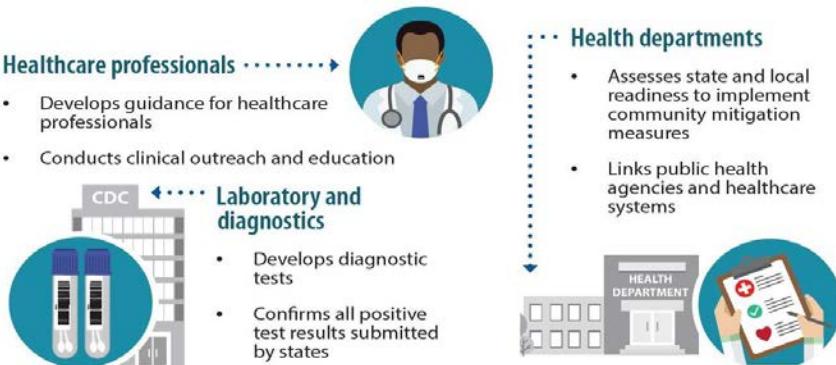


## CDC's 24/7 Response to COVID-19

CDC is [aggressively responding](#) to the global outbreak of COVID-19 and community spread in the U.S. CDC established a COVID-19 Incident Management System on January 7, 2020. On January 21, CDC activated its Emergency Operations Center to better provide ongoing support to the COVID-19 response. Highlights from CDC's response efforts are as follows:

- Over 800 CDC staff are supporting the COVID-19 response.
- CDC deployed multidisciplinary teams to support state health departments in case identification, contact tracing, clinical management, and public communications. As of March 26, 245 CDC personnel have been deployed.
- In addition to early action taken to slow the spread of illness in the United States, CDC issued additional [travel guidance](#), [clinical guidance](#), [guidance for long-term care facilities and nursing homes](#) and [other settings](#), and guidance on the [use of personal protective equipment \(PPE\)](#) during a shortage.
- CDC staff respond to over 300 inquiries daily from public health partners, and state, local, and territorial public health officials.
- CDC worked with federal partners to support the safe return of Americans overseas affected by COVID-19. As of March 23, CDC screened over 59,000 air travelers arriving from high risk areas.
- An important part of CDC's role during a public health emergency is to develop a test and equip state and local public health labs with testing capacity. [State and local public health labs](#) in all 50 states, the District of Columbia, Guam, and Puerto Rico have successfully verified and are using CDC COVID-19 diagnostic tests.
- Find more details on CDC activities [here](#)



## Supplemental Coronavirus Appropriations Allow CDC to Provide Surge Funding to Public Health Partners

- The Coronavirus Preparedness and Response Supplemental Appropriations Act of 2020 (H.R. 6024) provided CDC with \$2.2 billion to support high-priority needs for the public health response to COVID-19.
- H.R. 6024 specified that at least \$950 million was for grants or cooperative agreements to states, localities, territories, tribes, and tribal organizations, and that \$475 million of that total should be in the hands of the grant recipients within 30 days. In addition, \$40 million was set aside specifically for tribes.

## CDC's Immediate Plan of Action to Support State, Local, Territorial and Tribal Public Health

- CDC's top priority is to get funds to state, local, territorial and tribal public health organizations to allow them to surge to meet the challenges of this fast-moving public health threat.
- Every current recipient of the Public Health Preparedness Program cooperative agreement (which includes all states, territories, Washington DC and three large cities) received 90% of their FY 2019 award amount.
- CDC rapidly awarded \$560 million, nearly \$100 million more than the required amount, to those recipients. Information on funding levels can be found [here](#).

- CDC announced that \$80 million, significantly above the \$40 million minimum, would be provided for tribal nations, tribal organizations, urban Indian health organizations, or health services providers to tribal entities, through two existing and one new cooperative agreement.