

Coronavirus (COVID-19) Pandemic Messaging and Resource Links

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CDC Public Guidance

- Following state, tribal and local officials' instructions to stay at home is an important way to help. Social distancing not only protects you, but it protects the people you care about.
 - [COVID-19 spreads](#) between people who are in close contact with one another—that's why the CDC recommends staying at least 6 feet away from other people.
 - Staying home and limiting your interactions with people can break the chain of transmission and halt the spread of this new virus.
 - Wearing a cloth face mask in public is recommended when safe social distancing is difficult to maintain.
 - People who are infected but do not have symptoms likely play an important role in the spread of COVID-19.
- Recent studies indicate that the virus can be spread by people before they develop symptoms (pre-symptomatic) or people who never develop symptoms (asymptomatic).
 - [CDC's recent article](#) about an outbreak in a skilled nursing facility in King County, Washington, underscores the importance of social distancing to break the train of COVID-19 transmission, especially when there is spread from people who have no symptoms.
- Most U.S. states now report some community spread of COVID-19.
 - See [CDC's map](#) to stay up to date on what is happening in your state.
- On April 8, the U.S. government announced [new guidance](#) to help the most critical workers serving on the front lines to quickly return to work after potential exposure to someone with COVID-19, provided those workers are symptom-free.
- CDC has [recommendations](#) for things you can do to support anxiety and stress management

CDC Respirator Guidance

- CDC recognizes that—when N95 respirators are running low—crisis capacity or alternate [strategies to optimize the supply of respirators](#) in healthcare settings may be considered.
 - These strategies to conserve supply would come after the use of conventional and contingency capacity strategies.
 - These measures may include respirator use approved under international standards, similar to NIOSH-approved N95 respirators.
 - CDC has not approved methods to decontaminate disposable respirators prior to reuse.

Combating Disinformation and Rumors

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

Community-Based Testing Sites

- Federal officials and the U.S. Public Health Service have been working closely with state, local and private sector partners to bolster testing capabilities and supplies.
- The CBTS program was created to bring testing capabilities to vulnerable areas across the country.
 - CBTSs are another tool for states, local public health systems and healthcare systems to use as they work together to stop the spread of COVID-19 in their communities.
 - As state and local public health departments increase testing capacity, the federal role will diminish.
 - The federal government is poised to ensure states are fully supported until they are ready to take over management of the CBTS program.
 - Now that the FDA has given approval for individuals to self-administer COVID-19 nasal swab tests at testing sites, the demand for PPE and trained health care providers will be significantly reduced.
- CBTS are focused on testing test healthcare facility workers, first responders and Americans who need it most first.
 - To date, federal Community-Based Testing Sites (CBTS) across 12 states have screened more than 80,000 individuals.
 - People without symptoms who have not been exposed to COVID-19 should not be tested.

Defense Production Act

- On April 8, the Department of Health and Human Services [announced the first contract for ventilator production rated under the Defense Production Act](#), to General Motors.
 - The rating of this contract under the DPA follows President Trump's direction to HHS Secretary Alex Azar to invoke the Defense Production Act with regard to GM's production of ventilators on March 27.
 - The invocation of the DPA demonstrates that the President will not hesitate to use the full authority of the federal government to combat this crisis.
- On April 2, President Trump invoked the Defense Production Act to increase ventilator production. The order directed the supply of materials to make ventilators to six companies.
- The President also signed an [Executive Order](#) on March 27 which clarifies and updates Presidential delegations to federal agencies under the Defense Production Act (DPA).
 - For the purposes of COVID-19 response, the EO delegates a number of DPA authorities jointly to the Secretary of Health and Human Services (HHS) and the Secretary of Homeland Security (DHS).
 - The EO also assigns the Assistant to the President for Trade and Manufacturing Policy (Peter Navarro) as the National Defense Production Act Policy Coordinator.
- On March 18, President Trump issued an [Executive Order](#) outlining use of the Defense Production Act (DPA) in response to COVID-19 and supplementing Executive Order 13603, which delegates DPA authority to federal agencies.
 - The order provided federal departments with the authority to take actions implementing the DPA, if and as necessary. More information is available in the [DPA Fact Sheet](#).

Defense Production Act – Export of Critical PPE

- On **April 3**, President Trump issued “Memorandum on Allocating Certain Scarce or Threatened Health and Medical Resources to Domestic Use” directing DHS and FEMA, in consultation with the U.S. Department of Health and Human Services to use the Defense Production Act to keep scarce medical resources within the United States for domestic use.
- Personal Protective Equipment (PPE) subject to this policy includes a variety of respirators including N95 respirators, surgical masks and surgical gloves.
- Customs and Border Patrol is supporting FEMA to temporarily detain export shipments of PPE.
- CPB will hold identified export shipments, and FEMA will determine whether to:
 - Return the PPE for use within the United States;
 - Purchase the PPE on behalf of the United States; or,
 - Allow it to be exported

FDA Ventilator Guidance

- On **March 24**, the FDA issued an Emergency Use Authorization (EUA) for Ventilators, which allows anesthesia gas machines and positive pressure breathing devices to be modified for use as ventilators.
 - Assists 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.
- FDA provides information for manufacturers on adding production lines or alternative sites, like automobile manufacturers, for making more ventilators during COVID-19 pandemic.

FEMA Public Assistance: Eligible Emergency Protective Measures

- Under the nationwide emergency declaration, FEMA may reimburse eligible emergency protective measures taken to respond to the COVID-19 emergency at the direction or guidance of public health officials. Some examples of eligible expenses outlined in the [fact sheet](#) include:
 - Management, control and reduction of immediate threats to public health and safety.
 - Emergency medical care
 - Medical sheltering (e.g. when existing facilities are reasonably expected to become overloaded in the near future and cannot accommodate needs.
 - Purchase and distribution of food, water, ice, medicine, and other consumable supplies, to include personal protective equipment and hazardous material suits movement of supplies and persons.
 - Communications of general health and safety information to the public.
 - Reimbursement for state, tribe, territory and/or local government force account overtime costs.
- While some activities listed may be eligible for funding through HHS/CDC, final reimbursement determinations will be coordinated by HHS and FEMA. FEMA will not duplicate any assistance provided by HHS/CDC).

FEMA Public Assistance: Non-Congregate Sheltering

- Under the national emergency declaration, FEMA's Regional Administrators have been delegated authority to approve requests for non-congregate sheltering for the duration of the Secretary of Health and Human Services' declaration of a Public Health Emergency for COVID-19.
- FEMA recognizes that non-congregate sheltering may be necessary in this Public Health Emergency to save lives, to protect property and public health, and to ensure public safety, as well as to lessen or avert the threat of a catastrophe.
- FEMA has outlined criteria that must be considered before setting up non-congregate sheltering and support services in an [online fact sheet](#) and [Q&A document](#).

FEMA Public Assistance: Private Nonprofit Organizations

- Under the nationwide emergency declaration and subsequent major disaster declarations, [certain private non-profit \(PNP\) organizations](#) are eligible to apply for funding through FEMA's Public Assistance program.
 - If a government entity legally responsible to provide services to protect life, public health, and safety enters into an agreement with a PNP to provide those services (e.g., sheltering or food distribution). In these cases, Public Assistance funding is provided to the legally responsible government entity, which then pays the PNP.
 - In limited cases, PNPs that own or operate an eligible facility and perform eligible work to save lives or protect health and safety in response to the COVID-19 incident, such as providing emergency, medical or custodial care services for which they are legally responsible, may be eligible for reimbursement of costs as a Public Assistance applicant.
- For PNPs, operating costs (such as patient care and administrative activities) are generally not eligible even if the services are emergency services, unless the PNP performs an emergency service at the request of and certified by the legally responsible government entity.

FEMA Public Assistance: Simplified Application

- FEMA is [simplifying the Public Assistance application and funding process](#) to address the magnitude of the COVID-19 event and allow local officials to receive eligible funding more quickly.
 - FEMA is developing a simplified online form that applicants can complete, and on which they may explain work activities, answer basic questions, provide limited supporting documentation, and provide a cost estimate.
 - FEMA and the recipient will review this information, follow up with limited requests for additional information if necessary, and award assistance. Recipients will have access to all projects in [PA Grants Portal](#), consistent with the traditional PA process.
- Eligibility guidance on what FEMA can fund will be updated on the [Public Assistance Policy, Guidance, and Factsheets page on FEMA.gov](#) and the COVID-19 page on [FEMA.gov](#). Application support and tutorials are available on the resource tab in PA Grants Portal.

FEMA Disaster Response Capacity

- Even as FEMA is focused on responding to COVID-19, we are also preparing and maintaining readiness for other disasters to include spring flooding, severe weather and the upcoming hurricane season.
- FEMA currently has 2,637 employees supporting the COVID-19 pandemic response out of a total 20,550 agency employees who are prepared to respond to other emergencies should they occur.
- FEMA considers every employee an emergency manager, and each employee has regular and recurring emergency management responsibilities.
 - The agency has developed a series of online trainings to expand the cross-training of its workforce and build additional capacity.
- Should additional support be needed, FEMA is able to activate the Department of Homeland Security's surge capacity force composed of federal employees from DHS and other agencies.

FEMA Suspends Rent Collection for Three Months

- On April 8, FEMA announced suspension of rent payment for disaster survivors living in FEMA-purchased temporary housing units in California, Florida, North Carolina and Texas due to the coronavirus (COVID-19) pandemic.
 - The suspension applies to April, May and June rent only. Rent collection is expected to resume July 1.
 - FEMA will mail a letter to all affected survivors about their rent suspension.
- To prevent a duplication of benefits, survivors with insurance that covers additional living expenses must pay FEMA either the fair market rental value, or the amount of the insurance benefits, whichever is less. Fair market value is established by the U.S. Department of Housing and Urban Development.

Flood Insurance Grace Period for Policy Renewals

- To help serve National Flood Insurance Program (NFIP) customers who may be experiencing financial hardships due to impacts of the COVID-19 pandemic, [FEMA is extending the grace period to renew flood insurance policies](#) from 30 to 120 days.
 - This extension applies to NFIP flood insurance policies with an expiration date between February 13 and June 15, 2020.
 - For more information about renewing flood insurance policies or resolving an underpayment, policyholders can contact their insurance carriers or call the National Flood Insurance Program Call Center at 1-877-336-2627.

Help for Businesses

- On April 3, the Small Business Administration Paycheck Protection Program began offering nearly \$350 billion in loans to small businesses. More than 17,500 loans valued at over \$5.4 billion were approved on the first day of the Paycheck Protection Program.
 - If an employer maintains their workforce, the SBA will forgive the portion of the loan used to cover the first eight weeks of payroll and certain other expenses.

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- In addition to its traditional loan programs, the SBA is also providing Economic Injury Disaster Loans and forgiveness for up to six months of new and existing loans.
- The U.S. Department of Labor [announced the availability of up to \\$100 million for Dislocated Worker Grants](#) to help address the workforce-related impacts related to COVID-19.

Help for Individuals and Families

- Coping with stress: CDC has [recommendations](#) for things you can do to support yourself by managing your anxiety and stress.
- The Substance Abuse and Mental Health Services Administration's National Disaster Distress Line is available to anyone experiencing emotional distress related to a disaster, including COVID-19. Those in need of emotional support can call 1-800-985-5990 or text TalkWithUs to 66746 to be connected to a trained, caring counselor. The deaf or hard of hearing can access the helpline by text or using their preferred relay service. Spanish Speakers can call 1-800-985-5990 and press "2". From the 50 states, text Hablanos to 66746, those in Puerto Rico, text Hablanos to 1-787-339-2663.
- If you or a loved one need help, call the National Domestic Violence Hotline at 1-800-799-7233.
- The U.S. Department of Housing and Urban Development [issued a moratorium on foreclosures and evictions](#) for single family homeowners with FHA-insured mortgages for the next 60 days.
- The U.S. Department of Agriculture is delivering one million meals per week to children in rural areas who are out of school.
- The U.S. Department of Education [announced all borrowers with federally held student loans will have zero interest rates for at least 60 days](#). Additionally, these borrowers will have the option to suspend their payments for at least two months to allow them greater flexibility.
- Many telecommunication companies are working with the Federal Communications Commission to "[Keep Americans Connected.](#)" This pledge is designed to ensure that Americans do not lose their broadband or telephone connectivity during the COVID-19 response.

How to Help the Whole-of-America Response

- How to help: FEMA has information on how both the public and private sector can help. For more information, visit the page: [fema.gov/coronavirus/how-to-help](https://www.fema.gov/coronavirus/how-to-help)
- Cash donations to the nonprofit of your choice IS THE BEST donation. Do not collect or distribute donations of supplies without understanding community needs.
- Businesses that have medical supplies or equipment to donate are asked to go to www.fema.gov and provide of the offer through our online medical supplies and equipment form.
- To sell medical supplies or equipment to the federal government, please submit a price quote under the [COVID-19 PPE and Medical Supplies Request for Quotation](#).
- Licensed medical volunteers can offer their services by registering with [the Emergency System for Advance Registration of Volunteer Health Professionals](#). You can access a direct link to do so through [fema.gov](https://www.fema.gov).

- One thing people can do to help is to donate blood. Blood donation centers have the highest standards of safety and infection control. To find where you can donate blood, visit www.aabb.org/giveblood.

Hydroxychloroquine/Chloroquine

- HHS continues to speed the development of therapies derived from human blood that have the potential to lessen the severity or shorten the length of the illness.
- FDA issued fact sheets [Emergency Use Authorization of hydroxychloroquine sulfate](#) and [Emergency Use Authorization of chloroquine phosphate](#) to treat certain hospitalized patients
 - Hydroxychloroquine sulfate and chloroquine phosphate are oral prescription drugs approved to treat malaria and other diseases but both drugs have shown activity in laboratory studies against coronaviruses, including SARS-CoV-2 (the virus that causes COVID-19) and anecdotal reports suggest that these drugs may offer some benefit in the treatment of hospitalized COVID-19 patients.
- [HHS accepted](#) 30 million doses of hydroxychloroquine sulfate donated by Sandoz and one million doses of chloroquine phosphate donated by Bayer Pharmaceuticals for possible use in treating patients hospitalized with COVID-19 or for use in clinical trials.

National Guard Activation Under Title 32

- On March 22, President Trump directed the Secretary of Defense to permit full federal reimbursement, by FEMA, for some states' use of their National Guard forces.
 - Federally funded under Title 32, governors command their National Guard forces, enabling states to use the additional resources to meet missions necessary in the COVID-19 response.
 - Each state's National Guard is still under the authority of the governor, while working in concert with the Department of Defense.
- The President will consider Title 32 requests from states and territories based on the following:
 - A state or territory must have been approved for a Major Disaster or have submitted a Major Disaster Declaration request to FEMA for review.
 - The state or territory must have activated the lesser of 500 individuals or 2 percent of National Guard personnel in the state or territory in response to COVID-19.
 - Requests for reimbursement through Title 32 status must be submitted to the FEMA Administrator via the FEMA Regional Administrator, identifying specific emergency support functions the National Guard will carry out for COVID-19 support in accordance with the Stafford Act.
- For those states and territories that are approved under these criteria, FEMA will execute a fully reimbursable mission assignment to the Department of Defense, including reimbursement for pay and allowances of National Guard personnel serving in a Title 32 duty status in fulfillment of the FEMA mission assignment.
 - Pursuant to this approval, the federal government will fund 100 percent of the cost share for National Guard orders up to 31 days. These duty orders must be effective no later than two weeks from the date of the authorizing Presidential Memorandum on April 6.

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- This approach allows National Guard members to receive the additional benefits associated with 31-day deployments as well as allow each state additional time to issue new orders.
- To implement this change, FEMA will work with the Department of Defense to modify all of the existing mission assignments to include this language, and to extend the end date appropriately.
- The Administration will continue to work with states approved for 100 percent cost share to assess whether an extension of this level of support is needed.

Procurement Under Grants: Exigent or Emergency Circumstances

- FEMA recognizes that Recipients and Subrecipients of financial assistance may face exigencies or emergencies when carrying out a FEMA award during the COVID-19 pandemic.
- This [fact sheet](#) provides key information for SLTTs to consider when utilizing contracted resources under exigent or emergency circumstances.

Project Airbridge

- To efficiently maintain the country's existing medical supply chain infrastructure, FEMA is supplementing – not supplanting – the supply chain through a variety of strategies, including Project Airbridge.
- Project Airbridge was created to shorten the amount of time it takes for U.S. medical supply distributors to get Personal Protective Equipment and other critical supplies into the country for their respective customers.
- FEMA is doing this by covering the cost to fly supplies into the U.S. from overseas factories, cutting the amount of time it takes to ship supplies from weeks to days.
- FEMA is providing distributors with up-to-date information on the locations across the country hardest hit by COVID-19 or in most need of resources now and in the future.
- As part of the current agreement with distributors, 50 percent of the supplies on each plane are directed by the distributors to customers within hotspot areas with the most critical needs for those supplies.
 - These areas are determined by HHS and FEMA based on CDC data.
 - The remaining 50 percent is fed into that distributors' normal supply chain and onto their customers in other areas across the U.S.

Strategic National Stockpile

- FEMA planning assumptions acknowledged that the Strategic National Stockpile alone could not fulfill all requirements at state and tribal levels.
 - H.R. 748, “the Coronavirus Aid, Relief, and Economic Security Act” (CARES Act) allocates \$27 billion for vaccine development, to include \$16 billion designated to replenish the SNS.
- Under joint direction of FEMA and HHS, the SNS is in the process of deploying remaining personal protective equipment in its inventory.
 - Shipments are being sent nationwide with prioritization given to areas in greatest need.

Supply Chain Task Force

- The Supply Chain Stabilization Task Force is executing a whole-of-America approach to address limited supply of critical protective and life-saving equipment.
- The task force's primary effort is to increase the supply of medical supplies and equipment to healthcare workers on the front line.
- Through the National Response Coordination Center, the task force is working to find critical resources to meet urgent demand as well as increase the overall level of surge support to "hot spots" as they arise.
- In addition, the task force is engaging manufacturers, distributors and healthcare networks to increase supply chain long-term.
- Supply is executed through a four-pronged approach to rapidly increase supply today and expand domestic production of critical resources to increase supply long-term:
 - Preservation through guidance on how to preserve supplies when possible, to reduce impact on the medical supply chain.
 - Acceleration of industrial manufacturing and distribution.
 - Expansion via increased production capacity by private sector of critical supplies through retooling of assembly lines and partnerships where manufacturing capacity exists.
 - Allocation of supplies to get to the right place at the right time using data-informed prioritization recommendations for private industry to inform supply distribution network.

Tribal Information

- A tribal government may choose to receive assistance under the national emergency declaration:
 - As a Subrecipient under a state: All states are Recipients for Public Assistance; tribes have the option of working with the state(s) that they are located in and requesting assistance as a Subrecipient; or
 - As a Recipient: Each tribe has the option of signing a FEMA-Tribe Agreement and becoming a Recipient.
- Tribes that are Recipients will have a direct relationship with FEMA and will receive assistance autonomously from the state or states in which they are located.
- Tribal governments can express their intent to seek FEMA Public Assistance by notifying the FEMA Regional Administrator in the FEMA regional office in which the tribal government seat is located. More information may be found in the [COVID-19 FEMA Assistance for Tribal Governments fact sheet](#).