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

Saturday, May 9, 2020

**“WE WILL CONTINUE TO WORK AROUND THE CLOCK TO SUPPORT THE DEVELOPMENT OF ACCURATE AND RELIABLE TESTS, AS WE HAVE DONE THROUGHOUT THIS PANDEMIC.”** - FDA COMMISSIONER STEPHEN M. HAHN, M.D.

**Topline Briefing Points and Messages**

- On **May 8**, President Trump announced he would be extending the National Guard Title 32 through June 24 to respond to COVID-19. To date, the President has approved 48 National Guard requests for federal support for the use of National Guard personnel in a Title 32 duty status.
  - Through this order, the federal government will fund 100 percent of the cost for T-32 National Guard orders through June 24.

- On **May 9**, HHS announced the allocation plan for the drug remdesivir.
  - This plan uses a Gilead Sciences, Inc. donation of the drug to the United States.
  - Gilead Sciences, Inc. will supply approximately 607,000 vials of the experimental drug over the next six weeks.
    - On May 7, HHS began delivering cases of the drug to Connecticut, Illinois, Iowa, Maryland, Michigan and New Jersey.
    - Earlier in the week of May 4, an initial allocation was sent to Indiana, Massachusetts, New Jersey, New York, Rhode Island, Tennessee and Virginia.

- State health departments will distribute the doses to appropriate hospitals within their states.
  - State and local health departments have the greatest insight into community-level needs in the COVID-19 response, to include appropriate distribution of a treatment in limited supply.

- This week, FEMA and HHS efforts to fight COVID-19 focused on expanding testing, as well as getting health care facilities the equipment and drugs they need to care for patients.
  - On May 8, the FDA authorized the first diagnostic test with the option of using home-collected saliva samples for COVID-19 testing.
  - On May 7, the Health Resources and Services Administration (HRSA), awarded nearly **$583 million in funding** to 1,385 HRSA-funded health centers in all 50 states, the District of Columbia, and the U.S. territories to expand COVID-19 testing.
  - HHS deployed **50 portable kidney dialysis machines and supplies** to New York City and Long Island Intensive care units to provide surge capacity for facilities caring for patients with COVID-19, which has caused acute kidney injury and required dialysis in some instances.

- As of **May 8**, FEMA, HHS, and the private sector combined have coordinated the delivery of or are currently shipping: 87.2 million N95 respirators, 124.8 million surgical masks, 8.6 million face
shields, 20.5 million surgical gowns, 974.2 million gloves, 10,663 ventilators and 8,450 federal medical station beds.

- FEMA is coordinating two shipments totaling a 14-day supply of personal protective equipment to all 15,400 Medicaid and Medicare-certified nursing homes. The shipments are meant to supplement existing efforts to provide equipment to nursing homes.

- As of May 8, CDC, state, and local public health labs and other laboratories have tested more than 8.4 million samples.
  - HHS and FEMA have expanded items supplied by the International Reagent Resource (IRR) to help public health labs access free diagnostics supplies and reagents.
  - As of May 7, the FDA has issued 63 individual emergency use authorizations for test kit manufacturers and laboratories.

- On April 27, President Trump unveiled the Opening Up America Again Testing Overview and Testing Blueprint designed to facilitate state development and implementation of the robust testing plans and rapid response programs described in the President’s Guidelines for Opening Up America Again.
  - The President’s Testing Blueprint sets forth the partnership between federal, state, local, and tribal governments, along with the private-sector and professional associations, all of which play important roles in meeting the Nation’s testing needs.

  - To support the Administration’s Testing Blueprint, FEMA is working to source and procure testing material – specifically, testing swabs and transport media.
    - The FEMA-sourced material will be provided to states, territories and tribes for a limited duration to help increase testing capacity in support of their individualized plans.

Supply Chain Task Force

- FEMA continues to expedite movement of commercially pre-sourced and commercially procured critical supplies from the global market to medical distributors in various locations across the U.S. through Project Airbridge.

- As of May 8, Project Air Bridge has completed 124 flights with an additional 34 scheduled, or in transit, for a total of approximately 158 flights.
  - One flight scheduled to arrive on Friday, May 8, in Los Angeles was delayed.
  - Four flights are scheduled to land on May 9: two in Chicago and two in Los Angeles.
  - It is important to note that any number of variables can affect international flight schedules, causing unexpected delays or cancellations.

  - The Air Bridge program delivers PPE to the point of greatest need through prioritized distributor supply chains nine times faster than movement by sea.

  - Through Project Air Bridge, the following supplies have been delivered from overseas manufacturers to the U.S. and into private sector supply chains from March 29 through May 5:
    - More than 768,000 N95 respirators
    - More than 902 million gloves
    - More than 88 million surgical masks
    - 15.3 million surgical gowns
    - More than 2.3 million thermometers
    - 967,000 face shields
Nearly 392,000 coveralls
109,000 stethoscopes
370,000 oxygen masks
More than 160,000 cannulas

Since April 12, 40 flights carrying a total of 35.7 million FEMA-procured masks and respirators from 3M have landed in the U.S. The masks are inventoried at a warehouse and then distributed to prioritized areas as determined by FEMA and HHS.

The strategy to allocate medical supplies and equipment is based on COVID-19 disease activity and its effects, as well as the need to facilitate distribution of limited supplies to areas where resources are needed most urgently.

Leveraging quantitative data sets provided by FEMA, HHS and CDC, FEMA’s National Resource Prioritization Cell combines these data streams, analyzes the available COVID-19 disease activity data to determine current and potential future areas that most urgently require resources.

The team of experts works through this process every 96 hours to ensure resource prioritization recommendations are driven by the best available or most current data.

The Defense Logistics Agency awarded a contract to Battelle for 60 Critical Care Decontamination System units for the sanitation and reuse of N95 respirators.

Forty-five systems have been delivered: five to Texas, three to Virginia, two to California, Colorado, and New York, and one each to Alabama, Arizona, Arkansas, Connecticut, Idaho, Indiana, Florida, Georgia, Illinois, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Michigan, Mississippi, Missouri, Montana, New Jersey, New Mexico, North Dakota, Nevada, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Washington, Wisconsin and the District of Columbia.

By the Numbers

All 50 states, five territories, the Seminole Tribe of Florida, and Washington, D.C. have been approved for major disaster declarations to assist with additional needs identified.

To date, there are 66 tribes working directly with FEMA, with one tribe that is a direct recipient with a major disaster declaration, 40 tribes that are direct recipients with emergency declarations and 25 tribes that are recipients under state declarations.

As of May 8, 161,907 samples were processed at federally run Community Based Testing Sites and 168,733 samples were processed at public-private partnership testing sites.

Out of 41 original Community Based Testing Sites, 14 continue to operate as federally run sites, 20 have transitioned to state management, and 7 have closed in consultation with the states.

HHS has established a public-private partnership with pharmacy and retail companies to accelerate testing. To find locations, visit the COVID-19 Community-Based Testing Site page.

Under the CBTS public-private partnership, there are currently 136 sites in 32 states conducting testing.

Combined, FEMA and HHS have obligated $73.6 billion in support of COVID-19 efforts, which is an increase of $11.6 billion in the last week.
The federal government has approximately 13,274 total ventilators available: 12,192 in the Strategic National Stockpile; 1,082 from the Department of Defense.

As of April 30, FEMA and HHS have provided or are currently shipping 10,663 ventilators from the Strategic National Stockpile and the Defense Department to states, tribes and territories.

In support of the U.S. Department of Veterans Affairs and our nation’s veterans, FEMA has coordinated shipments of more than 4.3 million respirator masks, 1 million surgical masks, 1.5 million gloves, and 14,000 face shields to facilities across the country. An additional 1 million surgical masks and 28,000 gowns are shipping this week.

FEMA has 3,198 employees supporting COVID-19 pandemic response out of a total 20,605 agency employees ready to respond to other emergencies should they occur.

As of May 7, FEMA has obligated $5.7 billion in support of COVID-19 efforts. This support includes:

- Temporary Medical Facilities including medical personnel, mortuary and ambulance services: $2.4 billion.
- PPE including medical supplies and pharmaceuticals: $1.5 billion.
- National Guard: $1.2 billion.
- Commodities: $24.1 million.
- Crisis Counseling: $14.8 million.

As of May 7, 86 agencies across 28 states, the District of Columbia, one tribe and one U.S. territory have sent 234 alerts with information on COVID-19 via the Wireless Emergency Alert system; 54 alerts to broadcast stations via the Emergency Alert System.

To date, the President has approved 48 National Guard requests for federal support for the use of National Guard personnel in a Title 32 duty status.

- On May 8, President Trump announced he would extend the National Guard Title 32 status through June 24 to respond to COVID-19.
- Through this order, the federal government will fund 100 percent of the cost for T-32 National Guard orders through June 24.

As of May 8, 40,418 National Guard troops have activated in T-32 duty status and 826 troops have activated in State Active Duty status to help with testing and other response efforts.

The CDC has nearly 4,600 personnel supporting the outbreak response.

The U.S. Public Health Service deployed more than 1,500 officers in support of nation-wide efforts to mitigate the virus’ potential spread.

The U.S. Army Corps of Engineers has awarded 37 contracts for the design and build of alternate care facilities in Alaska, Arizona, California, Colorado, District of Columbia, Florida, Illinois, Maryland, Michigan, Missouri, the Navajo Nation, New Jersey, New Mexico, New York, Oklahoma, Oregon, Tennessee, U.S. Virgin Islands, and Wisconsin.

As of May 8, 1,109 USACE personnel are activated to support the COVID-19 mission, with more than 15,000 personnel engaged in additional response efforts.
FEMA and HHS Response

- FEMA, HHS, and our federal partners work with state, local, tribal and territorial governments to execute a whole-of-America response to COVID-19 pandemic and protect the health and safety of the American people.

- FEMA, HHS and the Cybersecurity Infrastructure and Security Agency (CISA) along with other federal agencies are distributing cloth face coverings for critical infrastructure workers as part of a multi-prong approach to re-open American economic activity while continuing to limit spread of COVID-19.
  - To date, over 80.9 million cloth face coverings are being processed and distributed to state, local, tribal, private sector, and federal entities.
  - The federal government will provide additional face coverings in production to states, territories and tribes for distribution, with priority to emergency services, food production and distribution, and other sectors that support community lifelines.
  - FEMA and HHS are also providing face coverings to federal departments and agencies with mission essential functions to promote health and safety in the workplace and in their execution of public-facing missions.

FEMA

- On March 13, President Trump declared a nationwide emergency pursuant to the Stafford Act.
  - 50 states, the District of Columbia, five territories, and 41 tribes are working directly with FEMA.
  - A tribal government may choose to be a subrecipient under a state that has chosen to be a recipient of FEMA assistance, or choose to be a direct recipient of FEMA.
  - All 10 Regional Response Coordination Centers and emergency operations centers in all states and territories are active and supporting response efforts across the country.

- Requests for assistance, especially for critical supplies, should be routed through the proper channels as soon as possible. The most efficient way to identify critical gaps and get results:
  - Consistent with the principle of locally executed, state managed, and federally supported response, requests for assistance at the local and county levels should first be routed to their respective state.
  - Any needs that cannot be met by the state or tribe should then be sent to the respective FEMA regional office. FEMA regions will direct requests to the FEMA NRCC in Washington, D.C. for fulfillment.

- HHS and FEMA deployment of ventilators from the stockpile have helped ensure that hospitals have not run out of ventilator capacity while working to save lives.
  - The federal government adopted a process to manage allocation of federal ventilator resources to ensure the right number of ventilators are shipped to the right states to sustain life within a 72-hour window.

- While FEMA leads the federal operations to the whole-of-America response to the pandemic, the agency continues to prepare for and respond to other disasters that may occur during this time, FEMA is preparing more buses, hotel rooms and shelter space for social distancing to reduce the spread of the novel coronavirus during potential evacuations.
DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- As of May 9, crisis counseling service grants have been made available to a total of 43 states and the District of Columbia to support programs providing free, confidential counseling through community-based outreach and educational services.

- On May 4, FEMA announced $200 million in supplemental funding from the CARES act for grants through its Emergency Food and Shelter Program.
  - Combined with the $120 million in annual funding appropriated by Congress, a total of $320 million will be distributed beginning in early June to human service organizations assisting those in need throughout the country.

- On April 23, FEMA announced an additional $100 million in funding for the Assistance to Firefighters Grant Program. This supplemental funding will provide financial assistance directly to eligible fire departments, non-affiliated emergency medical service organizations and State Fire Training Academies for critical PPE and supplies needed to respond to COVID-19. The application period begins April 28.

- On April 15, 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.
  - 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.

- On April 15, FEMA’s Office of Equal Rights issued a bulletin outlining best practices to assist state, local, tribal and territorial partners in anticipating and attending to civil rights concerns during the COVID-19 response and recovery.

- On April 13, The Department of Homeland Security and FEMA announced the funding notice for an additional $100 million in supplemental Emergency Management Performance Grant Program funds.

- On April 12, FEMA issued guidance on the framework, policy details and requirements for determining the eligibility for FEMA reimbursement of states purchasing and distributing food to meet the immediate needs of those who do not have access to food as a result of COVID-19 and to protect the public from the spread of the virus.

U.S. Department of Health and Human Services Agencies and Offices

- On May 7, HHS, through the Health Resources and Services Administration (HRSA), awarded nearly $583 million to 1,385 HRSA-funded health centers in all 50 states, the District of Columbia, and eight U.S. territories to expand COVID-19 testing.

- On May 7, HHS announced the deployment of 50 portable kidney dialysis machines and supplies to New York City and Long Island Intensive Care Units (ICU) to provide surge capacity for facilities caring for patients with COVID-19, which has caused acute kidney injury and therefore required dialysis in some ICU cases.

- On May 5, the Treasury Department began distributing $4.8 billion in critical funds from the CARES act to tribal governments.
  - The CARES act provides a total of $8 billion to address coronavirus preparedness, response, and recovery for American Indians and Alaska Natives.
  - The Administration has allocated over $1 billion through the Indian Health Service (IHS), to support tribes, tribal organizations, and Urban Indian Organizations in their coronavirus response efforts.
On May 1, HHS announced $40 million of available funding for the development and coordination of a strategic network of national, state, territorial, tribal and local organizations to deliver important COVID-19 related information to minority, rural, and socially vulnerable communities hardest hit by the pandemic.

On May 1, HHS began processing payments from the Provider Relief Fund to hospitals with large numbers of COVID-19 inpatient admissions through April 10, as well as to rural providers in support of the national response to COVID-19.
  □ These payments are being distributed to healthcare providers who have been hardest hit by the virus. Facilities admitting large numbers of COVID-19 patients received $12 billion and providers in rural areas received $10 billion.
  □ An additional $50 billion is being distributed throughout the healthcare system to help address the impact of COVID-19 to the entire healthcare system.
  □ $61 billion has been delivered to healthcare providers within 40 days of the passage of the CARES Act.

On April 30, HHS through the Health Resources and Services Administration, awarded $20 million to increase telehealth access and infrastructure for providers and families to help prevent and respond to COVID-19.

On April 29, the National Institutes of Health announced positive results of a trial using remdesivir; patients with advanced COVID-19 and lung involvement who received remdesivir recovered, on average, faster than similar patients who received placebo.

On April 29, the National Institutes of Health announced a new initiative, Rapid Acceleration of Diagnostics; aimed at speeding innovation, development, and commercialization of COVID-19 testing technologies and funded by $1.5 billion from federal stimulus.

On April 27, HHS, through the Health Resources and Services Administration (HRSA), launched a new COVID-19 Uninsured Program Portal, allowing health care providers who have conducted COVID-19 testing or provided treatment for uninsured COVID-19 individuals on or after Feb. 4 to submit claims for reimbursement.

On April 24, the Substance Abuse and Mental Health Services Administration (SAMHSA) announced an additional $250 million in emergency COVID-19 funding to increase access to and improve the quality of community mental and substance use disorder treatment services through the expansion of Certified Community Behavioral Health Clinics (CCBHC).

As of April 24, the Biomedical Advanced Research and Development Authority (BARDA) within the HHS Office of the Assistant Secretary for Preparedness and Response (ASPR) has a COVID-19 Medical Countermeasure Portfolio that includes development of 26 products supported under public-private partnerships.
  □ Of these, 15 are diagnostics, seven are treatments, three are vaccines, and one is a rapidly deployable capability to help protect the American people from COVID-19.
  □ To date, BARDA has obligated $39.8 million for diagnostics, $334.9 million for treatments, more than $979.3 million for vaccines.

On April 22, HHS launched Telehealth.hhs.gov. The site is a central source of information on telehealth resources and tools for patients and providers.

On April 21, HHS announced $955 million in grants from the Administration for Community Living to help meet the needs of older adults and people with disabilities. The grants will fund home-delivered meals, care services in the home, respite care and other support to families and caregivers, and other support services.
On April 20, the Substance Abuse and Mental Health Services Administration under HHS began releasing $110 million in emergency grant funding to strengthen access to treatments for substance use disorders and serious mental illnesses during the COVID-19 pandemic.

On April 10, HHS began delivering the initial $30 billion in relief funding to providers in support of the national response to COVID-19, with $26 of the $30 billion expected to be delivered to providers’ bank accounts the same day.

On April 10, HHS Secretary Azar sent a follow up letter to hospital administrators, reinforcing the need for data to be provided daily to facilitate planning, monitoring, and resource allocation in response to COVID-19.

On April 8, HHS, through the Health Resources and Services Administration awarded more than $1.3 billion to 1,387 health centers. These centers will help communities across the country detect coronavirus; prevent, diagnose, and treat COVID-19; and maintain or increase health capacity and staffing levels to address this public health emergency.

Centers for Disease Control and Prevention

On May 6, CDC published a report on COVID-19 in correctional and detention facilities. CDC recommends that facility administrators, with the support of local health departments and partners, prepare for potential transmission, implement prevention measures, and follow guidance for the management of suspected and confirmed COVID-19 cases to prevent further transmission.

The nation’s Slow the Spread campaign ended April 30. CDC continues to recommend that everyone use a cloth face covering in community settings to help reduce the spread of COVID-19.

On April 28, the Centers for Disease Control and the Environmental Protection Agency issued guidance on cleaning and disinfecting spaces when reopening America; the guidance offers step by step instructions on how Americans can reduce risk of exposure to COVID 19 and stay safe in public spaces, workplaces, businesses, schools, and homes.

CDC continues to encourage use of personal protective equipment optimization strategies for healthcare providers to optimize resources, deal with limited resources, and make contingency plans or alternative strategies when supplies are limited.

On April 26, CDC and the Occupational Safety and Health Administration (OSHA) released targeted guidance to help meat and poultry processing facilities implement infection control practices to reduce the risk of transmission and illness from COVID-19 in these facilities.

Food and Drug Administration (FDA)

FDA launched the Coronavirus Treatment Acceleration Program (CTAP) to speed approval of drugs and therapies. 72 therapies are now being tested, including hydroxychloroquine, and another 211 are in active planning for clinical trials.

FDA published a new blog post on the Coronavirus Treatment Acceleration Program. The program uses every available method to move new treatments to patients as quickly as possible, while at the same time finding out whether the treatments are helpful or harmful.

As of May 4, the FDA has issued 58 individual Emergency Use Authorizations (EUAs) for test kit manufacturers and laboratories. In addition, 25 authorized tests have been added to the EUA letter of authorization for high complexity molecular-based laboratory developed tests (LDTs).

FDA has authorized four mask sterilizations systems to disinfect N95 masks, with one system that can decontaminate 4 million N95 masks per day.
DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- **On May 1**, the FDA issued an [emergency use authorization](https://fema.gov/coronavirus) for the investigational antiviral drug remdesivir for the treatment of suspected or laboratory-confirmed COVID-19 in adults and children hospitalized with severe disease.

- **On April 28**, the FDA issued a new [video resource](https://fema.gov/coronavirus) explaining Emergency Use Authorizations (EUAs), one of several tools FDA uses to help make important medical products available quickly during public health emergencies like the COVID-19 pandemic.
  - EUAs provide more timely access to drugs, diagnostic tests and/or other critical medical products that can help diagnose, treat and/or prevent COVID-19.

- **On April 27**, the FDA released two new fact sheets for the food and agriculture sector outlining guidelines on [use of disposable facemasks and cloth coverings](https://fema.gov/coronavirus), as well as summarizing [key steps employers and coworkers can take](https://fema.gov/coronavirus) to stay open, continue to slow the spread and support continuity of essential operations.

- During the **April 24** White House Press Briefing, FDA Commissioner Dr. Stephen Hahn announced [approval the first COVID-19 home collection test kit](https://fema.gov/coronavirus).

- **On April 21**, the FDA issued an emergency use authorization for IntelliVue Patient monitors intended to be used by healthcare professionals in the hospital environment for remote monitoring of adult, pediatric and neonate patients having or suspected of having COVID-19 to reduce healthcare provider exposure.

- **On April 16**, the FDA [announced an expansion of testing options](https://fema.gov/coronavirus) through use of synthetic swabs – with a design similar to Q-tips – to test patients by collecting a sample from the front of the nose.

### Other Federal Agencies

- American Red Cross and the American Association of Blood Banks (AABB) continue to seek blood and convalescent plasma donations. To find where you can donate blood, visit [aabb.org](https://aabb.org).

- **On May 6**, the Department of Labor [awarded an additional $10 million in Dislocated Worker Grants](https://fema.gov/coronavirus) in response to the coronavirus public health emergency. The funding is from the CARES Act and is intended to help address the workforce-related impacts of COVID-19. This brings the total amount of Dislocated Worker Grants awarded to states and territories to $171 million.

- **On May 5**, CISA, along with the United Kingdom’s National Cyber Security Centre (NCSC), [released a joint advisory](https://fema.gov/coronavirus) to international healthcare and medical research organizations providing an update on ongoing malicious cyber activity and new cyber threats related to COVID-19.
  - CISA and NCSC continue to see indications that advanced persistent threat (APT) groups are exploiting the COVID-19 pandemic as part of their cyber operations.

- **On May 4**, the [Small Business Administration (SBA) announced](https://fema.gov/coronavirus) that agricultural businesses are now eligible for the SBA Economic Injury Disaster Loans as part of the Paycheck Protection Program and Healthcare Enhancement Act.

- **On May 3**, the U.S. Department of Treasury and the SBA [announced](https://fema.gov/coronavirus) that the second round of funding for the Paycheck Protection Program processed 2.2 million loans to small businesses [since it launched on April 27](https://fema.gov/coronavirus). The total value of these loans is over $175 billion.
  - Including the previous funding bill, more than $670 billion is available for the loan program in total.

- **On April 28**, President Trump signed an [executive order to keep meat processing plants open](https://fema.gov/coronavirus) to ensure the continued supply of beef, pork, and poultry to the American people. The order uses the Defense Production Act to classify meat processing as critical infrastructure.
DAILY BRIEFING POINTS: COVID-19 WHOLE-OF-AMERICA RESPONSE

- On **April 20**, President Trump launched the Dynamic Ventilator Reserve Program, an innovative public-private partnership to access up to 65,000 additional ventilators in hospitals across the country that can be redeployed when not in use.

- On **April 17**, U.S. Department of Agriculture announced the Coronavirus Food Assistance Program, an immediate relief program that provides $16 billion in direct support to farmers and ranchers as well as $3 billion to purchase and distribute fresh produce, dairy and meat products to food banks, community and faith-based organizations and other non-profits.

- On **April 17**, the Cybersecurity and Infrastructure Security Agency released version 3.0 of the 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.