The federal government is taking aggressive and proactive steps to address the Coronavirus (COVID-19) threat working closely with state and local partners to protect the public’s health and keep the public informed as the situation evolves domestically and globally.

**White House Task Force**

- On January 29, 2020 President Trump announced the formation of the White House Coronavirus Task Force.

- On February 26, 2020, President Trump announced Vice President Pence would lead the Task Force. Additionally, Ambassador Deborah Birx will serve as the White House Coronavirus Response Coordinator. The Task Force will lead the Administration’s efforts to contain the spread and mitigate the effects of the virus, while ensuring that the American people have the most accurate and up-to-date health and travel information.

- The Task Force is composed of subject matter experts from the White House and several United States Government agencies, including the U.S. Department of Health and Human Services whom is serving as the lead federal agency for coronavirus response. [Task Force membership can be found on the White House website.](https://www.whitehouse.gov)

**Federal Interagency Coordination**

**Lead Federal Agency**

- *Presidential Policy Directive-44: Enhancing Domestic Incident Response* designates HHS as the *lead federal agency* for public health responses utilizing authority established through:
  - Pandemic and All Hazards Preparedness Act (PAHPA)
  - Public Health Service Act
  - National Response Framework (NRF) and associated operational plans.

- The Congress-designated appropriation for this mission is the Public Health Emergency Fund for coordinating and delivering assistance.

- Currently, Congress is considering a supplemental appropriation to support public health preparedness and response efforts.
FEMA Role

FEMA is a supporting agency to HHS currently delivering crisis action planning, situational awareness reporting, interagency coordination, course of action development and logistics supply chain analysis through a Crisis Action Task Force located at the HHS Secretary’s Operations Center.

- FEMA began planning and coordination with HHS in late January, including the assessment of the government’s Pandemic Crisis Action Plan.

- Additionally, FEMA is readying over fifty teams to respond and support states and territories that may need assistance.

At this time, FEMA is not preparing an emergency declaration in addition to the Public Health Emergency declared by HHS on January 31, 2020.

Emergency Support Functions (ESF)

- The NRF and Response Federal Interagency Operational Plan (FIOP) are always in effect.

- In accordance with the NRF, HHS – under its ESF#8 Primary Authority for Public Health and Medical issues – has sixteen Supporting Agencies to initiate federal interagency coordination in the presence or absence of a Stafford Act declaration.

- Under a Non-Stafford Event, HHS – under the Economy Act – may request specific core capabilities from each (and appropriate) Federal Departments/Agencies through both a Memorandum of Agreement (MOA) and reimbursable Inter Agency Agreement (IAA);

- The Emergency Support Function Leadership Group (ESFLG) is convened at the request of HHS (or any other Lead Federal Agency for a given large-scale incident) at any time. FEMA can facilitate use of ESFLG using the Interagency Video Teleconference (VTC) format used during Stafford incidents.

- Currently, HHS develops and provides a daily Senior Leadership Brief (SLB) reflecting interagency actions and lifeline impacts.

Pandemic Crisis Action Plan (PanCAP)

- Represents response to a 2013 avian influenza in China (H7N9) and a coronavirus in the Middle East (MERS-CoV)

- Provides a process that outlines Public Health and emergency management response activities with defined triggers for movement between threat phases.

- Provides a sample coordination structure for each phase, which has been modified for COVID-19 (FEMA, ASPR, CDC).
State/Territorial/ Tribal/ Local Assistance

The primary form of assistance to States, Territories, Tribes and Localities may come in the form of federal guidance, funding to support enhanced mitigation measures, logistics supply chain analysis, and regulatory relief facilitated through HHS.

Some federal medical team capabilities may be deployed to support specific federal mission requirements (e.g., Incident Management Teams, Disaster Medical Assistance Teams) however these are expected to be limited as the virus becomes more widespread.

Public Health and Medical Assistance

- In a declared Public Health Emergency, the Secretary of HHS can initiate several actions to facilitate SLTT response including waiving certain regulatory requirements and authorizing federal Public Health Grantees to use grant funds towards a response to COVID-19.

- Guidance or assistance, in the form of technical assistance, during a biological incident may occur through the Centers for Disease Control and Prevention (CDC) under its legislative authorities and is anticipated to be the primary form of requested assistance.

- HHS manages the provision and development of vaccines and medications against this disease.

- The extent of additional HHS assistance to be available for States to manage the COVID-19 response is pending supplemental funding determinations from Congress.

Grant Assistance

FEMA Administrator, through the Grants Program Directorate, may direct emergency management grantees the use of awarded funds towards non-public health and non-medical capabilities to prepare and/or to respond to a biological incident whether directly impacted or not.

On March 3, 2020, the FEMA Grants Program Directorate provided notification to grant recipients and subrecipients to remind them of the cost allowability requirements of the Emergency Management, Homeland Security, and Tribal Homeland Security grant programs. Currently, FEMA is not proposing to expand allowability under any grant program.

- Emergency Management Performance Grant (EMPG): The purpose of the EMPG Program is to provide federal funds to states to assist state, local, territorial, and tribal governments in preparing for all hazards. EMPG funding can be used to support emergency preparedness and response capabilities for COVID-19.

  Allowable activities include, but are not limited to, strengthening public health incident management and emergency operations coordination to enable jurisdictions to provide emergency management response support that exceeds normal capacity; Strengthening information management and sharing; Strengthening
community recovery and resilience; Vector control and surveillance; Health surveillance and epidemiological investigation; Laboratory testing and support services; and Blood safety.

- **Homeland Security Grant Program (HSGP):** The HSGP includes a suite of risk-based grants, including the State Homeland Security Program (SHSP) and Urban Area Security Initiative (UASI), designed to assist SLTT efforts in preventing, preparing for, protecting against, and responding to acts of terrorism.

  For both SHSP and UASI many activities that support the achievement of core capabilities related to terrorism preparedness may simultaneously support enhanced preparedness for hazards unrelated to acts of terrorism. However, all SHSP- and UASI-funded projects must assist recipients and subrecipients in achieving core capabilities related to preventing, preparing for, protecting against, or responding to acts of terrorism. States and high-risk urban areas must justify proposed expenditures of SHSP or UASI funds in their Investment Justification submissions.

- **Tribal Homeland Security Grant Program (THSGP):** Like HSGP, the THSGP assists directly eligible tribal governments with efforts related to preventing, preparing for, protecting against, and responding to acts of terrorism.

  Activities funded under THSGP that support the achievement of core capabilities related to terrorism preparedness may simultaneously support enhanced preparedness for hazards unrelated to acts of terrorism. However, all THSGP-funded projects must assist recipients in achieving core capabilities related to preventing, preparing for, protecting against, or responding to acts of terrorism. Tribal governments must justify proposed expenditures of THSGP funds in their Investment Justification submissions.

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