



Domestic Public Health Response to COVID-19: Current Status

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The COVID-19 pandemic is affecting communities throughout the United States, with case counts changing daily. [Over 760,000 cases have been reported in 50 states, the District of Columbia, Puerto Rico, Guam, the Northern Mariana Islands, and the U.S. Virgin Islands, with over 35,000 deaths reported](#) (Data from compiled state and local reports.) Containment and mitigation efforts by federal, state, and local governments have been undertaken to “flatten the curve”—that is, to slow widespread transmission that could overwhelm the nation’s health care system.

This CRS Insight presents selected information and resources relevant to the *domestic public health response* to COVID-19 in containing and mitigating the spread and impact of the disease. As the situation evolves, this Insight will be updated. For further information on other issues related to COVID-19, see the CRS [Coronavirus Disease 2019](#) homepage.

A Snapshot of the Domestic Public Health Response to COVID-19, as of April 16, 2020

Selected events and actions. All dates are calendar year 2020.

Emergency and Major Disaster Declarations and White House

- Several emergency declarations are in effect, including a [Public Health Emergency](#) under Section 319 of the Public Health Service Act, declared on January 31 (retroactively dated

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to January 27); nationwide emergency declarations on March 13 and subsequent major disaster declarations pursuant to the [Stafford Act](#); and a National Emergency declaration pursuant to the [National Emergencies Act](#) on March 13, dated to March 1. Waivers are in effect under [Section 1135](#) of the Social Security Act to aid the health care system with surge capacity.

- President Donald Trump formed the President’s Coronavirus Task Force and appointed Vice President Mike Pence as the coordinator and Dr. Deborah Birx as response coordinator; [announced](#) on January 29.
- President Trump invoked the [Defense Production Act \(DPA\)](#) on March 18 and delegated authority to the Secretary of Health and Human Services (HHS) to prioritize and allocate health and medical resources as needed.
- The White House has [advised](#) Americans to work and engage in schooling from home when possible and to avoid gatherings of 10 or more people, discretionary travel, and restaurants through April 30.
- The White House, in collaboration with the Centers for Disease Control and Prevention (CDC), has released [guidelines](#) for “Opening Up America Again” on April 16.

Domestic Response Activities—FEMA, HHS, and Support Agencies

Coordination and General Public Health

- On [March 21](#), the Vice President announced that the Federal Emergency Management Agency (FEMA) is leading federal operations on behalf of the White House Coronavirus Task Force, with HHS providing subject matter expertise. FEMA is supporting federal, state, and local partners by providing situational awareness, planning, logistics, and supply chain support. In addition, FEMA is providing assistance to states and territories for emergency protective measures authorized pursuant to the President’s emergency and major disaster declarations under the Stafford Act.
- The CDC has [issued](#) guidances for the general public, schools, health care providers, health departments, pregnant women and children, travelers, and others. CDC has also [recommended](#) that all Americans wear nonmedical cloth masks when in public settings where 6-foot social distancing is difficult to maintain (e.g., grocery stores).
- CDC has begun to publish a weekly [data report](#), and has published [research reports](#) on U.S. and international cases and public health interventions.
- CDC has issued several guidances related to COVID-19 case reporting, including for [confirmed cases](#) and [certifying deaths](#).
- HHS has made several funding [announcements](#) following supplemental appropriations, including an [initial round](#) of \$30 billion in funding for the CARES Act Provider Relief Fund.

Diagnostic Testing

- CDC developed a [diagnostic test kit](#) for the virus and distributed it to public health laboratories pursuant to an Emergency Use Authorization (EUA) issued by the U.S. Food and Drug Administration (FDA) on February 4. Initial quality issues with this test delayed early testing and case identification.
 - FDA has [taken actions](#) to expand testing. FDA issued guidance on February 29 to authorize certain CLIA (Clinical Laboratory Improvement Amendments) certified labs to
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validate and use their own COVID-19 laboratory-developed tests for clinical diagnosis before EUA is granted. On March 16, FDA expanded this policy to cover the manufacture, distribution, and use of commercial test kits prior to EUA authorization. In this guidance, FDA also authorizes states to further authorize laboratories within their own state to develop and perform tests for COVID-19 pursuant to state law and without the objection of the FDA.

- COVID-19 diagnostic testing is currently conducted by public health, commercial, and clinical [laboratories](#).
- FEMA and HHS established Community Based Testing Sites ([CBTS](#)), which now have the option of being transferred to state leadership.

Medical Countermeasures

- FDA has issued [several EUAs](#) for COVID-19 diagnostic tests (including for serologic and point-of-care tests), ventilators and related medical devices, respirators and respirator decontamination systems, and treatments for COVID-19.
- Medical countermeasures (diagnostics, vaccines, and therapeutics) are in development, including those supported by the National Institutes of Health ([NIH](#)) and the Biomedical Advanced Research and Development Authority ([BARDA](#)). An [NIH-supported vaccine](#) is in Phase 1 clinical trials (early-stage testing in humans). Availability of a [vaccine](#) is projected to be at least a year away, while initial results of clinical trials of [potential treatments](#) are said to be expected by May.
- Treatments have been made available under FDA [expanded access](#) (also known as compassionate use) to certain COVID-19 patients while clinical trials are underway.

Supply Chain and Health Care Surge

- FEMA is coordinating [supply chain](#) activities through several efforts, including [Project Airbridge](#) and deployment of assets from the Strategic National Stockpile, with the HHS Assistant Secretary for Preparedness and Response ([ASPR](#)).
 - [FDA](#) has issued a series of enforcement policies via guidance to make products available, waiving regulatory requirements for personal protective equipment (PPE), hand sanitizer, and other FDA-regulated products and activities. CDC has also issued [guidance](#) on optimizing PPE use.
 - In [early April](#), the DPA was used to increase ventilator production and a contract was made to private companies (General Motors and Philips) to produce ventilators. Under DPA, export of critical PPE has also been limited.
 - The [Department of Defense](#) has transferred stockpiled respirators and ventilators for civilian use and deployed U.S. Navy hospital ships, field hospitals, and medical augmentation teams to infection hot spots, such as New York, New Jersey, Washington, Michigan, and Louisiana. In addition, over 30,000 members of the National Guard are conducting COVID-19 response operations at the direction of their governors.
 - FEMA has tasked the U.S. Army Corps of Engineers ([USACE](#)) to construct and convert sites into alternate health care facilities in 14 states, providing for roughly 15,700 additional beds. USACE anticipates completing the sites associated with around 11,700 beds by April 25.
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Travel-Related Policies and Restrictions

- [Travel restrictions](#) and quarantine requirements are in effect for certain travelers who have been in mainland China, the Islamic Republic of Iran, the Schengen area of the European Union, the United Kingdom, and the Republic of Ireland within 14 days prior to arrival, pursuant to proclamations issued by President Trump.
- Enhanced health screenings are in place at 13 major U.S. airports. Health screenings and referrals are in place at all air, land, and sea ports of entry by the Department of Homeland Security ([DHS](#)).
- CDC issued an [order](#) (along with [implementing regulations](#)) [suspending the “introduction”](#) of foreign nationals from countries with COVID-19. [Two DHS orders](#) restrict nonessential travel by foreign nationals into the United States through ports of entry on the land borders with both [Canada](#) and [Mexico](#).
- The State Department has [advised](#) Americans to avoid all international travel and for those abroad to return home immediately or prepare to remain abroad for an indefinite period of time. [CDC recommends](#) that travelers avoid all nonessential travel to all global destinations

Congress

- The Coronavirus Preparedness and Response Supplemental Appropriations Act (P.L. 116-123), enacted March 6, [provides](#) a total of \$7.767 billion in appropriations, including \$6.497 billion for HHS (including a contingent amount). The act also expands telehealth services. Prior to enactment, health response efforts were primarily supported by the CDC Infectious Diseases Rapid Response Reserve Fund allotment of \$105 million and HHS transfers of \$136 million.
- The Families First Coronavirus Response Act (FFCRA; P.L. 116-127), enacted March 18, includes provisions related to health care coverage and delivery, among other things. It requires coverage of COVID-19 testing under most federal health care programs, and provides \$1 billion for the HHS Public Health and Social Services Emergency Fund (PHSSEF) for COVID-19 testing for the uninsured.
- The Coronavirus Aid, Relief, and Economic Security Act (CARES Act; P.L. 116-136), enacted on March 27, provides a \$2.2 trillion economic package that includes \$172 billion additional supplemental appropriations for HHS to support public health and medical response activities, including coverage or purchase of a COVID-19 vaccine, when available. It establishes a \$100 billion [Provider Relief Fund](#) for hospitals and other health care providers. It also includes several health-related authorities, some related to medical supply chain issues.
- Another supplemental appropriations measure is [being considered](#) and would reportedly include additional health-related funding.

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