



STATE OF MINNESOTA

Office of Governor Tim Walz

130 State Capitol ♦ 75 Rev. Dr. Martin Luther King Jr. Blvd ♦ Saint Paul, MN 55155-1611

March 13, 2020

Vice President Mike Pence
The White House
Office of the Vice President
1600 Pennsylvania Avenue, N.W.
Washington, DC 20500

Dear Mr. Vice President:

On behalf of the State of Minnesota, I am following up on the request that I made on our March 12, 2020 phone call. As you know, the ability to test and diagnose cases of COVID-19 is critical to Minnesota's response and mitigation of the impact of the COVID-19 pandemic.

Minnesota, like other states, is deeply concerned about the availability of the testing kits, *in addition to* ancillary reagents and lab supplies needed to provide testing. There are a variety of components of a COVID-19 test. Kits alone are not enough; we need all necessary components to successfully test.

I am calling upon you and your office to aid us in ensuring there is access to testing kits, and all the reagents and supplies needed to conduct, at a minimum, 15,000 tests per month.

In addition, I urge you to work with the U.S. Food and Drug Administration to approve "research use only" chemicals to help address the supply chain shortages of reagents; and to fast track a rapid point of care test for COVID-19. We need to move the testing for coronavirus out of our laboratories and into our clinics.

Minnesota needs a more reliable supply chain to test and diagnose patients with COVID-19. Supply chain issues related to testing components not only impact the number of tests we have, but make it difficult to predict when we will run out of testing components and need to cease testing. We have been forced to ration the number of tests performed at our public health lab. I call upon you to help ensure we appropriately prevent and mitigate the spread of the COVID-19 pandemic.

Sincerely,

A handwritten signature in black ink, appearing to read "T. J. Walz".

Tim Walz
Governor

cc: Donald Trump, President of the United States of America



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Scott Gottlieb, U.S. Food and Drug Administration
Amy Klobuchar, U.S. Senator
Tina Smith, U.S. Senator
Jim Hagedorn, U.S. Congressman
Angie Craig, U.S. Congresswoman
Dean Phillips, U.S. Congressman
Betty McCollum, U.S. Congresswoman
Ilhan Omar, U.S. Congresswoman
Tom Emmer, U.S. Congressman
Collin Peterson, U.S. Congressman
Pete Stauber, U.S. Congressman



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March 18, 2020

Deborah L. Birx, M.D.
White House Coronavirus Task Force
U.S. Department of State
2201 C St., NW
Washington, DC 20520

Dear Dr. Birx:

Thank you for the opportunity to share information regarding our current COVID-19 testing situation and ongoing needs. As is the case with virtually all state public health laboratories, we are critically low on reagents necessary for all four of the methods we have at our disposal to test for COVID-19. We have limited our state's testing to hospitalized patients, health care providers and Minnesotans living in congregate populations, such as those in corrections facilities or long-term care facilities. We simply cannot test everyone displaying symptoms to monitor the spread of COVID-19. We received over 1,000 samples on March 17, and will need to freeze over 1,700 samples, but our supply orders are backordered, and we are only receiving partial orders sporadically.

Our state health lab is not alone in our lack of test supplies in Minnesota. Our major private lab, Mayo Clinic, is also at risk for not receiving adequate supplies. The Fairview Health System, part of the University of Minnesota, would like to develop a test but is also facing issues securing reagents.

In order to be able to run tests at a level at which we could generate adequate data to understand the spread of COVID-19, we are requesting the following supplies:

Vendor	Material #	Description	Quantity
Roche	06543588001	DNA and Viral NA Small Volume Kit	29 kits
Roche	06241620001	Filter Tips	11 cases
Roche	06241611001	Output plate	3 cases
Roche	06241603001	Processing Cartridge	15 boxes
Roche	06430112001	System Fluid (Internal)	29 cases
Roche	06374913001	External Lysis Buffer	55 bottles
Life Technologies Or ThermoFisher	A15299	TaqPath 1-Step RT-qPCR Master Mix, CG	55 Kits
CDC/IRR	10006606	2019-nCoV - Integrated DNA Technologies (Primer/Probes)	38 kits
CDC/IRR	KT0189	Human Specimen Control	7 boxes
CDC	2019-nCoVVEUA-01	2019-nCoVPC (Positive Control)	11 kits
Qiagen	61904	QIAamp DSP Viral RNA Mini Kit	100 Kits
Fisher	BP8202-500	96% v/v Ethanol Solution Molecular Biology Grade	5 orders



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Your swift action to assist us in obtaining these supplies will be crucial to our continued COVID-19 response.

Sincerely,

A handwritten signature in black ink, appearing to read "Tim Walz".

Tim Walz
Governor



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Office of Governor Tim Walz

75 Reverend Dr. Martin Luther King Jr. Blvd. ♦ Suite 130 ♦ Saint Paul, MN 55155-1611

March 28, 2020

James Joseph, Region V Administrator
Federal Emergency Management Agency – Region V
536 South Clark Street, 6th Floor
Chicago, IL 60605

Dear Administrator Joseph:


On March 13, 2020, President Trump declared a national emergency due to the COVID-19 outbreak, pursuant to sections 201 and 301 of the National Emergencies Act (50 United States Code 1601 et seq.) and the Robert T. Stafford Disaster Relief and Emergency Assistance Act, (42 United States Code Sections 5121-5207). On March 19, I sent the attached letter to President Trump requesting authorization of the use of the Minnesota National Guard under Title 32 United States Code Section 502(f) to support our COVID-19 emergency response operations. On March 27, I received the attached letter from Secretary of Defense Mark Esper authorizing the use of State National Guard forces to perform duty under Title 32, United States Code Section 502(f), subject to conditions.

Accordingly, I request authority to allocate and order, at my discretion, 1,000 members of the Minnesota Army and Air National Guard to perform operational activities necessary to fulfill any and all mission assignments in the response to and recovery from the COVID-19 outbreak in the State of Minnesota, pursuant to Title 32, United States Code Section 502(f).

To date, Minnesota has taken aggressive action to minimize the spread of the virus, which includes deploying the Minnesota National Guard, in State Active Duty status, to augment and support the State Emergency Operations Center, distribute personal protective equipment (PPE), provide PPE warehouse support and administration, assist the Minnesota Department of Health with planning support and analysis, coordinate with the United States Army Corps of Engineers to develop an alternative care facility, provide public affairs support to the Minnesota Joint Information Center, and support statewide county emergency operations centers. Authorization to mobilize 1,000 members of the Minnesota Army and Air National Guard pursuant to Title 32, United States Code Section 502(f) will allow this mission set to expand as the situation unfolds to activities including: management, control, and reduction of immediate threats to public health and safety; emergency medical care; and medical sheltering in the event that existing facilities are reasonably forecasted to become overloaded and unable to accommodate needs in the near future.

I will continue to monitor the unfolding situation in Minnesota and may request additional support as needed.

Sincerely,

A handwritten signature in black ink, appearing to read "T. J. Walz", written in a cursive style.

Tim Walz
Governor

Enclosures: Attachment 1 – 2020_03_19_Letter to President
Attachment 2 – 2020_03_27_Letter to Governor of Minnesota

cc: Mark Esper, Secretary, United States Department of Defense



SECRETARY OF DEFENSE
1000 DEFENSE PENTAGON
WASHINGTON, DC 20301-1000

MAR 27 2020

The Honorable Tim Walz
Governor of Minnesota
130 State Capitol
St. Paul, MN 55155

Dear Governor Walz:

The Department of Defense (DoD) deeply appreciates your leadership and partnership as we combat the coronavirus disease 2019 (COVID-19) pandemic and protect the people of your State or territory and our Nation. We face an immense challenge against an invisible enemy and the key to our success is working as one team: federal, state and local governments; the private sector; and every individual American citizen. Together, we will defeat this enemy.

Given this unique crisis, I have made the decision to accelerate the process for how the Department of Defense authorizes the use of National Guard forces under title 32, U.S.C., section 502(f).

Pursuant to the President's orders providing Federal support for the Governors' use of the National Guard to respond to COVID-19, I hereby authorize the use of State National Guard forces to perform duty under title 32, U.S.C., section 502(f), subject to the following conditions. These conditions are: (1) the States and territories or Federal Emergency Management Agency (FEMA) identify specific requirements for COVID-19 support in accordance with the Stafford Act; (2) requests originating from the States and territories must be submitted to FEMA; and (3) FEMA approves and provides the Department of Defense with a fully reimbursable mission assignment. Once the mission assignment is received, the Assistant Secretary of Defense for Homeland Defense and Global Security will promptly approve these requests.

This authorization enables your timely use of the National Guard to save lives and protect public health and safety. The men and women of the National Guard are Citizen-Soldiers who stand ready to serve their communities as we fight COVID-19.

As you know, FEMA's National Response Coordination Center is the quarterback for our team and the single point of entry for all requests for assistance, to ensure a swift, effective, and coordinated Federal response. For example, FEMA can provide access to the U.S. Army Corps of Engineers for assistance with rapidly developing overflow patient facilities in existing structures such as convention centers and hotels.

The Department of Defense stands ready to assist you and your citizens. If you have any DoD-specific questions, please contact Deputy Assistant Secretary of Defense Bob Salesses or Colonel Eric Shwedo on my staff, at (703) 697-5774.

Sincerely,

A handwritten signature in black ink, reading "Mark T. Esper", is located at the bottom right of the page.



THE VICE PRESIDENT
WASHINGTON

March 9, 2020

The Honorable Tim Walz
Governor of the State of Minnesota
St. Paul, Minnesota

Dear Governor Walz:

Thank you for your warm welcome to Minnesota last week.

It was good to be with you surrounding my visit to the 3M Innovation Center, and I appreciate our ongoing dialogue on ways the White House Coronavirus Task Force and our Federal agencies can continue to come alongside and support your State and local efforts underway in addressing the coronavirus.

The President's highest priority remains the health and safety of the American people, and we will get through this together.

Sincerely,

A handwritten signature in black ink that reads "Mike Pence". The signature is fluid and cursive, with the first name "Mike" and the last name "Pence" clearly legible.

Michael R. Pence
Vice President of the United States



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130 State Capitol ♦ 75 Rev. Dr. Martin Luther King Jr. Blvd ♦ Saint Paul, MN 55155-1611

March 19, 2020

Donald J. Trump
President of the United States

Dear Mr. President,

Thank you for your attention to the unprecedented COVID-19 National Emergency. Due to the unique nature of this emergency, and the fact that each state will have different response requirements, I am requesting you authorize the use of the Minnesota National Guard under Title 32 United States Code § 502(f) to support our COVID-19 emergency response operations. Additionally, I am requesting you to direct the Federal Emergency Management Agency to reimburse the Department of Defense with federal disaster funds when National Guard forces are employed in a federally funded Title 32 U.S.C. § 502(f) status during the current COVID-19 response.

The National Guard is local and uniquely suited to respond to the COVID-19 pandemic. If needed, the National Guard can provide an array of support, to include security, transportation, logistical, medical, containment, mitigation, cleanup and communication support in response to this pandemic. Authorizing their support in a Title 32 U.S.C. § 502(f) status would preserve limited state resources and time by avoiding the lengthy reimbursement process that is the result of normal emergency response authorities. Moreover, use of Title 32 U.S.C. § 502(f) status would dramatically increase each State's ability to respond to COVID-19 by authorizing the use of federally owned equipment while allowing the Governors to maintain control over their forces for domestic support missions.

Directing the authorization of Title 32 U.S.C. 502(f) status would also allow for the soldiers and airmen supporting this operation to receive Federal Tort Claims Act protection, military retirement points, USERRA reemployment rights, health insurance and disability protection.

Although the current emergency declaration will result in federal reimbursement to the states for use of the National Guard, that process takes months and requires states to incur substantial expense at a time when their financial resources are already strained and needed to provide direct support to our citizens.

Thank you for your consideration in this matter,

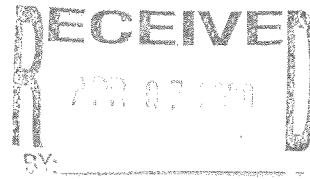
A handwritten signature in black ink, appearing to read "Timothy J. Walz".

Timothy J. Walz
Governor of Minnesota

cc: Mark Esper, United States Secretary of Defense
Joseph Lengyel, Chief, National Guard Bureau



SECRETARY OF DEFENSE
1000 DEFENSE PENTAGON
WASHINGTON, DC 20301-1000



MAR 27 2020

The Honorable Tim Walz
Governor of Minnesota
130 State Capitol
St. Paul, MN 55155

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The Department of Defense stands ready to assist you and your citizens. If you have any DoD-specific questions, please contact Deputy Assistant Secretary of Defense Bob Salesses or Colonel Eric Shwedo on my staff, at (703) 697-5774.

Sincerely,



CISA
CYBER+INFRASTRUCTURE

March 19, 2020

MEMORANDUM ON IDENTIFICATION OF ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS DURING COVID-19 RESPONSE

FROM: Christopher C. Krebs
Director
Cybersecurity and Infrastructure Security Agency (CISA)

As the Nation comes together to slow the spread of COVID-19, on March 16th, the President issued updated Coronavirus Guidance for America. This guidance states that:

“If you work in a critical infrastructure industry, as defined by the Department of Homeland Security, such as healthcare services and pharmaceutical and food supply, you have a special responsibility to maintain your normal work schedule.”

The Cybersecurity and Infrastructure Security Agency (CISA) executes the Secretary of Homeland Security’s responsibilities as assigned under the Homeland Security Act of 2002 to provide strategic guidance, promote a national unity of effort, and coordinate the overall federal effort to ensure the security and resilience of the Nation's critical infrastructure. CISA uses trusted partnerships with both the public and private sectors to deliver infrastructure resilience assistance and guidance to a broad range of partners.

In accordance with this mandate, and in collaboration with other federal agencies and the private sector, CISA developed an initial list of “Essential Critical Infrastructure Workers” to help State and local 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 can also inform critical infrastructure community decision-making to determine the sectors, sub-sectors, segments, or critical functions that should continue normal operations, appropriately modified to account for Centers for Disease Control (CDC) workforce and customer protection guidance.

The attached list identifies workers who conduct a range of operations and services that are essential to continued critical infrastructure viability, including staffing operations centers, maintaining and repairing critical infrastructure, operating call centers, working construction, and performing management functions, among others. The industries they support represent, but are not necessarily limited to, medical and healthcare, telecommunications, information technology systems, defense, food and agriculture, transportation and logistics, energy, water and wastewater, law enforcement, and public works.

We recognize that State, local, tribal, and territorial governments are ultimately in charge of implementing and executing response activities in communities under their jurisdiction, while the Federal Government is in a supporting role. As State and local communities consider COVID-19-related restrictions, CISA is offering this list to assist prioritizing activities related to continuity of operations and incident response, including the appropriate movement of critical infrastructure workers within and between jurisdictions.

Accordingly, this list is advisory in nature. It is not, nor should it be considered to be, a federal directive or standard in and of itself.

In addition, these identified sectors and workers are not intended to be the authoritative or exhaustive list of critical infrastructure sectors and functions that should continue during the COVID-19 response. Instead, State and local officials should use their own judgment in using their authorities and issuing implementation directives and guidance. Similarly, critical infrastructure industry partners will use their own judgment, informed by this list, to ensure continued operations of critical infrastructure services and functions. All decisions should appropriately balance public safety while ensuring the continued delivery of critical infrastructure services and functions.

CISA will continue to work with you and our partners in the critical infrastructure community to update this list as the Nation's response to COVID-19 evolves. We also encourage you to submit how you might use this list so that we can develop a repository of use cases for broad sharing across the country.

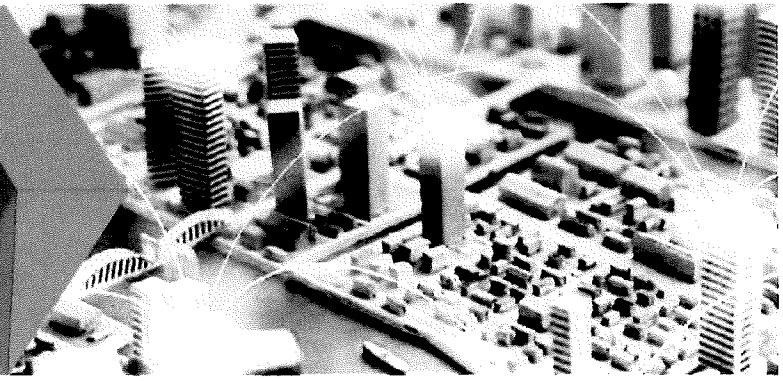
Should you have questions about this list, please contact CISA at CISA.CAT@cisa.dhs.gov.

Attachment: "Guidance on the Essential Critical Infrastructure Workforce: Ensuring Community and National Resilience in COVID-19 Response"



CISA
CYBER+INFRASTRUCTURE

DEFEND TODAY, SECURE TOMORROW



Guidance on the Essential Critical Infrastructure Workforce: Ensuring Community and National Resilience in COVID-19 Response

Version 1.0 (March 19, 2020)

THE IMPORTANCE OF ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS

Functioning critical infrastructure is imperative during the response to the COVID-19 emergency for both public health and safety as well as community well-being. Certain critical infrastructure industries have a special responsibility in these times to continue operations.

This guidance and accompanying list are intended to support State, Local, and industry partners in identifying the critical infrastructure sectors and the essential workers needed to maintain the services and functions Americans depend on daily and that need to be able to operate resiliently during the COVID-19 pandemic response.

This document gives guidance to State, local, tribal, and territorial jurisdictions and the private sector on defining essential critical infrastructure workers. Promoting the ability of such workers to continue to work during periods of community restriction, access management, social distancing, or closure orders/directives is crucial to community resilience and continuity of essential functions.

CONSIDERATIONS FOR GOVERNMENT AND BUSINESS

This list was developed in consultation with federal agency partners, industry experts, and State and local officials, and is based on several key principles:

1. Response efforts to the COVID-19 pandemic are locally executed, State managed, and federally supported
2. Everyone should follow guidance from the CDC, as well as State and local government officials, regarding strategies to limit disease spread.
3. Workers should be encouraged to work remotely when possible and focus on core business activities. In-person, non-mandatory activities should be delayed until the resumption of normal operations.
4. When continuous remote work is not possible, businesses should enlist strategies to reduce the likelihood of spreading the disease. This includes, but is not necessarily limited to, separating staff by off-setting shift hours or days and/or social distancing. These steps can preserve the workforce and allow operations to continue.

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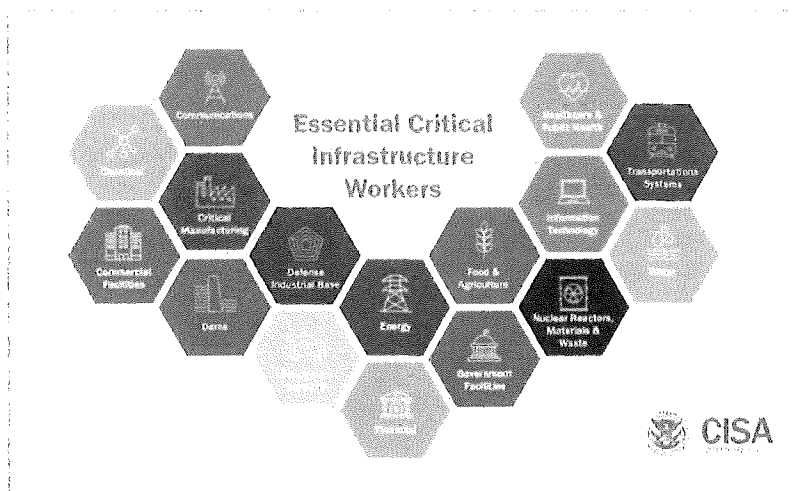
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Essential Critical Infrastructure Workforce

5. All organizations should implement their business continuity and pandemic plans, or put plans in place if they do not exist. Delaying implementation is not advised and puts at risk the viability of the business and the health and safety of the employees.
6. In the modern economy, reliance on technology and just-in-time supply chains means that certain workers must be able to access certain sites, facilities, and assets to ensure continuity of functions.
7. Government employees, such as emergency managers, and the business community need to establish and maintain lines of communication.
8. When government and businesses engage in discussions about critical infrastructure workers, they need to consider the implications of business operations beyond the jurisdiction where the asset or facility is located. Businesses can have sizeable economic and societal impacts as well as supply chain dependencies that are geographically distributed.
9. Whenever possible, jurisdictions should align access and movement control policies related to critical infrastructure workers to lower the burden of workers crossing jurisdictional boundaries.

IDENTIFYING ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS

The following list of sectors and identified essential critical infrastructure workers are an initial recommended set and are intended to be overly inclusive reflecting the diversity of industries across the United States. CISA will continually solicit and accept feedback on the list (both sectors/sub sectors and identified essential workers) and will evolve the list in response to stakeholder feedback. We will also use our various stakeholder engagement mechanisms to work with partners on how they are using this list and share those lessons learned and best practices broadly. We ask that you share your feedback, both positive and negative on this list so we can provide the most useful guidance to our critical infrastructure partners. **Feedback can be sent to CISA.CAT@CISA.DHS.GOV.**



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HEALTHCARE / PUBLIC HEALTH

- Workers providing COVID-19 testing; Workers that perform critical clinical research needed for COVID-19 response
- Caregivers (e.g., physicians, dentists, psychologists, mid-level practitioners, nurses and assistants, infection control and quality assurance personnel, pharmacists, physical and occupational therapists and assistants, social workers, speech pathologists and diagnostic and therapeutic technicians and technologists)
- Hospital and laboratory personnel (including accounting, administrative, admitting and discharge, engineering, epidemiological, source plasma and blood donation, food service, housekeeping, medical records, information technology and operational technology, nutritionists, sanitarians, respiratory therapists, etc.)
- Workers in other medical facilities (including Ambulatory Health and Surgical, Blood Banks, Clinics, Community Mental Health, Comprehensive Outpatient rehabilitation, End Stage Renal Disease, Health Departments, Home Health care, Hospices, Hospitals, Long Term Care, Organ Pharmacies, Procurement Organizations, Psychiatric Residential, Rural Health Clinics and Federally Qualified Health Centers)
- Manufacturers, technicians, logistics and warehouse operators, and distributors of medical equipment, personal protective equipment (PPE), medical gases, pharmaceuticals, blood and blood products, vaccines, testing materials, laboratory supplies, cleaning, sanitizing, disinfecting or sterilization supplies, and tissue and paper towel products
- Public health / community health workers, including those who compile, model, analyze and communicate public health information
- Blood and plasma donors and the employees of the organizations that operate and manage related activities
- Workers that manage health plans, billing, and health information, who cannot practically work remotely
- Workers who conduct community-based public health functions, conducting epidemiologic surveillance, compiling, analyzing and communicating public health information, who cannot practically work remotely
- Workers performing cybersecurity functions at healthcare and public health facilities, who cannot practically work remotely
- Workers conducting research critical to COVID-19 response
- Workers performing security, incident management, and emergency operations functions at or on behalf of healthcare entities including healthcare coalitions, who cannot practically work remotely
- Workers who support food, shelter, and social services, and other necessities of life for economically disadvantaged or otherwise needy individuals, such as those residing in shelters
- Pharmacy employees necessary for filling prescriptions
- Workers performing mortuary services, including funeral homes, crematoriums, and cemetery workers
- Workers who coordinate with other organizations to ensure the proper recovery, handling, identification, transportation, tracking, storage, and disposal of human remains and personal effects; certify cause of death; and facilitate access to mental/behavioral health services to the family members, responders, and survivors of an incident

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LAW ENFORCEMENT, PUBLIC SAFETY, FIRST RESPONDERS

- Personnel in emergency management, law enforcement, Emergency Management Systems, fire, and corrections, including front line and management
- Emergency Medical Technicians
- 911 call center employees
- Fusion Center employees
- Hazardous material responders from government and the private sector.
- Workers – including contracted vendors – who maintain digital systems infrastructure supporting law enforcement and emergency service operations.

FOOD AND AGRICULTURE

- Workers supporting groceries, pharmacies and other retail that sells food and beverage products
- Restaurant carry-out and quick serve food operations - Carry-out and delivery food employees
- Food manufacturer employees and their supplier employees—to include those employed in food processing (packers, meat processing, cheese plants, milk plants, produce, etc.) facilities; livestock, poultry, seafood slaughter facilities; pet and animal feed processing facilities; human food facilities producing by-products for animal food; beverage production facilities; and the production of food packaging
- Farm workers to include those employed in animal food, feed, and ingredient production, packaging, and distribution; manufacturing, packaging, and distribution of veterinary drugs; truck delivery and transport; farm and fishery labor needed to produce our food supply domestically
- Farm workers and support service workers to include those who field crops; commodity inspection; fuel ethanol facilities; storage facilities; and other agricultural inputs
- Employees and firms supporting food, feed, and beverage distribution, including warehouse workers, vendor-managed inventory controllers and blockchain managers
- Workers supporting the sanitation of all food manufacturing processes and operations from wholesale to retail
- Company cafeterias - in-plant cafeterias used to feed employees
- Workers in food testing labs in private industries and in institutions of higher education
- Workers essential for assistance programs and government payments
- Employees of companies engaged in the production of chemicals, medicines, vaccines, and other substances used by the food and agriculture industry, including pesticides, herbicides, fertilizers, minerals, enrichments, and other agricultural production aids
- Animal agriculture workers to include those employed in veterinary health; manufacturing and distribution of animal medical materials, animal vaccines, animal drugs, feed ingredients, feed, and bedding, etc.; transportation of live animals, animal medical materials; transportation of deceased animals for disposal; raising of animals for food; animal production operations; slaughter and packing plants and associated regulatory and government workforce
- Workers who support the manufacture and distribution of forest products, including, but not limited to timber, paper, and other wood products
- Employees engaged in the manufacture and maintenance of equipment and other infrastructure necessary to agricultural production and distribution

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ENERGY

Electricity industry:

- Workers who maintain, ensure, or restore the generation, transmission, and distribution of electric power, including call centers, utility workers, reliability engineers and fleet maintenance technicians
- Workers needed for safe and secure operations at nuclear generation
- Workers at generation, transmission, and electric blackstart facilities
- Workers at Reliability Coordinator (RC), Balancing Authorities (BA), and primary and backup Control Centers (CC), including but not limited to independent system operators, regional transmission organizations, and balancing authorities
- Mutual assistance personnel
- IT and OT technology staff – for EMS (Energy Management Systems) and Supervisory Control and Data Acquisition (SCADA) systems, and utility data centers; Cybersecurity engineers; cybersecurity risk management
- Vegetation management crews and traffic workers who support
- Environmental remediation/monitoring technicians
- Instrumentation, protection, and control technicians

Petroleum workers:

- Petroleum product storage, pipeline, marine transport, terminals, rail transport, road transport
- Crude oil storage facilities, pipeline, and marine transport
- Petroleum refinery facilities
- Petroleum security operations center employees and workers who support emergency response services
- Petroleum operations control rooms/centers
- Petroleum drilling, extraction, production, processing, refining, terminal operations, transporting, and retail for use as end-use fuels or feedstocks for chemical manufacturing
- Onshore and offshore operations for maintenance and emergency response
- Retail fuel centers such as gas stations and truck stops, and the distribution systems that support them

Natural and propane gas workers:

- Natural gas transmission and distribution pipelines, including compressor stations
- Underground storage of natural gas
- Natural gas processing plants, and those that deal with natural gas liquids
- Liquefied Natural Gas (LNG) facilities
- Natural gas security operations center, natural gas operations dispatch and control rooms/centers natural gas emergency response and customer emergencies, including natural gas leak calls
- Drilling, production, processing, refining, and transporting natural gas for use as end-use fuels, feedstocks for chemical manufacturing, or use in electricity generation
- Propane gas dispatch and control rooms and emergency response and customer emergencies, including propane leak calls
- Propane gas service maintenance and restoration, including call centers

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- Processing, refining, and transporting natural liquids, including propane gas, for use as end-use fuels or feedstocks for chemical manufacturing
- Propane gas storage, transmission, and distribution centers

WATER AND WASTEWATER

Employees needed to operate and maintain drinking water and wastewater/drainage infrastructure, including:

- Operational staff at water authorities
- Operational staff at community water systems
- Operational staff at wastewater treatment facilities
- Workers repairing water and wastewater conveyances and performing required sampling or monitoring
- Operational staff for water distribution and testing
- Operational staff at wastewater collection facilities
- Operational staff and technical support for SCADA Control systems
- Chemical disinfectant suppliers for wastewater and personnel protection
- Workers that maintain digital systems infrastructure supporting water and wastewater operations

TRANSPORTATION AND LOGISTICS

- Employees supporting or enabling transportation functions, including dispatchers, maintenance and repair technicians, warehouse workers, truck stop and rest area workers, and workers that maintain and inspect infrastructure (including those that require cross-border travel)
- Employees of firms providing services that enable logistics operations, including cooling, storing, packaging, and distributing products for wholesale or retail sale or use.
- Mass transit workers
- Workers responsible for operating dispatching passenger, commuter and freight trains and maintaining rail infrastructure and equipment
- Maritime transportation workers - port workers, mariners, equipment operators
- Truck drivers who haul hazardous and waste materials to support critical infrastructure, capabilities, functions, and services
- Automotive repair and maintenance facilities
- Manufacturers and distributors (to include service centers and related operations) of packaging materials, pallets, crates, containers, and other supplies needed to support manufacturing, packaging staging and distribution operations
- Postal and shipping workers, to include private companies
- Employees who repair and maintain vehicles, aircraft, rail equipment, marine vessels, and the equipment and infrastructure that enables operations that encompass movement of cargo and passengers
- Air transportation employees, including air traffic controllers, ramp personnel, aviation security, and aviation management
- Workers who support the maintenance and operation of cargo by air transportation, including flight crews, maintenance, airport operations, and other on- and off- airport facilities workers

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PUBLIC WORKS

- Workers who support the operation, inspection, and maintenance of essential dams, locks and levees
- Workers who support the operation, inspection, and maintenance of essential public works facilities and operations, including bridges, water and sewer main breaks, fleet maintenance personnel, construction of critical or strategic infrastructure, traffic signal maintenance, emergency location services for buried utilities, maintenance of digital systems infrastructure supporting public works operations, and other emergent issues
- Workers such as plumbers, electricians, exterminators, and other service providers who provide services that are necessary to maintaining the safety, sanitation, and essential operation of residences
- Support, such as road and line clearing, to ensure the availability of needed facilities, transportation, energy and communications
- Support to ensure the effective removal, storage, and disposal of residential and commercial solid waste and hazardous waste

COMMUNICATIONS AND INFORMATION TECHNOLOGY

Communications:

- Maintenance of communications infrastructure- including privately owned and maintained communication systems- supported by technicians, operators, call-centers, wireline and wireless providers, cable service providers, satellite operations, undersea cable landing stations, Internet Exchange Points, and manufacturers and distributors of communications equipment
- Workers who support radio, television, and media service, including, but not limited to front line news reporters, studio, and technicians for newsgathering and reporting
- Workers at Independent System Operators and Regional Transmission Organizations, and Network Operations staff, engineers and/or technicians to manage the network or operate facilities
- Engineers, technicians and associated personnel responsible for infrastructure construction and restoration, including contractors for construction and engineering of fiber optic cables
- Installation, maintenance and repair technicians that establish, support or repair service as needed
- Central office personnel to maintain and operate central office, data centers, and other network office facilities
- Customer service and support staff, including managed and professional services as well as remote providers of support to transitioning employees to set up and maintain home offices, who interface with customers to manage or support service environments and security issues, including payroll, billing, fraud, and troubleshooting
- Dispatchers involved with service repair and restoration

Information Technology:

- Workers who support command centers, including, but not limited to Network Operations Command Center, Broadcast Operations Control Center and Security Operations Command Center
- Data center operators, including system administrators, HVAC & electrical engineers, security personnel, IT managers, data transfer solutions engineers, software and hardware engineers, and database administrators
- Client service centers, field engineers, and other technicians supporting critical infrastructure, as well as

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Essential Critical Infrastructure Workforce

manufacturers and supply chain vendors that provide hardware and software, and information technology equipment (to include microelectronics and semiconductors) for critical infrastructure

- Workers responding to cyber incidents involving critical infrastructure, including medical facilities, SLTT governments and federal facilities, energy and utilities, and banks and financial institutions, and other critical infrastructure categories and personnel
- Workers supporting the provision of essential global, national and local infrastructure for computing services (incl. cloud computing services), business infrastructure, web-based services, and critical manufacturing
- Workers supporting communications systems and information technology used by law enforcement, public safety, medical, energy and other critical industries
- Support required for continuity of services, including janitorial/cleaning personnel

OTHER COMMUNITY-BASED GOVERNMENT OPERATIONS AND ESSENTIAL FUNCTIONS

- Workers to ensure continuity of building functions
- Security staff to maintain building access control and physical security measures
- Elections personnel
- Federal, State, and Local, Tribal, and Territorial employees who support Mission Essential Functions and communications networks
- Trade Officials (FTA negotiators; international data flow administrators)
- Weather forecasters
- Workers that maintain digital systems infrastructure supporting other critical government operations
- Workers at operations centers necessary to maintain other essential functions
- Workers who support necessary credentialing, vetting and licensing operations for transportation workers
- Customs workers who are critical to facilitating trade in support of the national emergency response supply chain
- Educators supporting public and private K-12 schools, colleges, and universities for purposes of facilitating distance learning or performing other essential functions, if operating under rules for social distancing
- Hotel Workers where hotels are used for COVID-19 mitigation and containment measures

CRITICAL MANUFACTURING

- Workers necessary for the manufacturing of materials and products needed for medical supply chains, transportation, energy, communications, food and agriculture, chemical manufacturing, nuclear facilities, the operation of dams, water and wastewater treatment, emergency services, and the defense industrial base.

HAZARDOUS MATERIALS

- Workers at nuclear facilities, workers managing medical waste, workers managing waste from pharmaceuticals and medical material production, and workers at laboratories processing test kits
- Workers who support hazardous materials response and cleanup
- Workers who maintain digital systems infrastructure supporting hazardous materials management operations

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Essential Critical Infrastructure Workforce

FINANCIAL SERVICES

- Workers who are needed to process and maintain systems for processing financial transactions and services (e.g., payment, clearing, and settlement; wholesale funding; insurance services; and capital markets activities)
- Workers who are needed to provide consumer access to banking and lending services, including ATMs, and to move currency and payments (e.g., armored cash carriers)
- Workers who support financial operations, such as those staffing data and security operations centers

CHEMICAL

- Workers supporting the chemical and industrial gas supply chains, including workers at chemical manufacturing plants, workers in laboratories, workers at distribution facilities, workers who transport basic raw chemical materials to the producers of industrial and consumer goods, including hand sanitizers, food and food additives, pharmaceuticals, textiles, and paper products.
- Workers supporting the safe transportation of chemicals, including those supporting tank truck cleaning facilities and workers who manufacture packaging items
- Workers supporting the production of protective cleaning and medical solutions, personal protective equipment, and packaging that prevents the contamination of food, water, medicine, among others essential products
- Workers supporting the operation and maintenance of facilities (particularly those with high risk chemicals and/or sites that cannot be shut down) whose work cannot be done remotely and requires the presence of highly trained personnel to ensure safe operations, including plant contract workers who provide inspections
- Workers who support the production and transportation of chlorine and alkali manufacturing, single-use plastics, and packaging that prevents the contamination or supports the continued manufacture of food, water, medicine, and other essential products, including glass container manufacturing

DEFENSE INDUSTRIAL BASE

- Workers who support the essential services required to meet national security commitments to the federal government and U.S. Military. These individuals, include but are not limited to, aerospace; mechanical and software engineers, manufacturing/production workers; IT support; security staff; security personnel; intelligence support, aircraft and weapon system mechanics and maintainers
- Personnel working for companies, and their subcontractors, who perform under contract to the Department of Defense providing materials and services to the Department of Defense, and government-owned/contractor-operated and government-owned/government-operated facilities

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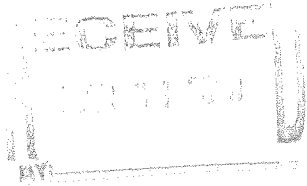
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UNITED STATES DEPARTMENT OF COMMERCE
National Institute of Standards and Technology
Gaithersburg, Maryland 20899-



March 20, 2020

The Honorable Tim Walz
Governor of Minnesota
75 Rev Dr Martin Luther King Jr Blvd #130
St. Paul, MN 55155

Dear Governor Walz:

The U.S. Department of Commerce's National Institute of Standards and Technology (NIST) Manufacturing Extension Partnership (MEP) is proactively reaching out to you and your state's manufacturers as our country works together to address the impacts of our national health crisis.

The MEP National Network™ has longstanding relationships with at least a third of the small and medium-sized suppliers across the country. They can offer immediate technical and business expertise to help your state's manufacturers get through this unfolding situation.

Our MEP Centers can support your efforts in-state by:

- Identifying and supporting companies that manufacture critical components in medical device supply chains that are needed by the health care system to deal with the health crisis;
- Reaching out to the local manufacturing base to assess immediate business needs, such as supply chains, inventory levels, and other emerging business challenges;
- Working one-on-one with local manufacturers to address operational issues and workforce issues to get goods out the door, deal with cost and financial issues, and find new customers;
- Connecting manufacturers in your state to business opportunities, sellers, or other manufacturers around the country via the National Network of MEP Centers; and
- Providing much needed workforce support for manufacturers during recovery, such as training, counseling, and upgrading in-demand skills.

The MEP Center in your state is:
Enterprise Minnesota

NIST

Center Director: John Connelly
2100 Summer St. NE Suite 150
Minneapolis, MN 55413
(612) 455-4210
john.connelly@enterpriseminnesota.org

We are the only resource solely focused on supporting your state's manufacturers – let your local MEP Center know how they can help.

Sincerely,

A handwritten signature in black ink, appearing to read "Carroll A. Thomas". The signature is fluid and cursive, with a long horizontal stroke at the end.

Carroll A. Thomas
Director, Hollings Manufacturing Extension Partnership



THE SECRETARY OF VETERANS AFFAIRS
WASHINGTON

March 17, 2020

The Honorable Tim Walz
130 State Capitol
75 Rev. Dr. Martin Luther King Jr. Boulevard
Saint Paul, MN 55155

Dear Governor Walz:

President Trump declared a nationwide emergency pursuant to section 501(b) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 United States Code 5121-5207 (the "Stafford Act") on March 13, 2020. This increases Federal support to the Department of Health and Human Services (HHS) in its role as the lead Federal agency for the ongoing COVID-19 pandemic response.

HHS remains the lead Federal agency directing the Federal response to COVID-19. When a State, Tribe, or Territory has determined that the maximum capacity of intrastate or interstate resources are exhausted, they may request assistance from the Federal government through their local HHS Regional Emergency Coordinator (REC). The HHS REC will then submit a task order to the HHS Secretary's Operations Center to be resourced by HHS or by one or a combination of the support agencies, including the Department of Veterans Affairs (VA).

HHS can request that VA provide resources to civilian health care systems or that VA hospital care and medical services be provided to non-Veteran patients in VA facilities, dependent upon the availability of resources and funding, and consistent with VA's mission to provide priority services to Veterans. VA cannot receive direct requests for assistance from State and local governments. The established central coordination function of HHS will ensure an integrated, effective response is provided to those communities that need assistance most.

VA has defined roles in both the National Disaster Medical System and the National Response Framework in the event of national emergencies. VA is standing by ready to support as needed. Our COVID-19 emergency preparedness exercises began weeks before the first case was confirmed in the United States, and VA has plans in place to protect everyone who gets care, visits, or works at one of our facilities.

To request Federal government assistance, please contact your State's HHS REC at <https://www.phe.gov/Preparedness/responders/rec/Pages/default.aspx>. For information on VA's COVID-19 response activities, updates can be found at <https://www.publichealth.va.gov/n-coronavirus>.

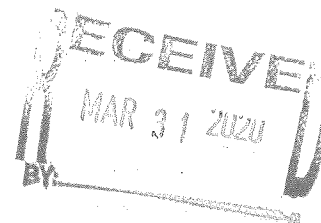
Sincerely,

A handwritten signature in cursive script that reads "Robert L. Wilkie".

Robert L. Wilkie

Handwritten signature or scribble at the bottom center of the page.

DEPUTY SECRETARY OF LABOR
WASHINGTON, D.C. 20210



MAR 27 2020

Office of Governor Tim Walz
130 State Capitol
75 Rev. Dr. Martin Luther King, Jr. Boulevard
St. Paul, MN 55155

Dear Governor Walz:

I am writing to support your state's response to the COVID-19 pandemic, and to request your partnership in responding to the crisis by ensuring your state workforce agency (SWA) continues its essential functions. Your state is on the front lines combatting this crisis, and the U.S. Department of Labor (Department) is eager to support your state in every way possible.

First, the Department recently announced the availability of \$100 million of Dislocated Worker Grants (DWG) for states. We encourage your state to apply for either or both National Health Emergency DWGs or Employment Recovery DWGs. Information on both types of grants, application method, and points of contact for assistance can be found at https://www.doleta.gov/grants/application_howto.cfm.

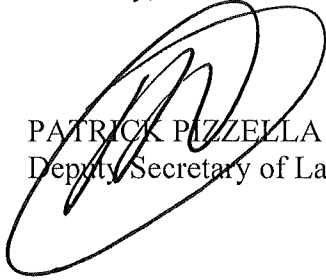
Second, the Unemployment Insurance (UI) program is critical to mitigating the health and economic effects of the virus. UI funds provide a financial safety net for workers, help maintain spending power, and give workers an alternative to going to work ill. The Department considers the UI program an essential government function that must continue during this crisis. We are aware that states are facing an unprecedented spike in unemployment claims and your teams are working to get them processed. The Department is ready to support your efforts and continues to clarify flexibilities and provide technical assistance. Legislation recently passed by Congress contains administrative resources to help with staffing needs, and the Department is committed to getting those resources to you as quickly as possible.

Relatedly, SWA staff also provide staff-assisted services for reviewing job orders related to the Department's foreign labor certification programs. These foreign labor certification programs address critical shortages for agricultural and non-agricultural workers. Because the SWAs' timely review and posting of these job orders are essential to the Department's ability to process employer applications for workers, the Department relies on the SWAs' ability to continue these services during this crisis. Agricultural employers who access the H-2A visa program must provide compliant housing to their temporary and seasonal workers, and depend on timely inspections by SWAs or other state authorities. The Department is committed to working with you and your SWA to assist in addressing these or other issues that may arise from state/local travel restrictions.

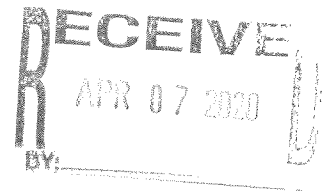
As you work to meet the evolving challenges to respond to this crisis in your state, we are available to support you and ask that you consider how to most effectively maintain essential services. Please know that the Department is ready to support your efforts. Should you or your

staff have any questions, please reach out to John Pallasch, Assistant Secretary for Employment and Training, at 202-693-2772.

Sincerely,

A handwritten signature in black ink, appearing to be 'P. Pizzella', enclosed within a large, loopy oval scribble.

PATRICK PIZZELLA
Deputy Secretary of Labor



THE VICE PRESIDENT

WASHINGTON

March 31, 2020

The Honorable Tim Walz
Governor of the State of Minnesota
St. Paul, Minnesota

Dear Governor Walz:

On behalf of President Trump and the White House Coronavirus Task Force, I want to extend my gratitude for your tireless efforts in our whole-of-America approach to respond to, prepare for, and mitigate the effects of COVID-19. As we have discussed on our calls, 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. I am personally grateful for your strong leadership and your time on these productive calls.

Above all else, I urge you to continue to regularly highlight community mitigation efforts to “Slow the Spread” through April 30. I would also like to reiterate our message to **encourage your State emergency director to have a plan to use the National Guard to move medical equipment from storehouses to hospitals**. We continue to hear from hospitals that are often unaware of PPE equipment that has been delivered from FEMA to State facilities. Please reinforce this to ensure the hospitals in your State get the supplies they need to provide lifesaving treatment to patients.

You have already received these from White House Intergovernmental Affairs, but attached again are some helpful resources we reviewed on the phone yesterday, including:

- Contacting Your FEMA Regional Administrator
 - Data Ask from FEMA
 - FEMA Guidance to States on National Guard Title 32 Status
- Testing Resources Including Swab & Reagent Flexibilities
- Sweeping Regulatory Changes to Help U.S. Healthcare System Address COVID-19 Patient Surge
- Department of Homeland Security Updated Essential Critical Infrastructure Workers Guidance for States & Localities
- Department of Labor Issues Guidance for Workers and Employers Explaining Paid Sick Leave and Expanded Family and Medical Leave Benefits

Thank you for your leadership, and we will continue to be in close communication.

Sincerely,

Michael R. Pence
Vice President of the United States



Office of the Vice President

Additional Resources for Our Nation's Governors

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.). In particular, please ensure good connectivity between your State public health director and your State emergency manager. Contact information for your FEMA Regional Administrator is attached separately.

Data Ask from FEMA

FEMA Administrator Gaynor has asked your State emergency managers for feedback on the data questions found below, welcoming you to engage with your State emergency managers on the response to these questions. Prudently achieving real-time supply chain and data management for healthcare within your State is a best practice.

- How many usable ventilators, ICU beds, convertible vents in the State?
- What is the hospital bed and ICU bed occupancy rate in the State?
- How many new ICU beds does the State estimate it can stand-up and the number of ventilator or alternatives it can or is standing up?
- What is the decompression ability of hospitals in the State?
- How many anesthesia machines are in the State, and have they been converted?

FEMA Guidance to States on National Guard Title 32 Status

FEMA has released guidance for States and territories seeking approval from the President on National Guard Title 32 Status – criteria below. Pursuant to this approval, the Federal government will fund 100 percent of the cost share for 30 days from the date of the authorizing Presidential Memorandum. 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. To date, 14 States have already received approval. More information can be found here: <https://www.fema.gov/national-guard-title-32-status>

Title 32 Approval Criteria:

- A State or territory must have been approved for a Major Disaster Declaration for the COVID-19 response 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.
- A specific request for the reimbursement through Title 32 status must be submitted to the FEMA Administrator via the FEMA Regional Administrator, and it should identify 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.

Please encourage your State emergency managers to have a plan to utilize your National Guard to move medical equipment from storehouses to hospitals.

Testing Resources Including Swab & Reagent Flexibilities

This website offers frequently asked questions relating to the development and performance of diagnostic tests for COVID-19, including information on what commercial laboratories are offering testing, **utilizing alternative swab supplies/methods (flexibilities in the types of swabs your healthcare professionals can use)**, diversification on the types of reagents that can be used, etc. This information should be shared and reviewed by your State public health lab.

- **Food & Drug Administration FAQ on Testing** including swab and reagent flexibilities can be found here: <https://www.fda.gov/medical-devices/emergency-situations-medical-devices/faqs-diagnostic-testing-sars-cov-2>
- **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, Thermo Fisher, and other private sector testing platforms, we would encourage you to do so as that is where the high-speed testing solution is moving forward.
- **Technical Assistance for State Labs:** 24/7 Technical Assistance for Labs: 1-888-463-6332.

Sweeping Regulatory Changes to Help U.S. Healthcare System Address COVID-19 Patient Surge

The Centers for Medicare & Medicaid Services (CMS) has issued an unprecedented array of temporary regulatory waivers and new rules to equip the American healthcare system with maximum flexibility to respond to COVID-19. Made possible by President Trump's recent emergency declaration and emergency rule making, these temporary changes will apply immediately across the entire U.S. healthcare system for the duration of the emergency declaration. This allows hospitals and health systems to deliver services at other locations to make room for COVID-19 patients needing acute care in their main facility. CMS's temporary actions announced empower local hospitals and healthcare systems to: (1) increase hospital capacity – CMS hospitals without walls; (2) rapidly expand the healthcare workforce; (3) put patients over paperwork; and (4) further promote telehealth in Medicare. More information can be found here: <https://www.cms.gov/newsroom/fact-sheets/additional->

[backgroundsweeping-regulatory-changes-help-us-healthcare-system-address-covid-19-patient](#)

Department of Homeland Security Updates Essential Critical Infrastructure Workers Guidance for States & Localities

The U.S. Department of Homeland Security (DHS)'s Cybersecurity and Infrastructure Security Agency has released updated guidance on the essential critical infrastructure workforce. Functioning critical infrastructure is imperative during the response to the COVID-19 emergency for both public health and safety as well as community well-being.

- A key update to guidance now includes employees supporting or enabling transportation functions, including truck drivers, bus drivers, dispatchers, maintenance and repair technicians, warehouse workers, truck stop and rest area workers, etc. More information can be found here: <https://www.cisa.gov/publication/guidance-essential-critical-infrastructure-workforce>
- State, local, tribal, and territorial governments are responsible for implementing and executing response activities, including decisions about access and reentry, in their communities, while the Federal Government is in a supporting role. Officials should use their own judgment in issuing implementation directives and guidance.

Department of Labor Issues Guidance for Workers and Employers Explaining Paid Sick Leave and Expanded Family and Medical Leave Benefits

On March 28, the U.S. Department of Labor (DOL) published more guidance to provide information to employees and employers about how each will be able to take advantage of the protections and relief offered by the Families First Coronavirus Response Act (FFCRA) when it goes into effect on April 1, 2020. More information can be found here: <https://www.dol.gov/newsroom/releases/whd/whd20200328>

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

Office of the Vice President

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

Intergovernmental Affairs Office

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

FACT SHEET

Coronavirus (COVID-19) Pandemic: Regional Administrators

Consistent with the President's national emergency declaration for the coronavirus (COVID-19) pandemic on March 13, 2020, FEMA is leading federal operations on behalf of the White House Coronavirus Task Force; who oversees the whole-of-government response to the pandemic. Governors can express intent to seek FEMA assistance by notifying the respective FEMA Regional Administrator in the FEMA regional office.

Regional Administrators

Region 1 - Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

- Russ Webster, Regional Administrator, Russell.Webster@fema.dhs.gov
617-956-7500 (desk), 857-210-4308 (cell)
- Paul F. Ford, Deputy Regional Administrator, Paul.Ford@fema.dhs.gov
978-461-5602 (desk), 617-947-0048 (cell)

Region 2 - New Jersey, New York, Puerto Rico, and U.S. Virgin Islands

- Tom Von Essen, Regional Administrator, Thomas.VonEssen@fema.dhs.gov
212-680-3806 (desk), 202-704-6650 (cell)
- Tammy Littrell, Acting Deputy Regional Administrator, Tammy.Littrell@fema.dhs.gov,
212-680-3612 (desk), 303-941-7313 (cell)

Region 3 - Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia

- MaryAnn Tierney, Regional Administrator, MaryAnn.Tierney@fema.dhs.gov,
215-931-5600 (desk), 215-687-3090 (cell)
- Janice Barlow, Deputy Regional Administrator, Janice.Barlow@fema.dhs.gov,
215-931-5569 (desk), 215-478-2909 (cell)



FEMA

Region 4 - Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee

- Gracia B. Szczech, Regional Administrator, Gracia.Szczech@fema.dhs.gov, 770-220-5264 (desk), 404-520-0381 (cell)
- Robert Samaan, Deputy Regional Administrator, Robert.Samaan@fema.dhs.gov, 770-220-3123 (desk), 202-288-9160 (cell)

Region 5 – Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin

- James K. Joseph, Regional Administrator, James.K.Joseph@fema.dhs.gov, 312-408-5501 (desk), 202-704-5658 (cell)
- Kevin Sligh, Deputy Regional Administrator, Kevin.M.Sligh@fema.dhs.gov, 312.408.5350 (desk), 312-218-5232

Region 6 – Arkansas, Louisiana, New Mexico, Oklahoma, and Texas

- Tony Robinson, Regional Administrator, Tony.Robinson@fema.dhs.gov, 940-898-5309 (desk), 940-368-0211 (cell)
- Moises Dugan, Deputy Regional Administrator, Moises.Dugan@fema.dhs.gov, 940-898-5312 (desk), 940-247-1536 (cell)

Region 7 – Iowa, Kansas, Missouri, and Nebraska

- Paul Taylor, Regional Administrator, Paul.Taylor@fema.dhs.gov, 816-283-7054 (desk), 816-988-6196 (cell)
- Kathy Fields, Deputy Regional Administrator, Kathy.Fields2@fema.dhs.gov, 816-283-7062 (desk), 816-810-8192 (cell)

Region 8 – Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming

- Lee dePalo, Regional Administrator, Lee.dePalo@fema.dhs.gov, 303-235-4990 (desk), 720-456-9616 (cell)
- Nancy Dragani, Deputy Regional Administrator, Nancy.Dragani@fema.dhs.gov, 303-235-4840 (desk), 202-702-1991 (cell)

Region 9 – American Samoa, Arizona, California, Guam, Hawaii, Nevada, Commonwealth of the Mariana Islands, Federate States of Micronesia, Republic of the Marshall Islands, and Republic of Palau

- Bob Fenton, Regional Administrator, Robert.Fenton@fema.dhs.gov, 510-627-7029 (desk), 510-867-1615 (cell)

- Jim Cho, Acting Deputy Regional Administrator, James.Cho@fema.dhs.gov, 510-627-7136 (desk), 215-240-0034 (cell)

Region 10 – Alaska, Idaho, Oregon, and Washington

- Mike O'Hare, Regional Administrator, Michael.OHare@fema.dhs.gov, 425-487-4604 (desk), 202-657-1973 (cell)
- Vince Maykovich, Deputy Regional Administrator, Vincent.Maykovich@fema.dhs.gov, 425-487-4799 (desk), 425-879-6983 (cell)



Protecting, Maintaining and Improving the Health of All Minnesotans

March 27, 2020

The Honorable Alex M. Azar II
Secretary of Health and Human Services
200 Independence Ave S.W.
Washington, DC 20201

Dear Mr. Secretary,

As our nation continues to fight the COVID-19 pandemic, the Minnesota Department of Health urges the federal government to invoke a Special Immigrant-Based Adjustment of status as described in Chapter 5, Volume 7 of the U.S. Citizenship and Immigration Services Policy Manual¹. We believe this would be an important action to eliminate barriers to practice for International Medical Graduates (IMGs) who have completed graduate medical education in the U.S. and ensure our country has sufficient health care staffing resources available during this health emergency.

According to the American Medical Association, there are about 216,000 IMGs, which make up 22.7% of all licensed doctors in the United States². A significant number of those IMGs, around 12,000 can be utilized to allow more health care providers to combat COVID-19. Currently, work permits and Visas only allow these providers to work within their designated worksite. During this public health emergency, if each physician works just one extra day where need exist, our country would have upwards of 10,000 additional physician-days available upon invoking Chapter 5. This would be a tremendous asset to medical facilities overwhelmed by the coronavirus pandemic.

Invoking Chapter 5 has been done during past public health disasters, none of them reaching the level that we currently face. Please give this proper consideration and take swift action to allow for thousands more health care providers to take on a larger role in the fight against COVID-19.

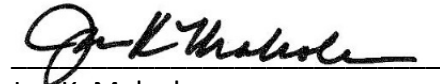
In addition to invoking Chapter 5, MDH urges Congress to pass S. 948 and H.R.2895, the "*Conrad State 30 and Physician Access Reauthorization Act*". These bills have not advanced past

¹ USCIS Policy Manual – Volume 7; Chapter 5
<https://www.uscis.gov/policy-manual/volume-7-part-f-chapter-5>

² How IMGs have changed the face of American medicine
<https://www.ama-assn.org/education/international-medical-education/how-imgs-have-changed-face-american-medicine>

introduction. If enacted into law, they will permit J-1 medical doctors to apply for a waiver for the 2-year residence requirement upon completion of the J-1 exchange visitor program³, allowing these graduates to stay in the United States rather than return to their home country.

Sincerely,



Jan K. Malcolm
Commissioner

CC: Vice President Mike Pence
US Senator Amy Klobuchar
US Senator Tina Smith
Congressman Jim Hagedorn
Congresswoman Angie Craig
Congressman Dean Phillips
Congresswoman Betty McCollum
Congresswoman Ilhan Omar
Congressman Tom Emmer
Congressman Colin Peterson
Congressman Pete Stauber

³ Conrad 30 Waiver Program
<https://www.uscis.gov/working-united-states/students-and-exchange-visitors/conrad-30-waiver-program>

March 27, 2020

The Honorable Chad F. Wolf
Acting Secretary of Homeland Security
Washington, DC 20528

Dear Mr. Secretary,

As our nation continues to fight the COVID-19 pandemic, the Minnesota Department of Health urges the federal government to invoke a Special Immigrant-Based Adjustment of status as described in Chapter 5, Volume 7 of the U.S. Citizenship and Immigration Services Policy Manual¹. We believe this would be an important action to eliminate barriers to practice for International Medical Graduates (IMGs) who have completed graduate medical education in the U.S. and ensure our country has sufficient health care staffing resources available during this health emergency.

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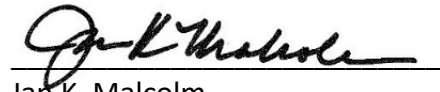
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the 2-year residence requirement upon completion of the J-1 exchange visitor program³, allowing these graduates to stay in the United States rather than return to their home country.

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<https://www.uscis.gov/working-united-states/students-and-exchange-visitors/conrad-30-waiver-program>

U.S. Department of Homeland Security
Region V
536 South Clark Street, Floor 6
Chicago, IL 60605



FEMA

April 5, 2020

Governor Tim Walz
75 Reverend Drive
Martin Luther King Jr. Blvd Suite 130
Saint Paul, MN 53155-1611

Dear Governor Walz:

This acknowledges receipt of your letter dated April 4, 2020 to President Trump requesting a major disaster declaration for the State of Minnesota as a result of the COVID-19 pandemic from January 20, 2020 and continuing. You specifically request the implementation of the Individual Assistance program, to include the Individuals and Household Program, Crisis Counseling, Disaster Case Management, Disaster Legal Services and Small Business Administration Disaster Assistance, the Public Assistance program (Category B and Direct Federal Assistance), as well as the Hazard Mitigation program statewide.

We understand that while your request is being considered you will be providing assistance to your citizens and taking steps to reestablish government services. To the extent that you are engaging in work that may be eligible for reimbursement if the requested Federal assistance is approved, the applicant and sub-applicants must comply with all applicable laws and regulations, including applicable environmental and historic preservation requirements. We especially note the contracting requirements of 2 CFR Part 200 and the necessity to obtain applicable permits. We are available for technical assistance if needed.

Sincerely,

A handwritten signature in blue ink, appearing to read "James K. Joseph".

James K. Joseph
Regional Administrator



FEMA

FEMA-STATE AGREEMENT
FEMA-3453-EM-MN

I. PURPOSE AND BACKGROUND

On March 13, 2020, the President declared that an emergency exists nationwide as a result of Coronavirus Disease 2019 (COVID-19) beginning on January 20, 2020 and continuing. FEMA will provide assistance to the State through this FEMA-State Agreement (Agreement) under this emergency (Declaration) pursuant to the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. §§ 5121-5207 (Stafford Act), in accordance with 44 C.F.R. § 206.44. The number for this Agreement is FEMA-3453-EM. This Agreement between the United States of America through the Regional Administrator, Federal Emergency Management Agency (FEMA), Department of Homeland Security (DHS) or his/her delegate, and the State of Minnesota (State or Recipient) governs all federal assistance FEMA provides the State under the Declaration.

II. GENERAL PROVISIONS

- A. GRANT AWARD PACKAGE. Any federal grant award (which includes a cooperative agreement for purposes of this Agreement) package issued under this Agreement will consist of the Declaration, this Agreement, and the *Application(s) for Federal Assistance* (Standard Form (SF) 424), including *Assurances- Non-Construction Programs* (SF-424B) and also the *Assurances - Construction Programs* (SF 424D) when applicable, submitted by the State for each grant program provided under the Declaration and this Agreement.
- B. FEMA RESPONSIBILITIES. FEMA may provide federal assistance to the State or residents of the State, if applicable, funds in the form of federal grant assistance or direct federal services to support the activities and programs authorized under the Stafford Act and the President's Declaration (federal assistance) in accordance with this Agreement.
- C. STATE RESPONSIBILITIES.
 - I. The State agrees to comply with the federal grant award terms and conditions set forth in the Declaration, this Agreement, individual projects,

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records of environmental consideration, and the State Administrative Plans in place for each grant award.

2. The State agrees to lead, manage and drive the overall recovery process and coordinate recovery activities and technical support by setting appropriate state policies. The State will coordinate with local, Tribal and Federal governments and agencies, private businesses and nonprofit organizations to lead and coordinate state recovery planning and assistance to impacted communities.
3. The State agrees to be the “Recipient” for all federal financial assistance provided under the Stafford Act and this Agreement, with the exception of Housing Assistance or for Other Needs Assistance when administered by FEMA rather than by the State (i.e., the “the FEMA option”) under the Individuals and Households Program, if applicable. The State also serves as the “pass-through entity” with respect to the State’s role in providing subawards and administering grant assistance provided to sub-recipients.
 - a. Recipient and pass-through entity have the same meaning as “Grantee,” as used in governing statutes, regulations, and FEMA guidance.
 - b. A recipient is also a “non-federal entity” for grants administration purposes.
4. The State will serve as the “pass-through entity” with respect to the State’s role in providing subawards and administering grant assistance provided to subrecipients. As the pass-through entity, the State agrees to comply with, and will require all subrecipients to comply with, the requirements of all applicable laws and regulations, including the Stafford Act, Title 44 of the Code of Federal Regulations (C.F.R.) (*Emergency Management and Assistance*), 2 C.F.R. Part 3002 (implementing 2 C.F.R. Part 200 (*Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*)), and applicable FEMA policies and guidance.
 - a. The term “subrecipient” has the same meaning as “subgrantee,” as used in governing statutes, regulations, and FEMA guidance.
 - b. A subrecipient is also a “non-federal entity” for grants administration purposes.

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D. CERTIFICATION AND WAIVERS.

1. Attachment 1 to this Agreement lists the State officials named by the Governor as authorized to execute certifications and otherwise to act on behalf of and to legally bind the State are listed on.
2. Attachment 2 to this Agreement is the State's Certification Regarding Lobbying. This certification complies with the Lobbying Prohibitions in the DHS Standard Terms and Conditions and with the FEMA regulations found at 44 C.F.R. Part 18 (*New Restrictions on Lobbying*).
3. The Governor certifies that appropriate action has been taken under State a law and the emergency plan has been executed.
4. The State waives any consultation process under Executive Order 12372 (*Intergovernmental review of Federal programs*) and 44 C.F.R. Part 4 (*Intergovernmental Review of Federal Emergency Management Agency (FEMA) Programs and Activities*) for grants, loans, or other financial assistance under the Stafford Act for the Declaration .

E. FEDERAL ASSISTANCE.

1. Federal assistance is limited to activities necessary to alleviate damage, loss, hardship, or suffering resulting from the incident that took place during the incident period, except that reasonable expenses that were incurred in anticipation of and immediately preceding such event may be eligible.
2. Federal assistance under the Stafford Act and this Agreement is limited to those areas and programs designated by the President or FEMA in the Federal Register Notices for this emergency, which are listed in Attachment 3 to this Agreement and are incorporated by reference.
3. All scopes of work and costs approved as a result of this Agreement, whether as estimates or final costs approved through subawards, project worksheets, or otherwise, will incorporate by reference the terms of this Agreement and must comply with applicable laws, regulations, policy and guidance in accordance with this Agreement.
4. Pursuant to Executive Order 13858 "Strengthening Buy-American Preferences for Infrastructure Projects," FEMA encourages recipients to use, to the greatest extent practicable and consistent with the law, iron and aluminum as well as steel, cement, and other manufactured products produced in the United States, in Public Assistance eligible public

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infrastructure repair and construction projects affecting surface transportation, ports, water resources including sewer and drinking water, and power. Such preference must be consistent with the law, including cost and contracting requirements at 2 C.F.R. Part 200.

- F. CONTROLLING AUTHORITIES. This Agreement is subject to the following governing authorities:
1. The Stafford Act and its implementing regulations contained in Title 44 of the Code of Federal Regulations (C.F.R.), and FEMA policy and guidance.
 2. "Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards," 2 C.F.R. Parts 200 and 3002.
 3. The DHS Standard Terms and Conditions for grants in effect on the date this event was declared, available at <http://www.dhs.gov/publication/fy15-dhs-standard-terms-and-conditions> which are hereby incorporated by reference.

III. TYPES OF FEDERAL ASSISTANCE

The President may authorize any of the following federal assistance programs and Attachment 3 to this Agreement sets forth the specific federal assistance programs authorized for this Declaration.

- A. PUBLIC ASSISTANCE (PA). When the Declaration authorizes Emergency Work under the PA Program, and FEMA makes a PA grant award to the State, the following terms apply:
1. Cost Share. FEMA funding for PA project costs (which do not include management costs) will be limited to 75 percent of total eligible costs after appropriate reductions, except as may be provided for in any subsequent cost share amendments to the Declaration. The State agrees to make available the non-federal cost share of PA.
 2. Direct Federal Assistance. When Direct Federal Assistance is requested and the assistance is provided:
 - a. The State will:
 - i. Provide without cost to the United States all lands, easements, and rights-of-ways necessary to accomplish the approved work;

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- ii. Hold and save the United States free from damages due to the requested work, and will indemnify the Federal Government against any claims arising from such work;
 - iii. Provide reimbursement to FEMA for the non-federal share of the cost of such work; and
 - iv. Assist the performing federal agency in all support and local jurisdictional matters.
 - b. FEMA will bill the State for the non-federal cost share of Direct Federal Assistance provided and the State agrees to pay the non-federal share pursuant to the timeframes set forth in the letter or other correspondence transmitting the bill.
3. Debris Removal. When debris removal is authorized, the State agrees to indemnify and hold harmless the United States for any claims arising from the removal of debris or wreckage for this major disaster or emergency. The State agrees that debris removal from public and private property will not occur until an unconditional authorization for the removal of debris is provided.
4. Additional Terms and Conditions. Additional terms and conditions regarding implementation of the PA Program including PA grant performance goals may be included in the attached PA Programmatic Addendum.
- B. INDIVIDUAL ASSISTANCE (IA). When the Declaration authorizes IA programs, and FEMA makes an IA grant award to the State, the following terms apply as applicable:
- 1. General. FEMA may award grant funds to the State for the IA programs authorized under the Declaration and requested by the State and, for Direct Temporary Housing and Permanent Housing Construction, may provide direct assistance.
 - 2. Other Needs Assistance. When the Declaration authorizes the Individual and Households Program (IHP), and FEMA provides IHP assistance including Other Needs Assistance (ONA) to individuals and households, the State agrees to make available its 25 percent share of any ONA that is provided under Section 408(e) of the Stafford Act (42 U.S.C. § 5174(e)).

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- a. FEMA Option. When FEMA administers ONA under the FEMA Option, FEMA will bill the State monthly for the cost share. The State agrees to pay the amount billed within 30 days of receipt.
 - b. Joint Option. If the State administers ONA under the Joint Option, a Cooperative Agreement will be executed as an IA Program Addendum to this Agreement and FEMA will pay to the State 75 percent of the total ONA payments to individual and households and actual administrative costs in accordance with Section 408 of the Stafford Act (42 U.S.C. §5174) and 44 C.F.R. §206.120. Administrative costs will equal up to 4 percent of the ONA grant.
 - c. State Option. If the State administers ONA under the State Option, an ONA Grant Agreement will be executed as an IA Program Addendum to this Agreement and FEMA will pay to the State 75 percent of the total ONA payments to individual and households and actual administrative costs in accordance with Section 408 of the Stafford Act (42 U.S.C. §5174) and 44 C.F.R. §206.120. Administrative costs will equal up to 4 percent of the ONA grant.
3. Additional Terms and Conditions. Additional terms and conditions regarding implementation of the IHP and other applicable Individual Assistance (IA) Programs including IA Grant performance goals may be included in an attached IA Programmatic Addendum.

IV. FUNDING

A. PAYMENT PROCESS.

1. Payment System. FEMA will pay the State using the U.S. Department of Health and Human Services Payment Management System (HHS/Smartlink).
2. Payments. Payments are governed by the Treasury-State Cash Management Improvement Act (CMIA) agreements and default procedures codified at 31 C.F.R. Part 205 (*Rules and Procedures for Efficient Federal-State Funds Transfers*) and Treasury Financial Management Manual, Volume 1, Part 4A-2000.
3. PA Overpayments. FEMA will use a “single obligation” system to process payments through a subaccount for each subaward under PA and HMGP. When FEMA identifies an overpayment as a potential debt, the State will have 60 days to appeal that initial determination. Upon exhaustion of appeal rights, the State will have 30 days to resolve the amount owed before the debt is referred to the FEMA Finance Center (FFC) for

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collection. The State may resolve the amount owed by paying FEMA directly. It may also deposit the amount owed directly into the applicable subaccount in HHS/Smartlink and notify FEMA when it has reimbursed that subaccount, after which FEMA will deobligate that amount in the subaccount. Alternatively, the State may request administrative offset of the amount owed against identifiable, allowable, allocable, and reasonable costs under the same subaward which have not yet been reimbursed by FEMA.

4. No Property Interest. The State and subrecipients have no property interest in the funds made available through the HHS/Smartlink account. At any time during the lifecycle of the grant, FEMA may adjust the amounts available to the State in HHS/Smartlink due to grant amendments, partial or full grant terminations, closeouts, or other reasons.

B. AVAILABILITY OF FUNDING. FEMA and the State agree to take measures to deliver assistance to individuals, households, governments and private nonprofits as expeditiously as possible, consistent with federal laws and regulations.

1. This Agreement does not comprise an award of any type of assistance authorized for the Declaration or as described in Part III, Types of Federal Assistance, above and this Agreement does not obligate any federal funding. Rather, FEMA will separately make such award decisions for the assistance authorized for the Declaration.
2. If FEMA decides to make an award of federal assistance, such assistance will be made available within the limits of funds available from Congressional appropriations for such purposes.
3. FEMA may, in its sole discretion, if necessary because of limited funds, give first priority to assistance for individuals and households, emergency work for protection of public health and safety, and administrative costs for managing the disaster programs. FEMA will provide other financial assistance when, and if, funds become available and will generally provide them in the order the claims are received.

V. REPORTING

A. FEDERAL FINANCIAL REPORTS.

1. Initial and Quarterly Financial Reports.

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- a. The State must submit complete and accurate Federal Financial Reports (Standard Form 425) to the FEMA Regional Office 30 days after the end of the first federal quarter following the federal award date for each program. The Regional Administrator or designee may waive the initial report if the incident is of such magnitude and complexity that it would place an undue administrative burden on the State. Subsequent reporting requirements will not be waived. The State must submit quarterly financial status reports thereafter until closeout of the federal grant award for each program funded. Reports are due on January 30, April 30, July 30, and October 30.
- b. The State must indicate in the remarks section on the quarterly financial report each time it has submitted a final expenditure report for a project or subaward as detailed in paragraph V.B below. The information must include the name of the subrecipient, the project number, and the date on which the State submitted the project closeout report. If it is the last project for a subrecipient, then the State must also note that the quarterly report reflects the last expenditures of that subrecipient.

2. Final Financial Report. The State must submit a complete and accurate final Federal Financial Report (SF 425), no later than 90 days after each program's federal grant award performance period expiration date.

B. FINAL EXPENDITURE REPORT FOR PROJECT COMPLETION

1. PA Large Project Final Expenditure Report
 - a. The State must submit a payment of claim to FEMA for each PA large project as required by FEMA regulations and guidance, including 44 C.F.R. § 206.205.
 - b. The State must submit the final payment of claim for a PA large project within 180 days from the earlier of the date the non-Federal entity completes the project or the project completion deadline.
2. PA Small Project Final Expenditure Report
 - a. The State must provide a small project certification for itself and each subrecipient as required by FEMA regulations and guidance, including 44 C.F.R. § 206.205.

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- b. The State must submit the certification within 180 days from the earlier of the date that the non-Federal entity completes its last small project or the latest project completion deadline of a small project.

3. PA Management Cost Project Final Expenditure Report

- a. The State must submit a payment of claim to FEMA for each subrecipient's PA management cost project within 180 days after the earlier to occur of the following:
 - i. 180 days after work is completed on the subrecipient's last non-management cost PA project for the Declaration;
 - ii. 180 days after the latest project completion deadline of a subrecipient's non-management cost PA project for the Declaration; or
 - iii. Two years from the date of the Declaration.
- b. The State must submit a payment of claim to FEMA for the State's PA management cost project within 180 days after the earlier to occur of the following:
 - i. 180 days after work is completed on the last non-management cost PA project for the Declaration;
 - ii. 180 days after the latest project completion deadline of a non-management cost PA project for the Declaration;
 - iii. Two years from the date of the Declaration.

4. Governmental Subrecipients

- a. FEMA will confirm the reports described in paragraphs 1, 2, and 3 as the final expenditure report only if the State has submitted all outstanding information and certifications required by applicable regulations and FEMA policy and guidance and the report is complete and accurate.
- b. The confirmed, complete, and accurate project closeout report is the "final expenditure report for project completion as certified by the grantee" for the purposes of applying Section 705(a) of the Stafford Act (codified as amended at 42 U.S.C. § 5205(a)).

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C. PERFORMANCE REPORTS.

1. Initial and Quarterly Reports. The State must submit performance/progress reports in compliance with each program identified under this Agreement to the FEMA Regional Office 30 days after the end of the first federal quarter following the federal award date. The Regional Administrator or designee may waive the initial report if the incident is of such magnitude and complexity that it would place an undue administrative burden on the grantee. Subsequent reporting requirements will not be waived. The State must submit quarterly performance/progress status reports thereafter until the grant performance period ends. Reports are due on January 30, April 30, July 30, and October 30.
2. Report Content. The State must include in its quarterly performance/progress reports (OMB Form 1660-0017 PA for PA) a status of project/subaward completion, amount of expenditures, and amount of payment for advancement or reimbursement of costs for each project/subaward funded under each of the programs authorized under this Agreement. The State must submit project overruns requiring additional obligations to FEMA for review and approval prior to incurring costs.
3. Project Cost Overruns. The State must submit project cost overruns requiring additional obligations to FEMA for review and approval. Where review and approval is not sought before incurring the costs of an overrun, there is no assurance that FEMA will reimburse such costs.
4. Final Performance Report. The State must submit a final performance/progress report 90 days from each program's grant award performance period expiration date that addresses all approved activities and the performance goals outlined in the federal award.

- D. ENFORCEMENT. FEMA may suspend drawdowns, provide other special conditions or take other authorized action pursuant to 2 C.F.R. § 200.338 (*Remedies for Noncompliance*) if the State does not submit accurate and timely reports. This may include, among other things, the administrative closeout of a grant and/or any projects under a grant when the State is not responsive to reasonable efforts FEMA makes to collect required reports needed to complete closeout. Administrative closeout is a unilateral mechanism by FEMA to move forward with project or grant closeout using available grant information in lieu of final reports. This can require FEMA to make cash or cost adjustments and ineligible cost determinations, which may result in identifying a debt owed by FEMA.

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E. RECORDS RETENTION.

1. State Requirement. The State must retain records for 3 years, except in certain rare circumstances described in 2 C.F.R. § 200.333 (*Retention requirements for records*), from the date it submits the final Federal Financial Report (SF 425) to FEMA in compliance with 2 C.F.R. § 200.333, notwithstanding the time period prescribed for subrecipients in subsection 2, Subrecipient Requirement, below. If FEMA administratively closes the grant where no final SF-425 was submitted, FEMA uses the date the grant was administratively closed as the start date for the 3-year record retention period.
2. Subrecipient Requirement. The State must require subrecipients to retain project or subaward records for 3 years from the date that the State submits to FEMA the final expenditure report for a project or subaward as described above in Part V.B. If, however, there is any litigation, claim, negotiation, audit, request for information, or other action involving the project or subaward that starts before that date, the records must be retained until completion of the action and resolution of all issues which arise from it, or until the end of the 3-year period, whichever is later.

VI. RECOVERY OF FUNDS

- A. IN GENERAL. FEMA may disallow costs and recover funds based on the results of audit or review during or after performance of the award to ensure compliance with the terms of the Agreement and award document. FEMA is required to recover funds when the Recipient or subrecipient has ineligible underruns (for example, actual costs for a PA large project are less than the amount FEMA awarded based on initial estimates); knowingly or negligently withholds or misrepresents material information; fails to complete work and comply with the terms of this Agreement or the approved award; expends federal funds in error; or incurs costs that are unreasonable or otherwise disallowed. If after exhaustion of appeal rights, FEMA determines a debt is owed, the State has 30 days to resolve the amount owed before the debt is referred to the FEMA Finance Center for collection. The State may do so by directly paying FEMA. The State may also deposit the amount owed directly into the applicable subaccount in HHS/Smartlink and notify FEMA when it has reimbursed that subaccount, after which FEMA will deobligate that amount in the subaccount. Alternatively, the State may request to substitute unallowable costs for other costs that are allowable (e.g., necessary, allocable, and reasonable under the same award and have not yet been reimbursed by FEMA

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- B. DUPLICATION OF BENEFITS.
1. General. The State must take all actions necessary and reasonable to ensure that all who receive federal assistance are aware of their responsibility to repay federal assistance that is duplicated by amounts available from insurance or any other source for the same purpose. FEMA may at any time pre-award or post-award adjust the level of funding provided to account for financial assistance provided from any other source for the same purpose as the federal assistance, or to account for benefits available for the same purpose from another source, irrespective of whether they are actually received.
 2. Insurance. Within his/her authorities, the Governor must ensure, through the state agency responsible for regulation of the insurance industry, that insurance companies make full payment of eligible insurance benefits to disaster survivors and others who receive federal assistance. The State must also take all reasonable steps to ensure that disaster survivors are aware of procedures for filing insurance claims, and are informed of any state procedures instituted for assisting insured disaster survivors.
- C. COOPERATION. The State agrees, on its behalf and on behalf of its political subdivisions and others that receive federal assistance, to cooperate with the Federal Government in seeking recovery of federal assistance against any party or parties whose intentional acts or omissions or whose negligence or other tortious conduct may have caused or contributed to the damage or hardship for which federal assistance was provided under this Agreement. If applicable, FEMA will treat recovered funds as duplicated benefits available to the recipient/ subrecipient in accordance with Section 312 of the Stafford Act (42 U.S.C. § 5155).
- D. STATE RESPONSIBILITIES. The State is responsible for the recovery of federal assistance expended in error, misrepresentation, fraud, or for costs otherwise disallowed or unused.
1. The State must adjust its expenditures as it recovers funding and will report these adjustments quarterly on the Federal Financial Report, SF 425.
 2. The State must designate on its PA quarterly progress reports the applicants/ subrecipients from which they have not processed recoveries but from which recoveries are due FEMA.

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3. The State is responsible for notifying FEMA of any potential debt as a result of federal funds expended in error, misrepresentation, fraud, or for costs otherwise disallowed or unused.
4. The State must report all cases of suspected fraud to the DHS Office of Inspector General. The State must cooperate with any investigation conducted by the DHS Office of Inspector General.
5. The State must cooperate with FEMA regarding any and all lawsuits that may result from the State or FEMA's attempt to recover funds or disallow costs.

E. STATUTE OF LIMITATIONS.

1. General. The 3-year statute of limitations limiting FEMA's ability to recover funds paid as provided for in Section 705(a) of the Stafford Act (42 U.S.C. § 5205(a)) begins with the State's submission of the "final expenditure report" described in paragraphs V.B 1, 2, and 3.
2. Initiation of an Administrative Action to Recover Payment. The initiation of an administrative action to recovery payments includes FEMA's written notice to the State or subrecipient of a questioned or disallowed cost or improper payment (including a request for information concerning such cost or payment) and written notice to the State or subrecipient of a FEMA or 3rd party review or audit.

- F. REFUNDS, REBATES AND CREDITS.** The State must transfer to FEMA the appropriate share, based on the federal support percentage, of any refund, rebate, credit or other amounts arising from the performance of this agreement. The State must take necessary action to promptly collect all monies due or which may become due and if applicable, to cooperate with the Federal Government in any claim or suit in connection with amounts due.

VII. CONSTRUCTION REQUIREMENTS

Prior to the start of any construction activity, the State will ensure that all applicable federal, state, and local permits and approvals are obtained and all permit conditions are addressed including FEMA and recipient/subrecipient compliance with the National Environmental Policy Act, the National Historic Preservation Act, the Endangered Species Act, and all other applicable environmental laws and executive orders. All construction should be in accordance with approved permits, projects plans and specifications, applicable building codes and program guidance.

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VIII. PERFORMANCE PERIODS

- A. PROGRAM/GRANT AWARD. The State will complete all grant award activities, including all projects and/or activities approved under each federal grant award, within the time period prescribed in FEMA regulations, program guidance and the award documents.
- B. EXTENSIONS. The State will include with any written request for an extension information and documentation to support the amendment and a schedule for completion. FEMA may approve subsequent work, monetary increase amendments, or activity time extension amendments only if the State submits all financial and performance reports to the appropriate Regional Office. FEMA will only approve extensions to the federal grant award period of performance or project completion timelines (if applicable) that comply with program regulatory timeframes. FEMA will not approve extensions for delays caused by lack of non-federal share funding.

IX. REMEDIES FOR NONCOMPLIANCE

FEMA may take action as it determines appropriate under the circumstances including but not limited to withholding of payments, disallowance of costs, suspension or termination of the award if the State or sub-recipient fails to comply with applicable Federal statutes, regulations or the terms of this Agreement pursuant to 2 C.F.R. § 200.338 (Remedies for Noncompliance).

X. ATTACHMENTS, PROGRAMMATIC ADDENDUMS AND AMENDMENTS

- A. ATTACHMENTS. Attached and also made part of this Agreement are the following Attachments which contain the terms and conditions applicable to all assistance provided under this Agreement:
- Attachment 1: List of State Certification Officers
- Attachment 2: Certification Regarding Lobbying
- Attachment 3: List of Designated Programs and Areas
- B. PROGRAMMATIC ADDENDUMS. Attached and also made part of this Agreement are the following Programmatic Addendums, which unless indicated otherwise in Attachment 1 may be signed or agreed to on behalf of the State by the Governor's Authorized Representative (GAR) listed in Attachment 1, and are included on a case by case basis depending on the assistance designated and whether additional terms and conditions for implementation of specific assistance programs are needed:

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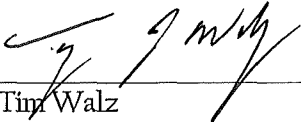
- None

- C. AMENDMENTS. This Agreement may be amended at any time by written approval of both parties. Executed amendments will be numbered and appended to this agreement in the order that they are executed. Electronic copies of executed amendments will be transmitted to the FEMA Declarations Unit.

XI. SIGNATURES AND EFFECTIVE DATE

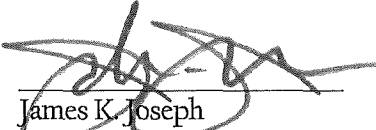
- A. COUNTERPART SIGNATURES. This Agreement may be executed in two or more counterparts, each of which together shall be deemed an original, but all of which together shall constitute one and the same instrument. In the event that any signature is delivered by facsimile transmission or by e-mail delivery of a .pdf format data file, such signature shall create a valid and binding obligation of the party executing with the same force and effect as if such facsimile or .pdf signature page were an original thereof.
- B. EFFECTIVE DATE. This FEMA-State Agreement becomes effective on the date of signature by the last Party.

Agreed:



Tim Walz
Governor
State of Minnesota

March 20, 2020
Date



James K. Joseph
Regional Administrator
FEMA Region V

MAR-19, 2020
Date

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ATTACHMENT 1
LIST OF STATE CERTIFICATION OFFICERS

1. The Governor hereby certifies that **Joe Kelly**, Director, Minnesota Homeland Security and Emergency Management (MN HSEM), is the Governor's Authorized Representative (GAR) empowered to execute on behalf of the State all necessary documents for federal assistance, including approval of subawards and certification of claims for Public Assistance. **Kevin Reed**, Deputy Director of MN HSEM, is the Alternate Governor's Authorized Representative and is similarly empowered.

2. The Governor hereby certifies that **Brian Olson**, Preparedness and Recovery Bureau Director, MN HSEM, and **Kevin Reed** are the State Coordinating Officer (SCO) and Alternate SCO, respectively, who will act in cooperation with the Federal Coordinating Officer under this Declaration.

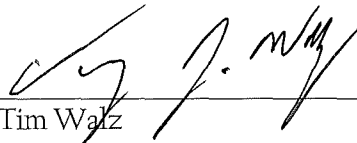
3. The Governor hereby certifies that **Larry Freund**, Director, Fiscal and Administrative Services, MN Department of Public Safety, is the representative of the State authorized to receive donations or loans of surplus property on behalf of the State and to execute certification, agreements, and other necessary documents with regard thereto.

4. The Governor hereby certifies that **Michelle Schlosser**, Grants Program Administrator, MN HSEM, is the State official authorized to execute compliance reports, carry out compliance reviews, and distribute informational material as required by FEMA to ensure that all recipients of federal assistance are in full compliance with FEMA nondiscrimination regulations (44 C.F.R. Part 7, *Nondiscrimination in Federally-Assisted Programs* and 44 C.F.R. § 206.11, *Nondiscrimination in disaster assistance*).

5. The Governor hereby certifies that **Michelle Schlosser** is the State official who will execute compliance reports, carry out compliance reviews, and distribute informational material as required by FEMA to ensure that all recipients of federal assistance are in compliance with the General Services Administration List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

Restrictions on approval authority of the above-named officials: None

Agreed:



Tim Walz
Governor

March 20, 2020
Date

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ATTACHMENT 2
CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

This certification is required by the regulations implementing the New Restrictions on Lobbying, 44 C.F.R. Part 18. The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
2. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned must complete and submit Standard Form-LLL, *Disclosure Form to Report Lobbying*, in accordance with its instructions.
3. The undersigned must require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients must certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31 U.S.C. § 1352. Any person who fails to file the required certification must be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

Signature

Date

Joe Kelly
Governor's Authorized Representative
Director, Homeland Security and Emergency Management
State of Minnesota

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ATTACHMENT 3
LIST OF DESIGNATED AREAS AND PROGRAMS

Eligible applicants in the State of Minnesota are eligible to apply for emergency protective measures (Category B), including direct Federal assistance, under the Public Assistance program.



FEMA

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I. PURPOSE AND BACKGROUND

The President declared on April 7, 2020, that a major disaster exists in the State of Minnesota. This declaration was based on COVID-19 (incident) beginning on January 20, 2020 and continuing (incident period). This is the FEMA-State Agreement for this major disaster, designated FEMA-4531-DR (Declaration), under the Robert T. Stafford Disaster Relief and Emergency Assistance Act, Pub. L. No. 93-288 (1974) (codified as amended at 42 U.S.C. §§ 5121-5207) (Stafford Act), in accordance with 44 C.F.R. § 206.44. This Agreement between the Federal Emergency Management Agency (FEMA), Department of Homeland Security (DHS) and the State of Minnesota (State or Recipient) governs all federal assistance that FEMA provides the State for this Declaration.

II. GENERAL PROVISIONS

- A. GRANT AWARD PACKAGE. Any federal grant (which includes a cooperative agreement for purposes of this Agreement) award package issued under this Agreement will consist of the Declaration, this Agreement, and the *Application(s) for Federal Assistance* (Standard Form (SF) 424), including *Assurances – Non-Construction Programs* (SF-424B) and also the *Assurances – Construction Programs* (SF 424D), when applicable, submitted by the State for each grant provided under the Declaration and this Agreement.
- B. FEMA RESPONSIBILITIES. FEMA may provide federal assistance to the State or residents of the State, if applicable, in the form of federal grant assistance, payments to individuals, and/or direct federal services to support the activities and programs authorized under the Stafford Act and the President’s Declaration in accordance with this Agreement.
- C. STATE RESPONSIBILITIES
- I. The State agrees to comply with the federal grant award terms and conditions set forth in the Declaration, this Agreement, individual projects, records of environmental consideration, State Mitigation Plan (if applicable) and the State Administrative Plans in place for each grant award.

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2. The State agrees to lead, manage, and drive the overall recovery process and coordinate recovery activities and technical support by setting appropriate state policies. The State will coordinate with local, tribal and Federal governments and agencies, private businesses, and nonprofit organizations to lead and coordinate state recovery planning and assistance to impacted communities.
3. The State agrees to be the “Recipient” for all federal financial assistance provided under the Stafford Act and this Agreement, with the exception of financial assistance for Temporary Housing and financial assistance for Housing Repair and Replacement under the Individuals and Household Program (IHP) that is always administered by FEMA or for Direct Temporary Housing, Permanent Housing, and/or Other Needs Assistance (ONA) under the IHP when administered by FEMA rather than by the State (*i.e.*, the “FEMA option”), if applicable.
 - a. Recipient has the same meaning as “Grantee” as used in governing statutes, regulations, and FEMA guidance.
 - b. A recipient is also a “non-Federal entity” for grants administration purposes.
4. The State will serve as the “pass-through entity” with respect to the State’s role in providing subawards and administering grant assistance provided to subrecipients. As the pass-through entity, the State agrees to comply with and will require all subrecipients to comply with the requirements of all applicable laws and regulations, including the Stafford Act, Title 44 of the Code of Federal Regulations (C.F.R.) (*Emergency Management and Assistance*), 2 C.F.R. Part 3002 (implementing 2 C.F.R. Part 200 (*Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*)), and applicable FEMA policies and guidance.
 - a. The term “subrecipient” has the same meaning as “subgrantee” as used in governing statutes, regulations, and FEMA guidance.
 - b. A subrecipient is also a “non-Federal entity” for grants administration purposes.
 - c. A subrecipient may also serve as a pass-through entity under certain circumstances in the Hazard Mitigation Grant Program (HMGP)
5. The State is required to maintain a FEMA-approved State Mitigation Plan (SMP) in accordance with 44 C.F.R. Part 201 (*Mitigation Planning*) as a condition of receiving non-emergency Stafford Act assistance.
 - a. The State must update its SMP every five years.

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- b. The State must have a FEMA-approved mitigation plan to receive the following assistance:
 - i. Public Assistance (PA) – Permanent Work Categories C-G
 - ii. HMGP
- c. FEMA will not obligate funds for PA Permanent Work or HMGP projects unless that State has a FEMA-approved SMP.
- d. If the State does not have a FEMA-approved SMP as of the date of the Declaration, the State must submit its approvable SMP within 30 days of the date of the Declaration for FEMA review and approval. If the State fails to do so, FEMA will deny the State's application for PA Permanent Work and HMGP assistance under the Declaration.
- e. If the State's FEMA-approved SMP lapses after the Declaration, the State must submit its approvable SMP within 30 days of the lapse for FEMA review and approval. FEMA will cease obligating funds for PA Permanent Work or HMGP projects during any lapse period between expiration of the current SMP and approval of an updated SMP.

D. CERTIFICATION AND WAIVERS

- 1. Attachment 1 to this Agreement lists the State officials named by the Governor as authorized to execute certifications and otherwise to act on behalf of and to legally bind the State.
- 2. Attachment 2 to this Agreement is the State's Certification Regarding Lobbying. This certification complies with the lobbying prohibitions in the DHS Standard Terms and Conditions and with the FEMA regulations at 44 C.F.R. Part 18 (*New Restrictions on Lobbying*).
- 3. The State waives any consultation process under Executive Order 12372 (*Intergovernmental review of Federal programs*) and 44 C.F.R. Part 4 (*Intergovernmental Review of Federal Emergency Management Agency (FEMA) Programs and Activities*) for grants, cooperative agreements, loans, or other financial assistance under the Stafford Act for the Declaration.

E. FEDERAL ASSISTANCE

- 1. The State has requested federal assistance and submitted a FEMA Form 010-0-13 (*Request for Presidential Disaster Declaration – Major Disaster or Emergency*), the terms, representations, and assurances of which are incorporated by reference into this Agreement.

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2. Federal assistance, except for assistance under the HMGP, is limited to activities necessary to alleviate damage, loss, hardship, or suffering resulting from the incident that took place during the incident period, except that reasonable expenses that were incurred in anticipation of and immediately preceding the incident may be eligible.
3. Federal assistance under the Stafford Act and this Agreement is limited to those areas and programs designated by the President or FEMA in the Federal Register Notices for this Declaration, which are listed in **Attachment 3** to this Agreement and are incorporated by reference into this Agreement.
4. All scopes of work and costs approved as a result of this Agreement, whether as estimates or final costs approved through subawards, project worksheets, or otherwise, will incorporate by reference the terms of this Agreement and must comply with applicable laws, regulations, policy, and guidance in accordance with this Agreement.
5. Pursuant to Executive Order 13858 "Strengthening Buy-American Preferences for Infrastructure Projects," FEMA encourages recipients to use, to the greatest extent practicable and consistent with the law, iron and aluminum as well as steel, cement, and other manufactured products produced in the United States, in Public Assistance and Hazard Mitigation Grant Program eligible public infrastructure repair and construction projects affecting surface transportation, ports, water resources including sewer and drinking water, and power. Such preference must be consistent with the law, including cost and contracting requirements at 2 C.F.R. Part 200.

F. **CONTROLLING AUTHORITIES.** This Agreement is subject to the following governing authorities:

1. The Stafford Act, its implementing regulations contained in Title 44 of the C.F.R., and FEMA policy and guidance.
2. The Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards set forth at 2 C.F.R. Parts 200 and 3002.
3. The DHS Standard Terms and Conditions in effect on the date of the Declaration, available at <http://www.dhs.gov/publication/fy15-dhs-standard-terms-and-conditions> which are incorporated by reference into this Agreement.

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III. TYPES OF FEDERAL ASSISTANCE

The President may authorize any of the following federal assistance programs and Attachment 3 to this Agreement sets forth the specific federal assistance programs authorized for this Declaration.

A. PUBLIC ASSISTANCE (PA). The following terms apply when the PA Program is authorized and FEMA makes a PA grant award to the State:

1. Cost Share. FEMA funding for PA project costs (which do not include management costs) will be limited to 75 percent of total eligible costs after appropriate reductions (such as for insurance), except as may be provided for in any subsequent cost share amendments to the Declaration, which will be incorporated into this agreement by amendment. The State agrees to make available the non-federal share of PA project costs.
2. Management Costs. FEMA funding for PA management costs will be 100 percent of the total eligible management costs, which will be limited to not more than 12 percent of the total award amount. Of this amount, the State may use up to 7 percent and a subrecipient may use up to 5 percent of the subrecipient's total award amount. The "total award amount" means the actual eligible PA project costs, including both the federal and non-federal share, and after appropriate reductions (such as for insurance) and excluding management costs. There is no non-federal share of PA management costs.
3. Direct Federal Assistance. When Direct Federal Assistance is requested and the assistance is provided:
 - a. The State will:
 - i. Provide without cost to the United States all lands, easements, and rights-of-ways necessary to accomplish the approved work;
 - ii. Hold and save the United States free from damages due to the requested work, and will indemnify the Federal Government against any claims arising from such work;
 - iii. Provide reimbursement to FEMA for the non-federal share of the cost of such work; and
 - iv. Assist the performing federal agency in all support and local jurisdictional matters.
 - b. FEMA will bill the State for the non-federal share of Direct Federal Assistance provided and the State agrees to pay the non-federal

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share pursuant to the timeframes set forth in the letter or other correspondence transmitting the bill.

4. Debris Removal. When debris removal is authorized, the State agrees to indemnify and hold harmless the United States for any claims arising from the removal of debris or wreckage for the Declaration. The State agrees that debris removal from public and private property will not occur until an unconditional authorization for the removal of debris is provided.
5. Additional Terms and Conditions. The attached **Public Assistance Programmatic Addendum** includes additional terms and conditions for the implementation of the PA Program as applicable and PA grant performance goals.

B. INDIVIDUAL ASSISTANCE (IA). When the Declaration authorizes IA overall or specific IA programs and FEMA makes an IA grant award to the State, the following terms apply:

1. General. FEMA may award grant funds to the State for the IA programs authorized under the Declaration and requested by the State and, for Direct Temporary Housing and Permanent Housing Construction, may provide direct assistance.
2. Other Needs Assistance. When the Declaration authorizes the IHP and FEMA provides ONA to individuals and households, the State agrees to make available its 25 percent share of any ONA that is provided under Section 408(e) of the Stafford Act (codified as amended at 42 U.S.C. § 5174(e)).
 - a. FEMA Option. When FEMA administers ONA under the FEMA Option, FEMA will bill the State monthly for the cost share. The State agrees to pay the amount billed within 30 days of receipt.
 - b. Joint Option. If the State administers ONA under the Joint Option, a cooperative agreement will be executed as an IA Program Addendum to this Agreement and FEMA will pay to the State 75 percent of the total ONA payments to individuals and households and actual administrative costs in accordance with Section 408 of the Stafford Act (codified as amended at 42 U.S.C. § 5174) and 44 C.F.R. § 206.120. Administrative costs will equal up to 5 percent of the ONA grant.
 - c. State Option. If the State administers ONA under the State Option, a grant agreement will be executed as an IA Program Addendum to this Agreement and FEMA will pay to the State 75 percent of the total ONA payments to individuals and households and administrative costs allowed under Section 408 of the Stafford Act (codified as amended at 42 U.S.C. § 5174) and 44 C.F.R. § 206.120.

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Administrative costs will equal up to 5 percent of the actual eligible ONA payments made to individual and households, including both the federal and non-federal share.

3. Additional Terms and Conditions. Additional terms and conditions regarding implementation of the IHP and other applicable IA Programs including IA grant performance goals and administrative plans may be included in an attached IA Programmatic Addendum.

C. HAZARD MITIGATION GRANT PROGRAM (HMGP). When the Declaration authorizes the HMGP and FEMA makes a HMGP award to the State, the following provisions apply:

1. Total Funding. Total federal contributions are based on the estimated aggregate amount of grants to be made under the Stafford Act for this major disaster (less any associated administrative costs), and will be 15 percent for the first \$2,000,000,000 or less of such amounts; 10 percent of the portion of such amounts over \$2,000,000,000 and not more than \$10,000,000,000; and 7.5 percent of the portion of such amounts over \$10,000,000,000 and not more than \$35,333,000,000.
2. Cost Share. FEMA funding for total HMGP costs, excluding management costs, will be limited to no more than 75 percent of total eligible costs after appropriate deductions. The State agrees to make available the 25 percent non-federal share of HMGP and, at its request, may provide a greater non-federal share of an activity cost.
3. Management Costs
 - a. FEMA funding for HMGP management costs will be 100 percent of the total eligible management costs, which will be limited to 15 percent of the total award amount. The State may use up to 10 percent of the total award amount and subrecipients may use up to 5 percent of the subrecipient's total award amount. There is no non-federal share of HMGP management costs
 - b. The "total award amount" means the actual eligible HMGP activity costs, including both the federal and the non-federal share, and after appropriate reductions (such as for insurance) and excluding management costs. For the State, this is the total of the federal contribution and the required nonfederal contribution under the HMGP grant award. For a subrecipient, this is the federal contribution and nonfederal contribution that the State has identified as contributing to meet the nonfederal share of the HMGP grant award. In the case where the non-federal share for the entire HMGP grant award exceeds the required 25 percent, those excess non-federal contributions are not included in the total award amount and are not included in the calculation of management costs.

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4. Program Administration by States. If the State requests and FEMA approves the State's request for inclusion in the Program Administration by States (PAS) Pilot Program, FEMA and the State will execute an Operating Agreement that will be included in the attached HMGP Programmatic Addendum.
5. Additional Terms and Conditions. Additional terms and conditions regarding implementation of HMGP, including performance goals, may be included in the attached HMGP Programmatic Addendum.

IV. FUNDING

A. PAYMENT PROCESS

1. Payment System. FEMA will pay the State using the U.S. Department of Health and Human Services Payment Management System (HHS/Smartlink).
2. Payments. Payments are governed by the Treasury-State Cash Management Improvement Act (CMIA) agreements and default procedures codified at 31 C.F.R. Part 205 (*Rules and Procedures for Efficient Federal-State Funds Transfers*) and Treasury Financial Management Manual, Volume 1, Part 4A-2000.
3. IA Overpayments. When FEMA identifies an overpayment under an IA grant award, subject to the exhaustion of appeals, FEMA will deobligate the funds from the State's HHS/Smartlink account. If there are insufficient funds in the account, the State will have 30 days to reimburse the HHS/Smartlink account. At that time, if there are still insufficient funds in the subaccount, FEMA will refer the amount to the FEMA Finance Center (FFC) for collection.
4. PA and HMGP Overpayments. FEMA will use a "single obligation" system to process payments through a subaccount for each subaward under PA and HMGP. When FEMA identifies an overpayment as a potential debt, the State will have 60 days to appeal that initial determination. Upon exhaustion of appeal rights, the State will have 30 days to resolve the amount owed before the debt is referred to the FEMA Finance Center (FFC) for collection. The State may resolve the amount owed by paying FEMA directly. It may also deposit the amount owed directly into the applicable subaccount in HHS/Smartlink and notify FEMA when it has reimbursed that subaccount, after which FEMA will deobligate that amount in the subaccount. Alternatively, the State may request administrative offset of the amount owed against identifiable, allowable, allocable, and reasonable costs under the same subaward which have not yet been reimbursed by FEMA.

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5. No Property Interest. The State and subrecipients have no property interest in the funds made available through the HHS/Smartlink account. At any time during the lifecycle of the grant, FEMA may adjust the amounts available to the State in HHS/Smartlink due to grant amendments, partial or full grant terminations, closeouts, or other reasons.

B. AVAILABILITY OF FUNDING. FEMA and the State agree to take measures to deliver assistance to individuals, households, governments, and private nonprofits as expeditiously as possible consistent with federal laws and regulations.

1. This Agreement does not comprise an award of any type of assistance authorized for the Declaration or as described in Part III, Types of Federal Assistance, above and this Agreement does not obligate any federal funding. Rather, FEMA will separately make such award decisions for the assistance authorized for the Declaration.
2. If FEMA decides to make an award of federal assistance, such assistance will be made available within the limits of funds available from Congressional appropriations for such purposes.
3. FEMA may, in its sole discretion, if necessary because of limited funds, give first priority to assistance for individuals and households, emergency work for protection of public health and safety, and administrative costs for managing the disaster programs. FEMA will provide other financial assistance when, and if, funds become available and will generally provide them in the order the claims are received.

V. REPORTING

A. FEDERAL FINANCIAL REPORTS

1. Initial and Quarterly Financial Reports
 - a. The State must submit complete and accurate Federal Financial Reports (Standard Form (“SF”) 425) to the FEMA Regional Office 30 days after the end of the first federal quarter following the federal award date for each program (PA, HMGP, and the various IA programs). The Regional Administrator or designee may waive the initial report if the incident is of such magnitude and complexity that it would place an undue administrative burden on the State. Subsequent reporting requirements will not be waived. The State must submit quarterly financial status reports thereafter until closeout of the federal grant award for each program funded. Reports are due on January 30, April 30, July 30, and October 30.
 - b. The State must indicate in the remarks section on the quarterly financial report each time it has submitted a final expenditure report for

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a project or subaward as detailed in paragraph V.B below. The information must include the name of the subrecipient, the project number, and the date on which the State submitted the project closeout report. If it is the last project for a subrecipient, then the State must also note that the quarterly report reflects the last expenditures of that subrecipient.

2. Final Federal Financial Report. The State must submit a complete and accurate final Federal Financial Report (SF 425), no later than 90 days after each program's federal grant award performance period expiration date.

B. FINAL EXPENDITURE REPORT FOR PROJECT COMPLETION

1. PA Large Project Final Expenditure Report

- a. The State must submit a payment of claim to FEMA for each PA large project as required by FEMA regulations and guidance, including 44 C.F.R. § 206.205.
- b. The State must submit the final payment of claim for a PA large project within 180 days from the earlier of the date the non-Federal entity completes the project or the project completion deadline.

2. PA Small Project Final Expenditure Report

- a. The State must provide a small project certification for itself and each subrecipient as required by FEMA regulations and guidance, including 44 C.F.R. § 206.205.
- b. The State must submit the certification within 180 days from the earlier of the date that the non-Federal entity completes its last small project or the latest project completion deadline of a small project.

3. PA Management Cost Project Final Expenditure Report

- a. The State must submit a payment of claim to FEMA for each subrecipient's PA management cost project within 180 days after the earlier to occur of the following:
 - i. 180 days after work is completed on the subrecipient's last non-management cost PA project for the Declaration;
 - ii. 180 days after the latest project completion deadline of a subrecipient's non-management cost PA project for the Declaration; or
 - iii. Eight years from the date of the Declaration.

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- b. The State must submit a payment of claim to FEMA for the State's PA management cost project within 180 days after the earlier to occur of the following:
 - i. 180 days after work is completed on the last non-management cost PA project for the Declaration;
 - ii. 180 days after the latest project completion deadline of a non-management cost PA project for the Declaration;
 - iii. Eight years from the date of the Declaration.

- 4. HMGP Project Final Expenditure Report
 - a. The State must submit a payment of claim to FEMA for each HMGP project as required by FEMA regulations and guidance, including 44 C.F.R. § 206.438(d).
 - b. The State must submit the final payment of claim within 180 days from the earlier of the date the non-Federal entity completes the project or the project completion deadline.

- 5. HMGP Management Cost Project Final Expenditure Report
 - a. The State must submit a payment of claim to FEMA for each subrecipient's HMGP management cost project within 180 days after the earlier to occur of the following:
 - i. 180 days after work is completed on the subrecipient's last non-management cost HMGP project for the Declaration;
 - ii. 180 days after the latest project completion deadline of a subrecipient's non-management cost HMGP project for the Declaration; or
 - iii. Eight years from the date of the Declaration
 - b. The State must submit a payment of claim to FEMA for the State's HMGP management cost project within 180 days after the earlier to occur of the following:
 - i. 180 days after work is completed on the last non-management cost HMGP project for the Declaration;
 - ii. 180 days after the latest performance period of a non-management cost HMGP project for the Declaration; or
 - iii. Eight years from the date of the Declaration

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6. IA Final Expenditure Report. If the State issues a subaward under the Disaster Case Management Program, Crisis Counseling Program, ONA, Direct Temporary Housing, or Permanent Housing Construction grant award, then it must submit a payment of claim to FEMA for that subaward within 180 days from the earlier of the date the non-Federal entity completes the project or the project completion deadline.
7. Governmental Subrecipients
 - a. FEMA will confirm the reports described in paragraphs 1, 2, 3, 4, 5, 6 as the final expenditure report only if the State has submitted all outstanding information and certifications required by applicable regulations and FEMA policy and guidance and the report is complete and accurate.
 - b. The confirmed, complete, and accurate project closeout report is the “final expenditure report for project completion as certified by the grantee” for the purposes of applying Section 705(a) of the Stafford Act (codified as amended at 42 U.S.C. § 5205(a)).

C. PERFORMANCE REPORTS

1. Initial and Quarterly Reports. The State must submit performance/progress reports in compliance with each program identified under this Agreement to the FEMA Regional Office 30 days after the end of the first federal quarter following the federal award date. The Regional Administrator or designee may waive the initial report if the incident is of such magnitude and complexity that it would place an undue administrative burden on the grantee. Subsequent reporting requirements will not be waived. The State must submit quarterly performance/progress status reports thereafter until the grant performance period ends. Reports are due on January 30, April 30, July 30, and October 30.
2. Report Content. The State must include in its quarterly performance/progress reports (OMB Form 1660-0017 PA and OMB Form 1660-0076 HMGP for PA and HMGP, respectively) a status of project/subaward completion, amount of expenditures, and amount of payment for advancement or reimbursement of costs for each project/subaward funded under each of the programs authorized under this Agreement, including for properties purchased for open space under the HMGP.
3. Project Cost Overruns. The State must submit project cost overruns requiring additional obligations to FEMA for review and approval. Where review and approval is not sought before incurring the costs of an overrun, there is no assurance that FEMA will reimburse such costs. In compliance with 44 C.F.R. § 206.438, the State must submit project cost overruns requiring additional HMGP obligations to FEMA for review and approval before incurring costs.

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4. Final Performance Report. The State must submit a final performance/progress report 90 days from each program's grant award performance period expiration date that addresses all approved activities and the performance goals outlined in the federal award.

D. ENFORCEMENT. FEMA may suspend drawdowns, impose other special conditions, or take other authorized action pursuant to 2 C.F.R. § 200.338 (*Remedies for Noncompliance*) if the State does not submit accurate and timely reports. This may include, among things, the administrative closeout of a grant and/or any projects under a grant when the State is not responsive to reasonable efforts FEMA makes to collect required reports needed to complete closeout. Administrative closeout is a unilateral mechanism by FEMA to move forward with project or grant closeout using available grant information in lieu of final reports. This can require FEMA to make cash or cost adjustments and ineligible cost determinations, which may result in identifying a debt owed to FEMA.

E. RECORDS RETENTION

1. State Requirement. The State must retain records for 3 years, except in certain rare circumstances described in 2 C.F.R. § 200.333 (*Retention requirements for records*), from the date it submits the final Federal Financial Report (SF 425) to FEMA in compliance with 2 C.F.R. § 200.333, notwithstanding the time period prescribed for subrecipients in subsection 2, Subrecipient Requirement, below. If FEMA administratively closes the grant where no final SF-425 was submitted, FEMA uses the date the grant was administratively closed as the start date for the 3-year record retention period.

2. Subrecipient Requirement. The State must require subrecipients to retain project or subaward records for at least 3 years from the date that the State submits to FEMA the final expenditure report for a project or subaward as described above in paragraph V.B. If, however, there is any litigation, claim, negotiation, audit, request for information, or other action involving the project or subaward that starts before that date, the records must be retained until completion of the action and resolution of all issues which arise from it, or until the end of the 3-year period, whichever is later.

VI. RECOVERY OF FUNDS

A. GENERAL. FEMA may disallow costs and recover funds based on the results of audit or review during or after performance of the award to ensure compliance with the terms of the Agreement and award document. FEMA is required to recover funds when the Recipient or subrecipient has ineligible underruns (for example, actual costs for a PA large project are less than the amount FEMA awarded based on initial estimates); knowingly or negligently withholds or misrepresents material information; fails to complete work and comply with the terms of this Agreement or the approved award; expends federal funds in error; or incurs costs that are unreasonable or otherwise disallowed. If after exhaustion of

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appeal rights, FEMA determines a debt is owed, the State has 30 days to resolve the amount owed before the debt is referred to the FEMA Finance Center for collection. The State may do so by directly paying FEMA. The State may also deposit the amount owed directly into the applicable subaccount in HHS/Smartlink and notify FEMA when it has reimbursed that subaccount, after which FEMA will deobligate that amount in the subaccount. Alternatively, the State may request to substitute unallowable costs for other costs that are allowable (e.g., necessary, allocable, and reasonable under the same award and have not yet been reimbursed by FEMA

B. DUPLICATION OF BENEFITS

1. General. The State must take all actions necessary and reasonable to ensure that all who receive federal assistance are aware of their responsibility to repay federal assistance that is duplicated by amounts available from insurance or any other source for the same purpose. FEMA may at any time pre-award or post-award adjust the level of funding provided to account for financial assistance provided from any other source for the same purpose as the federal assistance or to account for benefits available for the same purpose from another source, irrespective of whether they are actually received.
2. Insurance. Within his/her authorities, the Governor must ensure, through the state agency responsible for regulation of the insurance industry, that insurance companies make full payment of eligible insurance benefits to disaster survivors and others who receive federal assistance. The State must also take all reasonable steps to ensure that disaster survivors are aware of procedures for filing insurance claims, and are informed of any state procedures instituted for assisting insured disaster survivors.

C. COOPERATION. The State agrees, on its behalf and on behalf of its political subdivisions and others that receive federal assistance, to cooperate with the Federal Government in seeking recovery of federal assistance against any party or parties whose intentional acts or omissions or whose negligence or other tortious conduct may have caused or contributed to the damage or hardship for which federal assistance was provided under this Agreement. If applicable, FEMA will treat recovered funds as duplicated benefits available to the Recipient/subrecipient in accordance with Section 312 of the Stafford Act (codified as amended at 42 U.S.C. § 5155).

D. STATE RESPONSIBILITIES. The State is responsible for recovering federal assistance expended in error, misrepresentation, fraud, or for costs otherwise disallowed or unused.

1. The State must adjust its expenditures as it recovers funding and will report these adjustments quarterly on the Federal Financial Report, SF 425.

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2. The State must designate on its quarterly progress reports the applicants/subrecipients from which they have not processed recoveries but from which recoveries are due FEMA.
3. The State must notify FEMA of any potential debt as a result of federal funds expended in error, misrepresentation, fraud, or for costs otherwise disallowed or unused.
4. The State must report all cases of suspected fraud to the DHS Office of Inspector General. The State must cooperate with any investigation conducted by the DHS Office of Inspector General.
5. The State must cooperate with FEMA regarding any and all lawsuits that may result from the State or FEMA's attempt to recover funds or disallow costs.

E. STATUTE OF LIMITATIONS

1. General. The 3-year statute of limitations limiting FEMA's ability to initiate an administrative action to recover funds paid as provided for in Section 705(a) of the Stafford Act (codified as amended at 42 U.S.C. § 5205(a)) begins with:
 - a. PA and HMGP. The State's submission of final expenditure report described in paragraph V.B.1, 2, 3, 4, and 5.
 - b. IA Subawards. The State's submission of the final expenditure report described in paragraph V.B.6.
 - c. IA Grant Awards. The State's submission of the Final Federal Financial Report described in paragraph V.A for any portion of work under an IA grant completed by the State directly and not through a subaward.
2. Initiation of an Administrative Action to Recover Payment. The initiation of an administrative action to recover payment includes FEMA's written notice to the State or a subrecipient of a questioned or disallowed cost or improper payment (including a request for information concerning such cost or payment) and written notice to the State or a subrecipient of a FEMA or 3rd party review or audit.

- F. REFUNDS, REBATES AND CREDITS**. The State must transfer to FEMA the appropriate share, based on the federal support percentage, of any refund, rebate, credit or other amounts arising from the performance of this agreement. The State must take necessary action to promptly collect all monies due or which may become due and if applicable, to cooperate with the Federal Government in any claim or suit in connection with amounts due.

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VII. CONSTRUCTION REQUIREMENTS

The State must ensure that all applicable federal, state, and local permits and approvals are obtained and all permit conditions are addressed before the start of any construction activity, including FEMA and Recipient/subrecipient compliance with the National Environmental Policy Act, the National Historic Preservation Act, the Endangered Species Act, and all other applicable environmental laws and executive orders. All construction should be in accordance with approved permits, projects plans and specifications, applicable building codes, and program guidance.

VIII. PERFORMANCE PERIODS

- A. PROGRAM/GRANT AWARD. The State will complete all grant award activities, including all projects and/or activities approved under each grant award, within the time period prescribed in FEMA regulations, program guidance, and the award documents.
- B. EXTENSIONS. The State will include with any written request for an extension information and documentation to support the amendment and a schedule for completion as detailed in federal regulations and FEMA guidance and policies. FEMA may approve subsequent work, monetary increase amendments, or activity time extension amendments only if the State submits all financial and performance reports to the Regional Office. FEMA will only approve extensions to the federal grant award period of performance or project completion timelines (if applicable) that comply with program regulatory timeframes. FEMA will not approve extensions for delays caused by lack of non-federal share funding.

IX. REMEDIES FOR NONCOMPLIANCE

FEMA may take action as it determines appropriate under the circumstances including but not limited to withholding of payments, disallowance of costs, suspension or termination of the award if the State or subrecipient fails to comply with applicable Federal statutes, regulations, or the terms of this Agreement pursuant to 2 C.F.R. § 200.338 (Remedies for Noncompliance).

X. ATTACHMENTS, PROGRAMMATIC ADDENDUMS AND AMENDMENTS

- A. ATTACHMENTS. Attached and made part of this Agreement are the following Attachments which contain terms and conditions applicable to all assistance provided under this Agreement:
- Attachment 1: List of State Certification Officers
- Attachment 2: Certification Regarding Lobbying
- Attachment 3: List of Designated Programs and Areas
- B. PROGRAMMATIC ADDENDUMS. Attached and also made part of this Agreement are the following Programmatic Addendums, which unless indicated otherwise in Attachment 1 may be signed or agreed to on behalf of the State by the

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Governor's Authorized Representative (GAR) listed in Attachment 1, and are included on a case by case basis depending on the assistance designated and whether additional terms and conditions for implementation of specific assistance programs are needed:

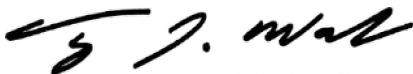
None

- C. AMENDMENTS. This Agreement may be amended at any time by written approval of both parties. Executed amendments will be numbered and appended to this agreement in the order that they are executed. Electronic copies of executed amendments will be transmitted to the FEMA Declarations Unit.

XI. SIGNATURES AND EFFECTIVE DATE

- A. COUNTERPART SIGNATURES. This Agreement may be executed in two or more counterparts, each of which together will be deemed an original, but all of which together will constitute one and the same instrument. In the event that any signature is delivered by facsimile transmission or by e-mail delivery of a .pdf format data file, such signature will create a valid and binding obligation of the party executing with the same force and effect as if such facsimile or .pdf signature page were an original thereof.
- B. EFFECTIVE DATE. This FEMA-State Agreement becomes effective on the date of signature by the last party.

AGREED:



Tim Walz
Governor
State of Minnesota

April 9, 2020

Date



James K. Joseph
Regional Administrator
FEMA Region V

APRIL 9, 2020

Date

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ATTACHMENT 1
LIST OF STATE CERTIFICATION OFFICERS

1. The Governor hereby certifies that Joe Kelly, Director, Minnesota Homeland Security and Emergency Management (MN HSEM), is the Governor's Authorized Representative (GAR) empowered to execute on behalf of the State all necessary documents for federal assistance, including approval of subawards and certification of claims for Public Assistance. Kevin Reed, Deputy Director of MN HSEM is the Alternate Governor's Authorized Representative and is similarly empowered.
2. The Governor hereby certifies that Brian Olson, Preparedness and Recovery Bureau Director, MN HSEM, and Kevin Reed are the State Coordinating Officer (SCO) and Alternate SCO, respectively, who will act in cooperation with the Federal Coordinating Officer under this Declaration.
3. The Governor hereby certifies that Larry Freund, Director, Fiscal and Administrative Services, MN Department of Public Safety, is the representative of the State authorized to receive donations or loans of surplus property on behalf of the State and to execute certification, agreements, and other necessary documents with regard thereto.
4. The Governor hereby certifies that Michelle Schlosser, Grants Program Administrator, MN HSEM, is the State official authorized to execute compliance reports, carry out compliance reviews, and distribute informational material as required by FEMA to ensure that all recipients of federal assistance are in full compliance with FEMA nondiscrimination regulations (44 CFR Part 7, *Nondiscrimination in Federally-Assisted Programs* and 44 CFR § 206.11, *Nondiscrimination in disaster assistance*).
5. The Governor hereby certifies that Michelle Schlosser is the State official who will execute compliance reports, carry out compliance reviews, and distribute informational material as required by FEMA to ensure that all recipients of federal assistance are in compliance with the General Services Administration List of Parties Excluded from Federal Procurement and Nonprocurement Programs.

Restrictions on approval authority of the above-named officials: None

Agreed:



Governor

April 9, 2020

Date

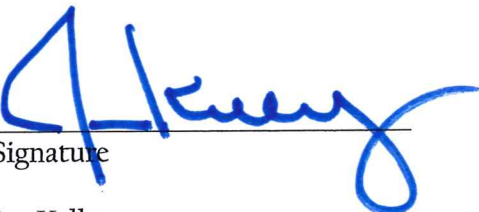
ATTACHMENT 2
CERTIFICATION REGARDING LOBBYING


Certification for Contracts, Grants, Loans, and Cooperative Agreements

This certification is required by the regulations implementing the New Restrictions on Lobbying, 44 C.F.R. Part 18. The undersigned certifies, to the best of his or her knowledge and belief, that:

1. No federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
2. If any funds other than federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, *Disclosure Form to Report Lobbying*, in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by 31 U.S.C. § 1352. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.


Signature


Date

Joe Kelly
Governor's Authorized Representative
Director, Homeland Security and Emergency Management
State of Minnesota

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ATTACHMENT 3

LIST OF DESIGNATED AREAS AND PROGRAMS

Eligible applicants are eligible to apply for emergency protective measures (Category B) not authorized under other Federal statutes, including direct federal assistance, under the Public Assistance program at 75 percent federal funding for all areas in the State of Minnesota.

U.S. Department of Homeland Security
536 S. Clark St. 6th Floor
Chicago, IL 60605



FEMA

March 19, 2020

Mr. Joe Kelly, Director
Minnesota Homeland Security and Emergency Management Division
MN Department of Public Safety
445 Minnesota Street – Suite 223
St. Paul, MN 55101-6223

Dear Director Kelly: *Joe:*

The FEMA-State Agreement for the Emergency declaration related to Coronavirus Disease 2019 accompanies this letter. FEMA recently made changes to its FEMA-State Agreement process. For this agreement, we only need the Governor's signature on page 15 and on Attachment 1, and the Governor's Authorized Representative's signature on Attachment 2.

FEMA accepts auto-penned, stamped and electronic signatures if those forms are sufficient to bind the state under state law. In addition, we accept counterpart signatures, i.e. the Governor's signature and my signature on separate pages.

I have signed the FEMA-State Agreement. Please have the Governor and the GAR sign the agreement and return it to FEMA, attention Julie Kokolus, Grants Management Specialist, at julie.kokolus@fema.dhs.gov. If you have any questions regarding the processing of this FEMA-State Agreement, please contact me or have your staff contact Julie Kokolus, FEMA Region V Grants Management Specialist, by phone at (312) 408-4403.

Sincerely,

A handwritten signature in blue ink, appearing to read "James K. Joseph".

James K. Joseph
Regional Administrator



STATE OF MINNESOTA

Office of Governor Tim Walz

75 Reverend Dr. Martin Luther King Jr. Blvd. ♦ Suite 130 ♦ Saint Paul, MN 55155-1611

April 4, 2020

The Honorable Donald Trump
The White House
1600 Pennsylvania Avenue Northwest
Washington, DC 20500

Through:

James K. Joseph, Regional Administrator
Federal Emergency Management Agency, Region V
536 South Clark Street, Floor 6
Chicago, IL 60605

Dear Mr. President:

Under the provisions of Section 401 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. §§ 5121-5207 (Stafford Act), as implemented by 44 C.F.R. § 206.36, I request that you issue an expedited major disaster declaration for Public Assistance (PA) Category B – emergency protective measures, including direct federal assistance and Individual Assistance (IA), for the State of Minnesota as result of the ongoing impacts of the global pandemic Coronavirus Disease 2019 (COVID-19).

United States Health and Human Services Secretary, Alex M. Azar II, declared a public health emergency for the nation on January 31, 2020, pursuant to Section 319 of the Public Health Service Act. The World Health Organization declared COVID-19 a global pandemic on March 11, 2020. You declared a national emergency on March 13, 2020, pursuant to Section 201 and Section 301 of the National Emergencies Act, 50 U.S.C. § 1621.

On March 13, 2020, you also declared that the ongoing pandemic is of sufficient severity and magnitude to warrant an emergency declaration for all states, tribes, territories, and the District of Columbia pursuant to section 501(b) of the Stafford Act. In accordance with that declaration, eligible emergency protective measures taken to respond to COVID-19 at the direction or guidance of public health officials may be reimbursed under Category B of FEMA's PA program. Reimbursable activities typically include emergency protective measures, such as the activation of emergency operations center, National Guard costs, law enforcement, and other measures necessary to protect public health and safety.

I request that you authorize the following IA programs in a major disaster declaration for Minnesota: Crisis Counseling, Disaster Supplemental Nutrition Program, Individuals and Households Program, Other Needs Assistance to include Medical Assistance, Funeral Assistance, Disaster Legal Services, Small Business Administration Disaster Assistance, as well as statewide Hazard Mitigation. The following analysis supports including the IA programs in the declaration.

Individual Assistance Declaration Factors

Under 44 C.F.R. § 206.48(b), six individual assistance declaration factors are to be considered. These factors are:

1. State Fiscal Capacity and Resources Availability

Minnesota has allocated all available resources to the effort to respond to the COVID-19 pandemic and is directly supporting local response efforts, while experiencing significant impact to the state's economy. Resources of local governments and supporting private entities are strained, and financial resources that were reasonably expected to be at the state's disposal are being rapidly diminished by the impact on the current operating budget. Business revenue and tax receipts are suffering, and—without supplemental federal assistance—the state's ability to respond to and recover from this event will be severely impacted.

2. Uninsured Home and Personal Property

The state is not requesting Individuals and Households program for physical damages, so home and personal property loss data is not applicable.

3. Disaster Impact Population Profile

Currently, all 87 counties and 11 tribes are impacted by the spread of the pandemic. As of April 4, 2020, Minnesota has 865 positive cases with 24 deaths. The age range is from 4 months to 104 years old. The median age of infected persons is 47 years.

4. Impact to Community Infrastructure

COVID-19 continues to have a drastic effect on community infrastructure. Hospitals, medical facilities, and emergency response organizations are facing challenges rarely, if ever, experienced before. The process of identifying, triaging, testing, and isolating potentially infected people is significantly disrupting lifesaving and life-sustaining services. Additionally,

insufficient resources and capacity at health care facilities, and the already limited number of qualified medical staff will continue to diminish rapidly as the impacts of COVID-19 spread.

Experience in previous disasters shows that emotional and psychological problems can be slow to surface, because individuals can cope with some isolation and trauma for a limited time early on. The potential delayed reactions are especially concerning during the COVID-19 pandemic because Minnesota's provider networks are already seeing drops in patient census, liquidity, and staff availability, on top of issues like school closures. Combined with a projected lengthy pandemic timeline, this will likely negatively impact the number of Minnesotans who are able to get their behavioral health and intellectual/developmental needs met through traditional means, which will create additional resource pressure on crisis lines as the pandemic unfolds.

5. Casualties

As of April 4, 2020, the Minnesota Department of Health has recorded 24 deaths as a direct result of the COVID-19 virus.

6. Disaster-Related Unemployment

During this unprecedented event, Minnesota is experiencing a high volume of calls and applications for unemployment assistance. The Minnesota Department of Economic Development (DEED) is seeing historic increases in unemployment filings. Since this event began, DEED has processed 297,397 applications for unemployment insurance.

Preliminary Damage Assessments

Preliminary damage assessments are impossible due to the dynamic nature of this public health disaster, but the damage is already substantial and continues to grow in both scope and scale. In response to the outbreak, schools and businesses have closed, workers lost their jobs, and major events were cancelled. Businesses large and small are suffering. The full economic impact on Minnesota's economy has yet to be determined, but the negative effects will be substantial. I respectfully request you waive the requirement for preliminary damage assessments in accordance with 44 CFR Section 206.33(d).

State and Local Government Actions

The State of Minnesota responded quickly to this public health disaster and continues to do so to the fullest extent possible. On January 29, 2020, Minnesota Department of Health (MDH) instituted its incident command system (ICS) to provide a standardized approach to the command, control, and coordination of our initial response. MDH convened a state agency

COVID-19 coordinating group on March 3, 2020. The Minnesota Department of Public Safety activated the state emergency operations center on March 6, 2020.

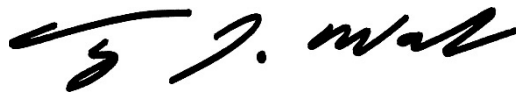
To date, I have issued 27 emergency executive orders in response to the coronavirus outbreak, beginning with the declaration of a peacetime emergency on March 13, 2020. Other major response and mitigation actions ordered include activating the Minnesota National Guard, closing schools to on-site education, and closing bars and restaurants to on-site service, as well as other places of public accommodation. On March 25, 2020, I issued a stay at home order. All these emergency executive orders remain in effect.

Nearly every government agency, non-profit, and volunteer organization around the state has supported Minnesota's response. The state government agencies and organizations assisting in the response include the Department of Health, Department of Health and Human Services, Department of Education, Department of Employment and Economic Development, Department of Military Affairs, Department of Agriculture, Department of Administration, Department of Commerce, Department of Corrections, Department of Labor and Industry, Department of Public Safety, Bureau of Criminal Apprehension, Division of Homeland Security and Emergency Management, State Fire Marshall, Minnesota State Patrol, Department of Transportation, Minnesota Management and Budget, Emergency Medical Services Regulatory Board, Minnesota Pollution Control Agency, Minnesota State Colleges and Universities, Metro Transit, Minnesota Council on Disabilities, University of Minnesota, Department of Revenue, and Department of Natural Resources.

For this major disaster, I certify that state and local governments will assume all applicable non-federal cost shares as required by the Stafford Act. I have designated Minnesota's state emergency management director, Mr. Joe Kelly, as state coordinating officer (SCO) for this incident.

On behalf of all Minnesotans, I thank you and respectfully request your full consideration and expedited approval of my request.

Sincerely,

A handwritten signature in black ink, appearing to read 'T. J. Walz', written in a cursive style.

Tim Walz
Governor

Enclosure: FEMA Form 010-0-13

cc: John Harrington, Commissioner, Minnesota Department of Public Safety
Joe Kelly, Director, Minnesota Division of Homeland Security & Emergency Management

[Link to Bios](#)

U.S. Digital Response Offer to Governors

To: Governors and Chiefs of Staff

From: Joanna Dornfeld, United States of Care, US Digital Response Team

Date: March 22, 2020

Re: Highly qualified volunteers to help during COVID-19 crisis

We write to offer help from the 500+ (and growing) highly qualified technology, data, and operations professionals who have registered with U.S. Digital Response to support state and local governments during this public health crisis. COVID-19 is already overwhelming the data and digital capacities of government in a myriad of ways, slowing the ability for states to respond to and stem the spread of the virus. We can match these highly qualified professionals to your needs during this unprecedented time. **To sign up to request these professionals go to: www.usdigitalresponse.org.**

U.S. Digital Response is an ad hoc group started by three former U.S. Deputy Chief Technology Officers (one who was a leader on the healthcare.gov rescue effort, one who founded Code for America, and one who leads the Digital Service Collaborative at the Georgetown Beeck Center) and a technical executive formerly with Facebook and Stripe. We are operating on a voluntary basis outside of our current roles because the need is clear and we can help. More about the organizing team is attached below and here: www.usdigitalresponse.org

Together we have sourced qualified people willing to help and skilled in technology, data, design, and operations. Many of our volunteers have worked at the [U.S. Digital Service](#), [18F](#), [Code for America](#), or in federal, state or local government and are already well aware of the constraints of working within a bureaucracy. Respect for public service and public servants is a baseline requirement for all our volunteers, in addition to a drive to help and a sensitivity to the nature of this work. **Many of these people are known to us from prior relevant projects (including the healthcare.gov rescue effort) and we will vet those who are not known to us to ensure that everyone we send is able to be immediately productive.**

We have identified volunteers all over the US. That said, much work is happening remotely now, so you may be able to use someone from anywhere in the country.

We are eager to understand your specific needs. We have heard from other state and local governments that their needs include:

- Help making it easier to collect and collate data from private and public testing facilities

- Help keeping websites and systems that are under unprecedented strain from going down (i.e., benefit application systems for unemployment insurance, etc.)
- Help from data scientists with modeling and mapping infection data
- Help with an online tool for the public to self-assess before going to a testing center
- Help with appointment scheduling for tests
- Help building/implementing a system to better collect and track data from hospitals about their bed and ventilator capacity
- Help re-imaging and distributing laptops to EOCs
- Help with project & general operational management, as well as supply chain and procurement expertise
- Help managing logistics and personnel shortages

Because we are working with many states and counties, we also have the ability to coordinate tools and approaches across common needs. We will shortly be sharing some tools from one of the states we are working with that your state is free to use.

Our volunteers have a variety of skills:

- Data Science
- Front-End Engineering
- Back-End Engineering
- Product Management
- Site Reliability Engineering and Operations
- Procurement
- Logistics & Supply Chain (including for healthcare)
- Manufacturing & Production (including for healthcare)
- General Manager
- User Research / Design
- Healthcare
- Public Health / Epidemiologist
- Health Diagnostics
- Disaster Relief and Response

We have provided a list of sample volunteers attached to this memo.

Highly skilled volunteers are being used in a wide variety of government contexts right now. For example, there is a “SWAT” team led by the White House and the Department of Health & Human Services that’s working to accelerate access to testing and resources, and some of our volunteers are being tapped to join this.

Please let us know how we can help.

Sample volunteers

Michael Pritchard

CTO of Onward Financial

<https://www.linkedin.com/in/pipster/>

Stephanie Hannon

Chief Product Officer at Strava // Director of Product at Google // CTO for Hillary for America

<https://www.linkedin.com/in/skhannon/>

Clara Tsao

Former Presidential Innovation Fellow @ Department of Homeland Security

<https://www.linkedin.com/in/claratsao>

Patrick Higgins

Software Engineer at Gremlin

<https://www.linkedin.com/in/pat-higgins/>

Ashley Grant

Associate Product Manager at Schmidt Futures // Lead Biotechnologist at Mitre

<https://www.linkedin.com/in/kara-holinski-77b673b6/>

Andrew Stroup

Founder & CTO of LVRG

<https://www.linkedin.com/in/andrewstroup/>

Alicia Rouault

Product Team Lead @ 18F, formerly of Code for America

<https://www.linkedin.com/in/alicia-rouault/>

Mark Lerner (Part-Time)

Former Deputy Executive Director of USDS at the Department of Homeland Security

<https://www.linkedin.com/in/markjlerner/>

Ben Balter

Senior Product Manager, GitHub // Former Presidential Innovation Fellow

<https://linkedin.com/in/benbalter>

Cory Eaves

Operating Partner at General Atlantic // Former CIO and CTO of AllScripts

<https://www.linkedin.com/in/ceaves/>

US Digital Response Team

Jennifer Pahlka is the founder and former executive director of Code for America. She served as the U.S. Deputy Chief Technology Officer in the White House Office of Science and Technology Policy from 2013–2014, where she founded the United States Digital Service. She received the Skoll Award for Social Entrepreneurship, and was named by Wired as one of the 25 people who has most shaped the past 25 years. She serves on the Defense Innovation Board and the board of the Tech Talent Project. She holds fellowships with Ashoka, the National Academy of Public Administration, and the Volcker Alliance. Jennifer is a graduate of Yale University and lives in Oakland, California with her daughter, husband, and six chickens.

Cori Zarek works on technology and policy projects with a goal of helping governments better serve the public. She is the Director of the Digital Service Collaborative at the Georgetown Beeck Center for Social Impact + Innovation and previously served as the Deputy U.S. Chief Technology Officer. Before launching this project, Cori led the principles and practices work for Code for America and was a Mozilla fellow. From 2013-2017 at the White House, Cori advised the U.S. Chief Technology Officer and led the team's work to build a more digital, open, and collaborative government including helping to stand up and support the U.S. Digital Service, 18F and the Presidential Innovation Fellows. Cori also led the U.S. government's development and implementation of commitments to the Open Government Partnership.

Ryan Panchadsaram joined Kleiner Perkins in 2016 to focus on venture-stage companies across the firm and serve as technical advisor to John Doerr, Chair of Kleiner Perkins. Ryan was the Deputy Chief Technology Officer for the United States. At the White House, Ryan helped shape how an \$80 billion budget can be used by federal agencies to deliver on their missions in a more effective, design-centric, and data-driven way. In 2014, Ryan was featured on the cover of [Time Magazine](#) as part of the crisis response team that rescued the rollout of Healthcare.gov. After the successful turnaround, Ryan helped launch the U.S. Digital Service. Ryan also represented the United States as a delegate to the United Nations, promoting increased connectivity and entrepreneurship around the world. Prior to public service, Ryan co-founded Pipette, a digital health startup that was acquired by Ginger.io, a MIT Media Lab spin-off using big data and machine-learning to improve the world's health. Ryan worked at Microsoft and Salesforce.com in product and engineering roles. Ryan graduated with a degree in Industrial Engineering and Operations Research from the University of California, Berkeley.

Raylene Yung is a recent fellow with the [Aspen Institute's Tech Policy Hub](#). She was an engineering leader at Stripe where she led Payments, Product, and global expansion in Asia-Pacific. Prior to Stripe, she was an engineering director at Facebook and led efforts on privacy, content creation, and News Feed. She has authored multiple guides on management

and scaling engineering organizations, as featured in [First Round Review](#) and [Stripe Guides](#). She holds a BS and MS in Computer Science from Stanford University.

Robin Carnahan is the former secretary of state of Missouri and leader at 18F within the General Services Administration. Since she was first elected in 2004, Ms. Carnahan has focused on protecting consumers, cracking down on financial fraud, cutting costs and red-tape for businesses, and ensuring fair elections. She has modernized and improved Missouri's elections system by implementing its first statewide voter registration system, creating the Missouri Voting Rights Center, and launching a new interactive election results website. In the historic 2008 election cycle, she served as co-chair of the Elections Committee for the bi-partisan National Association of Secretaries of State. Prior to entering politics, Ms. Carnahan served at the Export-Import Bank of the United States where she explored innovative ways to help American companies increase their sale of goods and services abroad.

Joanna Dornfeld is the Senior Director of State Affairs for United States of Care. She served as Minnesota Governor Mark Dayton's Chief of Staff, where she managed the daily operation of state government – a \$46 billion enterprise with more than 34,000 employees serving 5.5 million people. With more than a decade of legislative, policy, and leadership experience, Joanna served in multiple roles in the Dayton Administration including Deputy Chief of Staff for Legislative and Cabinet Affairs where she oversaw development of the Governor's biennial and capital budgets and managed legislative strategy. Joanna worked closely with stakeholders and legislators of both parties to build consensus and achieve results. She was instrumental in passing a health insurance premium rebate program to blunt the dramatic premium increases. Minnesota passed a reinsurance law that is credited with lowering insurance premiums. She also advocated for the Minnesota Care Buy-In which would expand access to Minnesota's Basic Health Care program to more Minnesotans.

Jennifer Anastasoff, former Head of People for USDS.

Jennifer was a founding member of U.S. Digital Service at the White House and served as Head of People from 2014 until 2017, increasing the team from three to over 200 and created a diverse, cross-functional pipeline of digital talent from around America into our federal government. She focuses on bringing together talent, innovation, and social change and loves building awesome teams.

She served as founding CEO of Fuse Corps, the nation's top executive fellowship bringing mid-career leaders from the private sector to serve as senior advisors to public executives, largely mayors and governors. Prior to starting Fuse Corps, Jennifer founded social enterprises focused on bringing technical and operational skills to the public sector, served as a consultant on the Higher Education Committee of the California State Assembly, and was a proud 6th grade teacher.



THE SECRETARY OF HEALTH AND HUMAN SERVICES
WASHINGTON, D.C. 20201

APR 10 2020

Dear Hospital Administrator:

First, I want to thank you for the work you are doing to provide treatment and care to Americans who have been impacted by COVID-19. Hospitals are key partners with the federal government as we work to ensure that the Whole of America response to COVID-19 which is locally executed, state managed, and federally supported.

On March 29, 2020, the Vice President sent you a letter requesting your assistance in reporting data that is critical for epidemiological surveillance and public health decision making for the COVID-19 pandemic. The data requested included daily reports on testing, capacity, supplies, utilization, and patient flows to facilitate the public health response to COVID-19. I understand that many non-federal entities may already be requesting this information, and I have received pleas from hospitals and states to minimize the burden of sharing this data and to reduce duplication of effort.

The enclosed Frequently Asked Questions (FAQs) document details the federal government's data needs, explains the division of reporting responsibility between hospitals and states, and provides clear, flexible options for the timely delivery of this critical information. Our objective is to allow states and hospitals either to leverage existing data reporting capabilities or, where those capabilities are insufficient, to provide guidance in how to build on them. These FAQs will be updated if additional data delivery methods become available.

It is critical that all of the requested information listed in these FAQs is provided on at least a daily basis to the federal government to facilitate planning, monitoring, and resource allocation during the COVID-19 Public Health Emergency.

On behalf of President Trump and the White House Coronavirus Task Force, I want to thank you for the work you are doing to provide care to the American people during this critical time.

Sincerely,



Alex M. Azar II

Enclosure

CC: The Honorable Peter Gaynor
Administrator
Federal Emergency Management Agency

COVID-19 Frequently Asked Questions (FAQs) For Hospitals, Hospital Laboratory, and Acute Care Facility Data Reporting

On March 29, 2020, Vice President Pence sent a letter to hospital administrators across the country requesting daily data reports on testing, capacity and utilization, and patient flows to facilitate the public health response to the 2019 Novel Coronavirus (COVID-19). Many separate governmental entities are requesting similar information, resulting in stakeholder requests to reduce duplication and minimize reporting burden. This document details the Federal Government's data needs, explains the division of reporting responsibility between hospitals and states, and provides clear, flexible options for the timely delivery of this critical information. The objective is to allow states and hospitals either to leverage existing data reporting capabilities or, where those capabilities are insufficient, to provide guidance in how to build upon existing capabilities. These FAQs will be posted to the various HHS and HHS division websites, and will be updated if additional data delivery methods become available.

It is critical to the COVID-19 response that all of the information listed below is provided on at least a daily basis to the Federal Government to facilitate planning, monitoring, and resource allocation during the COVID-19 Public Health Emergency (PHE).

Who is responsible for reporting?

By default, hospitals should report *on at least a daily basis* the detailed information listed below through one of the prescribed methods. However, we recognize that many states currently collect this information from the hospitals. Therefore, hospitals may be relieved from reporting directly to the Federal Government if they receive a written release from the State stating that the State will collect the data from the hospitals and take over Federal reporting responsibilities.

When are states permitted to provide such a written release to hospitals?

States must first receive written certification from their FEMA Regional Administrator affirming that the State has an established, functioning data reporting stream to the Federal Government that is delivering all of the information below at the appropriate daily (or higher) frequency. States that take over reporting must provide this data, regardless of whether they are seeking immediate Federal assistance.

Capacity and Utilization Data

Capacity and utilization data: what to submit?

The following data will greatly assist the White House Coronavirus Task Force in tracking the movement of the virus and identifying potential strains in the healthcare delivery system. It is critical that this data be reported at the facility and county level of detail rather than just a total statewide summary. Data that is submitted directly as a file instead of through an online portal should be sent in Excel or CSV format rather than as a scanned image or any other format that is not directly importable into a spreadsheet format.

ID	Information Needed	Definition
1.	<u>State</u>	State where the hospital is located
2.	<u>Hospital name</u>	Name of hospital and CMS Certification Number (CCN)
3.	<u>Hospital county and Zip Code</u>	County and Zip Code where the hospital is located
4.	<u>All hospital beds</u>	Total number of all staffed inpatient and outpatient beds in your hospital, including all overflow and surge/expansion beds used for inpatients and for outpatients (includes all ICU beds).
5.	<u>Hospital inpatient beds</u>	Total number of staffed inpatient beds in your hospital including all overflow and surge/expansion beds used for inpatients (includes all ICU beds)
6.	<u>Hospital inpatient bed occupancy</u>	Total number of staffed inpatient beds that are occupied
7.	<u>ICU beds</u>	Total number of staffed inpatient ICU beds
8.	<u>ICU bed occupancy</u>	Total number of staffed inpatient ICU beds that are occupied
9.	<u>Mechanical ventilators</u>	Total number of ventilators available
10.	<u>Mechanical ventilators in use</u>	Total number of ventilators in use
11.	<u>Hospitalized COVID patients</u>	Patients currently hospitalized in an inpatient bed who have suspected or confirmed COVID-19
12.	<u>Hospitalized and ventilated COVID patients</u>	Patients currently hospitalized in an inpatient bed who have suspected or confirmed COVID-19 and are on a mechanical ventilator
13.	<u>Hospital onset</u>	Patients currently hospitalized in an inpatient bed with onset of suspected or confirmed COVID-19 fourteen or more days after hospital admission due to a condition other than COVID-19
14.	<u>ED/overflow</u>	Patients with suspected or confirmed COVID-19 who currently are in the Emergency Department (ED) or any overflow location awaiting an inpatient bed

15.	<u>ED/overflow and ventilated</u>	Patients with suspected or confirmed COVID-19 who currently are in the ED or any overflow location awaiting an inpatient bed and on a mechanical ventilator
16.	<u>Deaths:</u>	Number of patients with suspected or confirmed COVID-19 who died in the hospital, ED, or any overflow location on the date for which you are reporting
17.	<u>On-hand supply of N95 masks (if available)</u>	<ul style="list-style-type: none"> • Zero days • 1-3 days • 4-14 days • 15 or more days

Capacity and utilization data: where/how to submit?

Hospitals and other facilities should report daily capacity and utilization data through one of the methods below, or to their State if they have received a written release from the State and the State has received written certification from their FEMA Regional Administrator to take over Federal reporting responsibilities. If the State assumes reporting responsibilities, the State can also choose to utilize one of the below channels or through the State portal at Protect.HHS.gov.

Reporting options for hospitals and other facilities:

- Submit data to TeleTracking™ [<https://teletracking.protect.hhs.gov>]. All instructions on the data submission are on that site. To become a user in the portal:
 - Respond to the validation email sent to your administrator.
 - Visit <https://teletracking.protect.hhs.gov> and follow the specific instructions on how to become users.
 - Each facility is allowed to have up to 4 users for both data entry and visual access to aggregated data in the platform.
 - Users will be validated by the platform.
- Complete the [National Healthcare Safety Network \(NHSN\) module](#) daily per the [Center for Disease Control’s \(CDC’s\) instructions](#)
- Authorize your health IT vendor or other third-party to share information directly with HHS. Use one of the above alternate methods until your FEMA Regional Administrator notifies you that this implementation is being received.
- Publish to the hospital or facility’s website in a standardized format, such as [schema.org](#). Use one of the above alternate methods until your FEMA Regional Administrator notifies you that this implementation is being received.

Capacity and utilization data: how often to submit?

At least daily. These reporting options have been chosen to make submission as easy as possible, and the HHS portal has been set up to allow users to submit data updates in a matter of minutes for the whole process. *The completeness, accuracy, and timeliness of the data will inform the COVID-19 Task Force decisions on capacity and resource needs to ensure a fully coordinated effort across America.* Doing so will also ensure that hospitals are not facing data requests from a multitude of Federal, State, Local, and private parties, as having a full data set will allow HHS to put a stop to others asking for the same data, so that they can spend less time on paperwork and more time on patients.

Testing Data: Hospitals That Perform COVID-19 Tests Using an In House Laboratory

How should hospitals that perform “in house” laboratory testing report this data?

In an effort to promote data reporting choices to hospitals and other acute and post-acute care facilities, below are the options to report testing data:

- A unique link will be sent to the American Hospital Association’s hospital points of contact. This will direct the POC to a hospital-specific secure form that can then be used to enter the necessary information. After completing the fields, click submit and confirm that form has been successfully captured. A confirmation email will be sent to you from the HHS Protect System. This method replaces the emailing of individual spreadsheets previously requested.

If your hospital did not receive a link, please contact the FEMA/HHS COVID-19 Diagnostics Task Force at fema-hhs-covid-diagnostics-tf@fema.dhs.gov for support.

- Provide directly to their State if the state is reporting complete information daily to the FEMA Regional Administrator and their state has shared a written notification from FEMA confirming the reporting requirements are being met.
- Authorize their health IT vendor or other third party to submit the “in house” testing data to HHS/CDC. Until this is confirmed in writing to be working successfully, use one of the other methods mentioned above.

What data should hospitals with in house laboratory testing expect to submit to the portal?

1. New Diagnostic Tests Ordered (Midnight to midnight cutoff, tests ordered on previous date queried)
2. Cumulative Diagnostic Tests Ordered (All tests ordered to date.)
3. New Tests Resulted (Midnight to midnight cutoff, test results released on previous date queried)
4. Cumulative Tests Performed (All tests with results released to date)
5. New Positive COVID-19 Tests (Midnight to midnight cutoff, positive test results released on previous date queried)
6. Cumulative Positive COVID-19 Tests (All positive test results released to date)

7. New Negative COVID-19 Tests (Midnight to midnight cutoff, negative test results released on previous date queried)
8. Cumulative Negative COVID-19 Tests (All negative test results released to date)

How often should hospitals submit the data?

This data should be submitted by 5PM ET daily. All testing data should include test results that were completed during the previous day with a midnight cutoff.

Testing Data: Hospitals that Perform a Portion of COVID-19 Tests Using an In House Laboratory

How should hospitals that perform a portion of tests “in house” and send a portion of tests to commercial labs and/or State Public Health Labs report this data?

The portion of tests that are performed “in house” should be reported through the HHS Protect System. See above for reporting details concerning “in house” tests. The portion of tests that are sent to one of the six commercial labs listed below or that are sent to your State Public Health lab do not need to be reported through the HHS Protect System. However, if your hospital send tests to a commercial lab not listed on the below list, you should report those tests using the HHS Protect System.

Testing Data: Hospitals that Send COVID-19 Tests to Commercial Laboratories

Do hospitals that send tests to commercial laboratories need to report data using this system?

All hospitals should report data on COVID-19 testing performed in Academic/University/Hospital “in house” laboratories. If all of your COVID-19 testing is sent out to private labs and performed by one of the commercial laboratories on the list below, you do not need to report using the HHS Protect System.

If you have COVID-19 testing that is sent out to private labs and performed by a commercial laboratory not listed, you should report this testing using the HHS Protect System.

Commercial laboratories:

- LabCorp
- BioReference Laboratories
- Quest Diagnostics
- Mayo Clinic Laboratories
- ARUP Laboratories
- Sonic Healthcare

Testing Data: Hospitals that Send COVID-19 Tests Data to State Public Health Laboratories

Do hospitals that send tests to State Public Health Laboratories need to report data using this system?

All hospitals must report data on COVID-19 testing performed in Academic/University/Hospital “in house” laboratories. If all of your COVID-19 testing is sent out to and performed by State Public Health Laboratories, you do not need to report using the HHS Protect System.

How should hospitals that perform a portion of tests “in house” and send a portion of tests to commercial labs and/or State Public Health Labs report this data?

The portion of tests that are performed “in house” should be reported through the HHS Protect System. The portion of tests that are sent to one of the six commercial labs listed above or that are sent to your State Public Health lab do not need to be reported through the HHS Protect System. However, if your hospital send tests to a commercial lab not listed on the above list, you should report such tests using the HHS Protect System.

Technical Assistance for Hospitals

Who do hospitals contact if they experience any technical issues?

Please email your question to Protect-ServiceDesk@hhs.gov. Your question will be answered as soon as possible.

DECLARED APRIL 7, 2020

SUMMARY

STATE: Minnesota
NUMBER: FEMA-4531-DR
INCIDENT: COVID-19
INCIDENT PERIOD: January 20, 2020, and continuing
DATE REQUESTED BY GOVERNOR: April 4, 2020
FEDERAL COORDINATING OFFICER: James K. Joseph

DESIGNATIONS AND TYPES OF ASSISTANCE:

INDIVIDUAL ASSISTANCE (Assistance to individuals and households):

Under Review.

PUBLIC ASSISTANCE (Assistance for emergency work and the repair or replacement of disaster-damaged facilities):

Emergency protective measures (Category B) not authorized under other Federal statutes, including direct Federal assistance, under the Public Assistance program at 75 percent federal funding for all areas in the State of Minnesota.

HAZARD MITIGATION GRANT PROGRAM (Assistance for actions taken to prevent or reduce long term risk to life and property from natural hazards):

Under Review.

OTHER: Additional designations may be made at a later date if requested by the state and warranted by the results of further damage assessments.



STATE OF MINNESOTA

Office of Governor Tim Walz

130 State Capitol ♦ 75 Rev. Dr. Martin Luther King Jr. Blvd ♦ Saint Paul, MN 55155-1611

March 18, 2020

Kem R. Fleming, Director
U.S. Small Business Administration
Office of Disaster Assistance
Field Operations Center East
101 Marietta Street NW, Suite 700
Atlanta, GA 30303-2725

Dear Mr. Fleming,

Under provisions of Title 13 C.F.R. Part 123.3, I respectfully request that the Administrator of the U.S. Small Business Administration (SBA) implement a Small Business Administration declaration to provide assistance in the form of SBA Economic Injury Disaster Loans (EIDL) for Minnesota businesses following the incident identified as Covid-19 from January 31, 2020, and ongoing. I am requesting that the entire state be included in the EIDL Declaration based on the new SBA criteria.

An assessment was made of the business community over the past several days. As a result, we have determined that five businesses located in Minnesota have experienced economic injury. These businesses and all areas of the state support our request for disaster declaration.

Surveys of businesses, as well as inquiries into our Small Business Hotline and Homeland Security Emergency Management Office, illustrate that the Covid-19 incident has had a significant impact on a variety of businesses within Minnesota, most notably hospitality, event hosting and support, and small retail businesses dependent on daily traffic. Direct economic loss is due to a decrease of customer sales and contracts brought about by cancelled events, the quarantining of employees and remote work that has put a strain on businesses of all sizes. As part of my emergency declaration, schools have been closed and instructed to prepare for online classes. Our institutions of higher learning are also preparing for online classes and the impact of these closings has serious implications for small businesses that provide supportive services to the schools. I have also ordered that restaurants, bars and other similar establishments begin to transition to carry out, delivery and curbside pick-up and drive through only. This has resulted in the closure of many of these businesses.

A survey of these affected businesses was conducted to determine the economic impact of their losses, for the disaster period as compared to the same period in the preceding year. Based upon these surveys, I certify that at least five businesses in the disaster area have

suffered substantial economic due to the disaster and are in need of financial assistance not otherwise available on reasonable terms.

If you need additional information, please contact Kevin McKinnon, Deputy Commissioner of Economic Development at 651-259-7440 or kevin.mckinnon@state.mn.us.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tim Walz', written in a cursive style.

Tim Walz
Governor



COVID-19 -STATE / LOCAL RESOURCE REQUEST FORM

A. REQUEST FOR ASSISTANCE (To be completed by requesting State DOH) ALL FIELDS REQUIRED			
1. Requestor's Name (Please print) Cheryl Petersen-Kroeber		2. Title Director of the Center for Emergency Preparedness & Response	3. Phone No. 651-201-5722
4. Requestor's Organization Minnesota Department of Health		5. Cell Phone No.	6. Email Address
7. Description of Requested Assistance (describe resource type and need in plain language -- no acronyms). Provide justification for request in detail. Please see attached. Hospital anticipates being out of supplies by Monday, March 16, 2020.			
8. Requested Item <input checked="" type="checkbox"/> N-95 Masks <input type="checkbox"/> Goggles <input checked="" type="checkbox"/> Gowns <input checked="" type="checkbox"/> Gloves: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> Medical Providers <input type="checkbox"/> Technical SME			
10. Date and Time Needed By 3/15/2020		11. Estimated Duration of Need (days) 10	
12. Delivery Site Location (Address, City, Zip)		13. Site Point of Contact (POC) Name and Title	
14. Delivery Site Location (<input type="checkbox"/> USNG or <input type="checkbox"/> Decimal Degrees)		15. Site 24 Hour Phone No.	16. Site email Address

B. HHS REGIONAL REVIEW (To be completed by HHS Region where request was initiated)	
Reviewed By (Name & Title)	Date and Time
Disposition <input type="checkbox"/> Sent to IMTNAT <input type="checkbox"/> Sent to SOC/IST <input type="checkbox"/> ASPR/FEMA RSP POCs notified	
Priority	<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low
Regional Approving Official (Name, Title, Date, Time)	
ASPR Region Request Number	

HHS RFR ID Number	
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C. HHS RCB/SNS REVIEW (To be completed by RCB/SNS Section only)	
Received By (Name & Title)	Date and Time
1. Resource Typing/Adjustment	
2. Special Instructions	
Entered in EMPortal by (Name & Title)	Date and Time
Disposition	<input type="checkbox"/> New Request <input type="checkbox"/> Assigned <input type="checkbox"/> Tasked to: _____ <input type="checkbox"/> In Process <input type="checkbox"/> Need More Information <input type="checkbox"/> Out for Delivery <input type="checkbox"/> En-route <input type="checkbox"/> On Hold <input type="checkbox"/> Complete <input type="checkbox"/> Cancelled <input type="checkbox"/> Request Withdrawn <input type="checkbox"/> Demobilized
Assigned To (Name and Title)	
Point of Contact (Name and Title)	24-Hr. POC Phone
Approved By (Name & Title)	Date and Time
3. Cost Estimate	
4. Priority	<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low

State Government Tracking Number	
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D. STATE GOVERNMENT REVIEW (To be completed by requesting State - Department of Health Agency)	
Received By (Name & Title)	Date and Time
Disposition	<input type="checkbox"/> Requested Federal Resources <input type="checkbox"/> Filled with Local Resource(s) <input type="checkbox"/> Filled with State Resources <input type="checkbox"/> Denied
Assigned To (Department Name)	
Point of Contact (Name and Title)	24-Hr. POC Phone
Approved By (Name & Title)	Date and Time

F. REQUESTOR NOTIFIED (To be handled by HHS RCB/SNS Logistics)	
Region Notified By (Name & Title)	Date and Time
State Notified By (Name & Title)	Date and Time
Other Notes:	

Request for Strategic National Stockpile Assets

MARCH 13, 2020

Requestor: Fairview M Health Hospital System

Date Needed 3/15/2020

System anticipates they will be out of supplies by Monday, March 16, 2020.

Item	Brand/Model	Size	Quantity
Facemasks/Ear loop masks	N/A	N/A	15,000
N95 Respirator	3M Models 1870+, 1860, 1860S	N/A	15,000 total
Isolation/Disposable Gown	N/A	XL and XXL	15,000
Gloves	N/A	S, M, L, XL	45,000 total
Face Shields	N/A	N/A	15,000
PAPR Hoods	Versaflo 3M Airmate Maxair CAPR	N/A	250 total
Ventilators	N/A	N/A	68
Universal Transport Medium	N/A	N/A	2,000

A. REQUEST FOR ASSISTANCE (To be completed by requesting State DOH) **ALL FIELDS REQUIRED**

1. Requestor's Name (Please print)		2. Title		3. Phone No.	
4. Requestor's Organization		5. Cell Phone No.		6. Email Address	
7. Description of Requested Assistance (describe resource type and need in plain language – no acronyms). Provide justification for request in detail.					
8. Requested Item <input type="checkbox"/> N-95 Masks <input type="checkbox"/> Goggles <input type="checkbox"/> Gowns <input type="checkbox"/> Gloves: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> Medical Providers <input type="checkbox"/> Technical SME Ventilators					
10. Date and Time Needed By			11. Estimated Duration of Need (days)		
12. Delivery Site Location (Address, City, Zip)			13. Site Point of Contact (POC) Name and Title		
14. Delivery Site Location (<input type="checkbox"/> USNG or <input type="checkbox"/> Decimal Degrees)			15. Site 24 Hour Phone No.		16. Site email Address

B. HHS REGIONAL REVIEW (To be completed by HHS Region where request was initiated)

Reviewed By (Name & Title)		Date and Time	
Disposition <input type="checkbox"/> Sent to IMTNAT <input type="checkbox"/> Sent to SOC/IST <input type="checkbox"/> ASPR/FEMA RSP POCs notified			
Priority		<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low	
Regional Approving Official (Name, Title, Date, Time)			
ASPR Region Request Number			

HHS RFR ID Number

C. HHS RCB/SNS REVIEW (To be completed by RCB/SNS Section only)

Received By (Name & Title)		Date and Time	
1. Resource Typing/Adjustment			
2. Special Instructions			
Entered in EMPortal by (Name & Title)		Date and Time	
Disposition <input type="checkbox"/> New Request <input type="checkbox"/> Assigned <input type="checkbox"/> Tasked to: _____ <input type="checkbox"/> In Process <input type="checkbox"/> Need More Information <input type="checkbox"/> Out for Delivery <input type="checkbox"/> En-route <input type="checkbox"/> On Hold <input type="checkbox"/> Complete <input type="checkbox"/> Cancelled <input type="checkbox"/> Request Withdrawn <input type="checkbox"/> Demobilized			
Assigned To (Name and Title)			
Point of Contact (Name and Title)		24-Hr. POC Phone	
Approved By (Name & Title)		Date and Time	
3. Cost Estimate			
4. Priority		<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low	

State Government Tracking Number

D. STATE GOVERNMENT REVIEW (To be completed by requesting State - Department of Health Agency)

Received By (Name & Title)		Date and Time	
Disposition <input type="checkbox"/> Requested Federal Resources <input type="checkbox"/> Filled with Local Resource(s) <input type="checkbox"/> Filled with State Resources <input type="checkbox"/> Denied			
Assigned To (Department Name)			
Point of Contact (Name and Title)		24-Hr. POC Phone	
Approved By (Name & Title)		Date and Time	

F. REQUESTOR NOTIFIED (To be handled by HHS RCB/SNS Logistics)

Region Notified By (Name & Title)		Date and Time	
State Notified By (Name & Title)		Date and Time	
Other Notes:			



COVID-19 - STATE / LOCAL RESOURCE REQUEST FORM

A. REQUEST FOR ASSISTANCE (To be completed by requesting State DOH) ALL FIELDS REQUIRED

1. Requestor's Name (Please print) Deborah Radi		2. Title Public Health Emergency Manager		3. Phone No. 651-201-5709	
4. Requestor's Organization Minnesota Department of Health		5. Cell Phone No.		6. Email Address	
7. Description of Requested Assistance (describe resource type and need in plain language - no acronyms). Provide justification for request in detail. The following products and equipment are specifically in critical need: (see attached list) ? 1,000 Universal Transport Medium for transporting swabs ? 15,000 "kits" of PPE (N95 masks, Surgical/Earloop Masks, Isolation Gowns, Exam Gloves, Faceshields) ? 68 ventilators (25% of M Health Fairview's fleet of ventilators)					
8. Requested Item <input checked="" type="checkbox"/> N-95 Masks <input type="checkbox"/> Goggles <input checked="" type="checkbox"/> Gowns <input checked="" type="checkbox"/> Gloves: <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large <input type="checkbox"/> Medical Providers <input type="checkbox"/> Technical SME					
10. Date and Time Needed By 03/20/2020			11. Estimated Duration of Need (days)		
12. Delivery Site Location (Address, City, Zip)			13. Site Point of Contact (POC) Name and Title		
14. Delivery Site Location (<input type="checkbox"/> USNG or <input type="checkbox"/> Decimal Degrees)			15. Site 24 Hour Phone No.		16. Site email Address

B. HHS REGIONAL REVIEW (To be completed by HHS Region where request was initiated)

Reviewed By (Name & Title)		Date and Time	
Disposition <input type="checkbox"/> Sent to IMTNAT <input type="checkbox"/> Sent to SOC/IST <input type="checkbox"/> ASPR/FEMA RSP POCs notified			
Priority		<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low	
Regional Approving Official (Name, Title, Date, Time)			
ASPR Region Request Number			

HHS RFR ID Number

C. HHS RCB/SNS REVIEW (To be completed by RCB/SNS Section only)

Received By (Name & Title)		Date and Time	
1. Resource Typing/Adjustment			
2. Special Instructions			
Entered in EMPortal by (Name & Title)		Date and Time	
Disposition <input type="checkbox"/> New Request <input type="checkbox"/> Assigned <input type="checkbox"/> Tasked to: _____ <input type="checkbox"/> In Process <input type="checkbox"/> Need More Information <input type="checkbox"/> Out for Delivery <input type="checkbox"/> En-route <input type="checkbox"/> On Hold <input type="checkbox"/> Complete <input type="checkbox"/> Cancelled <input type="checkbox"/> Request Withdrawn <input type="checkbox"/> Demobilized			
Assigned To (Name and Title)			
Point of Contact (Name and Title)		24-Hr. POC Phone	
Approved By (Name & Title)		Date and Time	
3. Cost Estimate			
4. Priority		<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low	

State Government Tracking Number

D. STATE GOVERNMENT REVIEW (To be completed by requesting State - Department of Health Agency)

Received By (Name & Title)		Date and Time	
Disposition <input type="checkbox"/> Requested Federal Resources <input type="checkbox"/> Filled with Local Resource(s) <input type="checkbox"/> Filled with State Resources <input type="checkbox"/> Denied			
Assigned To (Department Name)			
Point of Contact (Name and Title)		24-Hr. POC Phone	
Approved By (Name & Title)		Date and Time	

F. REQUESTOR NOTIFIED (To be handled by HHS RCB/SNS Logistics)

Region Notified By (Name & Title)		Date and Time	
State Notified By (Name & Title)		Date and Time	
Other Notes:			

Request for Strategic National Stockpile Assets

MARCH 13, 2020

Requestor: Fairview M Health Hospital System

Date Needed 3/15/2020

System anticipates they will be out of supplies by Monday, March 16, 2020.

Item	Brand/Model	Size	Quantity
Facemasks/Ear loop masks	N/A	N/A	15,000
N95 Respirator	3M Models 1870+, 1860, 1860S	N/A	15,000 total
Isolation/Disposable Gown	N/A	XL and XXL	15,000
Gloves	N/A	S, M, L, XL	45,000 total
Face Shields	N/A	N/A	15,000
PAPR Hoods	Versaflo 3M Airmate Maxair CAPR	N/A	250 total
Ventilators	N/A	N/A	68
Universal Transport Medium	N/A	N/A	2,000

RESOURCE REQUEST FORM (RRF)

TRACKING INFORMATION (FEMA Use Only)

ECAPS/NEMIS Task ID:	Resource Request #	Program Code/Event #	<input type="checkbox"/> Originated as verbal
Received by (Name and Organization)	State	Date/Time Received	

INSTRUCTIONS

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II. What needs to be done? Completed by requestor.

Description of Requested Assistance: Detail of resource shortfalls, statement of deliverable, or simply state problem/need.

Priority: The requestor's priority, which may differ from the priority in BOX III.

Site POC: The person at the delivery site coordinating reception and utilization of the requested resources. 24-hour contact information required.

If for Direct Federal Assistance (DFA), State Approving Official: Signature certifies that:

- (1) State and local governments cannot perform, nor contract for the performance of the requested work;
- (2) Work is required as a result of the event, not a pre-existing condition; and
- (3) The State is providing the required assurances found in 44 CFR, Section 206.208.

III. Action Review/Coordination (OPS Section Use Only): Completed by the Operations Section Chief or Resource Capability Branch Director.

Accept/Reject: Operations Section Chief or Resource Capability Branch Director accepts or rejects the request; provide reason if rejection. If request accepted, coordinates with others, i.e., Branch Directors or Group Supervisors, begins to determine best means of fulfilling request. All involved in coordination should check appropriate box and initial or print their name.

Assigned to: Operations Section Chief or Resource Capability Branch Director assigns tasks origination, may indicate the OFA Action Officer. Operations Section Chief may also indicate the Action Officer if known, or tasked organization may make this assignment. This may be Emergency Support Function, internal FEMA Organization (i.e.; Logistics), or other organization.

Date/Time Assigned: Operations Section Chief or Resource Capability Branch Director provides date and time of when sourcing should begin.

IV. Statement of Work (OPS Section Use Only): Completed by the Operations Section Chief or Resource Capability Branch Director.

OFA Action Officer: Ops Section Chief obtains from OFA if request fulfilled by a MA; 24-hr phone/fax required. Information used in eCAPS.

FEMA Project Manager: Provided by Operations Section Chief; a Region PFT; 24-hr phone/fax required. Information used in eCAPS.

Statement of Work: Description of tasks to be performed. Could be to assess a problem and report back, or could be to proceed with a specific action. If 40-1 or MA, this goes in "justification" tab in eCAPS.

V. Action Taken (OPS Section Use Only): Completed by Operations Section Chief, Resource Capability Branch Director, MA Unit or Logistics.

Resource Request Results: Ops Section Chief, Resource Support Section Chief, MA Unit, or LOG should note what type of document the action resulted in by "checking" the appropriate box i.e., Mutual Aid, Donations, Requisition, Procurement, IA, MA, Other. If "Other" is selected write in appropriate response or state "see below" and give detail description in "Disposition" field. "Disposition" field should note steps taken to complete the Action, and personnel, sub-tasked agencies, contracts and other resources utilized.

TRACKING INFORMATION. Completed by Action Tracker. Required for all requests.

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
RESOURCE REQUEST FORM (RRF)

O.M.B. No. 1660-0002
Expires May 31, 2017

PAPERWORK BURDEN DISCLOSURE NOTICE

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I. REQUESTING ASSISTANCE (To be completed by Requestor)

1. Requestor's Name (Please print) Deb Radi	2. Title Public Health Emergency Manager	3. Phone No. 651-201-5709
4. Requestor's Organization Minnesota Department of Health	5. Fax No.	6. E-Mail Address [REDACTED]

II. REQUESTING ASSISTANCE (To be completed by Requestor)

i. MEDICAL CARE (Healthcare Workers and Healthcare Facilities PPE for patient care
250,000 surgical masks needed as a 5-day supply. We currently burned 40,000 masks/day without meeting the PPE needs of long-term care facilities with outbreak, so anticipate true need is 50,000/day. We currently have 0 masks.

ii.

2. Quantity 1	3. Priority <input type="checkbox"/> Lifesaving <input checked="" type="checkbox"/> Life Sustaining <input type="checkbox"/> Normal <input type="checkbox"/> High	4. Date and Time Needed April 10, 2020
5. Delivery Site Location [REDACTED]		6. Site Point of Contact (POC) [REDACTED]
		7. 24 Hour Phone No. [REDACTED]
		8. Fax No.
9. State Approving Official Signature		10. Date and Time

III. SOURCING THE REQUEST - REVIEW/COORDINATION (Operations Section Only)

1. <input type="checkbox"/> OPS Review by: _____ <input type="checkbox"/> LOG Review by: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____	2. Source: <input type="checkbox"/> Donations <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Requisitions <input type="checkbox"/> Procurement <input type="checkbox"/> Interagency Agreement <input type="checkbox"/> Mission Assignment	3. Assigned to: ESF/OFA: _____ RSF/OFA: _____ Other: _____ Date/Time: _____
4. Immediate Action Required <input type="checkbox"/> Yes <input type="checkbox"/> No		

IV. STATEMENT OF WORK (Operations Section Only)

1. OFA Action Officer	2. 24 Hour Phone #	3. Fax #
4. FEMA Project Manager	5. 24 Hour Phone #	6. Fax #
7. Statement of Work		<input type="checkbox"/> See Attached
8. Estimated Completion Date	9. Estimated Cost	

V. ACTION TAKEN (Operations Section Only)

<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	<input type="checkbox"/> Requestor Notified
Reason / Disposition		

RESOURCE REQUEST FORM (RRF)

TRACKING INFORMATION (FEMA Use Only)

ECAPS/NEMIS Task ID:	Resource Request #	Program Code/Event #	<input type="checkbox"/> Originated as verbal
Received by (Name and Organization)	State	Date/Time Received	

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III. Action Review/Coordination (OPS Section Use Only): Completed by the Operations Section Chief or Resource Capability Branch Director.

Accept/Reject: Operations Section Chief or Resource Capability Branch Director accepts or rejects the request; provide reason if rejection. If request accepted, coordinates with others, i.e., Branch Directors or Group Supervisors, begins to determine best means of fulfilling request. All involved in coordination should check appropriate box and initial or print their name.

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FEMA Project Manager: Provided by Operations Section Chief; a Region PFT; 24-hr phone/fax required. Information used in eCAPS.

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DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
RESOURCE REQUEST FORM (RRF)

O.M.B. No. 1660-0002
Expires May 31, 2017

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I. REQUESTING ASSISTANCE (To be completed by Requestor)

1. Requestor's Name (Please print) Deb Radi	2. Title Public Health Emergency Manager	3. Phone No. 651-201-5709
4. Requestor's Organization Minnesota Department of Health	5. Fax No.	6. E-Mail Address [REDACTED]

II. REQUESTING ASSISTANCE (To be completed by Requestor)

i. MEDICAL CARE (Healthcare Workers and Healthcare Facilities PPE for patient care. The requests for gowns is increasing with the number of hospitalized COVID-19 patients combined with significant increases in long-term care outbreaks. The past 3 days we are distributing 2000-3000 gowns/day to health care facilities. Requesting 100,000 gowns.

2. Quantity 1	3. Priority <input type="checkbox"/> Lifesaving <input checked="" type="checkbox"/> Life Sustaining <input type="checkbox"/> Normal <input type="checkbox"/> High	4. Date and Time Needed April 14, 2020
5. Delivery Site Location [REDACTED]		6. Site Point of Contact (POC) [REDACTED]
		7. 24 Hour Phone No. [REDACTED]
		8. Fax No.
9. State Approving Official Signature		10. Date and Time

III. SOURCING THE REQUEST - REVIEW/COORDINATION (Operations Section Only)

1. <input type="checkbox"/> OPS Review by: _____ <input type="checkbox"/> LOG Review by: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____	2. Source: <input type="checkbox"/> Donations <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Requisitions <input type="checkbox"/> Procurement <input type="checkbox"/> Interagency Agreement <input type="checkbox"/> Mission Assignment	3. Assigned to: ESF/OFA: _____ RSF/OFA: _____ Other: _____ Date/Time: _____
4. Immediate Action Required <input type="checkbox"/> Yes <input type="checkbox"/> No		

IV. STATEMENT OF WORK (Operations Section Only)

1. OFA Action Officer	2. 24 Hour Phone #	3. Fax #
4. FEMA Project Manager	5. 24 Hour Phone #	6. Fax #
7. Statement of Work <input type="checkbox"/> See Attached		
8. Estimated Completion Date		9. Estimated Cost

V. ACTION TAKEN (Operations Section Only)

<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	<input type="checkbox"/> Requestor Notified
Reason / Disposition		

RESOURCE REQUEST FORM (RRF)

TRACKING INFORMATION (FEMA Use Only)

ECAPS/NEMIS Task ID:	Resource Request #	Program Code/Event #	<input type="checkbox"/> Originated as verbal
Received by (Name and Organization)	State	Date/Time Received	

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III. Action Review/Coordination (OPS Section Use Only): Completed by the Operations Section Chief or Resource Capability Branch Director.

Accept/Reject: Operations Section Chief or Resource Capability Branch Director accepts or rejects the request; provide reason if rejection. If request accepted, coordinates with others, i.e., Branch Directors or Group Supervisors, begins to determine best means of fulfilling request. All involved in coordination should check appropriate box and initial or print their name.

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DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
RESOURCE REQUEST FORM (RRF)

O.M.B. No. 1660-0002
Expires May 31, 2017

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1. Requestor's Name (Please print) Deb Radi	2. Title Public Health Emergency Manager	3. Phone No. 651-201-5709
4. Requestor's Organization Minnesota Department of Health	5. Fax No.	6. E-Mail Address [REDACTED]

II. REQUESTING ASSISTANCE (To be completed by Requestor)

i. **MEDICAL CARE** (Healthcare Workers and Healthcare Facilities PPE for patient care. The projected requests for N95s indicates more will be needed to serve hospitalized COVID-19 patients combined with significant increases in long-term care outbreaks. In addition, the lack of surgical masks is leading to more N95s being used. Requesting 100,000 N95s.

2. Quantity 1	3. Priority <input type="checkbox"/> Lifesaving <input type="checkbox"/> High	<input checked="" type="checkbox"/> Life Sustaining	<input type="checkbox"/> Normal	4. Date and Time Needed April 15, 2020
5. Delivery Site Location [REDACTED]		6. Site Point of Contact (POC) [REDACTED]		
		7. 24 Hour Phone No. [REDACTED]	8. Fax No.	
9. State Approving Official Signature				10. Date and Time

III. SOURCING THE REQUEST - REVIEW/COORDINATION (Operations Section Only)

1. <input type="checkbox"/> OPS Review by: _____ <input type="checkbox"/> LOG Review by: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____	2. Source: <input type="checkbox"/> Donations <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Requisitions <input type="checkbox"/> Procurement <input type="checkbox"/> Interagency Agreement <input type="checkbox"/> Mission Assignment	3. Assigned to: ESF/OFA: _____ RSF/OFA: _____ Other: _____ Date/Time: _____
4. Immediate Action Required <input type="checkbox"/> Yes <input type="checkbox"/> No		

IV. STATEMENT OF WORK (Operations Section Only)

1. OFA Action Officer	2. 24 Hour Phone #	3. Fax #
4. FEMA Project Manager	5. 24 Hour Phone #	6. Fax #
7. Statement of Work		<input type="checkbox"/> See Attached
8. Estimated Completion Date	9. Estimated Cost	

V. ACTION TAKEN (Operations Section Only)

<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	<input type="checkbox"/> Requestor Notified
Reason / Disposition		

RESOURCE REQUEST FORM (RRF)

TRACKING INFORMATION (FEMA Use Only)

ECAPS/NEMIS Task ID:	Resource Request #	Program Code/Event #	<input type="checkbox"/> Originated as verbal
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4. Requestor's Organization Minnesota Department of Health	5. Fax No.	6. E-Mail Address [REDACTED]

II. REQUESTING ASSISTANCE (To be completed by Requestor)

1. Description of Requested Assistance:
i. MEDICAL CARE (Healthcare Workers and Healthcare Facilities PPE other items that are under HHS authorities)
1000 cases of non-latex gloves, size medium
~~1000 cases of non-latex gloves, size large~~ +

2. Quantity	3. Priority <input type="checkbox"/> Lifesaving <input checked="" type="checkbox"/> Life Sustaining <input type="checkbox"/> Normal <input type="checkbox"/> High	4. Date and Time Needed Apr 7, 2020
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5. Delivery Site Location [REDACTED]	6. Site Point of Contact (POC) [REDACTED]
7. 24 Hour Phone No. [REDACTED] +	8. Fax No.

9. State Approving Official Signature	10. Date and Time
---------------------------------------	-------------------

III. SOURCING THE REQUEST - REVIEW/COORDINATION (Operations Section Only)

<p>1.</p> <input type="checkbox"/> OPS Review by: _____ <input type="checkbox"/> LOG Review by: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____	<p>2. Source:</p> <input type="checkbox"/> Donations <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Requisitions <input type="checkbox"/> Procurement <input type="checkbox"/> Interagency Agreement <input type="checkbox"/> Mission Assignment	<p>3. Assigned to:</p> ESF/OFA: _____ RSF/OFA: _____ Other: _____ Date/Time: _____
<p>4. Immediate Action Required <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		

IV. STATEMENT OF WORK (Operations Section Only)

1. OFA Action Officer	2. 24 Hour Phone #	3. Fax #
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8. Estimated Completion Date		9. Estimated Cost

V. ACTION TAKEN (Operations Section Only)

<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	<input type="checkbox"/> Requestor Notified
Reason / Disposition		

RESOURCE REQUEST FORM (RRF)

TRACKING INFORMATION (FEMA Use Only)

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Resource Request Results: Ops Section Chief, Resource Support Section Chief, MA Unit, or LOG should note what type of document the action resulted in by "checking" the appropriate box i.e., Mutual Aid, Donations, Requisition, Procurement, IA, MA, Other. If "Other" is selected write in appropriate response or state "see below" and give detail description in "Disposition" field. "Disposition" field should note steps taken to complete the Action, and personnel, sub-tasked agencies, contracts and other resources utilized.

TRACKING INFORMATION. Completed by Action Tracker. Required for all requests.

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
RESOURCE REQUEST FORM (RRF)

O.M.B. No. 1660-0002
Expires May 31, 2017

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 20 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless it displays a valid OMB control number. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472-3100, Paperwork Reduction Project (1660-0047). **NOTE: Do not send your completed form to this address.**

I. REQUESTING ASSISTANCE (To be completed by Requestor)

1. Requestor's Name (Please print) Deb Radi	2. Title Public Health Emergency Manager	3. Phone No. 651-201-5709
4. Requestor's Organization Minnesota Department of Health	5. Fax No.	6. E-Mail Address [REDACTED]

II. REQUESTING ASSISTANCE (To be completed by Requestor)

1. Description of Requested Assistance: i. MEDICAL CARE (Healthcare Workers and Healthcare Facilities PPE other items that are under HHS authorities) 300,000 surgical masks +			
2. Quantity	3. Priority <input type="checkbox"/> Lifesaving <input checked="" type="checkbox"/> Life Sustaining <input type="checkbox"/> Normal <input type="checkbox"/> High		4. Date and Time Needed Apr 7, 2020
5. Delivery Site Location [REDACTED]		6. Site Point of Contact (POC) [REDACTED]	
		7. 24 Hour Phone No. [REDACTED] +	8. Fax No.
9. State Approving Official Signature			10. Date and Time

III. SOURCING THE REQUEST - REVIEW/COORDINATION (Operations Section Only)

1. <input type="checkbox"/> OPS Review by: _____ <input type="checkbox"/> LOG Review by: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____ <input type="checkbox"/> Other Coordination: _____	2. Source: <input type="checkbox"/> Donations <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Requisitions <input type="checkbox"/> Procurement <input type="checkbox"/> Interagency Agreement <input type="checkbox"/> Mission Assignment	3. Assigned to: ESF/OFA: _____ RSF/OFA: _____ Other: _____ Date/Time: _____
4. Immediate Action Required <input type="checkbox"/> Yes <input type="checkbox"/> No		

IV. STATEMENT OF WORK (Operations Section Only)

1. OFA Action Officer	2. 24 Hour Phone #	3. Fax #
4. FEMA Project Manager	5. 24 Hour Phone #	6. Fax #
7. Statement of Work <input type="checkbox"/> See Attached		
8. Estimated Completion Date		9. Estimated Cost

V. ACTION TAKEN (Operations Section Only)

<input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	<input type="checkbox"/> Requestor Notified
Reason / Disposition		

RESOURCE REQUEST FORM (RRF)

TRACKING INFORMATION (FEMA Use Only)

ECAPS/NEMIS Task ID:	Resource Request #	Program Code/Event #	<input type="checkbox"/> Originated as verbal
Received by (Name and Organization)	State	Date/Time Received	

INSTRUCTIONS

Items on the Resource Request form that are not specifically listed are self-explanatory. Indicate "see attached" in any field for which additional space or more information is required.

I. Who is requesting assistance? Completed by requestor.

II. What needs to be done? Completed by requestor.

Description of Requested Assistance: Detail of resource shortfalls, statement of deliverable, or simply state problem/need.

Priority: The requestor's priority, which may differ from the priority in BOX III.

Site POC: The person at the delivery site coordinating reception and utilization of the requested resources. 24-hour contact information required.

If for Direct Federal Assistance (DFA), State Approving Official: Signature certifies that:

- (1) State and local governments cannot perform, nor contract for the performance of the requested work;
- (2) Work is required as a result of the event, not a pre-existing condition; and
- (3) The State is providing the required assurances found in 44 CFR, Section 206.208.

III. Action Review/Coordination (OPS Section Use Only): Completed by the Operations Section Chief or Resource Capability Branch Director.

Accept/Reject: Operations Section Chief or Resource Capability Branch Director accepts or rejects the request; provide reason if rejection. If request accepted, coordinates with others, i.e., Branch Directors or Group Supervisors, begins to determine best means of fulfilling request. All involved in coordination should check appropriate box and initial or print their name.

Assigned to: Operations Section Chief or Resource Capability Branch Director assigns tasks origination, may indicate the OFA Action Officer. Operations Section Chief may also indicate the Action Officer if known, or tasked organization may make this assignment. This may be Emergency Support Function, internal FEMA Organization (i.e.; Logistics), or other organization.

Date/Time Assigned: Operations Section Chief or Resource Capability Branch Director provides date and time of when sourcing should begin.

IV. Statement of Work (OPS Section Use Only): Completed by the Operations Section Chief or Resource Capability Branch Director.

OFA Action Officer: Ops Section Chief obtains from OFA if request fulfilled by a MA; 24-hr phone/fax required. Information used in eCAPS.

FEMA Project Manager: Provided by Operations Section Chief; a Region PFT; 24-hr phone/fax required. Information used in eCAPS.

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