THE FIGHT: President Donald J. Trump is continuing the fight against the coronavirus by beginning to reopen the country in a smart and safe way.

- The Trump Administration is issuing new guidelines to enable individual States to reopen in phases using a deliberate, data-driven approach.
 - Under these guidelines, States will reopen one step at a time, rather than all at once.
- The guidelines will empower Governors to tailor the phased reopening to address the situation in their State.
 - Governors can begin phased openings at the Statewide or county-by-county level.
- These guidelines were developed by the top medical experts from across the Government and are based on verifiable metrics regarding the situation on the ground.

- The guidelines set clear benchmarks on new cases, testing, and hospital resources for States to meet to proceed toward a phased reopening.
 - Criteria include a downward trajectory in cases presenting coronavirus-like symptoms or a downward trajectory in positive tests.
 - The criteria also included hospitals having the resources to treat all patients without crisis care and a robust testing program for healthcare workers.

CONTINUING TO PROTECT AMERICANS: These new guidelines represent the next phase in President Trump’s data-based approach to protect the health and wellbeing of Americans.

- Thanks to the commitment and sacrifices of Americans across the country, we have seen critical progress in flattening the curve.
 - A long-term nationwide shutdown is not sustainable and would inflict wide-ranging harm on the health and wellbeing of our citizens.
- The President’s data-based approach will protect the health and safety of Americans while laying the groundwork for economic growth.
- These guidelines will allow healthy Americans to safely return to work as conditions allow while protecting seniors and other vulnerable Americans.

LEADING A HISTORIC MOBILIZATION: President Trump has led a historic mobilization to rapidly ramp up testing and the distribution of medical supplies.

- President Trump mobilized the full resources of the Government and the private sector to increase the production and distribution of supplies like masks and ventilators.

- President Trump utilized the Defense Production Act, and the private sector responded, with numerous companies stepping up to shift production to make medical supplies.
 - The Administration launched Project Airbridge to airlift supplies to the United States from around the world.
- The President surged resources and personnel to assist healthcare providers on the frontlines.
 - At the President's direction, the military and FEMA stood up emergency medical sites around the country, and two naval ships were deployed to assist hospitals.
- President Trump has led an unprecedented effort to ramp up testing across the country.
 - The Administration has provided emergency use authority for dozens of new commercial tests.
 - The United States has now conducted more than 3.5 million tests – far more than any other country in the world.
 - The Food and Drug Administration continues to authorize new antibody tests that will be critical as we move toward the next phase.
- Because of President Trump's decisive early action, we have been able to get needed medical supplies to our healthcare workers on the frontlines and avoid deadly shortfalls.
 - No American who has needed a ventilator has gone without one.
 - States like New York, California, Washington, and Oregon have even been able to send extra ventilators to other areas that need them.

###

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Herron, Robin

From: Stevens, Lee (OS/IEA) <Lee.Stevens@hhs.gov>
Sent: Friday, April 17, 2020 7:07 AM
To: Johnston, Darcie (HHS/IEA);Stevens, Lee (OS/IEA)
Subject: HHS COVID-19 Update, 4-16-2020
Attachments: Guidelines for Opening America--Charts from Press Briefing--04-16-20.pdf

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Dear Colleague:

Yesterday the President hosted a call with the nation's governors, discussing a framework for reopening America. Following that, during the evening's press conference, the President and his Task Force unveiled [Guidelines for Opening Up America Again](#), a three-phased approach based on the advice of public health experts.

Other resources from the press conference include a [fact sheet](#) and for your convenience, attached to this email are the slides used in today's briefing outlining the guidelines.

Today's HHS news on COVID-19 follows.

Testing and Treatment

New Resource to Find Public Health and Testing Information: 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.

Donating Blood Plasma: FDA is putting out a [call to donate blood plasma](#) for recovered COVID-19 patients. Convalescent plasma is an antibody-rich product made from blood donated by people who have recovered from the disease caused by the virus. Prior experience with respiratory viruses and limited data that have emerged from China suggest that convalescent plasma has the potential to lessen the severity or shorten the length of illness caused by COVID-19. It is important to evaluate this potential therapy in the context of clinical trials, through expanded access, as well as facilitate emergency access for individual patients, as appropriate. The FDA has [launched a new webpage](#) to guide recovered COVID-19 patients to local blood or plasma collection centers to discuss their eligibility and potentially schedule an appointment to donate. The webpage also provides information for those interested in participating in the expanded access protocol, conducting clinical trials or submitting eIND applications. The American Red Cross has also set up a website for interested donors ([www.redcross.org/plasma4covid](#)[External](#) Link Disclaimer) and the FDA continues to work with others in this area to help encourage additional donations. Additionally, [BARDA and the American Red Cross \(ARC\) are collaborating on systems and procedures to recruit donors who have recovered from COVID-19](#). Through this collaboration the ARC will prepare procedures for the collection of plasma for investigational use in treating patients infected with COVID-19.

Expanding Availability of Systems to Measure Body Temperature: FDA issued an immediately-in-effect guidance that provides a policy to help [expand the availability of telethermographic systems](#) used for body temperature measurements for triage use for the duration of the public health emergency. The advantage of using telethermographic systems for initial temperature assessment for triage use is the potential use in high throughput areas (e.g., airports, businesses, warehouses, factories) and in settings where other temperature assessment products may be in short

supply. FDA believes the policy set forth in this guidance may help address urgent public health concerns raised by shortages of temperature measurement products by helping to clarify the regulatory landscape and expand the availability of telethermographic systems used for initial body temperature measurements for triage use during this public health emergency.

Policy for Compounding Drugs: FDA issued an immediately-in-effect guidance that communicates temporary policy for the [compounding of certain human drug products for hospitalized COVID-19 patients by registered outsourcing facilities](#). Some hospitals are experiencing difficulties accessing drug products used for patients with COVID-19. In addition, due to the large number of persons infected with COVID-19 and subsequent hospitalizations, it is possible that other drug products may become harder to acquire. To help the situation, the FDA will allow specific medicines that are used to aid people on ventilators to be compounded in bulk.

Rapid Diagnostic Test: BARDA is collaborating with Hememix Biotechnologies, Inc. on the [development of a rapid, Bluetooth-connected SARS-CoV-2 diagnostic test](#). The test is being designed to detect SARS-CoV-2 antigen from nasal swab samples and associated antibodies in 60 seconds or less through a finger-prick. Using the nasal swab antigen test, healthcare providers can triage patients infected with SARS-CoV-2 rapidly and make informed treatment decisions. Furthermore, antibody testing of blood to identify serological antibodies indicates which patients have been previously infected, even without showing symptoms, and recovered or those who could be potentially developing an infection but asymptomatic and need care. The added convenience of this test being Bluetooth-connected to cloud-based data management networks may aid public health officials with real-time geographical mapping of outbreaks.

Vaccine Update: BARDA and Sanofi Pasteur, the vaccines global business unit of Sanofi, are [expanding their collaboration to develop a SARS-CoV-2 vaccine](#). The previously announced research for a COVID-19 vaccine using a recombinant DNA platform will accelerate into non-clinical studies and a Phase 1 clinical trial to demonstrate initial safety and efficacy of the vaccine candidate. The technology was developed with BARDA support to make millions of doses of vaccine quickly in an influenza pandemic, and Sanofi uses the platform for its FDA-licensed seasonal influenza recombinant vaccine.

Serology Tests: The FDA issued [two new emergency use authorizations \(EUAs\) for serology tests](#) to detect for the presence of coronavirus antibodies. The EUAs were issued to [Ortho-Clinical Diagnostics, Inc.](#) for its VITROS Immunodiagnostic Products Anti-SARS-CoV-2 Total Reagent Pack and [Chembio Diagnostic Systems, Inc.](#) for its DPP COVID-19 IgM/IgG System.

Contact Tracing App: NIH funded MD2K who launched the new mobile app, called mContain, for download by residents of the greater metropolitan area of Memphis, Tennessee. Once downloaded and installed on a personal mobile device, the [mContain app collects location traces and sends notifications to users if they have had a recent encounter with a COVID-19 positive individual](#). The app reduces the chance of community transmission by providing an early warning to users who may be at the risk of infection from a COVID-19 positive individual. The mContain app provides two primary alert services: it can give users crowding information and provide notification to users who have had contact with a COVID-19-positive individual. The crowding alert feature provides information that should encourage social distancing within the community, indicating concentrations of users. The contact alert is expected to anonymously reduce community transmission of the COVID-19 virus and other infectious diseases. The data necessary to inform the app about positive test results is collected voluntarily.

Warnings Against Fraud: The FDA and Federal Trade Commission (FTC) issued a warning letter to one company for selling fraudulent COVID-19 products, as part of the agency's effort to protect consumers. The seller warned, [Earth Angel Oils](#), offers essential oil products that are unapproved and misbranded drugs for the prevention and treatment of COVID-19. 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.

Diagnostics Update to Date: During the COVID-19 pandemic, the FDA has worked with more than 315 test developers who have said they will be submitting emergency use authorization (EUA) requests to FDA for COVID-19 tests. To date,

36 [emergency use authorizations](#) have been issued for COVID-19 tests. The FDA has been notified that more than 190 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 [COVID-19 Diagnostics FAQ](#) up to date.

Summary of FDA Actions: The FDA has posted a new “[At-a-Glance Summary](#)” that captures the agency’s major activities in the fight against COVID-19. The agency intends to regularly update this resource on efforts related to medical products and equipment, vaccines and therapeutics, food supply and more.

PPE and Supplies

Expanding Ventilator Supply: HHS announced a [new contract for ventilator production](#) rated under the Defense Production Act (DPA), to General Electric (GE), in partnership with Ford. GE's contract, at a total contract price of \$336 million, is for 50,000 ventilators to be produced by July 13. In total, combined with contracts announced this month, HHS has finalized contracts to produce or acquire more than 41,000 ventilators by the end of May, and over 187,000 ventilators by the end of the year.

Reuse of N-95 Respirators: NIH released results of their [study that validates decontamination methods for re-use of N95 respirators](#). N95 respirators can be decontaminated effectively and maintain functional integrity for up to three uses, according to National Institutes of Health scientists. The study was conducted in a controlled laboratory setting and the findings are not yet peer-reviewed but are being shared to assist the public health response to COVID-19. Decontamination methods tested included vaporized hydrogen peroxide (VHP), 70-degree Celsius dry heat, ultraviolet light, and 70% ethanol spray. The authors concluded that VHP was the most effective decontamination method, because no virus could be detected after only a 10-minute treatment. UV and dry heat were acceptable decontamination procedures as long as the methods are applied for at least 60 minutes.

Decontaminating Respirators: The FDA issued an [emergency use authorization](#) (EUA) for the emergency use of Stryker Instrument’s Sterizone VP4 Sterilizer1 N95 Respirator Decontamination Cycle for use in decontaminating compatible N95 and N95-equivalent respirators for single-user reuse by healthcare personnel.

Information for Specific Populations

Crisis Standards of Care and Civil Rights Law: ASPR released a [document on crisis standards of care](#) which is intended to provide information about crisis standards of care in a resource constrained setting, such as the COVID-19 pandemic, to state, local, tribal, and territorial policymakers, healthcare systems leadership, and other decision-makers. Certain jurisdictions may be developing or implementing potentially discriminatory policies that negatively impact vulnerable populations (e.g., older adults and persons with disabilities). These policies are addressing the application of crisis standards of care in resource-constrained settings in the context of the COVID-19 pandemic. [OCR also announced that they have resolved a complaint](#) filed against the Pennsylvania Department of Health (PDH) after PDH revised its Interim Pennsylvania Crisis Standards of Care for Pandemic Guidelines (CSC Guidelines) to ensure that persons will not be discriminated against based on disability if providers in the state were to begin triaging life-saving health care services. This is the second enforcement action OCR has taken since OCR issued a Bulletin reminding covered entities of the continued applicability of civil rights laws during the COVID-19 public health emergency.

Considerations for Pharmacies: CDC updated their guidance on [Considerations for Pharmacies](#). Recommendations include: everyone entering the pharmacy should wear a face covering, regardless of symptoms; cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance; pharmacists and pharmacy technicians should always wear a facemask while they are in the pharmacy for source control; postponement and reschedule delivery of some routine clinical preventive services, such as adult immunizations, which require face to face encounters; and special considerations for clinics that are co-located in pharmacies.

FAQs on FFCRA and CARES Act: CMS posted an [FAQ document](#) with multiple questions on how the relief legislation applies to Medicare and Medicaid programs. Topics include the emergency period, new optional Medicaid group, benefits and cost-sharing for COVID-19 testing and diagnostic services, implications for CHIP, BHP and other questions.

FAQs for Clinicians: CDC has updated their [FAQ document for healthcare professionals](#). Topics include COVID-19 risk, transmission, testing, diagnosis and notification, treatment and management, obstetrical care, drug and investigational therapies, waste management and additional resources.

Guidance on Cleaning and Disinfecting Vehicles and Facilities: CDC released recommendations for [Non-emergency Transport Vehicles that May Have Transported Passengers with Suspected/Confirmed COVID-19](#). People who are known or suspected to have COVID-19 may use non-emergency vehicle services, such as passenger vans, accessible vans, and cars, for transportation to receive essential medical care. The guidance includes recommendations on how to clean different areas of the vehicle and at a minimum, recommends owners to clean and disinfect commonly touched surfaces in the vehicle at the beginning and end of each shift and between transporting passengers who are visibly sick. CDC's guidance on [Cleaning and Disinfecting Your Facility](#) includes everyday steps, steps when someone is sick, and considerations for employers.

CMS Hospital Payment and Inpatient Rehabilitation Facility Waivers: CMS [issued guidance](#) implementing the CARES Act that impacts inpatient prospective payment system hospital payment and provides new flexibilities for inpatient rehabilitation facilities and long-term care hospitals. The Coronavirus Aid, Relief, and Economic Security (CARES) Act increases payment for Inpatient Prospective Payment System (IPPS) and long-term care hospital (LTCH) inpatient hospital care attributable to COVID-19. CMS provided guidance for IPPS hospitals and LTCHs on how to code claims to receive the higher payment. The CARES Act also waives the requirement that Medicare Part A fee-for-service patients treated in inpatient rehabilitation facilities receive at least 15 hours of therapy per week. During the public health emergency period, LTCHs will be paid at higher rates and will not be penalized for accepting patients that would not typically be treated at an LTCH. CMS also updated their [summary of emergency declaration blanket waivers](#) for healthcare providers.

Guidances to Assist with Grief Management: ASPR has posted resource documents to assist with the management of grief. The resources include [Tips for Healthcare Workers Managing Grief](#) and [Recommendations for How to Handle the Death of a Colleague during COVID-19](#),

Resources for Programs Providing Treatment for Opioid Use Disorder: The document lists guidance and resources for [in-patient and out-patient programs and facilities providing Medication Assisted Treatment \(MAT\)](#) for individuals with opioid use disorder (OUD). These resources are available to provide continuity of care and to help mitigate the potential surge of patients seeking inpatient treatment. Resources are continually changing; visit the Substance Abuse and Mental Health Services Administration (SAMHSA) COVID-19 website for the most recent information.

Suspension of 2% Payment Adjustment for Medicare FFS Claims: The Centers for Medicare & Medicaid Services (CMS) recently [issued guidance](#) implementing Section 3709 of the Coronavirus Aid, Relief, and Economic Security Act, which temporarily suspends the 2% payment adjustment currently applied to all Medicare Fee-For-Service (FFS) claims due to sequestration. The guidance notes that the suspension is effective for FFS claims with dates of service from May 1 through December 31, 2020.

CMS Waiver Flexibility Update: CMS has approved 52 COVID- related emergency waivers, 31 state amendments, 11 COVID-related Medicaid Disaster Amendments and one CHIP COVID-related Disaster Amendment in record time. CMS recently approved two additional COVID-related emergency Medicaid waivers, delivering urgent regulatory relief to ensure the Commonwealth of Puerto Rico and the Commonwealth of the Northern Mariana Islands can quickly and effectively care for their most vulnerable citizens. CMS also approved COVID-related Medicaid Disaster Amendments that bring relief to Arkansas and Rhode Island. These approvals help to ensure that states have the tools they need to combat COVID-19 through a wide variety of state plan flexibilities. CMS continues to authorize amendments to ensure emergency flexibilities in programs that care for the elderly and people with disabilities, including most recently for

Colorado, Louisiana and Nevada. These approved flexibilities support President Trump's commitment to a COVID-19 response that is locally executed, state managed, and federally supported.

Not HHS, but relevant for healthcare:

FCC COVID-19 Telehealth Program. The Federal Communications Commission (FCC) just approved an Order to create a \$200 million telehealth program to support healthcare providers responding to the ongoing coronavirus pandemic, using funds appropriated as part of the CARES Act. The COVID-19 Telehealth Program will help healthcare providers purchase telecommunications, broadband connectivity, and devices necessary for providing telehealth services. Applications from healthcare providers will be accepted and processed on a rolling basis as soon as application forms are published in the Federal Register. Details on information that applications must include are on page 14 of the Order.

Stay safe, colleagues. If you have questions, reach out to 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

A Note About This HHS Email: *On Monday, March 23rd, I started sending out a daily email bundling the many COVID-19-related items coming out across the HHS enterprise. It is not exhaustive, but close. Judging by requests to be added to the distribution list and other feedback, this seems to be meeting a real need - and saving many from having to check multiple sites (CDC, FDA, CMS, and our main site, for example). If you started getting this and don't want it, just let me know. I will do this as long as volume and need for information dictates.*

If You Want a Broader View of the Entire Administration's Work on COVID-19: *Email the White House Office of Public Liaison -- which sends out a nightly recap-- and ask to be added to their list. Email: OPL@who.eop.gov.*

Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 8:06 AM
To: Loke, Ryan
Subject: FEMA Advisory: Disaster Financial Management Guide
Attachments: COVID-19-and-Disaster-Financial-Management-Guide.pdf

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U.S. DEPARTMENT OF HOMELAND SECURITY

Intergovernmental Affairs

Please see the advisory below, and attached fact sheet, from our partners in the Federal Emergency Management Agency (FEMA) regarding the release of a Disaster Financial Management Guide to assist communities in their COVID-19 response.

April 17, 2020

FEMA Advisory

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>.

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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.

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FEMA Advisory

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>.

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To help people before, during, and after disasters.

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 8:06 AM
To: Caraway, Ian
Subject: FEMA Advisory: Disaster Financial Management Guide
Attachments: COVID-19-and-Disaster-Financial-Management-Guide.pdf

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U.S. DEPARTMENT OF HOMELAND SECURITY

Intergovernmental Affairs

Please see the advisory below, and attached fact sheet, from our partners in the Federal Emergency Management Agency (FEMA) regarding the release of a Disaster Financial Management Guide to assist communities in their COVID-19 response.

April 17, 2020

FEMA Advisory

Disaster Financial Management Guide

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 8:06 AM
To: Whitaker, Skylar
Subject: FEMA Advisory: Disaster Financial Management Guide
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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 8:06 AM
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Subject: FEMA Advisory: Disaster Financial Management Guide
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Herron, Robin

From: Jeffrey Dickerson [REDACTED]
Sent: Friday, April 17, 2020 9:01 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;Laird, 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);lrice@ldxsolutions.com;Darryl Graham;Matthew Hicks
Subject: Interagency COVID-19 Response Planning Team Update, 170900APR20
Attachments: GWCC ACF-Atlanta Progress Update_170900APR20.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 morning’s update is outlined below. Few changes since last night’s report.

1. **GWCC ACF-Atlanta:** PAE still expects to be IOC at 0800, Saturday, 18APR20 - 24 hours ahead of schedule. Additionally, the N95 masks are expected today, and we expect equipment and PPE to be resolved today. We’ll conduct a walk-thru rehearsal at 1800 today after training is completed.

NO CHANGE

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. **Additional Hospital Staffing:** 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 be 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: [REDACTED]
Cell: [REDACTED]

From: Jeffrey Dickerson [mailto:[REDACTED]]
Sent: Thursday, April 16, 2020 6:27 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 CRTG (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) <randall.v.simmons.mil@mail.mil>; 'lrice@ldxsolutions.com' <lrice@ldxsolutions.com>; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>; Jeffrey Dickerson [REDACTED]
Subject: Interagency COVID-19 Response Planning Team Update, 161800APR20

Vr,
Jeff

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

Herron, Robin

From: Jeffrey Dickerson [REDACTED]
Sent: Friday, April 17, 2020 9:01 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;Laird, 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);lrice@ldxsolutions.com;Darryl Graham;Matthew Hicks
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Jeff

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

From: Jeffrey Dickerson [mailto:[REDACTED]]
Sent: Thursday, April 16, 2020 6:27 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>; Lairt, Julio R Col USAF 116 ACW (USA) <julio.r.lairt.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) <randall.v.simmons.mil@mail.mil>; 'lrice@ldxsolutions.com' <lrice@ldxsolutions.com>; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>; Jeffrey Dickerson [REDACTED]
Subject: Interagency COVID-19 Response Planning Team Update, 161800APR20

Vr,
Jeff

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

Herron, Robin

From: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>
Sent: Friday, April 17, 2020 10:02 AM
To: Loke, Ryan;Noggle, Caylee
Cc: Anna Adams
Subject: FW: hospital surge capacity ask in webeoc

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Hi Ryan & Caylee, Anna & I added some enhancements to the hospital questions you all and Kelly Nadeau developed. Tim Head let us know (email below) he is not able to accept revisions but I wanted to make you aware of our suggested edits. The first two questions have to do with daily ask of surge capacity w/o augmentation that BG Haldopoulos is interested. The third is a suggestion from Anna to enhance the new PPE question. Tim

1. Critical Care Bed Surge Capacity – Please report for today the number of critical care beds that your facility could surge to treat COVID patients without additional resources (in addition to your current SUS beds.)
2. General Inpatient Bed Surge Capacity – Please report for today the number of general inpatient beds that your facility could surge to treat COVID patients without additional resources (in addition to your current SUS beds.)
3. How many days of PPE supplies do you currently have on hand for your facility's immediate use? (Please exclude orders in shipment.)

From: Timothy Head <timothy.head@gema.ga.gov>
Sent: Friday, April 17, 2020 9:53 AM
To: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>; Anna Adams <aadams@gha.org>
Cc: Robbie Bagby <robbie.bagby@gema.ga.gov>; Lamar McEwen <lamar.mcewen@gema.ga.gov>; Woody Radcliffe <Woody.Radcliffe@gema.ga.gov>; Kelly Nadeau <kelly.nadeau@dph.ga.gov>; Daniell, Frank <frank.daniell@dph.ga.gov>
Subject: RE: hospital surge capacity ask in webeoc

Tim, Ms. Adams,




I apologize, but we can't accept design revisions from multiple angles. The last tranche of changes for the board, *going in this morning (4/17)*, is what was hashed out between the Governor's Office (POC: Ryan Loke & Caylee Noggle) and DPH (POC: Kelly Nadeau) over the last couple of days. Any further refinement to the board should be coordinated with the singular "board owner," Kelly Nadeau (Kelly.Nadeau@dph.ga.gov / 678-618-4906). Ms. Nadeau is the individual in ESF-8 that I pointed you to when you were recently in the SOC.

A "design problem" that we encountered early on was that what appeared to be obvious terms and interpretations for us, had different meaning in the hospital world. We need to either interpret their metrics to meet our needs, or ask the questions

we need asked in their language. Additionally, the last tranche of changes have been tailored to meet aspects of the federal ask (that's why they are weird).

Kelly is trying hard to preclude any additional frustration on the part of hospitals in being asked different questions, in different ways, on different days, by different people. Please coordinate BG Haldopoulos' additional requirements directly with Ms. Nadeau (copy-furnished). We look forward assisting Ms. Nadeau with any additional board modification requirements, and ultimately predictability to hospitals.

Thanks,
Tim

Timothy A. Head
Operations Support Analyst (WebEOC Admin)
Georgia Emergency Management and Homeland Security Agency (GEMA/HS)
 timothy.head@gema.ga.gov
 [\(470\) 755-0017](tel:(470)755-0017)
 <https://gema.webeocasp.com>
 WebEOCHelpdesk@gema.ga.gov

From: Anna Adams <aadams@gha.org>
Sent: Friday, April 17, 2020 9:34 AM
To: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>
Cc: Robbie Bagby <robbie.bagby@gema.ga.gov>; Timothy Head <timothy.head@gema.ga.gov>
Subject: Re: hospital surge capacity ask in webeoc

See below for suggested clarifications. There is no pride of authorship here, so feel free to leave out my edits or make your own changes. Thanks!

Critical Care Bed Surge Capacity – Please report for today the number of critical care beds that your facility could surge to treat COVID patients without additional resources (in addition to your current SUS beds.)

General Inpatient Bed Surge Capacity – Please report for today the number of general inpatient beds that your facility could surge to treat COVID patients without additional resources (in addition to your current SUS beds.)

How many days of PPE supplies do you currently have on hand for your facility's immediate use? (Please exclude orders in shipment.)

Anna Adams
Vice President, Government Relations
Georgia Hospital Association
(C) 706-512-2211
(O) 770-249-4530
Aadams@gha.org

On Apr 17, 2020, at 9:23 AM, Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov> wrote:

PS Anna, everyone liked your suggested enhancement of the PPE question – can you also include that revision?

From: Anna Adams <aadams@gha.org>
Sent: Friday, April 17, 2020 8:57 AM
To: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>
Cc: Robbie Bagby <robbie.bagby@gema.ga.gov>; Timothy Head <timothy.head@gema.ga.gov>
Subject: Re: hospital surge capacity ask in webeoc

It sounds like that current WEBEOC number wouldn't capture anything that they could do for surge that they haven't already implemented. Tim, if I'm understanding your goal here correctly, it is to establish how much wiggle room or cushion we have between current bed status and maximum added capacity, right?

Anna Adams
Vice President, Government Relations
Georgia Hospital Association
(C) 706-512-2211
(O) 770-249-4530
Aadams@gha.org

On Apr 17, 2020, at 8:38 AM, Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov> wrote:

Robbie, I'll let Anna weigh in on your question. When she and I spoke we interpreted the existing question as what they are currently using but not what they could surge to completely which was asked once on April 6.

From: Robbie Bagby <robbie.bagby@gema.ga.gov>
Sent: Friday, April 17, 2020 8:29 AM
To: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>; Anna Adams <aadams@gha.org>; Timothy Head <timothy.head@gema.ga.gov>
Subject: RE: hospital surge capacity ask in webeoc

Hey Tim,

I've attached the user guide that Tim Head gave us for the EEI Tracker data. It appears that the surge numbers are baked into the capacity already. The capacity is not static and can fluctuate over time with surge. Is this a separate field that the modelers would need in order to show surge separately? See definitions from this document below.

Critical Care Capacity – patient capacity in your critical care units to **include surge** spaces that you may be using

General Inpatient beds – patient capacity in your medical/surgical units to **include surge** spaces you may be using

Robbie Bagby
GIS Coordinator
GEMA/HS
404-450-4267

From: [Dignam, Timothy A. \(CDC/DDNID/NCEH/OD\)](#)

Sent: Thursday, April 16, 2020 3:43 PM

To: [Robbie Bagby](#); [Anna Adams](#)

Subject: hospital surge capacity ask in webeoc

Anna and Robbie, as discussed today, what do you think of this language? Please edit away!

Critical Care Bed Surge Capacity – Please report for today the number of critical care beds that your facility could surge to treat COVID patients without additional resources

General Inpatient Bed Surge Capacity – Please report for today the number of general inpatient beds that your facility could surge to treat COVID patients without additional resources

Anna, Can you also clarify for Robbie your enhancement of the PPE question? Tim

Herron, Robin

From: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>
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Cc: Anna Adams
Subject: FW: hospital surge capacity ask in webeoc

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.

Hi Ryan & Caylee, Anna & I added some enhancements to the hospital questions you all and Kelly Nadeau developed. Tim Head let us know (email below) he is not able to accept revisions but I wanted to make you aware of our suggested edits. The first two questions have to do with daily ask of surge capacity w/o augmentation that BG Haldopoulos is interested. The third is a suggestion from Anna to enhance the new PPE question. Tim

1. Critical Care Bed Surge Capacity – Please report for today the number of critical care beds that your facility could surge to treat COVID patients without additional resources (in addition to your current SUS beds.)
2. General Inpatient Bed Surge Capacity – Please report for today the number of general inpatient beds that your facility could surge to treat COVID patients without additional resources (in addition to your current SUS beds.)
3. How many days of PPE supplies do you currently have on hand for your facility's immediate use? (Please exclude orders in shipment.)

From: Timothy Head <timothy.head@gema.ga.gov>
Sent: Friday, April 17, 2020 9:53 AM
To: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>; Anna Adams <aadams@gha.org>
Cc: Robbie Bagby <robbie.bagby@gema.ga.gov>; Lamar McEwen <lamar.mcewen@gema.ga.gov>; Woody Radcliffe <Woody.Radcliffe@gema.ga.gov>; Kelly Nadeau <kelly.nadeau@dph.ga.gov>; Daniell, Frank <frank.daniell@dph.ga.gov>
Subject: RE: hospital surge capacity ask in webeoc

Tim, Ms. Adams,





I apologize, but we can't accept design revisions from multiple angles. The last tranche of changes for the board, *going in this morning (4/17)*, is what was hashed out between the Governor's Office (POC: Ryan Loke & Caylee Noggle) and DPH (POC: Kelly Nadeau) over the last couple of days. Any further refinement to the board should be coordinated with the singular "board owner," Kelly Nadeau (Kelly.Nadeau@dph.ga.gov / 678-618-4906). Ms. Nadeau is the individual in ESF-8 that I pointed you to when you were recently in the SOC.

A "design problem" that we encountered early on was that what appeared to be obvious terms and interpretations for us, had different meaning in the hospital world. We need to either interpret their metrics to meet our needs, or ask the questions

we need asked in their language. Additionally, the last tranche of changes have been tailored to meet aspects of the federal ask (that's why they are weird).

Kelly is trying hard to preclude any additional frustration on the part of hospitals in being asked different questions, in different ways, on different days, by different people. Please coordinate BG Haldopoulos' additional requirements directly with Ms. Nadeau (copy-furnished). We look forward assisting Ms. Nadeau with any additional board modification requirements, and ultimately predictability to hospitals.

Thanks,
Tim

Timothy A. Head
Operations Support Analyst (WebEOC Admin)
Georgia Emergency Management and Homeland Security Agency (GEMA/HS)
 timothy.head@gema.ga.gov
 [\(470\) 755-0017](tel:(470)755-0017)
 <https://gema.webeocasp.com>
 WebEOCHelpdesk@gema.ga.gov

From: Anna Adams <aadams@gha.org>
Sent: Friday, April 17, 2020 9:34 AM
To: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>
Cc: Robbie Bagby <robbie.bagby@gema.ga.gov>; Timothy Head <timothy.head@gema.ga.gov>
Subject: Re: hospital surge capacity ask in webeoc

See below for suggested clarifications. There is no pride of authorship here, so feel free to leave out my edits or make your own changes. Thanks!

Critical Care Bed Surge Capacity – Please report for today the number of critical care beds that your facility could surge to treat COVID patients without additional resources (in addition to your current SUS beds.)

General Inpatient Bed Surge Capacity – Please report for today the number of general inpatient beds that your facility could surge to treat COVID patients without additional resources (in addition to your current SUS beds.)

How many days of PPE supplies do you currently have on hand for your facility's immediate use? (Please exclude orders in shipment.)

Anna Adams
Vice President, Government Relations
Georgia Hospital Association
(C) 706-512-2211
(O) 770-249-4530
Aadams@gha.org

On Apr 17, 2020, at 9:23 AM, Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov> wrote:

PS Anna, everyone liked your suggested enhancement of the PPE question – can you also include that revision?

From: Anna Adams <aadams@gha.org>
Sent: Friday, April 17, 2020 8:57 AM
To: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>
Cc: Robbie Bagby <robbie.bagby@gema.ga.gov>; Timothy Head <timothy.head@gema.ga.gov>
Subject: Re: hospital surge capacity ask in webeoc

It sounds like that current WEBEOC number wouldn't capture anything that they could do for surge that they haven't already implemented. Tim, if I'm understanding your goal here correctly, it is to establish how much wiggle room or cushion we have between current bed status and maximum added capacity, right?

Anna Adams
Vice President, Government Relations
Georgia Hospital Association
(C) 706-512-2211
(O) 770-249-4530
Aadams@gha.org

On Apr 17, 2020, at 8:38 AM, Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov> wrote:

Robbie, I'll let Anna weigh in on your question. When she and I spoke we interpreted the existing question as what they are currently using but not what they could surge to completely which was asked once on April 6.

From: Robbie Bagby <robbie.bagby@gema.ga.gov>
Sent: Friday, April 17, 2020 8:29 AM
To: Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>; Anna Adams <aadams@gha.org>; Timothy Head <timothy.head@gema.ga.gov>
Subject: RE: hospital surge capacity ask in webeoc

Hey Tim,

I've attached the user guide that Tim Head gave us for the EEI Tracker data. It appears that the surge numbers are baked into the capacity already. The capacity is not static and can fluctuate over time with surge. Is this a separate field that the modelers would need in order to show surge separately? See definitions from this document below.

Critical Care Capacity – patient capacity in your critical care units to **include surge** spaces that you may be using

General Inpatient beds – patient capacity in your medical/surgical units to **include surge** spaces you may be using

Robbie Bagby
GIS Coordinator
GEMA/HS
404-450-4267

From: [Dignam, Timothy A. \(CDC/DDNID/NCEH/OD\)](#)

Sent: Thursday, April 16, 2020 3:43 PM

To: [Robbie Bagby](#); [Anna Adams](#)

Subject: hospital surge capacity ask in webeoc

Anna and Robbie, as discussed today, what do you think of this language? Please edit away!

Critical Care Bed Surge Capacity – Please report for today the number of critical care beds that your facility could surge to treat COVID patients without additional resources

General Inpatient Bed Surge Capacity – Please report for today the number of general inpatient beds that your facility could surge to treat COVID patients without additional resources

Anna, Can you also clarify for Robbie your enhancement of the PPE question? Tim

Herron, Robin

From: Edison, Laura
Sent: Friday, April 17, 2020 10:17 AM
To: Susan Miller; Ben Nicoara; cgoddard@esri.com; Paulk, Chavis; Deeksha Sinha; jay.harvey; Jessica Cole (Mil); Jay Harvey; Johnson, Jeffrey M.; Jason Schroeder; Lakeisha Coleman; Lisa Westin; Jessica Cole (Mil); Natalie Lee; Natalie.Lee@gio.ga.gov; parker; Retsef Levi (MIT); Robert Hathcock; Robbie Bagby; robert rike; Loke, Ryan; GIO: Susan Miller; Tdignam@cdc.gov; Vivek Farias (MIT); woody.radcliffe
Cc: Brigadier General Haldopoulos; Dignam, Timothy A. (CDC/DDNID/NCEH/OD); Anna Adams; Jhonatan Garridolecca
Subject: RE: DATA WORKING GROUP - DPH needs assistance with a report
Attachments: 456752508-Guidelines.pdf

Hello Data Working Group,

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Thank you,

Laura

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Daily COVID deaths with trajectory, and rolling avg
Daily COVID hospitalizations w/ trajectory, and rolling avg
COVID syndrome, with county level % change map
ILI syndrome, with county level % change map
Daily % positive tests
Hospital capacity, ICU capacity

-----Original Appointment-----

From: Susan Miller <Susan.Miller@dca.ga.gov>

Sent: Wednesday, April 15, 2020 9:31 AM

To: Susan Miller; Ben Nicoara; cgoddard@esri.com; Chavis Paulk; Deeksha Sinha; jay.harvey; Jessica Cole (Mil); Jay Harvey; Johnson, Jeffrey M.; Jason Schroeder; Lakeisha Coleman; Lisa Westin; Jessica Cole (Mil); Natalie Lee; Natalie.Lee@gio.ga.gov; parker; Retsef Levi (MIT); Robert Hathcock; Robbie Bagby; Robert Rike; ryan.loke@georgia.gov; GIO: Susan Miller; Tdignam@cdc.gov; Vivek Farias (MIT); Woody Radcliffe (GEMA)

Cc: Brigadier General Haldopoulos; Dignam, Timothy A. (CDC/DDNID/NCEH/OD); Edison, Laura; Anna Adams; Jhonatan Garridolecca

Subject: DATA WORKING GROUP - Daily Team Meeting

When: Friday, April 17, 2020 12:30 PM-1:30 PM (UTC-05:00) Eastern Time (US & Canada).

Where: Microsoft Teams Meeting

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

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- Review Draft spreadsheet for missing datasets

Expanded Data Requirements

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Conference ID: 

[Local numbers](#) | [Reset PIN](#) | [Learn more about Teams](#) | [Meeting options](#)

Herron, Robin

From: Manny Haldopoulos [REDACTED]
Sent: Friday, April 17, 2020 10:20 AM
To: Edison, Laura
Cc: Susan Miller; Ben Nicoara; cgoddard@esri.com; Paulk, Chavis; Deeksha Sinha; jay.harvey; Jessica Cole (Mil); Jay Harvey; Johnson, Jeffrey M.; Jason Schroeder; Lakeisha Coleman; Lisa Westin; Jessica Cole (Mil); Natalie Lee; Natalie.Lee@gio.ga.gov; parker; Retsef Levi (MIT); Robert Hathcock; Robbie Bagby; robert rike; Loke, Ryan; GIO: Susan Miller; Tdignam@cdc.gov; Vivek Farias (MIT); woody.radcliffe; Dignam, Timothy A. (CDC/DDNID/NCEH/OD); Anna Adams; Jhonatan Garridolecca
Subject: Re: DATA WORKING GROUP - DPH needs assistance with a report

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Let us demo our Georgia Capacity Planning Dashboard and all your questions and needs will be fulfilled. Pick a time.

Sent from my iPhone

On Apr 17, 2020, at 10:17, Edison, Laura <Laura.Edison@dph.ga.gov> wrote:

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(Mil); Jay Harvey; Johnson, Jeffrey M.; Jason Schroeder; Lakeisha Coleman; Lisa Westin; Jessica Cole (Mil); Natalie Lee; Natalie.Lee@gio.ga.gov; parker; Retsef Levi (MIT); Robert Hathcock; Robbie Bagby; Robert Rike; ryan.loke@georgia.gov; GIO: Susan Miller; Tdignam@cdc.gov; Vivek Farias (MIT); Woody Radcliffe (GEMA)

Cc: Brigadier General Haldopoulos; Dignam, Timothy A. (CDC/DDNID/NCEH/OD); Edison, Laura; Anna Adams; Jhonatan Garridolecca

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Subject: RE: DATA WORKING GROUP - DPH needs assistance with a report

Can we discuss during the afternoon meeting? Is this the GEMA dashboard that I saw yesterday

From: Manny Haldopoulos [REDACTED] >
Sent: Friday, April 17, 2020 10:20 AM
To: Edison, Laura <Laura.Edison@dph.ga.gov>
Cc: Susan Miller <Susan.Miller@dca.ga.gov>; Ben Nicoara <Ben.Nicoara@dca.ga.gov>; cgoddard@esri.com; Paulk, Chavis <chavis.paulk@opb.georgia.gov>; Deeksha Sinha <deeksha@mit.edu>; jay.harvey <jay.harvey@sloan.mit.edu>; Jessica Cole (Mil) <Jessica.l.cole44.mil@mail.mil>; Jay Harvey <jharvey2@mit.edu>; Johnson, Jeffrey M. <jmjohnson@atlantaga.gov>; Jason Schroeder <jschroeder@esri.com>; Lakeisha Coleman <L.Coleman@esri.com>; Lisa Westin <lisa.westin@dca.ga.gov>; Jessica Cole (Mil) [REDACTED] Natalie Lee <Natalie.Lee@dca.ga.gov>; Natalie.Lee@gio.ga.gov; parker <parker@thosemcgees.com>; Retsef Levi (MIT) <retsef@mit.edu>; Robert Hathcock <RHathcock@esri.com>; Robbie Bagby <robbie.bagby@gema.ga.gov>; robert rike <rrike@esri.com>; Loke, Ryan <ryan.loke@georgia.gov>; GIO: Susan Miller <susan.miller@gio.ga.gov>; Tdignam@cdc.gov; Vivek Farias (MIT) <vivekf@mit.edu>; woody.radcliffe <woody.radcliffe@gema.ga.gov>; Dignam, Timothy A. (CDC/DDNID/NCEH/OD) <ted9@cdc.gov>; Anna Adams <aadams@gha.org>; Jhonatan Garridolecca <JGarridolecca@esri.com>
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Cc: Brigadier General Haldopoulos; Dignam, Timothy A. (CDC/DDNID/NCEH/OD); Edison, Laura; Anna Adams; Jhonatan Garridolecca

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<456752508-Guidelines.pdf>

Herron, Robin

From: Obenshain, Tucker T. EOP/OVP <Anne.T.Obenshain@ovp.eop.gov>
Sent: Friday, April 17, 2020 11:47 AM
To: [REDACTED] Fleming, Tim; Herron, Robin; 'ben@potomacsouthllc.com'
Cc: Pottebaum, Nic D. EOP/WHO
Subject: Update from Vice President Mike Pence: Project Airbridge State & County-Level Data - Georgia
Attachments: 200415 Recent PPE shipments GA.pdf

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Office of the Vice President

Governor and Senior Staff,

Over the past several briefings, I've provided updates with FEMA Administrator Pete Gaynor and Joint Chiefs of Staff Rear Adm. John Polowczyk on increasing supply and expanding domestic allocation and production of medical supplies and equipment.

As the result of Project Airbridge and additional commercial supply chain acquisitions, attached you will find personal protection equipment (PPE) and other critical supplies distributed from FEMA to your State between April 1- April 14. The information shared with you today is for official use only and is not for distribution. The attachment includes:

- Statewide Total PPE Shipments for N95 Masks, Surgical Masks, Face Shields, Gowns, and Gloves
- County-Level PPE Shipments for N95 Masks, Surgical Masks, Face Shields, Gowns, and Gloves

The PPE was distributed to healthcare facilities in your State through the normal commercial supplier distribution system. Project Airbridge has greatly helped expedite sourcing of key materials from around the world and more efficiently distribute these vital resources to hospitals, nursing homes, long-term care facilities, pre-hospital medical services, state and local governments, and other facilities critical to caring for the American people during this pandemic.

Necessary State Reporting Ask: This information is being provided to support State-led efforts to get necessary critical supplies to the right place, at the right time within your state. In return, I ask you to ensure your State is reporting key information from your State emergency manager to the FEMA Regional Administrator. Most States are reporting this data on a daily basis, which is appreciated and I 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.

If you have any additional questions, please reach out to my office or White House Intergovernmental Affairs Office. Thank you for your tireless efforts and partnership during these unprecedented times.

Sincerely,

Vice President Mike Pence

###

Additional Background on Project Airbridge

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](#). The Air Bridge was created to reduce the time it takes for U.S. medical supply distributors to receive PPE and other critical supplies into the country for their respective customers. FEMA covers the cost to fly supplies into the U.S. from overseas factories, reducing shipment time from months or weeks to days. Overseas flights arrive at operational hub airports for distribution to hotspots and nationwide locations through regular supply chains. Flight arrivals do not mean supplies will be distributed in the operational hub locations. Per agreements with distributors, 50% of supplies on each plane are for customers within the hotspot areas with most critical needs. The remaining 50% is fed into distributors' normal supply chain to their customers in other areas nationwide. HHS and FEMA determine hotspot areas based on CDC data. The information does not include product distributed outside of major medical distributors and ~8% of total volume not mapped to a location. Numbers are directional and constitute a minimum, not a maximum. All numbers round to nearest 100. You can find more information [here](#).

We have received a number of questions as to where specifically these private sector medical supplies are going to better inform prioritization decisions being made at the state, local, tribal and territorial level. FEMA provides these documents to you so you can understand the overall flow of commercial supplies within your state. This information informs partners on the flow of private sector-distributed PPE which includes, but is not limited to, shipments facilitated by Project Airbridge.

Intergovernmental Affairs Office Contact Information

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 Contact Information

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

Slow the Spread

****Disclosure and Source of Attachment:*** Data provided by top U.S. medical suppliers (Cardinal, Concordance, Owens Minor, McKesson, and Medline). Product classifications provided by suppliers. Units in "eaches." Does not include product distributed outside of major medical distributors and ~8% of total volume not mapped to allocation; numbers are directional and constitute a minimum, not a maximum. All numbers rounded to nearest 100. **This document may contain confidential commercial information and is for official government use only. You may not distribute any information contained in this document to non-governmental entities without the express authorization of FEMA.**

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###

Additional Background on Project Airbridge

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](#). The Air Bridge was created to reduce the time it takes for U.S. medical supply distributors to receive PPE and other critical supplies into the country for their respective customers. FEMA covers the cost to fly supplies into the U.S. from overseas factories, reducing shipment time from months or weeks to days. Overseas flights arrive at operational hub airports for distribution to hotspots and nationwide locations through regular supply chains. Flight arrivals do not mean supplies will be distributed in the operational hub locations. Per agreements with distributors, 50% of supplies on each plane are for customers within the hotspot areas with most critical needs. The remaining 50% is fed into distributors' normal supply chain to their customers in other areas nationwide. HHS and FEMA determine hotspot areas based on CDC data. The information does not include product distributed outside of major medical distributors and ~8% of total volume not mapped to a location. Numbers are directional and constitute a minimum, not a maximum. All numbers round to nearest 100. You can find more information [here](#).

We have received a number of questions as to where specifically these private sector medical supplies are going to better inform prioritization decisions being made at the state, local, tribal and territorial level. FEMA provides these documents to you so you can understand the overall flow of commercial supplies within your state. This information informs partners on the flow of private sector-distributed PPE which includes, but is not limited to, shipments facilitated by Project Airbridge.

Intergovernmental Affairs Office Contact Information

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 Contact Information

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

Slow the Spread

****Disclosure and Source of Attachment:*** Data provided by top U.S. medical suppliers (Cardinal, Concordance, Owens Minor, McKesson, and Medline). Product classifications provided by suppliers. Units in "eaches." Does not include product distributed outside of major medical distributors and ~8% of total volume not mapped to allocation; numbers are directional and constitute a minimum, not a maximum. All numbers rounded to nearest 100. **This document may contain confidential commercial information and is for official government use only. You may not distribute any information contained in this document to non-governmental entities without the express authorization of FEMA.**

Herron, Robin

From: Obenshain, Tucker T. EOP/OVP <Anne.T.Obenshain@ovp.eop.gov>
Sent: Friday, April 17, 2020 11:47 AM
To: [REDACTED]; Fleming, Tim; Herron, Robin; 'ben@potomacsouthllc.com'
Cc: Pottebaum, Nic D. EOP/WHO
Subject: Update from Vice President Mike Pence: Project Airbridge State & County-Level Data - Georgia
Attachments: 200415 Recent PPE shipments GA.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.



Office of the Vice President

Governor and Senior Staff,

Over the past several briefings, I've provided updates with FEMA Administrator Pete Gaynor and Joint Chiefs of Staff Rear Adm. John Polowczyk on increasing supply and expanding domestic allocation and production of medical supplies and equipment.

As the result of Project Airbridge and additional commercial supply chain acquisitions, attached you will find personal protection equipment (PPE) and other critical supplies distributed from FEMA to your State between April 1- April 14. The information shared with you today is for official use only and is not for distribution. The attachment includes:

- Statewide Total PPE Shipments for N95 Masks, Surgical Masks, Face Shields, Gowns, and Gloves
- County-Level PPE Shipments for N95 Masks, Surgical Masks, Face Shields, Gowns, and Gloves

The PPE was distributed to healthcare facilities in your State through the normal commercial supplier distribution system. Project Airbridge has greatly helped expedite sourcing of key materials from around the world and more efficiently distribute these vital resources to hospitals, nursing homes, long-term care facilities, pre-hospital medical services, state and local governments, and other facilities critical to caring for the American people during this pandemic.

Necessary State Reporting Ask: This information is being provided to support State-led efforts to get necessary critical supplies to the right place, at the right time within your state. In return, I ask you to ensure your State is reporting key information from your State emergency manager to the FEMA Regional Administrator. Most States are reporting this data on a daily basis, which is appreciated and I 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.

If you have any additional questions, please reach out to my office or White House Intergovernmental Affairs Office. Thank you for your tireless efforts and partnership during these unprecedented times.

Sincerely,

Vice President Mike Pence

###

Additional Background on Project Airbridge

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Name	Cell Phone	Email
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Herron, Robin

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>
Sent: Friday, April 17, 2020 11:49 AM
To: Swint, Zachariah D. EOP/WHO
Cc: Pottebaum, Nic D. EOP/WHO; Campana, Ariella M. EOP/WHO; Obenshain, Tucker T. EOP/OVP
Subject: INVITE: Governor-Only Briefing Call/VTC with the Vice President on Monday April 20 at 11:00 a.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.



Governor's Senior Staff (Chief of Staff, State-Federal Director, and Scheduler),

Our Nation's Governors are invited to a **Governors-only Briefing Call (with a video teleconference option) with Vice President Mike Pence** and Senior Administration Officials on **Monday, April 20, 2020 at 11:00 a.m. Eastern Time** for an update on the Federal-State-Local efforts to respond to COVID-19.

Briefing Call/VTC Details

- **Date:** Monday, April 20, 2020
- **Time:** 11:00 a.m. Eastern Time
- **Expected Length:** 60-90 minutes
 - ***Please communicate if your governor is expected to be late or depart early from the call.***
- **Federal Participants:** President Trump & Senior Administration Officials
- **Reminder Governors-Only (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, state economic development directors, state workforce directors, other key state leaders in the state's response and re-opening efforts to COVID-19. Interactions will be limited only to governors and Federal leaders.
- **Video Teleconference Option:** If possible, ***we encourage your governor to participate by VTC.*** Participation by VTC allows governors and federal speakers to interact more efficiently. Any governor who wants to participate in this briefing via video teleconference (VTC), **indicate so in the RSVP.** FEMA has worked with your emergency manager to identify VTC capabilities in your state and we can provide you that information.

NOTE: We ask if your governor needs to leave early or arrive late to the call, that you communicate this no later than 9:00 a.m. on Monday, April 20. If not, we will expect your governor is on the call the entire time to potentially provide an update.

RSVP & Call-In/VTC Information – Deadline to RSVP is Saturday April 18 at 5:00 p.m. ET

To RSVP your governor, email please email me (Zachariah.D.Swint2@who.eop.gov) by **no later than Saturday April 18 at 5:00 p.m. Eastern Time**. Once you RSVP your governor, you will receive a call-in information link and guidance. VTC guidance will be provided upon request.

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

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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: Zachariah.D.Swint2@who.eop.gov

Herron, Robin

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>
Sent: Friday, April 17, 2020 11:49 AM
To: Swint, Zachariah D. EOP/WHO
Cc: Pottebaum, Nic D. EOP/WHO; Campana, Ariella M. EOP/WHO; Obenshain, Tucker T. EOP/OVP
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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: Zachariah.D.Swint2@who.eop.gov

Herron, Robin

From: Herron, Robin
Sent: Friday, April 17, 2020 12:31 PM
To: Swint, Zachariah D. EOP/WHO
Subject: Re: INVITE: Governor-Only Briefing Call/VTC with the Vice President on Monday April 20 at 11:00 a.m. ET

Please RSVP for Gov Kemp for VTC.

Get [Outlook for iOS](#)

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>
Sent: Friday, April 17, 2020 11:49:28 AM
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>
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Thanks,
Zach

--

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

Herron, Robin

From: Robert Rike <RRike@esri.com>
Sent: Friday, April 17, 2020 12:36 PM
To: Susan.Miller@dca.ga.gov; Ben Nicoara; Chad Goddard; Paulk, Chavis; deeksha@mit.edu; jay.harvey@sloan.mit.edu; Jessica Cole (Mil); Jay Harvey; Johnson, Jeffrey M.; Jason Schroeder; Lakeisha Coleman; Lisa Westin; Jessica Cole (Mil); Natalie Lee; Natalie.lee;parker@thosemcgees.com; retsef@mit.edu; Robert Hathcock; robbie.bagby@gema.ga.gov; Loke, Ryan; GIO: Susan Miller; Tdignam@cdc.gov; vivekf@mit.edu; woody.radcliffe; Brigadier General Haldopoulos; Dignam, Timothy A. (CDC/DDNID/NCEH/OD); Edison, Laura; Anna Adams; Jhonatan Garridolecca
Subject: Re: DATA WORKING GROUP - Daily Team Meeting

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Join the Combined All Hands Meeting for the Data Meeting Today.

Join Microsoft Teams Meeting

[REDACTED] United States, Atlanta (Toll)
Conference ID: [REDACTED]

Robert Rike

Esri State Team Account Executive

[Esri](#) | rrike@esri.com | M 804-627-1082

From: Susan.Miller@dca.ga.gov
When: 12:30 PM - 1:30 PM April 17, 2020
Subject: DATA WORKING GROUP - Daily Team Meeting
Location: Microsoft Teams Meeting

Apologies for the inconvenience – need to move **JUST** this one Data Team daily work group meeting to **12:30pm** for **Friday 4/17/2020**

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 [add your contact information here](#) – 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
 - MS Teams
 - Data Hub

[Join Microsoft Teams Meeting](#)

United States, Atlanta (Toll)

Conference ID:

[Local numbers](#) | [Reset PIN](#) | [Learn more about Teams](#) | [Meeting options](#)

From: Yanick, Brittany M. EOP/WHO <Brittany.M.Yanick@who.eop.gov>
Sent: Friday, April 17, 2020 1:50 PM
To: Yanick, Brittany M. EOP/WHO
Cc: Pottebaum, Nic D. EOP/WHO
Subject: The United States Has Built the Most Advanced and Robust Testing Anywhere in the World

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 | The United States Has Built the Most Advanced and Robust Testing Anywhere in the World

As President Trump and members of the task force laid out in yesterday's briefing, we have quickly built the most advanced and robust testing system in the world.

Under President Trump's leadership, the United States has completed far more tests than anywhere else in the world – with the numbers still going up.

- PRESIDENT TRUMP: "We have now completed more than 3.5 million tests – by far the most anywhere in the world. Areas of our country that have been hotspots have done much more testing, on a per capita basis, than South Korea. We've done more than South Korea – and South Korea has done a good job, but we've done more."
- PRESIDENT TRUMP: "In recent days, we have seen a dramatic increase in the number of tests performed by hospitals and academic institutions, with more than 120,000 tests recently reported in a single day – far more than any country in the world has ever been able to do. And our numbers are actually going up."
- PRESIDENT TRUMP: "As Dr. Birx has been advising our governors for weeks, we continue to have an excess testing capacity of 1 million tests per week available for use. And our capabilities are growing every single day, especially with the new tests that are coming onto the market rapidly."

As the Trump Administration has cut red tape and authorized new testing solutions, states are now able to turn to faster, on-site tests.

- PRESIDENT TRUMP: "As these new and better testing solutions come online, we're seeing this additional capacity reflected in the numbers. For this reason, the number of tests processed in commercial laboratories has dropped from approximately 100,000 to roughly 75,000 tests over the last week. The reason it dropped is because we have so many other tests and we don't even have to go through the laboratories. But the laboratories have tremendous additional capacity, and states feel free to use that capacity."

- PRESIDENT TRUMP: “Some in the media falsely reported this as a bad thing, when, in fact, it is a great thing because it indicates that the states are moving to faster, more local testing solutions, including on-the-spot tests.”
- PRESIDENT TRUMP: “We have now distributed over 600,000 Abbott ID NOW point-of-care diagnostic tests. These are tests that are done on site, and, within five minutes, you know the answer: positive or negative.”
- PRESIDENT TRUMP: “In other words, the laboratories are great, but now we have forms of testing that are much quicker, much better, and we don’t have to use the laboratories. But they’re there, and they have a great capacity to do the work.”

The advanced system developed under President Trump enables both constant surveillance testing and diagnostic testing to help stop new hot spots from developing.

- PRESIDENT TRUMP: “We will continue to work with governors to advise them on how to conduct both surveillance and diagnostic testing.”
- VICE PRESIDENT PENCE: “I do believe with this plan that we’re both confronting the issue of finding symptomatic individuals through our networks with early alert, as well as those who come and present to different hospitals and emergency room with testing and contact tracing, but critically have put in place what we believe is a safety net through asymptomatic sentinel surveillance that is centered around our most vulnerable groups — between nursing homes and our Native American people and indigenous populations, and our inner city groups that we know may be in multi-generational households and have unique risk.”
- DR. BIRX: “I think what’s new and what’s really critical is this constant sentinel surveillance for asymptomatic individuals in communities that we know are particularly vulnerable. And that hasn’t been done in flu before, and I think that’s going to be the added dividend that’s really focused on who is most vulnerable and how do we get the fastest alert by generally screening people without symptoms. So people who are just coming to the clinic will be screened for COVID-19. And we do have enough testing capacity to do both that surveillance piece, as well as the diagnostic piece and contact tracing.”
- DR. BIRX: “So the testing and contact tracing — and Dr. Redfield will be putting people in every single state to make sure that CDC is standing beside the state and local health officials to make sure that all of those cases are immediately identified and contact traced.”

###

Herron, Robin

From: Rich Kenah <rkenah@atlantatrackclub.org>
Sent: Friday, April 17, 2020 2:49 PM
To: William K Parker; Shawn Hardister; Erika Brookes; Kara Finley; Mary Ford; Brian Frank; Katie Kirkpatrick; Reggie Mason; Terry Ozell; Ryan Purcell; Michelle Reid; John Runnion; Aparna Sharma; Mark Wulkan; Leslie Zacks; Wilkinson, Stuart; Da'Rel Patterson; Finley, Phillip (CDC/DDPHSIS/CGH/DGHT); aisha.wright@adp.com; Chally, Jon
Subject: FW: Atlanta Track Club: The Distance--Resources to help you stay active while social distancing

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.

Board,

Note that the Club launched a micro-site today. The goal for this site, as referenced below, is to give people guidance, suggestions, fun workouts, expert voices and some laughs around fitness during our current crisis.

We wanted to get this launched ASAP so it currently has just the basics there now. You'll see more content added each day. When our current reality is in the review mirror, I expect we will repurpose much of this info and fold it into our existing plan of offering more non-event related content on our website.

We are actively look for ideas. Feel free to send any thoughts/suggestions my way.

<https://www.thedistance.atlantatrackclub.org/>

Be safe out there.

Rich

From: Atlanta Track Club <questions@contact.atlantatrackclub.org>
Sent: Friday, April 17, 2020 2:04 PM
To: rkenah@atlantatrackclub.org
Subject: Atlanta Track Club: The Distance--Resources to help you stay active while social distancing



Hello Running City USA:

It has been a busy week at Atlanta Track Club. I have some good news and some bad news to share.

First - the bad news. The Club has cancelled all in-person events and programs for the month of May which includes the first five All Comers Track & Field meets. Please find our updated COVID-19 statement [here](#).

Next - the good news. We have launched a new initiative called [The Distance](#). It brings together workouts, live classes, nutrition, mental wellness and inspiration from the Club's coaches, staff, volunteers and members during this time of social distancing.

Atlanta Track Club's vision of an active and healthy Atlanta through running and walking is as important as ever. During these uncertain times, that vision includes creating new ways to share the Club's core values of community, camaraderie and competition and ensuring the ways we continue to engage in exercise keep us and the community we live in safe. We are all in this together.

Stay safe, stay home, stay active!

Meaghan Leon
Membership Manager



[See The Distance](#)

Run. Walk. Go! Virtual Group Runs

Join us on Thursday, April 23 for our first virtual "Run. Walk. Go!" group run. Together with the BeltLine, we are continuing our Thursday night tradition but the only difference is, it will be virtual! Head out for a 30-45 minute run in your neighborhood around 6:30 p.m. When you are finished, grab a drink of your choice, hop on your computer, and join us for a fun Zoom chat session starting at 7:00 p.m. While we can't physically get together for a group run, this is a safe way to help us all still connect! We will post the Zoom link on our Facebook page Thursday morning. Hope you can join us!

[Group Run Facebook Page](#)

Running and Walking in the Time of COVID-19

Your exercise routine may be fundamentally altered as a result of our "shelter-in-place" ordinances. Balancing your health and wellness with the needs of your children or work expectations may be difficult. Consider the following recommendations for keeping moving while remaining at home.

Exercising at Home with Children:

- Exercise early before your children wake up
- Identify a small loop you can repeat while your children can play in the yard

- Utilize treadmills, exercise bikes and other cross training equipment
- Join the many free exercise classes being offered online during naps or quiet times
- Supplement with creative exercise such as stair repeats, calisthenics (jumping jacks, burpees etc.) that can be added in small amounts throughout the day
- Play active games with your children (tag, relay races, etc. - see kids section below) and pets
- Family walks are great for everyone, even those family members with four legs!

The Distance: Virtual Workouts



Monday, April 20, 2020

[Strength Training at Home](#)

8:00 a.m. - 8:30 a.m.

Get your Monday started off right with this class led by CrossFit Level 1 Trainer, Natalie Cabanas.

Tuesday, April 21, 2020

[Power Plyos](#)

8:00 a.m.- 8:30 a.m.

Join former UGA All-American 400m hurdler Justin Gaymon for plyometrics classes on Tuesday morning to get your legs toned and improve your power for all aspects of life.

Tuesday, April 21, 2020

[Nutrition at Noon](#)

12:00 p.m. - 12:30 p.m.

Learn the best ways to eat right and shop right during quarantine. These will keep you well-fueled, well-balanced, and well-focused with dietitian Alissa Palladino.

Wednesday, April 22, 2020

[Core with Amy Begley](#)

8:00 a.m. - 8:30 a.m.

Whether you're gunning for a self-isolation six-pack or want to maintain proper running form, these crucial core exercises will help you get there.

Thursday, April 23, 2020

[Dynamic Drills](#)

8:00 a.m. - 8:30 a.m.

Join 2016 Olympian Rob Mullett for a set of dynamic drills designed to improve your running form.

Friday, April 24, 2020

[Bodyweight Blaster](#)

8:00 a.m.- 8:30 a.m.

Blast into the weekend with this bodyweight class from the Club's Jennie Coakley. Expect core and strengthening work to help you get your heart rate up from the comfort of home.

Workouts of the Week

Checkout Week 3 workouts from our High Performance Department to help keep you fit!

Beginner 5K Program: Week 3 Workout

You do not run or walk regularly and want to begin training for the first time or have had several years off from training.



Intermediate Runner/Walker Workout

You regularly run, walk or practice intervals several days a week for more than 30 minutes but have not been doing speed workouts.



Advanced Runner Workout

You consistently train 5-7 days per week including a day of speed work, interval training or a tempo run and an appropriate long run.



If you'd like to take your training a step further, anyone can join the [Virtual In-Training for Peachtree](#) which kicks off this month and leads up to July 4.



Keep Kids Active

Schools are out, but that's no reason to stop exercising. Healthy lifestyles make for strong immune systems, so let's keep kids moving even if it's only around the house. Here are some ideas for games you can play at home to keep your kids moving.



Kaboom!

Fill the Bucket

Boom Ball

Northside Hospital Women's Atlanta 5K

"We are in this together!"

More than 2,500 women from across Atlanta and 25 different states tackled the annual Northside Hospital Atlanta Women's 5K virtually last weekend.

It was a little out of our comfort zone to race solo without our smiling volunteers and the tangible finish line. However, we hope this video proves that even though we raced apart, we raced together. Congratulations ladies!



Volunteer Appreciation Month



Volunteers Keep #Running City USA moving! Atlanta Track Club has over 10,000 active volunteers that support our 30+ events and programs. As we continue to celebrate National Volunteer Month, we want to hear from you, our members. Share with us a time that a volunteer stood out and supported you towards the finish line. Email us at volunteers@atlantatrackclub.org with your story.

Membership Benefits



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Atlanta Track Club
201 Armour Dr
Atlanta, GA 30324
questions@atlantatrackclub.org



Herron, Robin

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Sent: Friday, April 17, 2020 3:18 PM
To: Caraway, Ian
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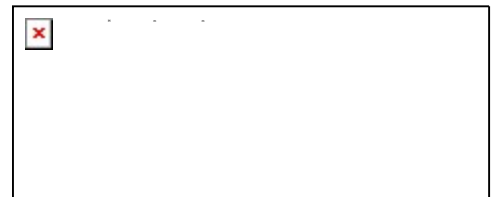
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Intergovernmental Affairs

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April 17, 2020

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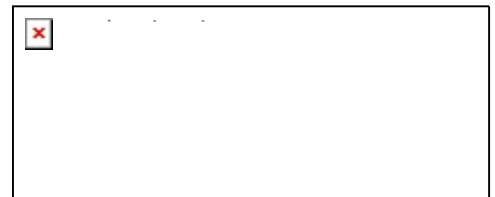
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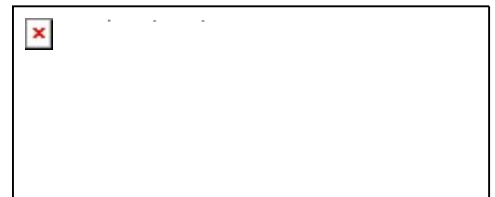
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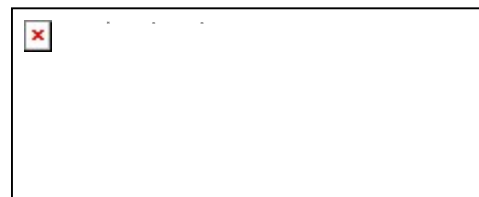
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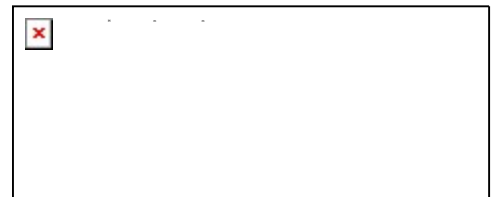
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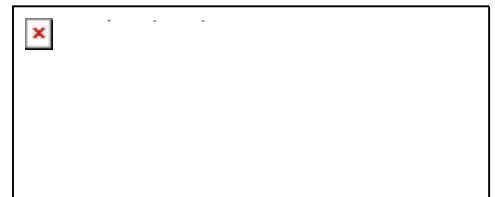
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Herron, Robin

From: FEMA-IGA <FEMA-IGA@fema.dhs.gov>
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To: FEMA-IGA
Subject: FEMA Advisory: COVID-19 Daily Briefing Points (April 17, 2020)
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FEMA ADVISORY – APRIL 17, 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 the 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.
- On April 16, President Trump released [Guidelines for Opening America Up Again](#), providing a plan for rolling back social distancing measures and reopening the country's economy in several phases, depending on location.
 - Under the guidelines, states will need to meet six metrics that include demonstrating a downward trajectory of COVID-19 cases over a 14-day period and a robust system for testing health care workers before they can proceed to a phased opening.
 - The 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.
- 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-19 outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild).

- Where appropriate, governors can work on a regional basis to satisfy these criteria and to progress through the phases outlined.
- 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.
 - Fully assessing and leveraging the state’s entire testing capacity will be important, including roadmap to all locations and types of testing available in the states, and the capacity of state and local labs, hospitals and universities, and private labs.
 - 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.
- FEMA continues to expedite movement of commercially pre-sourced and commercially procured critical supplies from the global market to medical distributors in various locations across the U.S. through [Project Airbridge](#).

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
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FEMA Mission

To help people before, during, and after disasters.



Herron, Robin

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Sent: Friday, April 17, 2020 3:21 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);Laird, 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 17, 2020
Attachments: Medical Facility EEI Status Report 04-17-2020.xlsx

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Director Bryson,

See attached Medical Facility Essential Elements of Information Status Tracker information for April 17, 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

Herron, Robin

From: Woody Radcliffe <Woody.Radcliffe@gema.ga.gov>
Sent: Friday, April 17, 2020 3:21 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);Laird, 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
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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 3:37 PM
To: Herron, Robin
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 17
Attachments: ESF15_DailyBriefingPoints_20200417_FINAL.pdf

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U.S. DEPARTMENT OF HOMELAND SECURITY

Intergovernmental Affairs

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 3:37 PM
To: Loke, Ryan
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 17
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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 3:37 PM
To: Broce, Candice
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 17
Attachments: ESF15_DailyBriefingPoints_20200417_FINAL.pdf

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 3:37 PM
To: Fleming, Tim
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 17
Attachments: ESF15_DailyBriefingPoints_20200417_FINAL.pdf

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 3:37 PM
To: Caraway, Ian
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 17
Attachments: ESF15_DailyBriefingPoints_20200417_FINAL.pdf

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Friday, April 17, 2020 3:37 PM
To: Whitaker, Skylar
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 17
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Herron, Robin

From: Swint, Zachariah D. EOP/WHO <Zachariah.D.Swint2@who.eop.gov>
Sent: Friday, April 17, 2020 3:55 PM
To: Herron, Robin
Subject: RE: INVITE: Governor-Only Briefing Call/VTC with the Vice President on Monday April 20 at 11:00 a.m. ET

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Thank you for your Governor's RSVP to the Governors-Only Call/VTC regarding COVID-19 preparedness and response efforts with Vice President Mike Pence on for **Monday, April 20 at 11:00 a.m. Eastern Time.**

Please fill out audio call-in information as a backup, please complete this [LINK](#).

Please join 30 minute prior to ensure no issues. If your Governor is unable to join by VTC, **please let me know before 10:00 AM Monday (4/20).**

Dial-In information for the Video Teleconference (VTC)

Please read carefully and do NOT share or distribute the VTC/call-in information. Upon receiving this email, please connect with your State Emergency Manager and their Emergency Operations Center to stand-up the VTC. This VTC will be conducted through the FEMA Emergency Operations Center. Your State Emergency Manager and their staff should reach out to the FEMA Region contact (if they haven't already contacted you).

The VTC/call line has limited lines and we are permitting only one dial-in per state. All relevant cabinet members and key state officials must join their governor in the same room to ensure you are using the access code only once per state. ***If your state dials-in using the same access code as the governor, you may prevent your governor from participating in the VTC/call as lines are limited.*** Your governor will be receiving an unmuted line, so we ask when the governors dials-in to mute their line and ONLY unmute if a federal participant asks them to unmute. This will ensure maximum participation, but ensure a smooth conference call.

VTC Dial-In Options

- **SIP:** [REDACTED]
- **IP:** [REDACTED]
- **Toll Free ISDN:** [REDACTED]
- **Direct Dial ISDN:** [REDACTED]

Do NOT connect via an audio line and a video line in the same room.

Testing (highly encouraged): The video bridge will be available for testing starting at 9:00 a.m. ET on (4/20) and remaining up to one hour prior to the conference start time. All VTC are asked to join 30 minutes prior to the VTC start time for a final audio/video check.

Testing & Troubleshooting Contact: The FEMA Operations Center (540-542-2171).

Zach Swint
Office of Intergovernmental Affairs
The White House

From: Herron, Robin <robin.herron@georgia.gov>

Sent: Friday, April 17, 2020 12:31 PM

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

Subject: Re: INVITE: Governor-Only Briefing Call/VTC with the Vice President on Monday April 20 at 11:00 a.m. ET

Please RSVP for Gov Kemp for VTC.

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

Sent: Friday, April 17, 2020 11:49:28 AM

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: INVITE: Governor-Only Briefing Call/VTC with the Vice President on Monday April 20 at 11:00 a.m. ET

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Governor's Senior Staff (Chief of Staff, State-Federal Director, and Scheduler),

Our Nation's Governors are invited to a **Governors-only Briefing Call (with a video teleconference option) with Vice President Mike Pence** and Senior Administration Officials on **Monday, April 20, 2020 at 11:00 a.m. Eastern Time** for an update on the Federal-State-Local efforts to respond to COVID-19.

Briefing Call/VTC Details

- **Date:** Monday, April 20, 2020
- **Time:** 11:00 a.m. Eastern Time
- **Expected Length:** 60-90 minutes
 - ***Please communicate if your governor is expected to be late or depart early from the call.***
- **Federal Participants:** President Trump & Senior Administration Officials
- **Reminder Governors-Only (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, state economic development directors, state workforce directors, other key state leaders in the state's response and re-opening efforts to COVID-19. Interactions will be limited only to governors and Federal leaders.
- **Video Teleconference Option:** If possible, ***we encourage your governor to participate by VTC.*** Participation by VTC allows governors and federal speakers to interact more efficiently. Any governor who wants to participate in this briefing via video teleconference (VTC), **indicate so in the RSVP.** FEMA has worked with your emergency manager to identify VTC capabilities in your state and we can provide you that information.

NOTE: We ask if your governor needs to leave early or arrive late to the call, that you communicate this no later than 9:00 a.m. on Monday, April 20. If not, we will expect your governor is on the call the entire time to potentially provide an update.

RSVP & Call-In/VTC Information – Deadline to RSVP is Saturday April 18 at 5:00 p.m. ET

To RSVP your governor, email please email me (Zachariah.D.Swint2@who.eop.gov) by **no later than Saturday April 18 at 5:00 p.m. Eastern Time**. Once you RSVP your governor, you will receive a call-in information link and guidance. VTC guidance will be provided upon request.

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

Name	Cell Phone	Email
Nic Pottebaum	202-881-7803	Nicholas.D.Pottebaum@who.eop.gov
Tucker Obenshain	202-881-6217	Anne.T.Obenshain@ovp.eop.gov
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: Zachariah.D.Swint2@who.eop.gov

Herron, Robin

From: Jeffrey Dickerson [REDACTED]
Sent: Friday, April 17, 2020 4:57 PM
To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA)
Cc: Wilson, Richard D BG USARMY NG GAARNG (USA); Simmons, Randall V Jr BG USARMY NG GAARNG (USA); Berry, Frank; Haldopoulos, Emmanuel I (Manny) Brig Gen USAF GA CRTC (USA); Jeffrey Dickerson; Hood, Joseph; Laird, 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: Hospital Surge Capacity Analysis Updated 17APR20
Attachments: Hospital Surge Capacity Analysis_17APR20.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 – We updated the hospital surge capacity analysis based upon the updated IHME model updated this afternoon. The updated moved our peak date back to 15APR – 2 days ago – and significantly reduced the demand on bed space.

Vr,
Jeff

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

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

Herron, Robin

From: Stevens, Lee (OS/IEA) <Lee.Stevens@hhs.gov>
Sent: Friday, April 17, 2020 5:43 PM
To: Johnston, Darcie (HHS/IEA); Stevens, Lee (OS/IEA)
Subject: HHS Releases \$3.5 Billion to Support the Child Care and Development Block Grant
Attachments: CAREs Act CCDBG State Allocations.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.

Dear State Partners,

With so many daily notifications coming through, we wanted to make sure you are aware of the release of \$3.5 billion dollars (see below) earlier this week to support families with child care during this public health emergency. Attached please find state by state allocations. Below I have added details of actions by the Department of Labor that also support working families:

Support for Working Families

- The Families First Coronavirus Response Act (FFCRA) requires certain employers to provide employees with paid sick leave or expanded family and medical leave for specified reasons related to COVID-19.
- Generally, the FFCRA authorizes the following:
 - Two weeks (up to 80 hours) of paid sick leave at two-thirds the employee's regular rate of pay because the employee is unable to work because of a **bona fide need to care for an individual subject to quarantine** (pursuant to Federal, State, or local government order or advice of a health care provider), **or to care for a child (under 18 years of age) whose school or child care provider is closed or unavailable for reasons related to COVID-19**, and/or the employee is experiencing a substantially similar condition as specified by the Secretary of Health and Human Services, in consultation with the Secretaries of the Treasury and Labor; and
- Up to an additional 10 weeks of paid expanded family and medical leave at two-thirds the employee's regular rate of pay where an employee, who has been employed for at least 30 calendar days, is unable to work due to a **bona fide need for leave to care for a child whose school or child care provider is closed or unavailable for reasons related to COVID-19**.
- More information on paid sick leave and expanded family and medical leave can be found [HERE](#).

As always, please do not hesitate to contact me if I can provide assistance.

Best,

Darcie

Darcie Johnston, Director
Office of Intergovernmental Affairs



ADMINISTRATION FOR
CHILDREN & FAMILIES

FOR IMMEDIATE RELEASE

Office of Public Affairs

April 14,
2020
401-9215

Contact: ACF

(202)

edia@acf.hhs.gov

[m](#)

HHS' Administration for Children and Families to Release Funding to Support the Child Care and Development Block Grant

COVID-19 spending bill gives an additional \$3.5 billion to the Child Care and Development Block Grant to support families with child care options during this public health crisis

On March 27, the President signed a \$2 trillion emergency relief bill aimed at providing economic relief to the nation's families, workers, and businesses. The Coronavirus Aid, Relief, and Economic Security (CARES) Act will provide the Administration for Children and Families (ACF) with \$6.3 billion in additional funding that will aid in the continuation of work protecting, supporting, and uplifting our vulnerable communities during this public health crisis.

"President Trump has secured more than \$6 billion in funding to help meet the needs of America's most vulnerable during this time of crisis, including those who need assistance affording child care," said HHS Secretary Alex Azar. "As part of the President's all-of-America approach to combating the coronavirus, ACF is providing extra support for human services that Americans—including healthcare workers, first responders, and other essential workers—may rely on even more in this time of crisis."

The bill provides \$3.5 billion to the Child Care and Development Block Grant. This funding will support states, territories, and tribes to provide assistance to child care providers in order to financially support them during the public health crisis. This additional funding can also help support healthcare workers, first responders, and other essential workers playing critical roles during this crisis. Funds will be released to state, territory, and tribal Child Care and Development Fund programs.

"It is crucial that we continue our work in supporting our most vulnerable populations with the services they need to live their daily lives during this unprecedented time," said ACF Assistant Secretary Lynn Johnson. "Providing access to child care for individuals and communities who have been affected by the public health crisis is a priority of the Administration for Children and Families."

With this additional funding, the Administration for Children and Families continues to support services that strengthen and support families, individuals, youth and children to achieve their fullest potential during a public health crisis.

Additional information about the Child Care and Development Block Grant specific to this public health crisis can be found on the Office of Child Care website: <https://www.acf.hhs.gov/occ/resource/occ-covid-19-resources>.

###

All ACF news releases, fact sheets and other materials are available on the [ACF news](#) page. Follow [ACF on Twitter](#) for more updates.

Please do not hesitate to contact me if you have questions.

Best,
Darcie

Darcie L. Johnston
Director, Intergovernmental Affairs
U.S. Department of Health and Human Services
(202) 853-0582

Herron, Robin

From: Jeffrey Dickerson [REDACTED]
Sent: Friday, April 17, 2020 6:30 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;Laird, 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);lrice@ldxsolutions.com;Darryl Graham;Matthew Hicks;Jeffrey Dickerson
Subject: Interagency COVID-19 Response Planning Team Update, 171800APR20
Attachments: Hospital Surge Capacity Analysis_17APR20.pptx; GWCC ACF-Atlanta Progress Update_171800APR20.pptx

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Jeff Dickerson
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Email: [REDACTED]
Cell: [REDACTED]

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Sent: Friday, April 17, 2020 9:01 AM
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) <randall.v.simmons.mil@mail.mil>; 'lrice@ldxsolutions.com' <lrice@ldxsolutions.com>; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>
Subject: Interagency COVID-19 Response Planning Team Update, 170900APR20

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GA DOD Interagency Coordinator for COVID-19 Response
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Cell: [REDACTED]

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Sent: Thursday, April 16, 2020 6:27 PM
To: Carden, Thomas M Jr MG USARMY NG GAARNG (USA) <thomas.m.carden.mil@mail.mil>
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Dickerson [REDACTED]

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

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Jeff Dickerson

GA DOD Interagency Coordinator for COVID-19 Response

Email: [REDACTED]

Cell: [REDACTED]

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Dickerson [REDACTED]

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GA DOD Interagency Coordinator for COVID-19 Response

Email: [REDACTED]

Cell: [REDACTED]

Herron, Robin

From: Stevens, Lee (OS/IEA) <Lee.Stevens@hhs.gov>
Sent: Friday, April 17, 2020 9:12 PM
To: Johnston, Darcie (HHS/IEA);Stevens, Lee (OS/IEA)
Subject: HHS COVID-19 Update, 4-17-2020

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:

Tonight's Task Force press conference offered a report to the American people on the status of our country's testing capacity and how that relates to the phased reopening of America outlined last night. The biggest point made is that we currently have the necessary testing capacity to move into phase one should governors and their public health officials decide their state is ready. We also have the surveillance tools to detect any signs of COVID-19 reemergence for immediate action.

HHS Updates on COVID-19 follow.

Testing Updates

A New Swab Option Helps Address Shortages: The U.S. Food and Drug Administration announced a further [expansion of COVID-19 testing options](#) through the recognition that spun synthetic swabs – with a design similar to Q-tips – could be used to test patients by collecting a sample from the front of the nose. As part of this effort, U.S. Cotton, the largest manufacturer of cotton swabs and a subsidiary of Parkdale-Mills, developed a polyester-based Q-tip-type swab that is fully synthetic for compatibility with COVID-19 testing. Harnessing its large-scale U.S.-based manufacturing capabilities, U.S. Cotton plans to produce these new polyester swabs in large quantities to help meet the needs for coronavirus diagnostic testing. The finding that spun synthetic swabs could be used for COVID-19 testing is based on results from a clinical investigation that represents a collaboration between the FDA, UnitedHealth Group, the Gates Foundation, and Quantigen.

Serology Testing: CDC released information on [Serology Testing for COVID-19](#). CDC has developed a new laboratory test to assist with efforts to determine how much of the U.S. population has been exposed to SARS-CoV-2, the virus that causes COVID-19. Currently, CDC's serologic test is designed and validated for broad-based surveillance and research that will give us information needed to guide the response to the pandemic and protect the public's health. The test is not currently designed to test individuals who want to know if they have been previously infected with COVID-19. Additionally, CDC is evaluating commercially manufactured serologic tests in collaboration with the Biomedical Research and Development Authority (BARDA), the FDA, the NIH, the DOD, and the White House Office of Science and Technology Policy. This evaluation is expected to be completed in late April.

Treatment Updates

New Partnership to Develop National Strategy for Treatment and Vaccines: The National Institutes of Health and the Foundation for the NIH (FNIH) are bringing together more than a dozen leading biopharmaceutical companies, the HHS Office of the Assistant Secretary for Preparedness and Response, the CDC, , and the European Medicines Agency to develop an [international strategy for a coordinated research response to the COVID-19 pandemic](#). The planned Accelerating COVID-19 Therapeutic Interventions and Vaccines (ACTIV) partnership will develop a framework for prioritizing vaccine and drug candidates, streamlining clinical trials, coordinating regulatory processes and/or leveraging assets among all partners to rapidly respond to the COVID-19 and future pandemics. This is part of the whole-of-government, whole-of-America response the Administration has led to beat COVID-19. Secretary Azar notes, "By

bringing together 16 pharmaceutical companies and five government agencies here and abroad, the ACTIV partnership will accelerate the amazing work being done every day by scientists and innovators inside and outside of government.”

Vaccine Trial Enrolling Older Adults: An NIH [clinical trial of a vaccine for COVID-19 is now enrolling older adults](#) in Seattle, Atlanta and Bethesda. A Phase 1 clinical trial of an investigational vaccine designed to prevent COVID-19 is now enrolling older adults. The trial began on March 16, 2020 and was originally designed to enroll 45 healthy volunteers ages 18 to 55 years. Enrollment of the first 45 participants is now complete, and investigators have expanded the trial to enroll an additional 60 participants: 30 adults ages 56 to 70 years and 30 adults ages 71 years and older. The trial is supported by the National Institute of Allergy and Infectious Diseases (NIAID), part of the National Institutes of Health. Enrolling older adult volunteers in the trial will help investigators better understand vaccination safety and immune response among older people, who face a higher risk of complications from COVID-19 than younger individuals.

Study of Remdesivir Shows Promise: NIH released a study on [Remdesivir that supports clinical testing underway across the US](#). The antiviral Remdesivir was shown to prevent disease progression in monkeys with COVID-19. Early treatment with the experimental antiviral drug Remdesivir significantly reduced clinical disease and damage to the lungs of rhesus macaques infected with SARS-CoV-2, the coronavirus that causes COVID-19, according to NIH scientists.

Consumer Warning About Chloroquine Phosphate Used in Aquariums: The FDA [issued](#) warning letters to [Fishman Chemical of North Carolina, LLC.](#), and [Dr. G’s Marine Aquaculture](#), which distribute chloroquine phosphate products intended to treat disease in aquarium fish which the FDA has not approved, conditionally approved, or indexed for said fish treatment. Although neither product identified in today’s warning letters made claims about use in people, the agency is [concerned](#) that consumers may mistake unapproved chloroquine phosphate animal drugs for the human drug chloroquine phosphate, which is currently under study as a potential treatment for COVID-19. People should not take any form of chloroquine unless it has been prescribed by a licensed health care provider.

More Fraudulent Product Warnings: The FDA and Federal Trade Commission (FTC) issued a warning letter to a seller of fraudulent COVID-19 products, as part of the agency’s effort to protect consumers. The seller warned, [The Art of Cure](#), which offers homeopathic drug products for sale in the U.S. that are unapproved and misbranded with misleading claims that the products are safe and/or effective for the prevention and treatment of COVID-19. 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.

Updated Clinical Trial Guidance: The FDA added content to the question-and-answer appendix in its guidance titled [“Conduct of Clinical Trials of Medical Products during COVID-19 Public Health Emergency.”](#) The updated guidance includes new content on conducting remote clinician-reported outcome or performance outcome assessments; remote site monitoring; [electronic common technical document](#) requirements; investigational product administration by a local health care provider who is not a sub-investigator; and information for sponsors on who they should contact at the FDA regarding certain changes to ongoing trials. There is also updated information about obtaining informed consent from a patient who is unable to travel to the clinical trial site due to COVID-19 illness or travel restrictions, in situations where electronic informed consent is not an option.

Diagnostics Update to Date: During the COVID-19 pandemic, the FDA has worked with more than 315 test developers who have said they will be submitting emergency use authorizations (EUA) requests to FDA for COVID-19 tests. To date, 37 [emergency use authorizations](#) have been issued for COVID-19 tests. The FDA has been notified that more than 190 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 [COVID-19 Diagnostics FAQs](#) up to date.

Guidance for Specific Populations

No Evidence of COVID-19 Transmission via Food: The FDA posted tips on [Shopping for Food During the COVID-19 Pandemic - Information for Consumers](#) and a downloadable [PDF](#). These materials reassure consumers that there is currently no evidence of human or animal food or food packaging being associated with transmission of the coronavirus

that causes COVID-19. In an [interview](#) posted on the FDA's webpage, Deputy Commissioner for Food Policy and Response Frank Yiannas talks about the state of the U.S. food supply, both now and beyond this public health crisis. The topics he covers include food safety and food availability, as well as an update on implementation of the FDA Food Safety Modernization Act and FDA plans to release a blueprint for the New Era of Smarter Food Safety initiative.

Strategies for Long-Term Care Facilities: CDC released new guidance on [Key Strategies to Prepare for COVID-19 in Long-Term Care Facilities](#). COVID-19 cases have been reported in all 50 states, the District of Columbia, and multiple U.S. territories; many having wide-spread community transmission. Given the high risk of spread once COVID-19 enters a LTCF, facilities must act immediately to protect residents, families, and staff from serious illness, complications, and death. Strategies include keeping COVID-19 from entering your facility, identify infections early, prevent spread of COVID-19, assess supply of PPE and initiate measures to optimize supply, and identify and manage severe illness.

Considerations for Assisted Living Facilities: CDC released information with [Considerations When Preparing for COVID-19 in Assisted Living Facilities](#). Given their congregate nature and population served, assisted living facilities (ALFs) are at high risk of COVID-19 spreading and affecting their residents. If infected with SARS-CoV-2, the virus that causes COVID-19, assisted living residents—often older adults with underlying chronic medical conditions—are at increased risk of serious illness. As states are responsible for licensing and regulating ALFs, the structure and care provided within ALFs can be distinctly different from that of nursing homes. As such, implementing that guidance might present some unique challenges or additional considerations state by state.

Guidance for Exposed Healthcare Personnel: CDC released updates to their Interim U.S. Guidance for [Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with COVID-19](#) to align with revisions to the public health recommendations for community-related exposure to COVID-19, which changed the period of exposure risk from “onset of symptoms” to “48 hours before symptom onset.” Given the ongoing transmission of COVID-19 in communities across the United States and the role that asymptomatic and pre-symptomatic individuals with COVID-19 play in transmission, the feasibility and benefits of formal contact tracing for exposures in healthcare settings are likely limited and this guidance is being archived. No further updates are planned. Healthcare facilities should consider foregoing contact tracing for exposures in a healthcare setting in favor of universal source control for healthcare personnel (HCP) and screening for fever and symptoms of COVID-19 before every shift. Additional infection prevention and control recommendations, including more details about universal source control in healthcare settings are available.

Guidance for Public Health Management of Exposed Workers in Non-US Settings: CDC released Interim Operational Considerations for [Public Health Management of Healthcare Workers Exposed to or Infected with COVID-19: non-US Healthcare Settings](#). Healthcare workers (HCWs) are not only at higher risk of infection but can also amplify outbreaks within healthcare facilities if they become ill. Identifying and managing HCWs who have been exposed to a patient with COVID-19 is of great importance in preventing healthcare transmission and protecting staff and vulnerable patients in healthcare settings. These operational considerations are intended to be used by healthcare facilities and public health authorities in non-US healthcare settings, particularly focusing on low- and middle-income countries, assisting with the management of HCWs exposed to a person with confirmed or suspected COVID-19.

Resources for Hospitals and Healthcare Workers Preparing for COVID-19 Patients: CDC updated their suite of resources for [Hospitals and Healthcare Workers Preparing for COVID-19](#). The resources include checklists, guidances, print resources, phone scripts and other information to help these entities with preparation of COVID-19 patients.

Information for High Risk Populations: CDC updated the information and steps for [Groups at Higher Risk for Severe Illness](#) related to COVID-19. The information includes steps to take to reduce your risk of getting sick with COVID-19 and specific actions that can be taken based on conditions and other risk factors. As new information becomes available, CDC continues to add to this page.

Information for Pediatric Healthcare Providers: CDC updated their information for [Pediatric Healthcare Providers](#). The resource should be used to inform pediatric healthcare providers of information available on children with COVID-19.

The information includes guidance on maintaining childhood vaccines during the pandemic, burden of disease and risk factors, clinical presentation in children, clinical course and complications for children, treatment and prevention and additional information.

Funding Update

Funding Opportunity for Tribes: The Health Resources and Services Administration's (HRSA), Federal Office of Rural Health Policy will announce an upcoming notice of funding opportunity (NOFO) announcement that will be available to tribal organizations. Through the CARES Act, [HRSA received \\$15M to allocate to tribes, tribal organizations, urban Indian health organizations, and health service providers to tribes](#). The funding will provide support for the Tribes to prevent, prepare, and respond to COVID-19 in rural communities. The funding opportunity will be posted at the following link soon: www.grants.gov/web/grants/search-grants.html?keywords=hrsa-20-135.

If you have questions, contact Darcie.Johnston@hhs.gov. Stay safe.

Laura

Laura C. Trueman

Director, Office of Intergovernmental and External Affairs

U.S. Department of Health and Human Services

Washington D.C. 20201

How to Help – If you or your organization are interested in helping the effort to combat the spread of COVID-19, FEMA has established a website (www.fema.gov/coronavirus/how-to-help) with more information. Examples for the private sector include:

- To **sell medical supplies or equipment** to the federal government, please submit a price quote under the [COVID-19 PPE and Medical Supplies Request for Quotation](#). Full details can be found in the solicitation ([Notice ID 70FA2020R00000011](#)).
- This solicitation requires registration with the System for Award Management (SAM) in order to be considered for award, pursuant to applicable regulations and guidelines. Registration information can be found at <https://protect2.fireeye.com/url?k=fa52cae6-a606d39a-fa52fbd9-0cc47adc5fa2-e2b988ac64497b50&u=http://www.sam.gov/>. Registration must be “ACTIVE” at the time of award.
- If you have **medical supplies or equipment to donate**, please [provide us details](#) on what you are offering.
- If you or someone you know represent a **hospital or healthcare provider in need of medical supplies**, please contact your state, local, tribal or territory department of public health and/or emergency management agency.
- If you are interested in **doing business with FEMA and supporting the response to COVID- 19** with your company's non-medical goods and/or services, please submit your inquiry to the Department of Homeland Security (DHS) Procurement Action Innovative Response Team (PAIR) team at DHSIndustryLiaison@hq.dhs.gov.
- If you would like to meet with a federal agency regarding a **vaccine, diagnostic, therapeutic or other medical device** that you are developing for SARS-CoV-2 or COVID-19, please go to medicalcountermeasures.gov.
- For all other issues and concerns not related to offering products, services, or donations, please email nbeoc@max.gov.

For additional information please visit FEMA's website: <https://www.fema.gov/coronavirus/>.

COVID-19: Background & Additional Information

[The President's Coronavirus Guidelines for America](#)



Download the COVID-19 App

For background and the most up-to-date information, please visit the Centers for Disease Control and Prevention Coronavirus Disease 2019 website: [HERE](#)

Other Resources You May Find Helpful

U.S. Department of Health and Human Services: Twitter ([here](#)) & Facebook ([here](#))

Centers for Disease Control and Prevention: Twitter ([here](#)) & Facebook ([here](#))

What you should know:

- [Workplace, School, and Home Guidance](#)
- [People at Risk for Serious Illness from COVID-19](#)
- [How COVID-19 Spreads](#)
- [Symptoms](#)
- [Steps to Prevent Illness](#)
- [Frequently Asked Questions](#)
- [What to Do If You Are Sick with COVID-19](#)
- [Stigma Related to COVID-19](#)
- [Facts about COVID-19](#)
- [Information for People at Higher Risk and Special Populations](#)
- [Communication Resources](#)

Situation Updates:

- [Situation Summary](#)
- [Cases in the U.S.](#)
- [Global Locations with COVID-19](#)
- [Risk Assessment](#)
- [CDC in Action: Preparing Communities](#)

Information for Businesses:

- [Interim Guidance for Businesses and Employers](#)
- [Information for Communities, Schools, and Businesses](#)
- [Environmental Cleaning and Disinfection Recommendations – Community Facilities](#)
- SBA: [COVID-19 Resources](#)
- DOL: [Guidance for Preparing Workplaces for Coronavirus](#)
- DOL: [OSHA Resources for Workers and Employers on COVID-19](#)
- WHO: [Get Your Workplace Ready for COVID-19](#)
- CISA: [Risk Management for COVID-19](#)
- EPA: [Disinfectants for Use Against COVID-19](#)

Information for Travel and Transportation:

- [Information for Travel](#)
- [Guidance for Ships](#)
- [Guidance for Airlines and Airline Crew](#)
- State: [Travel Advisories](#)
- State: [Traveler's Checklist](#)
- State: [Smart Traveler Enrollment Program](#)
- DOT: [FAQs from FTA Grantees Regarding COVID-19](#)

Information for Healthcare Providers, First Responders, and Research Facilities:

- [Information for Healthcare Professionals](#)
- [Resources for State, Local, Territorial and Tribal Health Departments](#)
- [Resources for Healthcare Facilities](#)
- [Infection Prevention and Control Recommendations for Patients with COVID-19 or Persons Under Investigation in Healthcare Settings](#)
- [Information for Laboratories](#)
- [Resources for First Responders](#)
- [Guidance for Public Health Professionals Managing People with COVID-19 in Home Care and Isolation Who Have Pets or Other Animals](#)
- [FAQs and Considerations for Patient Triage, Placement and Hospital Discharge](#)
- [Guidance for Homeless Shelters](#)
- [Guidance for Hemodialysis Facilities](#)
- CMS: [Information on COVID-19 and Current Emergencies](#)
- CMS: [Guidance for Hospice Agencies](#)
- CMS: [Emergency Medical Treatment and Labor Act Requirements and Implications Related to COVID-19](#)
- CMS: [FAQs for State Survey Agency and Accrediting Organizations](#)
- EPA: [Disinfectants for Use Against COVID-19](#)

Information for Law Enforcement:

- [What Law Enforcement Personnel Need to Know](#)
- [Bureau of Prisons COVID-19 Resources](#)

Information for Families and Households:

- [Information on COVID-19 for Pregnant Women and Children](#)
- [Interim Guidance for Household Readiness](#)
- [Environmental Cleaning and Disinfection Recommendations for U.S. Households](#)
- [Guidance for Preventing the Spread of COVID-19 in Homes and Residential Communities](#)
- [FAQ: COVID-19 and Children](#)
- EPA: [Disinfectants for Use Against COVID-19](#)

Information for Schools and Childcare Providers:

- [Interim Guidance for Administrators of U.S. Childcare Programs and K-12 Schools](#)
- [Resources for Institutes of Higher Education](#)
- [Environmental Cleaning and Disinfection Recommendations – Community Facilities](#)
- USDA: [USDA Makes It Easier, Safer to Feed Children in California Amid Coronavirus Outbreak](#)

- DOE: [Resources for Schools and School Personnel](#)
- EPA: [Disinfectants for Use Against COVID-19](#)

Information for Community Events and Gatherings:

- [Interim Guidance for Mass Gatherings and Large Community Events](#)
- [Interim Guidance for Community- and Faith-Based Organizations](#)
- EPA: [Disinfectants for Use Against COVID-19](#)

Agency Resources and Information:

- [U.S. Department of Health and Human Services](#)
- [Centers for Medicare and Medicaid](#)
- [U.S. Food & Drug Administration](#)
- [U.S. Department of Agriculture](#)
- [U.S. Department of Defense](#)
- [U.S. Department of Education](#)
- [U.S. Department of Energy](#)
- [U.S. Department of Homeland Security](#)
- [U.S. Department of Labor](#)
- [U.S. Department of State](#)
- [U.S. Department of Veterans Affairs](#)
- [U.S. Environmental Protection Agency](#)
- [U.S. Small Business Administration](#)

Herron, Robin

From: Jeffrey Dickerson [REDACTED] >
Sent: Saturday, April 18, 2020 9:04 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;Laird, 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);lrice@ldxsolutions.com;Darryl Graham;Matthew Hicks;Jeffrey Dickerson
Subject: Interagency COVID-19 Response Planning Team Update, 180900APR20

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Sir – This morning's update is outlined below:

1. **GWCC ACF-Atlanta:** GWCC ACF-Atlanta ready to receive patients. All systems, personnel, and supplies are operational. The facility is IOC, and will be FOC in the next 24-48 hours as remaining staff arrive.

2. **Additional Augmentation Efforts:** The Rome site is delayed two days.

Rome: The FOC date for this site shifted from 25APR to 27APR as a result of equipment shipping delays.

The medical headwalls for the units for Rome are delayed in transit and will not arrive in Wisconsin until Tuesday, 21 APR.

Albany: All containers and the back-up generator are on site, and utilities will be tied in on Monday. The construction site is preparing for inclement weather on Sunday night. FOC expected 28APR.

Macon: Site preparation and container production continues. We're continuing to work on the MOU and equipment needed for the site.

FOC expected 5MAY.

Gainesville: Container production is underway, and we're continuing to work on the MOU and equipment needed for the site. FOC expected 5MAY.

3. **Additional Hospital Staffing:** **NO CHANGE:** We conducted a regional staffing capabilities call with Region C hospitals on 17APR, and they have no current/expected staffing shortfalls. We will continue with regional staffing capabilities calls Monday, focused on Region I, to assess their staffing shortfalls and identify hospitals that need additional assistance. We are focusing our staffing augmentation on long term care facilities as we see an increased demand signal there with more facilities reporting staff shortages. We are deploying additional staffing to fill staffing shortfalls at Thomson Nursing Home, as well as facilities in Bainbridge and Byromville.

4. **DBHDD:** **NO CHANGE:** 6 of 16 additional staffing personnel recently arrived at Central State Hospital in order to fill staffing shortages.

Vr,
Jeff

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

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Email: [REDACTED]
Cell: [REDACTED]

Herron, Robin

From: FEMA-IGA <FEMA-IGA@fema.dhs.gov>
Sent: Saturday, April 18, 2020 12:20 PM
Subject: FEMA Advisory: COVID-19 Daily Briefing Points (April 18, 2020)
Attachments: FEMA_Advisory_COVID19DailyBriefingPoints_20200418.pdf; ESF15_DailyBriefingPoints_20200418 FINAL.pdf

Importance: High

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FEMA ADVISORY – APRIL 18, 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 the 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:

- On **April 16**, President Trump released [Guidelines for Opening America Up Again](#), providing a plan for rolling back social distancing measures and reopening the country's economy in several phases, depending on location.
 - Under the guidelines, states will need to meet six metrics that include demonstrating a downward trajectory of COVID-19 cases over a 14-day period and a robust system for testing health care workers before they can proceed to a phased opening.
 - The guidelines also outline state responsibilities to have in place before moving into a reopening plan: protecting workers in critical industry, particularly protecting the most vulnerable, those who live and work in senior care facilities, and having a plan for testing symptomatic individuals with a focus on vulnerable populations.
 - The federal government will continue to work with governors across the country to ensure that they have the equipment and the supplies and the testing resources to reopen safely and responsibly.

- As of **April 17**, FEMA, HHS, and the private sector combined have coordinated the delivery of or are currently shipping: 55 million N95 respirators, 69 million surgical masks, 5.9 million face shields, 10.5 million surgical gowns, 523 million gloves, 10,998 ventilators and 8,450 federal medical station beds.
 - FEMA continues to expedite movement of commercially pre-sourced and commercially procured critical supplies from the global market to medical distributors in various locations across the U.S. through [Project Airbridge](#).
 - On **April 17**, Vice President Pence issued a letter to the nation's governors summarizing all the medical equipment and supplies that have been distributed to each state from FEMA between the first of this month and April 14th through Project Airbridge and through the commercial supply network.
- On **April 17**, the Cybersecurity and Infrastructure Security Agency released version 3.0 of the [Essential Critical Infrastructure Workers guidance](#) to help state and local jurisdictions and the private sector identify and manage their essential workforce while responding to COVID-19.
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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

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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.



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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Saturday, April 18, 2020 1:27 PM
To: Herron, Robin
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 18
Attachments: ESF15_DailyBriefingPoints_20200418_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.

FEMA Advisory

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Herron, Robin

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Sent: Saturday, April 18, 2020 1:27 PM
To: Broce, Candice
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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Saturday, April 18, 2020 1:27 PM
To: Fleming, Tim
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 18
Attachments: ESF15_DailyBriefingPoints_20200418_FINAL.pdf

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Intergovernmental Affairs

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Sent: Saturday, April 18, 2020 1:27 PM
To: Caraway, Ian
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 18
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Herron, Robin

From: Woody Radcliffe <Woody.Radcliffe@gema.ga.gov>
Sent: Saturday, April 18, 2020 3:43 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);Laird, 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;Minarcine, Scott
Subject: Medical Facility EEI Status Report for April 18, 2020
Attachments: Medical Facility EEI Status Report 04-18-2020.xlsx

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Director Bryson,

See attached Medical Facility Essential Elements of Information Status Tracker information for April 18, 2020.

These numbers don't appear to be as accurate as in days past. Multiple hospitals have not updated their hospital bed counts/COVID numbers in DPH's WebEOC within the past 24 hours (as of 2:45 PM) to include the following:

Stephens County Hospital – Toccoa
Wayne Memorial Hospital – Jesup
Southeast Georgia Health System St. Mary's – St. Mary's
Coliseum Medical Center – Macon
Northridge Medical Center – Commerce
Coliseum Northside Hospital – Macon
Washington County Regional Medical Center – Sandersville
Southwell Medical – Adel
Emory Johns Creek – Johns Creek
Piedmont Newton Hospital – Covington
Jefferson Hospital – Louisville
Lifebrite Community Hospital of Early – Blakely
Donalsonville Hospital – Donalsonville
Jenkins County Medical Center – Millen
Effingham Health System – Springfield
Piedmont Atlanta Hospital – Atlanta
Piedmont Henry Hospital – Stockbridge
Appling Healthcare – Baxley
Phoebe Worth Medical Center – Sylvester
Monroe County Hospital – Forsyth
Jeff Davis Hospital – Hazlehurst
Crisp Regional Hospital – Cordele
Piedmont Mountainside – Jasper
University Hospital-McDuffie – Thomson

***All Hospitals are asked to update DPH's WebEOC by 9AM daily.

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
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woody.radcliffe@gema.ga.gov

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woody.radcliffe@gema.ga.gov

Herron, Robin

From: Jeffrey Dickerson [REDACTED] >
Sent: Saturday, April 18, 2020 6:22 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;Lairt, 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);lrice@ldxsolutions.com;Darryl Graham;Matthew Hicks;Jeffrey Dickerson
Subject: Interagency COVID-19 Response Planning Team Update, 181830APR20

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Sir – This evening’s update is outlined below:

1. **GWCC ACF-Atlanta:** The site was IOC at 0800 this morning, and one patient is expected to arrive later this evening from Wellstar Cobb Hospital.

2. **Additional Augmentation Efforts:**

Rome: The FOC date for this site shifted from 25APR to 27APR as a result of equipment shipping delays.

Albany: Roof mounted HVAC was installed yesterday, and all on site work is proceeding as planned with the potential of being 24 hours ahead of schedule. FOC is still expected 28APR.

Macon: All containers are on schedule, and site work coordination continues with Navicent. FOC expected 5MAY.

Gainesville: Container construction and equipment coordination is ongoing, and durable medical equipment will be ordered on Monday. FOC expected 5MAY.

3. **Additional Hospital Staffing:** HHS medical staffing teams are currently on the ground and will work with regional hospitals to get integrated and will support operations while waiting for temporary medical units to come online. Their distribution is outlined below

Rome - 18 personnel

Macon - 18 personnel

Gainesville - 18 personnel

Albany - 38 personnel (DMAT team)

4. **DBHDD:** NSTR

Vr,
Jeff

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

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Sent: Saturday, April 18, 2020 6:22 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;Laird, 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);lrice@ldxsolutions.com;Darryl Graham;Matthew Hicks;Jeffrey Dickerson
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GA DOD Interagency Coordinator for COVID-19 Response
Email: [REDACTED]
Cell: [REDACTED]

Herron, Robin

From: Yanick, Brittany M. EOP/WHO <Brittany.M.Yanick@who.eop.gov>
Sent: Saturday, April 18, 2020 8:23 PM
To: Yanick, Brittany M. EOP/WHO
Subject: THE LATEST | Paycheck Protection Program

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Governors Communicators,

Thank you for your efforts in the whole-of-America approach and your continued efforts to communicate effectively with your states. On April 16th, the Paycheck Protection Program (PPP) experienced a lapse in appropriations and by law, the [Small Business Administration](#) is no longer able to issue new loan approvals. Until Congress appropriates more funding for this program, small businesses are no longer able to participate and get the resources they need. You can find the latest state breakdown [here](#).

Below are topline talking points, resources, and quotes from lawmakers surrounding the many small business success stories we have witnessed across the country from the Paycheck Protection Program.

TOPLINE MESSAGE

- President Trump continues to fight every day for the American people, mobilizing the full resources of the government and private sector to combat the coronavirus.
- The Administration launched the Paycheck Protection Program on April 3rd, which has provided \$349 billion in forgivable loans to keep small businesses open and workers on payrolls.
- The Small Business Administration processed more than 14 years' worth of loans in less than 14 days.

On April 4th, President Trump stated: "In 24 hours, the Small Business Administration and over 1,200 lending partners processed over 28,000 loans – it's so far ahead of schedule – and billions of billions of dollars. It's worked out incredibly well. If we run out of funding for the employee retention program, I will immediately ask Congress for more money."

SUCCESS OF THE PAYCHECK PROTECTION PROGRAM

- From its start on April 3rd, PPP provided payroll assistance to more than 1.6 million small businesses in all 50 states and territories.
- Nearly 5,000 lenders participated in this critical program, including significant lending by community banks and credit unions.
- Nearly 20% of the amount approved was processed by lenders with less than \$1 billion in assets, and approximately 60% of the loans were approved by banks with \$10 billion of assets or less.
- No lender accounted for more than 5% of the total dollar amount of the program.

- The vast majority of these loans — 74% of them — were for under \$150,000, demonstrating the accessibility of this program to even the smallest of small businesses.

WHERE DO WE STAND?

- For small businesses and individuals who are unable to apply for a forgivable Paycheck Protection Program loan to cover their payroll and keep their business afloat now that the program has run out of funds, the House Republican Conference has created a website so they can share their story [here](#).
- To see stories from small businesses who have been impacted by this lapse in PPP funding across the country, click [here](#).
- The Small Business Administration created a state-by-state breakdown of Paycheck Protection Loans that have been approved through April 13, 2020. These are broken down by states and territories, the loan size, and industry by subsector. For more information, click [here](#).

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

President Donald Trump

"Democrats are blocking additional funding for the popular Paycheck Protection Program. They are killing American small business. Stop playing politics Dems! Support Refilling PPP NOW – it is out of funds!"

Senate Majority Leader, Mitch McConnell (R-KY)

For seven long days, Democrats have been blocking a \$250 billion refill for the Paycheck Protection Program, and on Thursday morning the loan fund finally ran out of money. "Every Senate Republican was ready to act today," Majority Leader Mitch McConnell said on the Senate floor Thursday. "But Democrats would not let us reopen the program."

Senate Republican Conference Chairman, Senator John Barrasso (R-WY)

"American workers need their paychecks. The Pelosi-Schumer paycheck blockade must end now. The Paycheck Protection Program has made sure millions of Americans keep getting paid during this crisis. We need further funding to continue this vital work. The program is out of money, and there's no time to delay. The millions of Americans who work for small businesses deserve better than to be used as bargaining chips by Chuck Schumer and Nancy Pelosi. Republicans are offering a simple solution to keep businesses alive and to keep people on the payroll. Democrats need to stop playing politics with our economic survival."

Senator Joe Manchin (D-WV)

"Congress must act in a bipartisan way to quickly invest more funding into the PPP and we need to do so in a way that protects small businesses and healthcare providers across rural West Virginia. We've always come together during a crisis and I believe we will again."

Republican Whip, Steve Scalise (R-LA)

"Speaker Pelosi and Minority Leader Schumer need to stop holding small businesses and workers across America hostage to their endless spending demands and work with us to keep this program alive so that our small businesses can stay alive, along with the millions of jobs they provide to hard-working families. The solution is simple: a clean, standalone funding bill for the PPP. No games, no gimmicks. Democrats must rise to the moment and join Republicans to deliver the critical emergency relief that our small business owners and workers need and deserve."

Congresswoman Diana DeGette (D-CO)

“Congress must immediately replenish funds for the Paycheck Protection Program. Millions of small businesses are counting on this program to cover expenses and pay their workers. We have to get this right.”

Congressman Mark Walker (R-NC)

“PPP is now exhausted and it’s because of politicians thinking their agenda is more important than keeping people employed. This program has already helped more than 24,000 small businesses in North Carolina keep their workers paid. People’s livelihoods are not bargaining chips.”

Congresswoman Angie Craig (D-MN)

“With the devastating news that funding for PPP loans has been depleted, I urge leadership and all of my colleagues to set any differences we may have aside and support the economic engines fueling main streets across our country. The cost of inaction is too high, American lives are at stake. Let’s get this done right now.”

Congressman Ron Wright (R-TX)

“5.2 million Americans filed for unemployment in the last week, and the Paycheck Protection Program is officially out of money. It’s time for Democrats to stop holding American jobs hostage. Our workers and small businesses deserve better than this.

Congresswoman Kendra Horn (D-OK)

“We cannot treat relief for small businesses like a political football. I’m calling on both parties to come together to fund PPP. We must strengthen access for our smallest businesses, but that shouldn’t stop us from taking action. PPP needs funding now.”

Congressman Lee Zeldin (R-NY)

“The Paycheck Protection Program (PPP) and Emergency Injury Disaster Loan (EIDL) Program of the Small Business Administration have run dry today due to inexcusable inaction by Congress. There will be small businesses that never reopen because a few members of Congressional leadership refused to allow a vote.

Herron, Robin

From: Jeffrey Dickerson [REDACTED]
Sent: Sunday, April 19, 2020 9:12 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;Laird, 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);lrice@ldxsolutions.com;Darryl Graham;Matthew Hicks;Jeffrey Dickerson
Subject: Interagency COVID-19 Response Planning Team Update, 190900APR20

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Sir – This morning's update is outlined below:

1. **GWCC ACF-Atlanta:** One patient last night from Wellstar Cobb Hospital. We have a strategy meeting this morning at 0900 to discuss staffing solutions for Atlanta based long term care facilities with a high number of COVID-19 population and staffing shortages.

2. **Additional Augmentation Efforts:**

Rome: The FOC date for this site may shift one more day to the right to 28APR as a result of equipment shipping delays.
Albany: Roof mounted HVAC was installed yesterday, and all on site work is proceeding as planned with the potential of being 24 hours ahead of schedule. FOC is still expected 28APR.
Macon: All containers are on schedule, and site work coordination continues with Navicent. FOC expected 5MAY.
Gainesville: Container construction and equipment coordination is ongoing, and durable medical equipment will be ordered on Monday. FOC expected 5MAY.

NO CHANGES IN THE OTHER LINES OF EFFORT

3. **Additional Hospital Staffing:** HHS medical staffing teams are currently on the ground and will work with regional hospitals to get integrated and will support operations while waiting for temporary medical units to come online. Their distribution is outlined below

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4. **DBHDD:** NSTR

Vr,
Jeff

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

From: Jeffrey Dickerson [mailto:[REDACTED]]
Sent: Saturday, April 18, 2020 6:22 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>; Laitet, Julio R Col USAF 116 ACW (USA) <julio.r.laitet.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) <randall.v.simmons.mil@mail.mil>; 'lrice@ldxsolutions.com' <lrice@ldxsolutions.com>; Darryl Graham <dgraham@gwcc.com>; Matthew Hicks <mhicks@gmh.edu>; Jeffrey Dickerson [REDACTED]
Subject: Interagency COVID-19 Response Planning Team Update, 181830APR20

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

Herron, Robin

From: Jeffrey Dickerson [REDACTED]
Sent: Sunday, April 19, 2020 9:12 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;Laird, 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);lrice@ldxsolutions.com;Darryl Graham;Matthew Hicks;Jeffrey Dickerson
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Subject: Interagency COVID-19 Response Planning Team Update, 181830APR20

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

From: FEMA-IGA <FEMA-IGA@fema.dhs.gov>
Sent: Sunday, April 19, 2020 12:32 PM
Subject: FEMA Advisory: COVID-19 Daily Briefing Points (April 19, 2020)
Attachments: FEMA_Advisory_COVID19DailyBriefingPoints_20200419.pdf; ESF15_DailyBriefingPoints_20200419 FINAL.pdf

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FEMA ADVISORY – APRIL 19, 2020

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

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- As of **April 18**, FEMA, HHS, and the private sector combined have coordinated the delivery of or are currently shipping: 55.8 million N95 respirators, 77.1 million surgical masks, 6.1 million face shields,

11.4 million surgical gowns, 564 million gloves, 10,998 ventilators and 8,450 federal medical station beds.

- FEMA continues to expedite movement of commercially pre-sourced and commercially procured critical supplies from the global market to medical distributors in various locations across the U.S. through [Project Airbridge](#).
- On **April 17**, Vice President Pence issued a letter to the nation's governors summarizing all the medical equipment and supplies that have been distributed to each state from FEMA between the first of this month and April 14th through Project Airbridge and through the commercial supply network.
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 - USDA will partner with regional and local distributors to purchase \$3 billion in fresh produce, dairy and meat products. The distributors and wholesalers will provide these items to food banks, community and faith-based organizations and other non-profits serving people in need.

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

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Sunday, April 19, 2020 1:11 PM
To: Herron, Robin
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 19
Attachments: ESF15_DailyBriefingPoints_20200419_FINAL.pdf

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U.S. DEPARTMENT OF HOMELAND SECURITY

Intergovernmental Affairs

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Sunday, April 19, 2020 1:12 PM
To: Broce, Candice
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 19
Attachments: ESF15_DailyBriefingPoints_20200419_FINAL.pdf

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Sunday, April 19, 2020 1:12 PM
To: Caraway, Ian
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 19
Attachments: ESF15_DailyBriefingPoints_20200419_FINAL.pdf

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Sent: Sunday, April 19, 2020 1:12 PM
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Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 19
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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Sunday, April 19, 2020 1:12 PM
To: Fleming, Tim
Subject: Coronavirus (COVID-19) Pandemic Whole-of-America Response - April 19
Attachments: ESF15_DailyBriefingPoints_20200419_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 19, 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 the 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:

- On April 16, President Trump released [Guidelines for Opening America Up Again](#), providing a plan for rolling back social distancing measures and reopening the country's economy in several phases, depending on location.
 - Under the guidelines, states will need to meet six metrics that include demonstrating a downward trajectory of COVID-19 cases over a 14-day period and a robust system for testing health care workers before they can proceed to a phased opening.
 - The guidelines also outline state responsibilities to have in place before moving into a reopening plan: protecting workers in critical industry, particularly protecting the most vulnerable, those who live and work in senior care facilities, and having a plan for testing symptomatic individuals with a focus on vulnerable populations.
 - The federal government will continue to work with governors across the country to ensure that they have the equipment and the supplies and the testing resources to reopen safely and responsibly.

- As of April 18, FEMA, HHS, and the private sector combined have coordinated the delivery of or are currently shipping: 55.8 million N95 respirators, 77.1 million surgical masks, 6.1 million face shields, 11.4 million surgical gowns, 564 million gloves, 10,998 ventilators and 8,450 federal medical station beds.
 - FEMA continues to expedite movement of commercially pre-sourced and commercially procured critical supplies from the global market to medical distributors in various locations across the U.S. through [Project Airbridge](#).
 - On April 17, Vice President Pence issued a letter to the nation's governors summarizing all the medical equipment and supplies that have been distributed to each state from FEMA between the first of this month and April 14th through Project Airbridge and through the commercial supply network.
- The U.S. Department of Agriculture announced the [Coronavirus Food Assistance Program \(CFAP\)](#), an immediate relief program that provides \$19 billion in support to farmers and ranchers, maintains the integrity of our food supply chain and ensures access to food for those in need.
 - Direct support to farmers and ranchers provides \$16 billion based on actual losses for agricultural producers.
 - USDA will partner with regional and local distributors to purchase \$3 billion in fresh produce, dairy and meat products. The distributors and wholesalers will provide these items to food banks, community and faith-based organizations and other non-profits serving people in need.

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Sent: Sunday, April 19, 2020 1:12 PM
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Herron, Robin

From: Woody Radcliffe <Woody.Radcliffe@gema.ga.gov>
Sent: Sunday, April 19, 2020 3:18 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);Laird, 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;Minarcine, Scott
Subject: Medical Facility EEI Status Report for April 19, 2020
Attachments: Medical Facility EEI Status Report 04-19-2020.xlsx

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Director Bryson,

See attached Medical Facility Essential Elements of Information Status Tracker information for April 19, 2020.

These numbers may not be as accurate as in days past. Multiple hospitals have not updated their hospital bed counts/COVID numbers in DPH's WebEOC within the past 24 hours (as of 2:28 PM) to include the following:

Stephens County Hospital – Toccoa
Wayne Memorial Hospital – Jesup
Coliseum Medical Center – Macon
Northridge Medical Center – Commerce
Coliseum Northside Hospital – Macon
Southwell Medical – Adel
Piedmont Newton Hospital – Covington
Lifebrite Community Hospital of Early – Blakely
Donalsonville Hospital - Donalsonville
Piedmont Atlanta Hospital – Atlanta
Appling Healthcare – Baxley
Phoebe Worth Medical Center – Sylvester
Monroe County Hospital – Forsyth
Crisp Regional Hospital – Cordele
University Hospital-McDuffie – Thomson
GWCC Alternate Care Facility – Atlanta
Piedmont Columbus Regional – Northside
Piedmont Columbus Regional - Midtown Camp
Advent Health Murray - Chatsworth
Warm Springs Medical Center – Warm Springs

Additional hospitals have not updated their hospital bed counts/COVID numbers in DPH's WebEOC today (as of 2:28 PM) to include the following:

Jeff Davis Hospital – Hazlehurst
Jefferson Hospital – Louisville

NGMC Gainesville RCH - Gainesville
NGMC Braselton - Braselton
NGMC Barrow - Winder
NGMC Lumpkin - Dahlonega

***All Hospitals are asked to update DPH's WebEOC by 9AM daily.

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: FEMA-IGA <FEMA-IGA@fema.dhs.gov>
Sent: Sunday, April 19, 2020 3:40 PM
Subject: FEMA Advisory: COVID-19 Best Practices Press Release (April 19, 2020)
Attachments: FEMA_Advisory_COVID19_Best Practices_20200419.pdf

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FEMA ADVISORY – APRIL 19, 2020

Coronavirus (COVID-19) Pandemic: Best Practices

FEMA and the U.S. Department of Health and Human Services (HHS) are collecting and sharing best practices and lessons learned from the whole-of-America response to the coronavirus (COVID-19) pandemic. The best practices are intended to help medical practitioners, emergency managers, and other critical stakeholders learn from each other's approaches and apply solutions to current response and recovery operations.

The [FEMA Coronavirus Emergency Management Best Practices](#) page provides a one-stop shop to explore best practices and lessons learned across all levels of government, private sector, academic institutions, professional associations, and other organizations. HHS has a comprehensive [Novel Coronavirus Resources](#) page that highlights technical resources and information for the medical community and emergency responders.

Best practices are organized around five themes:

- *Helping People*, which includes best practices on topics such as crisis counseling resources and anticipating and attending to civil rights;
- *Government Operations* best practices such as public information and continuity of operations considerations;
- *Private Sector and Infrastructure*, which includes best practices for commercial trucking and food stores;
- *Recovery Planning and Implementation*, to include the newly released FEMA Disaster Financial Management Guide and economic recovery considerations; and

- *Medical Supplies and Equipment*, including best practices for the preservation of personal protective equipment while ensuring workers are protected.

Please visit www.coronavirus.gov for current health-related guidance and information on COVID-19.

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

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Sunday, April 19, 2020 4:11 PM
To: Caraway, Ian
Subject: FEMA Advisory: COVID-19 Best Practices

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April 19, 2020

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Herron, Robin

From: Office of Intergovernmental Affairs (IGA) <IGA@messages.dhs.gov>
Sent: Sunday, April 19, 2020 4:11 PM
To: Broce, Candice
Subject: FEMA Advisory: COVID-19 Best Practices

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FEMA Mission

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