

State and Federal Overview: The Novel Coronavirus (COVID-19), March 31-April 3, 2020



April 3, 2020



The President's Press Briefing - April 2, 2020

Participants included: President Trump and Vice President Pence, Treasury Secretary Steven Mnuchin, Small Business Administration Administrator Jovita Carranza, Senior Advisor Jared Kushner, Defense Production Act Coordinator Peter Navarro, Fleet Ordinance and Supply Officer Rear Admiral John Polowczyk, and Dr. Deborah Birx. Below are selected points of importance, as well as supplementary information from trusted third-party sources. For the purpose of brevity, speakers' statements are often paraphrased. Those wanting to watch the briefing can access it here. The broadcast begins at approximately 1:43:00.

International.

Cases. According to the WHO, one new country reported cases of COVID-19: Malawi. Ports, airports and ground crossings require careful monitoring. WHO has produced two online interactive courses to provide guidance for the management of ill travelers and for managing COVID-19 cases or outbreaks on board ships.

- Online course for the management of ill travelers at point of entry: here.
- Online course for operational considerations for managing COVID-19 cases/outbreaks on board ships: here.

Travel Bans. Japan has expanded their entry ban to include the US. The US is looking at a reciprocal ban.

Small Business Administration. With 50% of the nation's workforce being in small businesses under 500 people, the President commented on the Paycheck Protection Program and Main Street Lending. He stated that nearly \$350 billion in loans will be



available to small businesses, including sole proprietors. These loans are up to 100 percent forgivable as long as employers keep paying their workers. Secretary Mnuchin stated that they are going to raise the interest rate on these loans — and again, the interest rate is paid for as part of the program; the borrower doesn't have to pay this to 1 percent. Learn more about the Program here. Secretary Mnuchin stated that part of their work with the Federal Reserve includes a facility called the Main Street Lending facility. More information on that to follow. Finally, he commented on the IRS Employee Retention Credit, designed to encourage businesses to keep employees on their payroll. The refundable tax credit is 50% of up to \$10,000 in wages paid by an eligible employer whose business has been financially impacted by COVID-19. To find out whether your business qualifies, follow this link. In response to a question regarding whether energy companies will receive loans under the CARES Act, Sec. Mnuchin replied that their expectation is that energy companies will be able to participate in broad-based facilities, but not direct lending from the Treasury.

Airlines. Airlines that receive supplemental aid will be for employees; there are requirements to maintain specific routes. Secretary Mnuchin stated that they've hired three outside advisors who will be financial advisors, and three law firms. More information on that will be released soon. It was stressed that this is not a bailout. Specific allocation is yet to be determined.

The Economy. Secretary Mnuchin stated that within two weeks, the first Economic Impact (stimulus) payments will be direct deposited into taxpayers' accounts.

• From the U.S. Department of the Treasury. Social Security beneficiaries who are not typically required to file tax returns will not need to file an abbreviated tax return to receive an Economic Impact Payment. Instead, payments will be automatically deposited into their bank accounts. The IRS will use the information on the Form SSA-1099 and Form RRB-1099 to generate \$1,200 Economic Impact Payments to Social Security recipients who did not file tax returns in 2018 or 2019. Recipients will receive these payments as a direct deposit or by paper check, just as they would normally receive their benefits. Find more information here.

Medical Supplies and Testing. Rear Admiral Polowczyk provided an overview of materials being distributed by the federal government.

- 19.5 million N-95 masks
- 27.1 million surgical masks
- 22.4 million pairs of protective gloves
- 5.2 million face shields
- 7,640 ventilators

He stated that 200,000 N95 respirators are being sent to the public health warehouse in New York City today. The President stated that 4 million N95 respirators, 1.8 million



surgical masks, 460,000 face shields, 1.4 million gloves, and 4,400 ventilators have been delivered just to the city and to the state of New York. Rear Admiral Polowczyk stated that typically, the industrial base produces approximately 30,000 ventilators a year; the Administration is working to acquire 100,000 by the end of June.

Project Airbridge. Six Air Bridge flights have been completed and 28 have been scheduled. It usually takes 37 days from order to getting the supplies to the US and distributed. Rear Admiral Polowczyk stated that they are working on expediting the process.

Defense Production Act: The Three-Legged Stool

- Mobilization of the industrial base (retooling and/or expanding production),
- Allocation of resources (two issues: strain on the supply chain, and ensuring the product goes to the right recipient), and
- Hoarding of critical or threatened material (seizing critical items from areas where they're being inappropriately stockpiled and giving them to medical professionals).

Ensuring resources are where they need to be takes a, "whole-of-state/whole-of-metro" approach, where resources are reallocated within a state or metro area to harder-hit areas. Dr. Birx praised Governors for their action on this front.

Testing.

- **U.S. Cases**. According to the CDC, there are 239,279 U.S. cases of COVID-19; 5,443 fatalities; and 55 jurisdictions reporting cases (50 states, District of Columbia, Puerto Rico, Guam, the Northern Mariana Islands, and the U.S. Virgin Islands).
- False Negatives. In response to a question from a reporter regarding roughly
 one in three Roche/Abbott tests providing false negatives, Dr. Birx stated that
 she will look into it. She stated that she reviews the Roche and Abbott numbers
 every night, and that the numbers are trending in exactly the same way, but she
 will review again for anomalies.
- Data Overview. Two states, NY and NJ, are reporting 35% positive; LA is reporting 26% positive; MICH, CT, IN, IL, GA are reporting 15% positive; CO, D.C., RI, MA are reporting 13% positive; CA and WA hold steady at 8% positive. She stated that not all groups are reporting, which is necessary for a better understanding of the numbers.
- Dr. Birx stated that one component of the testing strategy is prioritizing rapid test delivery to areas that may not have the same amount of access to the Indian Health Services, and to the public health institutions, and the public health and state labs so that they can use that and start forward leaning into surveillance. (*This is good news for Texas.*)



Insurance. Instead of expanding the ACA special enrollment period for those without coverage, the Vice President stated that the White House Coronavirus Task Force is working on a proposal for the President to compensate the hospitals directly for any coronavirus treatment that they provide to uninsured Americans. They are working out the

National Recommendation for Face Coverings. Dr. Birx stated that the most important thing is the social distancing and washing your hands. We don't want people to get an artificial sense of protection because they're behind a mask. Though your mouth and nose might be covered, your eyes are still exposed and you're still touching things with your hands. When further guidance is given, if masks are recommended, it will be in addition to the already established guidance.

Nursing Homes. The President stated that he is issuing guidance to protect elderly Americans residing in nursing homes. He stated that by now, nursing homes should have suspended the entry of all medically unnecessary personnel. He stated that today, the Administration further recommends that all nursing home facilities assign the same staff to care for the same group of residents consistently to minimize any potential spread. He stated that they are also urging facilities to designate separate areas for healthy and sick residents. Learn more here.

Recommendation Regarding the Use of Cloth Face Coverings, Especially in Areas of Significant Community-Based Transmission

CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies) **especially** in areas of significant community-based transmission.

It is critical to emphasize that maintaining 6-feet social distancing remains important to slowing the spread of the virus. CDC is additionally advising the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus and do not know it from transmitting it to others. Cloth face coverings fashioned from household items or made at home from common materials at low cost can be used as an additional, voluntary public health measure.

The cloth face coverings recommended are not surgical masks or N-95 respirators. Those



are critical supplies that must continue to be reserved for healthcare workers and other medical first responders, as recommended by current CDC guidance. Read the <u>full</u> release here. The President stated that this is voluntary, and he will not be wearing one.

Bureau of Labor Statistics

Today, the Bureau of Labor Statistics released employment statistics for March 2020. March data from the establishment and household surveys broadly reflect some of the early effects of the coronavirus (COVID-19) pandemic on the labor market. We cannot precisely quantify the effects of the pandemic on the job market in March. However, it is clear that the decrease in employment and hours and the increase in unemployment can be ascribed to effects of the illness and efforts to contain the virus. It is important to keep in mind that the March survey reference periods for both surveys predated many coronavirus-related business and school closures in the second half of the month.

- Total nonfarm payroll employment fell by 701,000 in March, and the unemployment rate rose to 4.4 percent. This is the largest over-the-month increase in the rate since January 1975, when the increase was also 0.9 percentage point.
- Employment in leisure and hospitality fell by 459,000, mainly in food services and drinking places. Notable declines also occurred in health care and social assistance, professional and business services, retail trade, and construction.
- The number of unemployed persons rose by 1.4 million to 7.1 million in March.
- Unemployment rates rose among all major worker groups.
- The number of unemployed persons who reported being on temporary layoff more than doubled in March to 1.8 million. The number of permanent job losers increased by 177,000 to 1.5 million.

Read the full release here.

U.S. Department of Labor

U.S. Department of Labor Announces New Cares Act Guidance on Unemployment Insurance For States In Response To Covid-19 Crisis The U.S. Department of Labor today announced the publication of Unemployment Insurance Program Letter 14-20 (UIPL) outlining relevant provisions of the Coronavirus Aid, Relief and Economic Security (CARES) Act related to the administration of and



eligibility criteria for state unemployment insurance (UI) programs, including Pandemic Unemployment Assistance (PUA) for those not typically eligible for UI, such as gig workers, and expanded UI benefits. Today's quidance is the first of several upcoming UIPLs to states on the unemployment insurance provisions of the CARES Act. The UIPL outlines several new programs under the recent CARES Act. PUA provides benefits for eligible individuals who are self-employed, seeking part-time employment, or who otherwise would not qualify for UI benefits under state or federal law. To be eligible, among other requirements, individuals must demonstrate that they are otherwise able to work and available for work within the meaning of applicable state law, except that they are unemployed, partially unemployed, or unable or unavailable to work because of COVID-19 related reasons. Under the Federal Pandemic Unemployment Compensation (FPUC) program, eligible individuals who are collecting certain UI benefits, including regular unemployment compensation, will receive an additional \$600 in federal benefits per week for weeks of unemployment ending on or before July 31, 2020. Additionally, the Pandemic Emergency Unemployment Compensation (PEUC) program allows those who have exhausted benefits under regular unemployment compensation or other programs to receive up to 13 weeks of additional benefits. States must offer flexibility in meeting PEUC eligibility requirements related to "actively seeking work" if an applicant's ability to do so is impacted by COVID-19. Read the full release.

U.S. Department of Labor Announces Additional Guidance Following Paid Sick **Expanded Family** and Medical **Leave Implementation** The guidance announced today includes a comprehensive webinar explaining which employers are covered by the new law, which workers are eligible, and what benefits and protections the law provides. The Wage and Hour Division (WHD) also added additional Questions and Answers to its website in response to the questions most frequently received to-date through its extensive stakeholder engagement. Workplace posters translated into additional languages, which fulfill notice requirements for employers obligated to inform employees about their rights under the FFCRA, have also been added to WHD's website. To view the webinar and other guidance materials, visit www.dol.gov/agencies/whd/pandemic. The guidance announced today adds to a growing list of compliance assistance materials published by WHD, including a Fact Sheet for Employees and a Fact Sheet for Employers, available in both English and Spanish, Questions and Answers about posting requirements, and a Field Assistance Bulletin describing WHD's 30-day non-enforcement policy. Read the full release here.

U.S. Department of Labor Issues Guidance for Respiratory Protection During N95Shortage

Due

to

Covid-19

Pandemic

The U.S. Department of Labor's Occupational Safety and Health Administration (OSHA) has issued interim enforcement guidance to help combat supply shortages of disposable N95 filtering face piece respirators (N95 FFRs). The action marks the department's latest



step to ensure the availability of respirators and follows President Donald J. Trump's Memorandum on Making General Use Respirators Available. Read the <u>full release here</u>.



The Governor's Press Conference

Special Thanks to the Governor's Office for making the presentation materials available.

The Governor was joined by Texas Department of Health Services Commissioner John Hellerstedt, MD, Executive Vice Chancellor for Health Affairs of the University of Texas System John Zerwas, MD, and Texas Division of Emergency Management Chief Nim Kidd. The focus of the briefing was to provide an update on the state's COVID-19 hospital capacity.

As of today:

- More than 55,000 Texans have been tested
- 5,478 have tested positive
- 827 people hospitalized
- 91 confirmed fatalities
- More than 1.4 million facemasks, 190,000 face shields, 2 million gloves, 160,000 gowns have been provided
- 8,741 ventilators have been identified.

15-Minute Test. There is a new test developed by Abbot Labs that can provide immediate results (5-15 minutes); 10,000 have been shipped to Texas and are now available. The Governor stated that 20,000 would be made available weekly in the future. Seven hospital locations have received the tests and this number will increase to 44. The goal of these tests is to test the people on the front lines (first responders).

Ensuring hospital capacity. Increased hospital beds have been made available through eliminating nonessential surgeries; Waiving regulatory requirements for professionals to enhance staffing; Doubling up on beds per room. Through these efforts,



Texas has a 142% increase in available beds (19,695 beds) available for COVID-19.

STATEWIDE

TOTAL BEDS TOTAL REPORTED AVAILABLE BEDS: 47,585 19,695 PERCENT BEDS **TOTAL ICU BEDS** AVAILABLE: **AVAILABLE** 2,107 41% TOTAL 22 Trauma **VENTILATORS** Service 8,741 Areas (TSA)

Dr. Zerwas stated that there are five different levels of beds available to address the crisis.

These are described below.

Level **5** support hospital system to maintain current capacity. Level 4 - support hospital system to open all physical beds and double occupancy the waiver (accounts for additional 10,000 beds). through an **Level 3 -** transition or non-traditional care areas such as operating rooms, recovery etc. could available COVID-19. rooms that be made for Level 2 - could be opened for additional capacity in adjacent medical office or centers, freestanding ERs, supported convalescent by **Level 1** - stand up alternate care sites in remote areas that are operated by local gov and/or supported by hospital for less serious patients or patients in recovery.

Please see the attached PowerPoint for details on the different service areas.

The Governor stated that our capacity should help us avoid the fate that New York is experiencing. We, as a State, have to ensure everyone is doing everything they can to slow the spread. We are asking you to do this through the end of April.

Questions and Answers

Unfortunately, the questions were often inaudible, but the answers have been provided.



The first task we face is ensuring that hospitals have capacity to care for patients. Then we can address the financial support that has been made available. We are reviewing the federal mechanisms to access the funding. There are funds that are made available specifically for hospitals. There is also funding for lost income.

Regarding ventilators and future needs, the Governor stated that studies have shown that Texas should have the capability to provide ventilators as the need arises. He cautioned, however, that we are dealing with unknowns. We have teams that are working to increase the ability to bring in more ventilators. Dr. Hellerstedt stated that we have a lot of ventilators and we can control future demand by following the established path of social isolation. This will alter the course and reduce the need for ventilators, Dr. Zerwas stated that he feels comfortable with the available inventory. We will be in a good place. The Governor stated that we are starting ahead of the curve but ahead of the are sprinting to stav curve.

Regarding concern for medical professionals in rural areas potentially falling ill, and subsequent staffing issues at those hospitals, the Governor stated that we look at PPE, hospital beds, and personnel and staff. Dr. Zerwas stated that the rural areas are a challenge. We have to look at a pipeline of replacement staff and to that end, we are soliciting volunteers. We are testing ways to address this pipeline of professionals and volunteers. The Governor stated that we are assessing the capabilities of the Texas National Guard as well.

Regarding alternatives to hospitalization, we have identified hotels and other structures and we review them for suitability. We do look to other structures and to the military to set up structures and convention centers but first, we look to expansion within the existing medical facility. We are identifying facilities across the state.

Regarding state and federal interaction, as Governors, we have an ongoing dialogue with the CDC and other professionals. The federal government provides direction on a national

Regarding drive-thru testing facilities, Texas may be first in the nation for drive-thru facilities. There are ten different "lanes" in Texas receiving FEMA federal funding. We also lead in the number of tests being provided in those lanes. Eventually, we will see only locally supported lanes as FEMA pulls support back. There are three testing providers: public health authorities; FEMA-provided testing; and the primary provider is through the private health care sector. Because of the increased testing, there will be greater access for primary care physicians. Dr. Hellerstedt stated that testing is very important, but we want to focus on prevention. The Governor stated that



a negative test is for that day and that day only... you could contract the disease right after being tested as negative.

Regarding elections and vote-by-mail, the May primary run-off was moved to July. If at all possible, we want people to vote in-person, which is what the law provides for.

Have we received what we requested from FEMA? We have received 3.8 million FEMA masks, but we have asked for many more. We continue to work with FEMA and the goal is to put product back in the supply chain. Project Airbridge will help move the needle to restore the supply chain.

Regarding hospitalizations, we have 827 today; these numbers come from the public and private sector hospitals. Earlier numbers were only from public health authorities. We are working on ways to capture all the information we can get on COVID-19 hospital beds. Dr. Zerwas stated that in looking at the capacity, we are prepared to deal with an increase.

Regarding measuring antibodies, antibodies are part of the immune system's response to infections. The CDC is working on a <u>serology test</u> for COVID-19. We look at the technical and medical aspects; the big question is—what does it tell us about the individual's immunity to the disease? We must figure out if the immunity is short-lived or longer term.

Health and Human Services

Health and Human Services Commission

HHSC Issues Guidance for FFS Service Coordinators and Case Managers Fee-for-service Medicaid 1915(c) waiver case managers and service coordinators may continue to suspend face-to-face service coordination visits. This is through April 30, 2020 and applies to:

- Community Living Assistance and Support Services
- Texas Home Living
- Deaf-Blind with Multiple Disabilities
- Home and Community-based Services
- General Revenue Service Coordinators



- Community First Choice Service Coordinators
- Pre-admission Screening and Resident Review Habilitation Coordinators

Due to COVID-19, HHSC encourages case managers, service coordinators, and habilitation coordinators to complete visits due through April 30, 2020 by phone, telehealth or telemedicine, if possible. Learn more here.

HHSC Issued Guidance Letter (GL) 20-3003 related to COVID-19 infection control and emergency preparedness in licensed Narcotic Treatment Programs (NTPs), has been posted. This letter provides licensed NTPs with recommendations and guidance to ensure the health and safety of clients and staff during the COVID-19 pandemic. For questions, contact HCQ_PRT@hhsc.state.tx.us.

Department of State Health Services

COVID-19 Case Count. The Texas Department of State Health Services (DSHS) is working closely with the Centers for Disease Control and Prevention (CDC) in responding to the new coronavirus disease 2019 (COVID-19) that is causing an outbreak of respiratory illness worldwide. State case counts, current as of 12:00 PM today, can be found by accessing the DSHS COVID-19 Dashboard.

DSHS Announces Mental Health Support Line. If you or someone you know is feeling overwhelmed by the COVID-19 pandemic, help is available. Please call the toll-free HHSC COVID-19 Mental Health Support Line at 833-986-1919 to speak with a mental health professional for help dealing with stress, anxiety, or depression. Learn more

DSHS Announces EMS Waiver. In response to the Governor's <u>Proclamation – April 2, 2020</u>

- Local medical directors for licensed EMS providers may permit individuals who are qualified, but not formally certified, to provide critical emergency response services for patients treated and transported by the EMS provider (Texas Health and Safety Code Section 773.050(a), 25 Texas Administrative Code Section 157.11(h)).
- First responder organizations may delay submission of renewal applications and certain completion requirements for licensure (25 Texas Administrative Code Section 157.14(f)(1) and (2)).



- EMS licensees may delay submitting recertification applications and delay meeting recertification requirements (Texas Administrative Code Section 157.34(a)(3), 157.34(e)(2)-(3)).
- Out-of-state Advanced Emergency Medical Technicians who are qualified, but currently unable to take the skills test, are able to provide essential EMS services (25 Texas Administrative Code Section 157.33(i)(2)(B)).

COVID-19 Case Reporting Form Released by DSHS. DSHS COVID-19 Combined Case Reporting and Contact Investigation Form

Texas Department of Insurance

TDI extends start of updated coastal building code
The Texas Department of Insurance (TDI) issued an emergency rule, effective
immediately, to move the start date of the new coastal building code from April 1 to
September 1, 2020. The change was made in response to business disruptions caused
by the COVID-19 outbreak.

TDI recently adopted the 2018 *International Building Code* and *International Residential Code* as the standards for insurance through the Texas Windstorm Insurance Association (TWIA). The new codes provide greater windstorm protection and will apply to new construction, repairs, and additions. TDI is pushing back the start date on the new rules because the pandemic is disrupting supply chains and manufacturing operations around the world. That could make it more difficult for builders to get products that comply with the new building codes. Construction started before September 1 can use either the new or old code and be eligible for TWIA coverage. Learn more here.

TDI has published guidance on not falling victim to coronavirus scams. Scams you might see

- Criminals may try to sell you "coronavirus insurance." It's a scam. Remember, if
 it seems too good to be true, it likely is. TDI has tips on how to search for real
 insurance.
- Another scam is selling fake coronavirus treatments or questionable cures. Health officials say none of these products help, and they could make you sick.
- You might get a robocall offering coronavirus test kits. This is an attempt to steal
 your money or personal information. Talk to a doctor if you're sick or think you
 might need a test.
- Be wary of calls or emails warning you about problems with your insurance plan. Someone could be trying to get you to reveal personal information.



Read the full guidance here.

Texas Department of Housing and Community Affairs

The Texas Department of Housing and Community Affairs (TDHCA) wants to make sure that owners of multifamily developments are aware of TDHCA's opinion on the applicability of the recently-passed federal CARES Act to several programs that TDHCA administers. These include, but are not limited to, developments that have utilized 9% or 4% Low Income Housing Tax Credits, 811 PRA, Housing Choice Vouchers, Emergency Solutions Grants, and HOME.

TDHCA views the CARES Act as imposing a 120-day moratorium on tenant eviction filings and charging late fees for properties covered under the Violence Against Women Act (VAWA), particularly that such developments may not:

- 1. Make, or cause to be made, any filing with the court of jurisdiction to initiate a legal action to recover possession of the covered dwelling from the tenant for nonpayment of rent or other fees or charges; or
- 2. Charge fees, penalties, or other charges to the tenant related to such nonpayment of rent.

In addition, developments may not require tenants to vacate sooner than 30 days after providing notice or issue a notice to vacate until after July 10, 2020. If multifamily development owners have questions about the CARES Act, VAWA, or any other federal or state requirements, they are encouraged to contact their legal counsel.

The Texas Department of Housing and Community Affairs (TDHCA) will hold four virtual meetings to discuss the needs of poverty and homeless service providers, and possible uses of the Emergency Solutions Grants with funding through the Coronavirus Aid, Relief, and Economic Security (CARES) Act. Poverty and homeless service providers are encouraged to attend the virtual meeting that best represents your service area of Texas. However, if the time or date of the virtual meeting for your area does not work for your schedule, you may attend any of the four virtual meetings below.

The CARES Act includes funding for ESG, with an allocation of approximately \$33.2 million to TDHCA in the first round of funding released by the US Department of Housing and Urban Development. TDHCA is working to program this funding quickly for use in Texas communities. We want to hear from Texas poverty and homeless service providers regarding the needs in your communities related to serving persons experiencing homelessness or are at-risk of homelessness with the COVID-19 impact, and possible



uses for the ESG CARES Act funds.

April 13, 2020, 10 a.m., Austin local time

- ESG Outreach: CARES Funding for Dallas, Fort Worth/Arlington, and Houston
- Includes Continuum of Care Regions TX-600, TX-601, and TX-700
- https://attendee.gotowebinar.com/register/3437130929005097483

April 13, 2020, 3 p.m., Austin local time

- ESG Outreach: CARES Funding for Amarillo, El Paso and San Antonio
- Includes Continuum of Care Regions TX-611, TX-500 and TX-603
- https://attendee.gotowebinar.com/register/2478757011817070347

April 14, 2020, 9 a.m., Austin local time

- ESG Outreach: CARES Funding for Austin, Bryan, Waco, Wichita Falls
- Includes Continuum of Care Regions TX-503, TX-701, TX-604, and TX-624
- https://attendee.gotowebinar.com/register/4920182998875104267

April 14, 2020, 1 p.m., Austin local time

- ESG Outreach: CARES Funding for Balance of State Continuum of Care
- Includes Continuum of Care Region TX-607 (mainly rural areas)
- https://attendee.gotowebinar.com/register/3655023347304897803

Questions can be sent to Naomi Cantu, Homeless Programs Administrator, at naomi.cantu@tdhca.state.tx.us or 512-475-3975.

Texas Workforce Commission

TWC to Implement Staggered Access to Unemployment Benefit Services Portal to Ensure More Texans Can File UI Claims

Recommendations Will Ease Backlog of Texans Unable to Access Unemployment System

Over half a million Texans have filed unemployment claims in the last 18 days as a result of COVID-19. The Texas Workforce Commission (TWC) will soon outpace the total number of claims received in all of 2019. This unprecedented increase has led to long wait times, overwhelmed call centers and technical issues with the Unemployment Benefit Services portal. TWC staff is working around the clock to expand the capacity to take claims but needs your support. Effective immediately, TWC recommends that Texans stagger their calls and access to the online portal based on applicant's area codes. Effective immediately, TWC asks that Texans use their area code to find their proposed call and access times listed below. See below chart for recommended call and access



Recommended Call and Access Times	
Area Code of Applicant	Suggested Call Time
Area Codes Beginning with 9	Mon-Wed-Fri 8:00 a.mNoon
Area Codes Beginning with 3, 4, 5,6	Mon-Wed-Fri 1:00 p.m 5:00 p.m.
Area codes Beginning with 7, 8	Tues -Thurs-Sat 8:00 a.m Noon
Area codes Beginning with 2	Tues-Thurs-Sat 1:00 p.m5:00 p.m.

Texans will not be penalized for a delay due to call or user volume. Claims for individuals affected by COVID-19 are eligible to be backdated. Staggering claims will provide help to reduce frustrations for many Texans and provide better access to needed services. For more information on COVID-19 and unemployment benefits, visit: https://www.twc.texas.gov/news/covid-19-resources-job-seekers

Learn more here.

April 2, 2020

Texas Insight Podcast Episode 1: Texas Medicaid with Billy Millwee

Welcome to the Texas Insight Podcast. For almost ten years, Texas Insight has provided regular reports on what's happening in the Texas health and human services space. We wanted to experiment with delivering new content through this podcast. We'd love to hear your feedback.

Today's episode is a conversation between Texas Insight Founder Eric Wright and Billy Millwee, Medicaid expert with Millwee & Associates Consulting. Our topics are



1) Texas' Medicaid response to COVID-19 and 2) the recent news about the cancellation by the Texas Health and Human Services Commission of its Medicaid Managed

Care procurement.

In this episode, we tackle the following:

- How state Medicaid programs are responding in general to COVID-19, and what is in the works for Texas,
- Actions taken by the Federal Government to benefit State Medicaid programs,
- Long-term impacts to Medicaid programs as a result of COVID-19,
- The cancellation of STAR+PLUS contracts awarded in November 2019, and
- Changes at HHSC, such as the recent departure of Executive Commissioner Phillips and the announced retirement of the Medicaid Director Stephanie Muth.

Listen Now

Federal Government



The President's Briefing - April 1, 2020

The White House Coronavirus Taskforce held its daily briefing. Participants included: President Trump and Vice President Pence, Attorney General Bill Barr, Secretary of Defense Mark Esper, National Security Advisor Robert O'Brien, General Milley, Chief of Naval Operations Admiral Gilday, Commandant of the Coast Guard Admiral Schultz, acting Secretary of Homeland Security Chad Wolf, Dr. Deborah Birx, and Dr. Anthony



Fauci. Below are selected points of importance, as well as supplementary information from trusted third-party sources. For the purpose of brevity, speakers' statements are often paraphrased. Those wanting to watch the briefing can access it here. Broadcast begins at approximately 1:57:00.

Drug Cartels. Defense Secretary Esper stated that with concerns of drug cartels taking advantage of the pandemic, the Department of Defense has announced an enhanced counter-narcotics operation. Ships, aircrafts, and ground troops will be deployed to the Eastern Pacific Ocean and the Caribbean. He stated that 22 partner countries are lending support.

International. A reporter asked Secretary Esper to comment on the information from the WHO that Iran is vastly underreporting its coronavirus cases and fatalities. He stated that according to on-the-ground estimates, that might be as high as 15.5 thousand deaths; thirty-two commanders in the military in Iran are now confirmed either in dire condition or dead; eight percent of the parliament now down with coronavirus. He asked whether this decreases the credibility of their threats towards the US? Secretary Esper stated that Iran should focus on helping its people recover. In response to a question regarding whether China underreported confirmed cases and deaths related to COVID-19, Ambassador O'Brien stated that they have no way to confirm the data released by China.

The Navy. The Naval ship (the Roosevelt) with confirmed cases is still operational; Admiral Gilday stated that they are making great progress in testing and moving people off of the ship. He stated that across the fleet, sailors are quarantined for 14 days before they get underway. He stated that they've increased the amount of testing equipment, as well as physicians on board their ship at sea.

Public-Private Partnerships. The President stated that he gave Doug McMillon, Walmart, a large order for gowns, PPE, etc. to supply hospitals. He stated that there are companies making ventilators.

VA Hospitals Standing Ready. Veterans Affairs hospitals and facilities are not opened to the public yet, but are prepared to do so if needed.

Stay-At-Home Orders. The President reaffirmed that states should have flexibility on whether to enact stay-at-home orders. Therefore, no national lockdown is recommended.

Hospital Staff Compensation. When asked about hazard pay for hospital workers, the President indicated that some sort of compensation will happen.



Economic Impact Payments. The IRS has issued guidance for receiving economic impact payments. The distribution of economic impact payments will begin in the next three weeks and will be distributed automatically, with no action required for most people. Social Security beneficiaries who are not typically required to file tax returns will not need to file to receive a payment. Instead, payments will be automatically deposited into their bank accounts. **However, some people who typically do not file returns will need to submit a simple tax return to receive the economic impact payments.** In response to a question regarding the process, the President and Vice President stated that they're looking into it.

Economy. The President stated that the oil industry is down 35-40%. He stated that he has meetings scheduled on Friday with industry leaders. (This has a direct impact on Texas revenues.)

Social Distancing Guidance. A reporter asked Dr. Fauci whether, after the curve goes down, we will need to keep certain social distancing measures in place until we have an approved treatment or vaccine. Dr. Fauci stated that once the curve goes down, it will make sense to relax social distancing. However, he stated that he believes there will be a much more robust surveillance system to identify and isolate individuals with COVID-19. He stated that the ultimate solution to a virus that might keep coming back (he expressed a consensus among health leaders that there may be cycling for another season) is with a vaccine, which is still roughly 12-18 months out.

Medical Bills for the Uninsured. In response to a question regarding COVID-19 medical bills for the uninsured, the President stated that it's something they're looking at.

In Other News

Presidential Nominating Conventions. The Democratic National Committee is postponing the party's Presidential convention until August 17. It will still be held in Milwaukee, now a week before the Republican Party's convention in Charlotte, N.C. Learn more here.

The State of Texas





From the Office of the Governor, Greg Abbott

The Governor Suspends Regulations to Increase EMS, First Responder Workforce.

The Governor today suspended regulations to increase the amount of Emergency Medical Services (EMS) workers and first responders in Texas during the state's response to COVID-19. Under the Governor's direction, local medical directors for licensed EMS providers can permit individuals who are qualified, though not formally certified, to provide critical emergency response services for patients treated and transported by the EMS

The Governor has also suspended certain skills testing requirements for EMS personnel in Texas and for out-of-state Advanced Emergency Medical Technicians seeking reciprocity in Texas so that these individuals who are qualified, but currently unable to take the skills test, are able to provide essential EMS services. Additionally, Governor Abbott has also suspended regulations to allow first responder organizations to delay submission on their renewal application and completion requirements for licensure. Read the full release here.

Health and Human Services

HHSC: Medicaid and CHIP Stakeholder Conference Call and Webinar

(Unfortunately, technical issues rendered some comments inaudible.)

States have several avenues to request flexibility during a disaster to ensure client access and to ease administrative burdens for providers, such as:

- 1135 waiver
- 1115 waiver
- 1915(c) waiver Appendix K
- State plan amendment



Texas submitted the initial Medicaid 1135 waiver request on March 25, 2020 and received partial federal approval on March 30, 2020. Because states have different authority, CMS has several ways to request flexibility and the 1135 waiver request is a disaster related waiver request. Flexibility is being sought across all waivers.

HHSC continues to discuss the following flexibilities with CMS:

- Extend to 60 days the amount of time that MCOs have to resolve standard appeals statewide.
- Waive the requirements that a member appealing to an MCO must have their oral request for an appeal be confirmed in writing.
- Authorize the state to extend all deadlines that require a person to request continuation of benefits from 10 days to 30 days.
- Waive any requirements of the state plan that require face-to-face contacts to allow the services to be performed by telehealth, telemedicine, or telephonic contact as consistent with state law and subject to HHSC requirements.
- Extend current medical necessity, service authorizations, and level of care authorizations for state plan fee-for-service and managed care services and programs, including waiver programs.
- Extend or allow the state to waive any requirements that require the signature of physician or DME provider or Medicaid recipient.
- Allow Texas Medicaid to reimburse pharmacies for the administration of flu vaccines, long acting antipsychotics, and drugs used to treat substance use disorder or opioid dependency.
- Waive timeframes associated with public notice requirements for an 1115 waiver.

CMS Approvals (so far) included: Long Term Services and Supports. Suspending pre-admission screening and annual resident review (PASRR) Level I and Level II Assessments for 30 days and extending minimum data set authorizations for nursing facility and skilled nursing facility (SNF) residents.

Fair Hearings. Extend the amount of time an enrollee has to request a state fair hearing by 30 days.

Other Approvals. Waive the timeframes associated with the public notice requirements for state plan amendments and modify deadlines for OASIS and Minimum Data Set (MDS) assessments and transmission.

Medicaid Authorizations:

- Extend prior authorizations (PA) for services expiring.
- How HHSC will implement:



- Managed care and fee-for-service prior authorizations requiring recertification and expiring from March 13 – April 30, 2020 will be extended for 90 days.
- Extended authorizations must contain the same proportional amount and frequency as was originally authorized.
- Does not apply to current authorizations for one-time services or pharmacy PAs.
- o A provider may submit an amended request to an existing, extended PA.
- Before reimbursement is requested, providers must have obtained the appropriate required documentation.

Provider Revalidation/Enrollment:

- Postpone deadlines for provider revalidation for providers who are located in the state or otherwise directly impacted by the emergency.
- Waive certain requirements to expedite providers' ability to enroll in Texas Medicaid:
 - o Application fee
 - o Fingerprint-based criminal background checks
 - Site visits
 - In-state license requirement as long as provider is licensed in another state
 - Medicare enrollment requirements

COVID-19 Provider Applications

How HHSC will implement:

- Temporary expedited enrollment is valid during dates of the current federallyapproved public health emergency.
 - All provider types that currently enroll in Texas Medicaid and CHIP using TMHP's systems will enroll through the <u>expedited process</u>.
 - Pharmacies enrolling through the vendor drug program may use the temporary pharmacy agreement.
- At the end of the COVID-19 public health emergency:
 - o Temporarily enrolled providers will be identified and contacted.
 - Providers who do not wish to remain enrolled in Texas Medicaid or CHIP will be disenrolled.
 - Providers who wish to remain enrolled must complete all required state and federal screening requirements.

COVID-19 Medical Policy Updates

Rural Health Clinics (RHCs) as distant site providers:

- RHCs can be reimbursed as telemedicine and telehealth distant site providers through April 30, 2020.
- RHCs must bill using procedure code T1015 with the modifier 95 to indicate use of the telehealth or telemedicine modality.



Guidance on THSteps Check-ups:

- Medical and dental providers are encouraged to adjust their clinical operations based on their professional medical judgment and guidance from their professional medical and dental societies.
- Adjustments may include:
 - o Temporarily postponing certain check-ups.
 - o Limiting check-ups to certain times of the day.
 - o Dedicating specific rooms for sick visits and well visits.
 - Prioritizing visits for younger children, especially those due for routine vaccines.
- Providers are encouraged to continue providing medical exams for children entering Department of Family and Protective Services (DFPS) conservatorship ("3-day exam") in-person.

DSRIP Flexibility Requests. HHSC requested and received approval from CMS for flexibilities in April reporting and related payments. Information has been shared with the regional anchors. HHSC is also requesting flexibilities around calendar year 2020 measurement.

Questions can be directed to the DSRIP mailbox: TXHealthcareTransformation@hhsc.state.tx.us .

Medicaid coverage. Most coverage will be continued through the COVID-19 emergency period; individuals will automatically remain covered. The only exceptions are voluntary withdraw, or if the person moves or passes away. CHIP, however, is not included in this provision. Public notification has been posted, but recipients will not receive a notice that Medicaid will be sustained. Notification will come when it is time to renew. A policy bulletin related to maintaining service requirements will be made available. HHSC IT has been engaged in addressing the automatic edits that must be suspended during this time period. Any renewal that was due in March or April has been pushed to another date. Again, no action is needed by recipients. The only reason that individuals may see a change is if the new Medicaid group for which they are eligible has better coverage or benefits. After the crisis, people will be notified of changes that will occur to their coverage. There will be sufficient time for people to understand and act on those notices.

Department of State Health Services - Texas Case Count

The Texas Department of State Health Services (DSHS) is working closely with the Centers for Disease Control and Prevention (CDC) in responding to the new coronavirus



disease 2019 (COVID-19) that is causing an outbreak of respiratory illness worldwide. State case counts, current as of 10:00 AM this morning, can be found by *accessing this spreadsheet*.

Notices from the Health and Human Services Commission

To Help Hospitals, HHSC Makes Adjustments to UHRIP and QIPP Programs. To assist stakeholders during the coronavirus (COVID-19) emergency, the Health and Human Service Commission (HHSC) is changing the schedule for intergovernmental transfers (IGT) for the Uniform Hospital Rate Increase Program (UHRIP) and the Quality Improvement Payment Program (QIPP). HHSC will allow units of government to make their UHRIP and QIPP IGT commitments in two quarterly payments. For both programs, the first IGT is due to HHSC by June 3, 2020 and the second is due August 10.

Typically, units of government must transfer half of the required funding for the upcoming program year in the previous May. (e.g. For fiscal year 2021, transfers are due in May 2020). HHSC is making the change to both UHRIP and QIPP to ease cash flow concerns for units of government that have had unexpected expenses due to the coronavirus (COVID-19) emergency. The IGT commitments for the second half of fiscal year 2021 will follow a normal timeline and be due in November.

UHRIP's purpose is to increase access and quality of services provided by hospitals who serve persons with Medicaid. As designed, eligible hospitals receive a percent increase paid on claims submitted to a Medicaid managed care organization (MCO). It is a statewide program that provides for increased Medicaid payments to hospitals for inpatient and outpatient services provided to persons with Medicaid. Texas Medicaid MCOs receive additional funding through their monthly capitation rate from HHSC and are directed to increase payment rates for certain hospitals. Local units of government provide funding for the nonfederal share of Medicaid the funding.

QIPP is a statewide program that provides incentive payments to qualifying nursing facilities. STAR+PLUS MCOs are directed to make payments to qualifying nursing facilities once the facilities demonstrate meeting the required quality improvement goals.

LTC Providers Required to Report COVID-19 to HHSC Effective immediately, a provider must report every presumptive and confirmed case of



COVID-19 in staff and individuals receiving services from the provider as a self-reported incident. A presumptive or confirmed case is considered a critical incident. Providers (other than HCS and TxHmL providers) must notify HHSC through TULIP or by calling Complaint and Incident Intake (CII) at 1-800-458-9858. HCS and TxHmL providers must notify HHSC at: waiversurvey.certification@hhsc.state.tx.us

Learn more here.

Texas Department of Insurance

Texas Department of Insurance (TDI) emergency rule makes it easier to get medication refills

The Texas Department of Insurance (TDI) today announced an <u>emergency rule</u> to make it easier for Texans with TDI-regulated health insurance to get early refills and to get prescriptions at more locations, including by home delivery.

The temporary emergency rule requires health plans regulated by TDI to:

- Pay for a 90-day refill of covered medications regardless of when the prescription
 was last refilled, unless specifically prohibited by law as in the case of controlled
 substances.
- Allow prescriptions to be filled at out-of-network pharmacies at no additional cost to the consumer if the drug isn't available quickly through mail order or at an innetwork pharmacy within 30 miles.
- Allow for substitutions if the plan's preferred drug isn't available due to shortages or distribution issues.
- Waive any requirement for a consumer's signature unless specifically required by law.

The emergency rule doesn't apply to self-insured employer plans, Medicare, workers' compensation, or the state's employee or teacher retirement plans.

TDI-regulated plans cover only about 15% of the Texas market, including plans purchased through Healthcare.gov. The insurance cards for state-regulated plans have either "DOI" (for department of insurance) or "TDI" (Texas Department of Insurance) printed on them.

Learn more here.



From the Office of the Comptroller

Franchise Tax Deadline. In response to the COVID-19 pandemic and to provide Texas businesses relief, Texas Comptroller announced today that his agency is automatically extending the due date for 2020 franchise tax reports to July 15 to be consistent with the Internal Revenue Service (IRS). The due date extension applies to all franchise taxpayers. It is automatic, and taxpayers do not need to file any additional forms.

The <u>Texas franchise tax</u> is a tax imposed on each taxable entity formed or organized in Texas or doing business in Texas. Unlike the sales and use tax, the franchise tax is not collected from the consumers of those taxable entities.

Franchise taxpayers who need an extension beyond the July 15 date have these options:

- Non-electronic funds transfer (non-EFT) taxpayers who cannot file by July 15 may file an extension request on or before July 15 and must pay 90 percent of the tax due for the current year, or 100 percent of the tax reported as due for the prior year with the extension request. Non-EFT taxpayers who request an extension have until Jan. 15 to file their report and pay the remainder of the tax due.
- On or before July 15, taxpayers who are mandatory EFT payers may request an extension of time to file to Aug. 15 and must pay 90 percent of the tax due for the current year or 100 percent of the tax reported as due for the prior year with the extension request. On or before Aug. 15, EFT taxpayers may request a second extension of time to file their report and must pay the remainder of any tax due with their extension request. The Aug. 15 extension request extends the report due date to Jan. 15. Any payments made after Aug. 15 will be subject to penalty and interest.

Learn more here.

April 1, 2020





The President's Press Briefing - March 31, 2020

The White House Coronavirus Taskforce held its daily briefing. Participants included: President Trump and Vice President Pence, Dr. Deborah Birx, and Dr. Anthony Fauci. Below are selected points of importance, as well as supplementary information from trusted third-party sources. For the purpose of brevity, speakers' statements are often paraphrased. Those wanting to watch the briefing can access it here [begins at 1:42:45].

International. According to the WHO's <u>situation report for April 1</u>, 2020, three new countries/territories/areas reported cases of COVID-19 in the past 24 hours: Botswana, Burundi, and Sierra Leone. Additionally, the WHO has released a scientific brief on the off-label use of medicines for COVID-19. A number of medicines have been suggested as potential investigational therapies, many of which are now being or will soon be studied in clinical trials, including the SOLIDARITY trial co-sponsored by WHO and participating countries. More information <u>can</u> be found here.

Americans Returning Home. According to the U.S. State Department, **31,230** Americans have been repatriated from **72** countries since January 29, 2020. Find more information on repatriation statistics here.

Small Business Relief. The Treasury and Small Business Administration (SBA) released new information on the Paycheck Protection Program (discussed below in further detail).

- Almost \$350 billion in loans to meet payroll and other expenses for up to two months
- Loans are set to be forgiven if employees are kept on the payroll.



• Applications will begin being accepted starting Friday, April 3.

Resources and Supplies. The President stated that medical equipment and supplies are being sent to all 50 states. He stated that almost 10,000 ventilators are being held in stockpile in preparation for the surge.

- He stated that FEMA is supplying ambulances and EMTs to New York.
- He stated that most resources are being sent directly from the manufacturer to hospitals or states, rather than to warehouses.

The President praised the internet and phone providers, as they are working to keep lines open.

Stay-At-Home Orders. When asked about a national stay-at-Home order, the Vice President stated that at the President's direction, the Federal Government will defer to state and local health authorities on any measures that they deem appropriate.

Infrastructure Spending Related to COVID-19. The President indicated that he wanted to put \$2 trillion into roads, highways, bridges, and tunnels for upgrades and construction.

Community Mitigation and Projections. Dr. Birx, citing five or six international and domestic modelers from Harvard, from Columbia, from Northeastern, from Imperial, stated that assuming mitigation efforts in the community, projected fatality rates decrease from 1.5-2.2 million to 100,000-200,000. She stated that there was a modeler out of the University of Washington who utilized global experience. This model provides the most detail regarding the time course possible, but assumes full mitigation. According to models done by Chris Murray, IHME, it will be 15 days until peak resource use and deaths related to COVID-19. For a summary of key findings, please follow this link. It should be noted that these numbers are adjusted daily.

Testing. The Vice President stated that more than 1.1 million tests have been completed around the country. Dr. Birx stated that currently, there are about 500,000 Abbott tests that have been distributed, but are not being utilized. She stated that they need to raise awareness of this testing method because providers may be relying on and requesting one specific form or another and unaware of other options.

Treatments. The President stated that it is too early to say anything definitive about clinical trials for hydroxychloroquine/chloroquine, but that they have not heard anything catastrophic in connection with the drugs. Dr. Fauci stated that there are a number of vaccine candidates. The drugs under review — for compassionate use, clinical trials — are generally drugs that already exist for other things. He stated that there are numerous drugs and interventions going into clinical trials that are not approved for anything yet. He stated that they are examining a number of things for effectiveness,



such as immune serum, convalescent plasma, or hyperimmune globulin, or monoclonal antibodies.

Social Distancing Recommendations. A reporter cited an MIT professor who suggests that coronavirus can be carried on droplets a distance of 27 feet, and asked for Dr. Fauci's response. Dr. Fauci replied that that is terribly misleading. For the coronavirus to travel that distance, it would require a "very robust vigorous 'Achoo' sneeze," and that's an uncommon scenario.

Face Coverings for the General Population. A federal recommendation to wear masks is still being reviewed. The President indicated that it is a good idea.

U.S. Small Business Administration

With \$349 Billion in Emergency Small Business Capital Cleared, SBA and Treasury Begin Unprecedented Public-Private Mobilization Effort to Distribute Funds

Following President Trump's signing of the historic Coronavirus Aid, Relief, and Economic Administrator Jovita Carranza and Security (CARES) Act, SBA Secretary Steven T. Mnuchin today announced that the SBA and Treasury Department have initiated a robust mobilization effort of banks and other lending institutions to provide small businesses with the capital they need.

The CARES Act establishes a new \$349 billion Paycheck Protection Program. The Program will provide much-needed relief to millions of small businesses so they can sustain their businesses and keep their workers employed.

The new loan program will help small businesses with their payroll and other business operating expenses. It will provide critical capital to businesses without collateral requirements, personal guarantees, or SBA fees – all with a 100% guarantee from SBA. All loan payments will be deferred for six months. Most importantly, the SBA will forgive the portion of the loan proceeds that are used to cover the first eight weeks of payroll costs, rent, utilities, and mortgage interest.

The Paycheck Protection Program is specifically designed to help small businesses keep their workforce employed. Visit <u>SBA.gov/Coronavirus</u> for more information on the Paycheck Protection Program.



• The new loan program will be available retroactive from Feb. 15, 2020, so employers can rehire their recently laid-off employees through June 30, 2020.

Loan Terms & Conditions

- Eligible businesses: All small businesses, including non-profits, Veterans organizations, Tribal concerns, sole proprietorships, self-employed individuals, and independent contractors, with 500 or fewer employees, or no greater than the number of employees set by the SBA as the size standard for certain industries
- Maximum loan amount up to \$10 million
- Loan forgiveness if proceeds used for payroll costs and other designated business operating expenses in the 8 weeks following the date of loan origination (due to likely high subscription, it is anticipated that not more than 25% of the forgiven amount may be for non-payroll costs)
- All loans under this program will have the following identical features:
 - Interest rate of 0.5%
 - Maturity of 2 years
 - o First payment deferred for six months
 - o 100% guarantee by SBA
 - No collateral
 - No personal guarantees
 - No borrower or lender fees payable to SBA

SBA's announcement comes on the heels of a series of steps taken by the Agency since the President's Emergency Declaration to expeditiously provide capital to financially distressed businesses affected by the Coronavirus (COVID-19) pandemic.

Read the full release here.

U.S. Department of Labor Announces New Paid Sick Leave and Expanded Family and Medical Leave Implementation

Families First Coronavirus Response Act Helps Americans Overcome COVID-19 Workplace Challenges

The U.S. Department of Labor today announced new action regarding how American workers and employers will benefit from the protections and relief offered by the Emergency Paid Sick Leave Act and Emergency Family and Medical Leave Expansion Act, both part of the Families First Coronavirus Response Act (FFCRA). The department's Wage and Hour Division (WHD) posted a temporary rule issuing regulations pursuant to this new law, effective today, April 1, 2020.



FFCRA helps the United States combat the workplace effects of COVID-19 by reimbursing American private employers that have fewer than 500 employees with tax credits for the cost of providing employees with paid leave for specified reasons related to COVID-19. The law enables employers to keep their workers on their payrolls, while at the same time ensuring that workers are not forced to choose between their paychecks and the public health measures needed to combat the virus. WHD administers the paid leave portions

of the FFCRA.

WHD will post a recorded webinar on Friday, April 3, 2020, to provide interested parties a more in-depth description and help them learn more about the FFCRA. To view the webinar visit www.dol.gov/agencies/whd/pandemic.

Learn more here.



From the Office of the Governor

Governor Abbott Releases Video Message to Texans As Latest Executive Order Goes Into Effect

Governor Greg Abbott today released a video with a statewide message to all Texans as his Executive Order goes into effect requiring all Texans to stay home unless they are participating in an essential service or activity. A list of essential services and activities as defined under the Executive Order can be found here. The Executive Order goes into effect at 12:01 AM, April 2nd.

Transcript: Hi, this is Governor Greg Abbott. With COVID-19 spreading across Texas I issued this Executive Order that requires all Texans to stay at home except to provide essential services or do essential things like go to the grocery store. Now I know this is a great sacrifice, and we must respond to this challenge with strength and with resolve. By following social distancing practices, we will slow the spread of COVID-19. We will



save lives. And we will make it through this challenge together. Thank you, and God bless you all. Watch the video here.

Governor Abbott, TDHCA Take Initial Action to Secure Financial Housing Assistance

Governor Greg Abbott and the Texas Department of Housing and Community Affairs (TDHCA) have taken initial action to provide tenant-based rental assistance for Texans experiencing financial hardship due to COVID-19. The Governor has waived statutes relating to the U.S. Department of Housing and Urban Development's (HUD) HOME Investments Partnership program which would allow Texas greater flexibility to use program funds to help certain Texans pay their rent. In addition, TDHCA has sent a letter to HUD requesting federal waivers to allow greater flexibility to Texas to reprogram these funds for that purpose. If these waivers are granted, Texas will reprogram these funds to provide financial housing assistance to certain Texans enduring economic hardships related to COVID-19. Read the full release here.

Governor Abbott Announces Federal Stimulus Package To Help Texans Affected By COVID-19

Governor Greg Abbott today issued a statement regarding the recently passed \$2 trillion federal stimulus package intended to relieve the economic impact of the COVID-19 pandemic, with a special focus on unemployed workers and the state's hardest-hit businesses.

Workers are the main beneficiaries of the stimulus dollars, whether their situation consists of reduced hours, furlough, or termination related to COVID-19. Self-employed Texans whose businesses have failed under the stress of the global pandemic may also be eligible as well.

A newly created Pandemic Emergency Unemployment Compensation (PEUC) fund is the bill's primary vehicle, empowering states to extend federally-funded unemployment benefits by an additional 13 weeks (past the usual 26 weeks). The fund also boost weekly benefits for those laid off, terminated or furloughed due to COVID-19 by \$600 per week.

The measures also reduces paperwork and speeds the claims process by empowering employers to file one mass claim on behalf of all their employees laid off because of COVID-19. It also eliminates any chargeback to Texas employers for claims filed due to COVID-19.

Much like disaster unemployment assistance seen in past weather-related disasters, Pandemic Unemployment Assistance (PUA) may be available for displaced workers not normally eligible for regular or extended benefits. Workers whose hours have been



reduced due to the COVID-19 slowdown may qualify for Work Share, a federal Short-Term Compensation program.

Employees whose work has been impacted by COVID-19, whether by a reduction in hours or a loss of their job, are encouraged apply for unemployment benefits online or call 1-800-939-6631. Employers can also utilize <u>online</u> filing for mass claims they file on behalf of employee groups laid off due to COVID-19. Read the <u>full release here</u>.

Governor Abbott Announces \$14.1 Million In Grants to Texas Military Communities

Governor Greg Abbott today announced a new round of grants totaling \$14.1 million from the Texas Military Preparedness Commission's (TMPC) Defense Economic Adjustment Assistance Grant (DEAAG) program awarded to various military communities across the state. This program assists defense communities that may be positively or negatively impacted by a future Base Realignment and Closure (BRAC) round. The grant money will be invested in infrastructure projects and other initiatives to increase the military value of military installations in Texas and protect jobs. **The following entities will receive FY2020-2021 DEAAG disbursements:**

- **Abilene** \$616,389; Security Control Center expansion at Dyess Air Force Base brings additional capacity to the security center
- Alamo Area Council of Governments \$5,000,000; Project reinforces and hardens power distribution across San Antonio and Joint Base San Antonio
- **Corpus Christi** \$919,500; Flight line security and safety enhancements at Corpus Christi Army Depot
- **El Paso** \$2,050,000; Expansion of the Kay Bailey Hutchison Desalination Plant, serving El Paso and Fort Bliss
- **Texarkana** \$516,670; Robotic Vehicle Program preparing Red River Army Depot for the Army's new robotics mission
- **Tom Green County** \$5,000,000; Project Resiliency funds power infrastructure, human resiliency and communications infrastructure, benefiting San Angelo and Goodfellow Air Force Base

The TMPC is part of the Governor's Office and advises the Governor and the Legislature on defense and military issues and ways to strengthen the position of Texas military installations in preparation for a potential BRAC and other defense-related issues. The commission is composed of 13 members serving six-year staggered terms, typically representing an installation in their community. Read the <u>full release here</u>.

From the Office of the Attorney General, Ken Paxton



Attorney General and Governor Issue a Joint Statement on Houses of Worship as Essential Services. Governor Greg Abbott and Attorney General Ken Paxton today issued joint guidance regarding the effect of Executive Order GA 14 on religious services conducted congregations and houses of Houses of worship provide "essential services." On March 31, 2020, Governor Abbott issued Executive Order GA 14, which defines essential services to include "religious services conducted in churches, congregations, and houses of worship." Institutions providing these essential services can provide them under certain conditions described in Executive Order GA 14 and local orders by counties or municipalities that are consistent with GA 14. To the extent there is conflict between the Governor's Executive Order GA 14 and local orders, GA 14 controls. Houses of worship must, whenever possible, conduct their activities from home or through remote audio or video services. Houses of worship often gather as large groups of people in one building during a religious service or activity. But during this public health crisis, in accordance with quidance from the White House, Centers for Disease Control and Prevention ("CDC"), and Texas Department of State Health Services ("Texas DSHS"), providers of essential services must follow certain mitigation strategies to slow the spread of the virus. Thus, under the Governor's Executive Order GA 14, houses of worship should conduct remote audio, video, or teleconference activities whenever possible... Read the full release here.

Texas Department of Insurance

Guidance on COVID-19 and the WorkplaceThis is a rapidly evolving issue that may require adjustments to reduce the impact on businesses, workers, and the public.

At many worksites, employees' exposure risks are similar to the risks to the general public. Social distancing, proper handwashing, the use of physical barriers to control virus spread, and other guidelines from the CDC help to prevent worker exposure to coronavirus. However, employees who interact with potentially infected people, such as those working in health care, laboratories, or airline operations, have higher exposure risks. Read the full press release for the required OSHA standards to help protect these workers

COVID-19.

The TDI has released the additional guidance for industry

April 1: Coverage for COVID-19 testing and network adequacy



March 31: Alternative health plan coverage for COVID-19 testing

March 30: TDI expedites review of COVID-19 filings

March 27: Claim-submission deadlines

March 27: Managed Care Quality Assurance filing requirements

March 27: Electronic signatures for escrow checks and directly issued policies

March 27: Suspension of certain provisions of the Labor Code and DWC rules

See more guidance documents here.

Additionally, TDI has produced a <u>video</u> discussing ways to cope with mental health issues during the COVID-19 crisis, and services provided by different health plans.

Health and Human Services

Department of State Health Services - Texas Case Count and Testing Guidance

Case Count

The Texas Department of State Health Services (DSHS) is working closely with the Centers for Disease Control and Prevention (CDC) in responding to the new coronavirus disease 2019 (COVID-19) that is causing an outbreak of respiratory illness worldwide. State case counts, current as of 10:00 AM this morning, can be found by *accessing this spreadsheet*.

Guidance Regarding Testing and Submission of Specimens for COVID-19 Testing to DSHS Austin Laboratory.

The recommended specimen type is still a Nasopharyngeal (NP) swab (Dacron-tipped with a plastic or aluminum shaft) in viral transport media (VTM). If VTM is unavailable Universal Transport Media (UTM), Amies, or 0.85% Saline may be substituted. Nasal swabs and nasal mid-turbinate (NMT) swabs are now acceptable. Oropharyngeal (OP) swabs are still an acceptable specimen type. The DSHS Interim COVID-19 Case Report Form (found here) *must* be included with each sample submission. Learn more here.

Health and Human Services Commission



Webinar Notice: Nursing facility providers from across the state are invited to a COVID-19 webinar in Q&A format. Panelists are from HHSC Long-term Care Regulatory and DSHS. The webinar is limited to the first 1000 registrants.

- April 3, 2020
- 10:30 a.m. to noon
- Register here for the COVID-19 Q&A

New Guidance: <u>GL 20-3001</u> related to infection control and emergency preparedness in chemical dependency treatment facilities has been posted. This letter provides licensed CDTFs with recommendations and guidance to ensure health and safety of clients and staff during the COVID-19 pandemic. For questions, please contact <u>HCO PRT@hhsc.state.tx.us</u>.

March 31, 2020



The President's Briefing - March 30, 2020

The White House Coronavirus Taskforce held its daily briefing. Participants included: President Trump and Vice President Pence, Dr. Deborah Birx, Dr. Anthony Fauci, Darius Adamczyk of Honeywell, Debra Waller of Jockey International, Mike Lindell of MyPillow, David Taylor of Procter & Gamble, and Greg Hayes of United Technologies Corporation. Below are selected points of importance, as well as supplementary information from trusted third-party sources. For the purpose of brevity, speakers' statements are often paraphrased. Those wanting to watch the briefing can access it here [begins at 1:45:40].

International. According to the WHO's situation report for March 31, 2020, no new



countries/territories/areas reported cases of COVID-19 in the past 24 hours.

Social Distancing Guidance. As with the 30-day guidance, travel restrictions will remain in place. A national stay-at-home order is not being contemplated at this time largely because stay-at-home orders are up to Governors and localities, but Americans were encouraged to stay at home when they can. More specifics related to the extension of current guidelines will be made available soon.

Personal Protective Equipment (PPE).

- The President stated that as demand is met in the US, ventilators and other supplies will be distributed to Italy, France, and Spain.
- Thousands of mask sanitizers are going to key areas. Each sanitizer can sterilize thousands of masks per day; masks can be sterilized up to 20 times.

Beds and Ventilators. This week, hospitals are due to report the number of total beds, ICU beds, and ventilators used daily.

Testing. HHS Secretary Azar stated that there are now 20 different emergency testing options and that number is growing. A Point-of-Care test from Abbott has been developed that generates a result in as little as five minutes. The time it took for development of this test was remarkably short. Additionally, the FDA is approving new options to existing testing, such as self-swabbing.

Treatment, Regulation. Novartis (Sandoz), Bayer, and Teva are set to donate tens of millions of doses of chloroquine and hydroxychloroquine. Clinical trials to determine the effectiveness of the drugs in combating COVID-19 are underway. In order to expand treatment options, CMS is waiving regulatory requirements in the following ways:

- "Hospitals Without Walls" to expand treatment sites to colleges, hotels, etc.
- To facilitate testing, labs will go out to homes and long-term care facilities to collect test samples as some are too sick to leave their home.
- Expanding the workforce by allowing healthcare professionals to work at the top of their license.
- Further expanding telehealth to allow for phone calls and utilize telehealth in emergency rooms.
- Advanced payments for providers with cashflow issues, since non-essential procedures have stopped.

See CMS' Press Release: Sweeping Regulatory Changes to Help U.S. Healthcare System Address COVID-19 Patient Surge here.

COVID-19 as a seasonal virus. Dr. Fauci stated that he anticipates that given the degree of transmissibility, this disease will be cyclical. When asked if we are prepared



to face this again in the future, Dr. Fauci replied that if it returns, it will be a "totally different ballgame." Several key things will be different:

- The ability to test, identify, and isolate (surveillance) will be better.
- We will have therapeutic interventions.
- We currently have a vaccine that is on-track as well as multiple candidates.



Governor's Press Conference - March 31, 2020

The Governor praised Texans' efforts.

More tests have been provided, 42,922 individuals have been tested and of those, 3,266 came back positive. Currently, 122 counties have at least one reported case. Only 2.4% of hospital beds available for COVID-19 are being used. There have been 41 deaths. Less than 10% of those who were tested test positive, and just 11% of those who test positive have required hospitalization.

When you look around the community one thing is clear: social distancing is working. Now is not the time to let up on the distancing efforts— we have to redouble our efforts. The President extended the current guidelines until April 30th. Based on this extension, as well as the advice of other health professionals, the new Executive Order (EO GA14) is modified to comply with the revised guidance. The protocols direct all Texans to minimize non-essential gatherings and in-person contact with people who are not in the same household. The Governor's Executive Order renews and amends his previous order enforcing federal social distancing guidelines for COVID-19, including closing schools and instructing Texans to avoid eating or drinking at bars and restaurants. The protocols allow exceptions for essential activities and services based on the Department of Homeland Security's guidelines on the Essential Critical Infrastructure Workforce. Examples of these essential services include healthcare, grocery stores, banking and financial services, utilities, child care for essential service employees, and government services. This Order follows the decision by President Trump and the Centers for Disease



Control and Prevention (CDC) to enhance social distancing guidelines and extend the deadline for these guidelines to April 30th.

All critical infrastructure will remain operational. Travel is still allowed, but must adhere to social distancing guidelines. School will remain closed until Monday May 4_{th} , unless developments related to the virus require the timeframe to be extended. He stated that by adhering to the previous Executive Orders, Texans have slowed the spread of the virus.

Additional Comments

Lt. Governor Dan Patrick stated that Texas' per capita death rate is one of the lowest in the country.

Speaker Bonnen quoted Churchill—"It is not enough that we do our best; sometimes we must do what is required." People must stay home if what they do is nonessential. The process must continue for 30 more days. The better we do this together, the sooner we will be out of this together.

Dr. Hellerstedt stated that the EO is based on sound public health principles. We see that people are responding.

Mr. Kidd stated that the priority is ensuring that health care workers and first responders have what they need, and that the infrastructure stays up and running

Texas Education Agency Commissioner Mike Morath stated that there is a new reality in education. Educators are working with love and diligence to support the parents and students.

Every Texan is important to our state and the Governor asked citizens to follow the rules and to stay healthy.

Questions/Topics and Answers

(Paraphrased for brevity. Not all questions were audible.)

In response to a question regarding businesses, essential services, shelter in place— When we talk about "shelter in place," it means that wherever you are, you



should take shelter there. The term does not accurately capture what we're describing; the EO also does not contain a "stay at home" strategy, in the strictest sense. This is a standard based on essential services as defined above. Those who want to access those services have the ability to access them, and personal health and physical fitness are important. The point is to abstain from group activities and to follow social distancing guidelines.

How do you enforce this order? Any law enforcement officer can enforce the elements of the EO with fines or jail time up to 180 days. Dr. Hellerstedt has also ordered that violations can result in a quarantine.

In response to a question regarding supply chain issues— Chief Kidd has increased the supply of PPE. It is no secret the supply chain has taken a hit. There is a rationing system of one mask per person per shift. We are working to find the right PPE for staff. We want to distribute resources according to the greatest need. The Governor stated that additional supplies are coming from the Federal Government.

In response to a question regarding essential services interacting/conflicting with local ordinances—The EO has specific paragraphs addressing local ordinances or rules where the EO overrides local ordinances. Local jurisdictions can establish their own rules if the standards are not included in the EO.

This executive order shall supersede any conflicting order issued by local officials in response to the COVD-19 disaster, but only to the extent that such a local order restricts essential services allowed by this executive order or allows gatherings prohibited by this executive order. I hereby suspend Sections 418.1015(b) and 418.108 of the Texas Government Code, Chapter 81, Subchapter E of the Texas Health and Safety Code, and any other relevant statutes, to the extent necessary to ensure that local officials do not impose restrictions inconsistent with this executive order, provided that local officials may enforce this executive order as well as local restrictions that are consistent with this executive order.

In response to a question regarding the CDC considering face coverings— The Governor stated that any order or revision thereof offered by CDC will be considered by Texas. They stay connected to the CDC standards, so any revisions or additions to CDC standards

will be reviewed.

In response to a question— We want to achieve the highest level of collaboration. We have been required to impose information-gathering standards to provide information to the CDC. It may be necessary for local governments to access critical information; to the extent that it is available, we should pursue that.



In response to a question regarding closures of schools and restaurants— The extension of prohibitions is also for restaurants and bars. Additional business are listed for clarification.

In response to a question regarding State Supported Living Centers (SSLCs) and other facilities serving vulnerable Texans— We also list the importance of SSLCs or Senior living facilities. These are a top priority because they house vulnerable populations. We will increase surveillance of these facilities and there is an increase in testing in these facilities. We want to protect all lives.

In response to a question regarding the Texas Workforce Commission being overwhelmed with calls—We are adding people by the hundreds to respond to the unemployment claims. The Governor stressed that the funding is available. There is a need for speed, and the Governor understands this.

In response to a question regarding a potential Statewide Stay at Home order— Any decision in that direction will be based on the advice of health and emergency professionals.

From the Office of the Governor, Greg Abbott

Governor Abbott issued a proclamation regarding his prior Executive Order mandating a self-quarantine for individuals arriving from the New York Tri-State Area and New Orleans, Louisiana. The Executive Order now includes air travelers arriving from the following states and cities:

- California
- Louisiana
- Washington
- Atlanta, Georgia
- · Chicago, Illinois
- Detroit, Michigan
- Miami, Florida

Governor Abbott Announces Comfort Food Care Packages for Texas Youth and Families

Governor Greg Abbott today announced the Comfort Food Care Package (CFCP) program to provide meals for at-risk youth and families in communities across Texas as the state responds to COVID-19. As part of the program, participating restaurants offer CFCPs for



patrons to purchase on behalf of families and youth in need. Each care package contains enough food to feed a family of 5 to 6 and will be delivered to recipients' homes. The program is a partnership between the Governor's Public Safety Office, the Texas network of Family and Youth Success Programs (formerly called Services to At-Risk Youth), Favor Delivery, and the Texas Restaurant Association. Read the <u>full release here</u>.

Department of State Health Services - Texas Case Count and Testing Updates

The Texas Department of State Health Services (DSHS) is working closely with the Centers for Disease Control and Prevention (CDC) in responding to the new coronavirus disease 2019 (COVID-19) that is causing an outbreak of respiratory illness worldwide. State case counts, current as of 10:00 AM this morning, can be found by accessing this spreadsheet.

Drive-Thru Testing Locations

People can get tested for COVID-19 at drive-thru locations in certain parts of Texas. Locations may use different screening criteria to determine if you are able get tested. Please contact the drive-thru provider to see what their testing criteria are.

The testing sites listed below are not run or overseen by the Texas Department of State Health Services. Listings are accurate according to the best available information at the time of listing. DSHS will update information as it becomes available.

How to get your COVID-19 test results: Please contact the telephone number or online lab information provided on your drive-thru testing receipt. If your specimen was sent to LabCorp or Quest Diagnostics to be tested, the following document contains instructions on how to obtain your COVID-19 test results online: <u>How to Log in to LabCorp and Quest Diagnostics</u> (PDF, V.1.0, released 3/31/2020).

Testing sites have been updated to include the following:

- Austin/Round Rock
- Dallas/Fort Worth/Irving/Plano
- El Paso
- Houston/Katy/Baytown
- San Angelo
- San Antonio



Upcoming Webinars Related to COVID-19

Medicaid CHIP COVID-19 Information Sessions Call regarding the actions taken to implement federal flexibilities in response to the COVID-19 pandemic, including the 1135, Appendix K and 1115 options. When:

- April 2, 2020 from 1 2 p.m.
- April 9, 2020 from 1 2 p.m.

Learn more and register here

THBI and **Texas Biomedical Research Institute** Discuss the latest COVID-19 research and development efforts being conducted at the Texas Biomed campus in San Antonio. **Tuesday, April 7th, 3:00- 4:00 pm.**

To participate:

By Computer:

https://zoom.us/j/897511742pwd=NytpTFJYdHFXNVZHTzdyTEFCMnZtZz09

• Meeting ID: 897511 742

Password:024880

By Phone:

Call-In:+1-346-248-7799Meeting ID:897511742#

Health and Human Services

HHSC Launches Statewide COVID-19 Mental Health Support Line. Health and Human Services has launched a 24/7 statewide mental health support line to help Texans experiencing anxiety, stress or emotional challenges due to the COVID-19 pandemic. This new resource (which is offered by the Harris Center for Mental Health and IDD) offers COVID-19-related mental health support for all Texans. People can call the Statewide COVID-19 Mental Health Support Line 24 hours a day, 7 days a week toll-free at 833-986-1919. The support line offers trauma-informed support and psychological first aid to those experiencing stress and anxiety related to COVID-19. Counseling services are confidential and free of charge to people who call the hotline. Read the full release here.



HHSC and CMS Release Guidance for Infection Control and Prevention of COVID-19 in ICF/IIDs.

The Centers for Medicare & Medicaid Services released a letter providing additional guidance for Intermediate Care Facilities for Individuals with Intellectual Disabilities to help them improve their infection control and prevention practices to prevent the transmission of COVID-19, including revised guidance for visitation. Access the letter here.

HHSC Releases Spanish Screening Tool for Community Attendants and In-Home Caregivers Related to COVID-19

HHSC is releasing a <u>Spanish Agency Based In-Home Caregivers Screening Flow Chart (PDF)</u>. This is for community attendants and other in-home caregivers who make home visits or provide services in a home or community setting. Contact your <u>Public Health Region</u> or your <u>Local Public Health Organization</u> if you need PPE.

Texas Commission on Environmental Quality

Texas Department of Environmental Quality Issues Guidance Related to Disposal of Coronavirus (COVID-19) Contaminated Waste. The Texas Department of State Health Services (DSHS) and the Texas Commission on Environmental Quality (TCEQ) generally define medical waste as special waste from health care-related facilities (25 TAC 1.132(46) and 30 TAC 326.3(23)), and includes: treated and untreated animal waste, bulk human blood and body fluids, microbiological waste, pathological waste, and sharps. TCEQ's webpage "What is Medical Waste?" contains additional information on medical waste generation and treatment.

Approved methods for treatment of medical waste are listed in DSHS rules and include steam sterilization (autoclave), incineration, chemical treatments, and shredding (25 TAC 1.136). After treatment, medical waste may be managed as routine municipal solid waste and disposed of in a municipal solid waste landfill. Find TCEQ's Regulatory Guidance on Disposal of COVID-19 Medical Waste here.



This summary contains supplemental information from third-party sources where that information provides clarity to the issues being discussed. Not every comment or statement from the speakers in these summaries is an exact transcription. For the purpose of brevity, their statements are often paraphrased. These documents should not be viewed as a word-for-word account of every meeting or hearing, but a summary. Every effort has been made to ensure the accuracy of these summaries. The information contained in this publication is the property of Texas Insight and is considered confidential and may contain proprietary information. It is meant solely for the intended recipient. Access to this published information by anyone else is unauthorized unless Texas Insight grants permission. If you are not the intended recipient, any disclosure, copying, distribution or any action taken or omitted in reliance on this is prohibited. The views expressed in this publication are, unless otherwise stated, those of the author and not those of Texas Insight or its management.