DECLARATION OF EMERGENCY CITY OF CHAMPAIGN

WHEREAS, on January 30, 2020, the World Health Organization declared the outbreak of COVID-19 to be a public health emergency of international concern and on March 11, 2020 declared a worldwide pandemic; and

WHEREAS, on January 31, 2020, the U.S. Health and Human Services Secretary declared a public health emergency for the United States; and

WHEREAS, the Governor of the State of Illinois has issued a disaster proclamation on March 9, 2020 due to the impact of the COVID-19 virus and has activated the State Emergency Operations Center; and

WHEREAS, the State Emergency Management Agency has declared a public health emergency due to the impact of the COVID-19 virus; and

WHEREAS, the City Administration has coordinated its response with other Champaign County governmental entities; and

WHEREAS, 20 ILCS 3305/10(j) of the Emergency Management Agency Act and 65 ILCS 5/8-10-5 of the Emergency Act and Section 12.5-32 (d)(5) and Section 12-24 of the Champaign Municipal Code provides political subdivisions with certain emergency contractual authority; and

WHEREAS, the City of Champaign is a Home Rule Unit under the 1970 Illinois Constitution.

I, Deborah Frank Feinen, Mayor of the City of Champaign, pursuant to power granted to me by Section 12-37 of the Champaign Municipal Code, 1985, and relevant provisions of the Illinois Compiled Statutes, do hereby declare the existence of a local emergency in the City of Champaign.

A. Description of Emergency. The emergency is related to the COVID-19 virus which is causing or anticipated to cause widespread impacts on the health of

members of the community. In this matter, I am relying upon each and every matter recited in the preamble hereto, which is hereby incorporated by reference.

B. Call to Meet. Pursuant to this Declaration and Section 12-42 of the Champaign Municipal Code, the Mayor hereby calls for a special emergency meeting for March 13, 2020 at 9:30 a.m. at the City Council Chambers, 102 N. Neil Street, Champaign, Illinois.

C. Posting. The City Manager or her designee shall provide copies of this Declaration to the news media and post copies at the Police Station, Library and City Building.

This Declaration is effective at $4^{\circ}.30$ or 12° m. on the 12° day of <u>March</u>, 2020.

Mavor of the City of Champai

WITNESSED: <u>Kostation</u> (Signature) <u>Kos Stockton</u> Print Name

STATE OF ILLINOIS)) SS. COUNTY OF CHAMPAIGN)

I, the undersigned, a Notary Public, in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT **Deborah Frank Feinen**, personally known to me to be the Mayor of the City of Champaign, Illinois and personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and severally acknowledged that as such Mayor, she signed and delivered the said instrument as Mayor and caused the corporate seal of said corporation to be affixed thereto, pursuant to authority, given by the City Council of said corporation as their free and voluntary act, and as the free and voluntary act and deed of said corporation, for the uses and purposes therein set forth.

Given under my hand and Notarial Seal this $12^{\frac{1}{2}}$ day of March, 2020.

Michila Zuele Notary Public

OFFICIAL SEAL MICHELE L LUECKE NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:10/09/23

J:\LEG\WORD\Legal Department\Emergency\COVID-19 Virus\Declaration Of Emergency - COVID-19.Docx

COUNCIL BILL NO. 2020 - 022

AN ORDINANCE

RELATED TO THE EMERGENCY CREATED BY THE IMPACT OF THE COVID-19 VIRUS

WHEREAS, on January 30, 2020, the World Health Organization declared the outbreak of COVID-19 to be a public health emergency of international concern and on March 11, 2020 declared a worldwide pandemic; and

WHEREAS, on January 31, 2020, the U.S. Health and Human Services Secretary

declared a public health emergency for the United States; and

WHEREAS, the Governor of the State of Illinois issued a disaster proclamation on March

9, 2020 due to the impact of the COVID-19 virus and has activated the State Emergency

Operations Center; and

WHEREAS, the State Emergency Management Agency has declared a public health

emergency due to the impact of the COVID-19 virus; and

WHEREAS, the City Administration has coordinated its response with other Champaign County governmental entities; and

WHEREAS, Mayor Deborah Frank Feinen has issued a Declaration of Emergency pursuant to Section 12-37 of the Champaign Municipal Code; and

WHEREAS, the City Council has considered the existence of a public health emergency in acting upon this ordinance and actions required to promote the health, safety and welfare of its citizens; and

WHEREAS, 20 ILCS 3305/10(j) of the Emergency Management Agency Act and 65 ILCS 5/8-10-5 of the Illinois Municipal Code and Section 12.5-32 (d)(5) and Section 12-24 of the Champaign Municipal Code provides political subdivisions with certain emergency contractual authority; and

WHEREAS, the City of Champaign is a Home Rule Unit under the 1970 Illinois Constitution.

NOW, THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF CHAMPAIGN, ILLINOIS as follows:

Section 1. City Council Meetings. That any regular or special meetings of the City Council may be conducted at the call of the Mayor or two Council members via electronic means including audio or video conference. Such meetings may be held, providing such notice to the public and media as is reasonable under the circumstances, and if possible, providing access to the public and including a means for public participation. All such meetings shall be considered "emergency meetings" under the law. During this period of emergency, Council Rules are hereby modified to require an affirmative vote of a majority of a quorum present, electronically or physically, at the meeting for the passage of any council bill or to provide policy direction.

Section 2. Meetings of Boards and Commissions. That the Mayor may cancel meetings of any board or commission to which the Mayor appoints members. Any such cancellation shall automatically extend such deadlines for required actions by such board or commission as is specified in the cancellation notice.

Section 3. Licensed or Permitted Activities. That the Mayor may, upon the recommendation of the City Manager or her designee, suspend licenses or permits for special events or any other licenses or permits issued by the City which in the judgment of the Mayor could impact the public health or well-being of residents or visitors to the community.

2

Section 4. Purchases. That the City Manager may authorize any purchase for which funds are available reasonably related to the emergency. Such purchases may be made without following each formal requirement of Chapter 12.5 of the Champaign Municipal Code.

Section 5. Personnel Policies. That the City Manager is hereby authorized to adjust any personnel policies related to leave time, other benefits or terms and conditions of employment as are reasonably related to providing sufficient staffing during the term of the emergency.

Section 6. Bargaining Units. That the City Manager is hereby authorized to enter into such temporary agreements, including memoranda of understanding with the City's bargaining units in order to promote the provision of City services and the health and safety of the public and employees during the emergency.

Section 7. City Facilities. That the City Manager is hereby authorized to close City facilities as is reasonably required to protect the health of the public and employees of the City.

Section 8. Ordinance Violations. That the City Attorney is hereby authorized to extend any timeframe for payment or filing related to City ordinance violations in recognition of the emergency.

Section 9. Amounts Due and Owing. That the City Manager, upon the recommendation of the Finance Director, is hereby authorized to extend deadlines for payment related to any amounts due and owing to the City.

Section 10. Other Emergency Powers. That the Mayor, upon the recommendation of the City Manager, may issue such orders, which shall have the force of law, as are provided for by Section 12-39 of the Champaign Municipal Code attached hereto as Exhibit A. Where applicable, such orders or regulations shall be reviewed and approved by the City Council at the next Council meeting after issuance of such order.

3

Section 11. Absence or Incapacity. That in the absence or incapacity of the Mayor, the Mayor may delegate such powers to the emergency interim successor who may take such actions as are provided herein. Similarly, in the absence or incapacity of the City Manager, the City Manager's designee may perform any matter referred to herein.

Section 12. That this ordinance shall be construed as a declaration of a local disaster as provided for under 20 ILCS 3305/11.

Section 13. Duration. This ordinance shall be effective for 28 days from the date of passage. The ordinance shall continue for 28-day periods thereafter unless repealed or amended by the City Council.

COUNCIL BILL NO. 2020-022

PASSED:

APPROVED:

Mayor

ATTEST:

City Clerk

APPROVED AS TO FORM:

City Attorney

EXHIBIT A

Sec. 12-39. - Orders and regulations.

After the declaration of an emergency, the Mayor may in the interest of public safety and welfare make any or all of the following orders and provide the following direction:

(1) Issue such other orders as are imminently necessary for the protection of life and property.

(2) Order a general curfew applicable to such geographical areas of the City or to the City as a whole, as the Mayor deems advisable, and applicable during such hours of the day or night as the Mayor deems necessary in the interest of public safety and welfare.

(3) Order the closing of all retail liquor stores, including taverns and private clubs or portions thereof wherein the consumption of intoxicating liquor and beer is permitted;

(4) Order the discontinuance of the sale of alcoholic liquor by any wholesaler or retailer;

(5) Order the discontinuance of selling, distributing, or giving away gasoline or other liquid flammable or combustible products in any container other than a gasoline tank properly affixed to a motor vehicle;

(6) Order the discontinuance of selling, distributing, dispensing or giving away of explosives or explosive agents, firearms or ammunition of any character whatsoever;

(7) Order the control, restriction and regulation within the City by rationing, issuing quotas, fixing or freezing prices, allocating the use, sale or distribution of food, fuel, clothing and other commodities, materials, goods or services or the necessities of life;

- (8) (a) Order City employees or agents, on behalf of the City, to take possession of any real or personal property of any person, or to acquire full title or such lesser interest as may be necessary to deal with a disaster or emergency, and to take possession of and for a limited time, occupy and use any real estate to accomplish alleviation of the disaster, or the effects thereof;
 - (b) In the event any real or personal property is utilized by the City, the City shall be liable to the owner thereof for the reasonable value of the use or for just compensation as the case may be.

(9) Order restrictions on ingress or egress to parts of the City to limit the occupancy of any premises;

(10) To make provision for the availability and use of temporary emergency housing;

(11) Temporarily suspend, limit, cancel, convene, reschedule, postpone, continue, or relocate all meetings of the City Council, and any City committee, commission, board,

authority, or other City body as deemed appropriate by the Mayor.

(12) Require closing of business establishments.

(13) Prohibit the sale or distribution within the City of any products which could be employed in a manner which would constitute a danger to public safety.

(14) Temporarily close any and all streets, alleys, sidewalks, bike paths, public parks or public ways.

(15) Temporarily suspend or modify, for not more than sixty (60) days, any regulation or ordinance of the City, including, but not limited to, those regarding health, safety, and zoning. This period may be extended upon approval of the City Council.

(16) Suspend or limit the use of the water resources or other infrastructure.

(17) Control, restrict, allocate, or regulate the use, sale, production, or distribution of food, water, fuel, clothing, and/or other commodities, materials, goods, services and resources.

(18) Suspend or limit burning of any items or property with the City limits and up to two(2) miles outside the corporate limits.

(19) Direct and compel the evacuation of all or part of the population from any stricken or threatened areas within the City if the mayor deems this action is necessary for the preservation of life, property, or other disaster or emergency mitigation, response or recovery and to prescribe routes, modes of transportation and destination in connection with an evacuation.

(21) Approve application for local, state, or federal assistance.

(22) Establish and control routes of transportation, ingress or egress.

(23) Control ingress and egress from any designated disaster or emergency area or home, building or structures located therein.

(24) Approve the transfer the direction, personnel, or functions of City departments and agencies for the purpose of performing or facilitating emergency or disaster services.

(25) Accept services, gifts, grants, loans, equipment, supplies, and/or materials whether from private, nonprofit, or governmental sources.

(26) Require the continuation, termination, disconnection, or suspension of natural gas, electrical power, water, sewer, communication or other public utilities or infrastructure.

(27) Close or cancel the use of any municipally owned or operated building or other public facility.

(28) Declare, issue, enforce, modify and terminate orders for quarantine and isolation of

persons or animals posing a threat to the public, not conflicting with the directions of the Health Officer of the community.

(29) Exercise such powers and functions in light of the exigencies of emergency or disaster including the waiving of compliance with any time consuming procedures and formalities, including notices, as may be prescribed by law.

(30) Issue any and all such other orders or undertake such other functions and activities as the Mayor reasonably believes is required to protect the health, safety, and welfare of persons or property within the City or otherwise preserve the public peace or abate, clean up, or mitigate the effects of any emergency or disaster.



REPORT TO CITY COUNCIL

FROM: Dorothy Ann David, City Manager

DATE: March 13, 2020

SUBJECT: EXPLANATION OF COUNCIL BILL NO. 2020 - 022

A. Introduction: The Mayor has declared an emergency related to the COVID-19 virus. The Council Bill recommended to be considered by the Council would implement the Emergency Declaration by providing for increased flexibility in the areas of purchasing, personnel, meetings, licensed activities, meetings of boards and commissions, and City Council meetings.

B. Action Requested: The Administration recommends passage of this Council Bill.

C. Background:

1. Federal. The Secretary of the Department of Health and Human Services issued a Public Health Emergency Declaration under Section 319 of the Public Health Service Act on January 31, 2020. This occurred a day after the World Health Organization ("WHO") declared the outbreak of COVID-19 to be a "public health emergency of international concern." On March 12, 2020 the WHO characterized COVID-19 as a pandemic (Attachment A).

2. State. In Illinois, the Governor issued a Proclamation of Disaster on March 9, 2020 due to the impact of COVID-19. The declaration of a disaster indicated a public health emergency. When the Governor declares such a disaster, the Governor is possessed with the full authority to take extraordinary steps to remedy the emergency. The Governor acts through the State Emergency Management Agency. The Governor's Disaster Proclamation and press release are attached as Attachment B and Attachment C.

The State Emergency Management Agency is the coordinating entity at the State level. In the case of a health emergency, the Emergency Management Agency's role is specifically geared towards coordinating with the State Department of Public Health. The State Department of Public Health ("DPH") possesses significant authority with respect to health-related issues. Per the statutes, the DPH is the "supreme authority" relative to isolation and quarantine orders. The State Department of Health works through the local departments of public health that are certified. The local public health agency is the Champaign-Urbana Public Health District.

3. Local. In Champaign County, there are many actors that play a role in addressing COVID-19. The Cities, including Champaign, Urbana and all other municipalities are authorized to declare emergencies under the Illinois Emergency Management Agency Act (20 ILCS 3305/1 et seq) The City of Champaign has implemented legislative emergency preparedness when it enacted Chapter 12 of the Champaign Municipal Code. The provisions in Chapter 12 provide a framework for a mayoral declaration of emergency. These provisions provide that the Mayor is authorized to declare an emergency for a limited period of time. The gist of the chapter is to allow the Mayor to exercise significant emergency powers at the inception of the emergency, and then to provide an opportunity for the City Council, as a whole, to deal with an emergency.

The Mayor declared an emergency on March 12, 2020 and immediately called a Special Emergency Meeting of the City Council. The meeting of the City Council was proposed in order that the Council consider an ordinance which would provide for an increase in flexibility in many different areas, including City Council meetings, meetings of boards and commissions, gatherings and licensed activities, purchases, personnel policies, bargaining units, City facilities, ordinance violations, amounts due and owing the City, and other emergency powers as outlined in the municipal code.

4. Other Local Entities. Other local entities are looking at taking similar action. The City has been meeting and attempting to coordinate with the County and Urbana relative to a variety of different matters, including communication with the public. The City Manager has mobilized every department of the City in order to work on different aspects of the COVID-19 emergency on a "highest priority" basis.

5. Other Background Information. Attached to this report are other pieces of information including the Governor's proclamation and press release, the Public Health Emergency Declaration (Attachment D) and press release (Attachment E) by the Secretary of the Department of Health and Human Services.

D. Alternatives:

- 1. Pass this Council Bill.
- 2. Do not pass this Council Bill and provide further direction to the Administration.

E. Discussion of Alternatives:

Alternative 1 would pass this Council Bill.

a. Advantages

- Would provide a framework for flexibility in reacting to the emergency.
- The ordinance is effective for a limited period of time always subject to City Council action.

• Would provide the legal framework for the City to take various actions of extraordinary nature which ordinarily have to wait to be approved by the City Council.

b. Disadvantages.

- While some elements contained in the ordinance are duplicative of existing powers, e.g. emergency purchases, the City would lack the flexibility to deal with certain human resource related issues that the City is preparing to deal with.
- The failure to pass the ordinance might send a message that the situation was of diminished importance.

Alternative 2 would not pass this Council Bill.

a. Advantages.

- The City Council would retain the authority to act during its regularly scheduled meetings in any event.
- The City Council could delay action on the ordinance and wait until the situation presented a clear picture of the full extent of the nature of the emergency.

b. Disadvantages

- The City would miss the opportunity for an early reaction to the health issues involved.
- Employees would be required to follow the existing ordinances and attempt to work in a "business as usual" manner.

F. Community Input:

G. Budget Impact: There is no question that the emergency will have a financial impact on the City organization and the community as a whole. The impact is, in part, driven by the University's decision to go to an online format for some period of time resulting in some segments of the student population not being here at the University. The City maintains contingency funds for the purposes of encountering unforeseen circumstances. The Finance Director will provide further information concerning this in separate communication.

H. Staffing Impact: The Human Resources Department is dealing with different aspects of the possible staffing impact. It may be imperative at some point in time for employees to work from home and the Information Technologies Department is preparing instructions for Staff to deal with this. Of course, it will not be possible for some employees to work from home and

preparations are being made to limit entrance to some public facilities. The City Manager's Office is providing details with respect to contact with citizens.

Prepared by:

Frederick C. Stavins City Attorney

Attachments: Attachment A: World Health Organization Declaration of Outbreak Attachment B: Gubernatorial Disaster Proclamation Attachment C: Governor Pritzker's Press Release Attachment D: Department of Health and Human Services Public Health Emergency Declaration Attachment E: Department of Health and Human Services Press Release

J:\LEG\WORD\Council Meeting Documents-Reports-Study Sessions\2020\Regular Council Meetings\Emergency Created By COVID-19\RTC - Emergency Created By COVID-19 Virus.Doc

ATTACHMENT A





WHO Director-General's opening remarks at the Mission briefing on COVID-19 - 12 March 2020

12 March 2020

Excellencies, dear colleagues and friends,

First of all, I would like to say good morning.

As you know, yesterday I said that the global COVID-19 outbreak can now be described as a pandemic.

This is not a decision we took lightly.

We have made this assessment for two main reasons: first, because of the speed and scale of transmission.

Almost 125,000 cases have now been reported to WHO, from 118 countries and territories. In the past two weeks, the number of cases reported outside China has increased almost 13-fold, and the number of affected countries has almost tripled.

The second reason is that despite our frequent warnings, we are deeply concerned that some countries are not approaching this threat with the level of political commitment needed to control it.

Let me be clear: describing this as a pandemic does not mean that countries should give up. The idea that countries should shift from containment to mitigation is wrong and dangerous.

On the contrary, we have to double down.

This is a controllable pandemic. Countries that decide to give up on fundamental public health measures may end up with a larger problem, and a heavier burden on the health system that requires more severe measures to control.

All countries must strike a fine balance between protecting health, preventing economic and social disruption, and respecting human rights.

We urge all countries to take a comprehensive approach tailored to their circumstances - with containment as the central pillar.

We are calling on countries to take a four-pronged strategy:

First, prepare and be ready.

There are still 77 countries and territories with no reported cases, and 55 countries and territories that have reported 10 cases or less.

And all countries with cases have unaffected areas. You have an opportunity to keep it that way. Prepare your people and your health facilities.

Second, detect, prevent and treat.

You can't fight a virus if you don't know where it is. That means robust surveillance to find, isolate, test and treat every case, to break the chains of transmission.

Third, reduce and suppress.

To save lives we must reduce transmission. That means finding and isolating as many cases as possible, and quarantining their closest contacts. Even if you cannot stop transmission, you can slow it down and protect health facilities, old age homes and other vital areas – but only if you test all suspected cases.

And fourth, innovate and improve.

This is a new virus and a new situation. We're all learning and we must all find new ways to prevent infections, save lives, and minimize impact. All countries have lessons to share.

WHO is working day and night to support all countries.

We have shipped supplies of personal protective equipment to 57 countries, we're preparing to ship to a further 28, and we've shipped lab supplies to 120 countries.

We've published an R&D roadmap, with a set of core protocols for how studies should be done.

We've published a comprehensive package of technical guidance.

We've had more than 176,000 enrollments in our COVID training courses on OpenWHO.

We're working with the World Economic Forum and the International Chambers of Commerce to engage the private sector. We're also working with FIFA.

We're working with our colleagues across the UN system to support countries to develop their preparedness and response plans, according to the 8 pillars.

And more than 440 million U.S. dollars has now been pledged to WHO's Strategic Preparedness and Response Plan

We thank those countries that have contributed, especially those that have contributed fully flexible funds. Because this is a dynamic situation, we need the greatest flexibility possible to provide the best support possible. In the spirit of solidarity, we ask countries not to earmark funds for this response.

Thank you all once again for your support and commitment.

As I keep saying, we're all in this together.

I thank you.

Subscribe to the WHO newsletter \rightarrow

ATTACHMENT B

GUBERNATORIAL DISASTER PROCLAMATION

WHEREAS, in late 2019, a new and significant outbreak of Coronavirus Disease 2019 (COVID-19) emerged in China; and,

WHEREAS, COVID-19 is a novel severe acute respiratory illness that can spread among people through respiratory transmissions and present with symptoms similar to those of influenza; and,

WHEREAS, certain populations are at higher risk of experiencing more severe illness as a result of COVID-19, including older adults and people who have serious chronic medical conditions such as heart disease, diabetes, or lung disease; and,

WHEREAS, we are continuing our efforts to prepare for any eventuality given that this is a novel illness and given the known health risks it poses for the elderly and those with serious chronic medical conditions; and,

WHEREAS, the World Health Organization declared COVID-19 a Public Health Emergency of International Concern on January 30, 2020, and the United States Secretary of Health and Human Services declared that COVID-19 presents a public health emergency on January 27, 2020; and,

WHEREAS, the World Health Organization has reported 109,578 confirmed cases of COVID-19 and 3,809 deaths attributable to COVID-19 globally as of March 9, 2020; and,

WHEREAS, in response to the recent COVID-19 outbreaks in China, Iran, Italy and South Korea, the Centers for Disease Control and Prevention ("CDC") has deemed it necessary to prohibit or restrict non-essential travel to or from those countries; and,

WHEREAS, the CDC has advised older travelers and those with chronic medical conditions to avoid nonessential travel, and has advised all travelers to exercise enhanced precautions; and,

WHEREAS, the CDC currently recommends community preparedness and everyday prevention measures be taken by all individuals and families in the United States, including voluntary home isolation when individuals are sick with respiratory symptoms, covering coughs and sneezes with a tissue, washing hands often with soap and water for at least 20 seconds, use of alcohol-based hand sanitizers with at least 60% alcohol if soap and water are not readily available, and routinely cleaning frequently touched surfaces and objects to increase community resilience and readiness for responding to an outbreak; and,

WHEREAS, a vaccine or drug is currently not available for COVID-19; and,

WHEREAS, in communities with confirmed COVID-19 cases, the CDC currently recommends mitigation measures, including staying at home when sick, when a household

member is sick with respiratory disease symptoms or when instructed to do so by public health officials or a health care provider and keeping away from others who are sick; and,

WHEREAS, despite efforts to contain COVID-19, the World Health Organization and the CDC indicate that it is expected to spread; and,

WHEREAS, there are currently 11 confirmed cases of COVID-19 and an additional 260 persons under investigation in Illinois; and,

WHEREAS, one of the confirmed cases of COVID-19 in Illinois has not been linked to any travel activity or to an already-confirmed COVID-19 case, which indicates community transmission in Illinois; and,

WHEREAS, based on the foregoing, the circumstances surrounding COVID-19 constitute a public health emergency under Section 4 of the Illinois Emergency Management Agency Act; and,

WHEREAS, it is the policy of the State of Illinois that the State will be prepared to address any disasters and, therefore, it is necessary and appropriate to make additional State resources available to ensure that the effects of COVID-19 are mitigated and minimized and that residents and visitors in the State remain safe and secure; and,

WHEREAS, this proclamation will assist Illinois agencies in coordinating State and Federal resources, including the Strategic National Stockpile of medicines and protective equipment, to support local governments in preparation for any action that may be necessary related to the potential impact of COVID-19 in the State of Illinois; and,

WHEREAS, these conditions provide legal justification under Section 7 of the Illinois Emergency Management Agency Act for the issuance of a proclamation of disaster;

NOW, THEREFORE, in the interest of aiding the people of Illinois and the local governments responsible for ensuring public health and safety, I, JB Pritzker, Governor of the State of Illinois, hereby proclaim as follows:

Section 1. Pursuant to the provisions of Section 7 of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7, I find that a disaster exists within the State of Illinois and specifically declare all counties in the State of Illinois as a disaster area.

Section 2. The Illinois Department of Public Health and the Illinois Emergency Management Agency are directed to coordinate with each other with respect to planning for and responding to the present public health emergency.

Section 3. The Illinois Department of Public Health is further directed to cooperate with the Governor, other State agencies and local authorities, including local public health authorities, in the development of strategies and plans to protect the public health in connection with the present public health emergency.

Section 4. The Illinois Emergency Management Agency is directed to implement the State Emergency Operations Plan to coordinate State resources to support local governments in disaster response and recovery operations.

Section 5. To aid with emergency purchases necessary for response and other emergency powers as authorized by the Illinois Emergency Management Agency Act, the provisions of the Illinois Procurement Code that would in any way prevent, hinder or delay necessary action in coping with the disaster are suspended to the extent they are not required by federal law. If necessary, and in accordance with Section 7(1) of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7(1), the Governor may take appropriate executive action to suspend additional statutes, orders, rules, and regulations.

Section 6. Pursuant to Section 7(3) of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7(3), this proclamation activates the Governor's authority, as necessary, to transfer the direction, personnel or functions of State departments and agencies or units thereof for the purpose of performing or facilitating emergency response programs.

Section 7. The Illinois Department of Public Health, Illinois Department of Insurance and the Illinois Department of Healthcare and Family Services are directed to recommend, and, as appropriate, take necessary actions to ensure consumers do not face financial barriers in accessing diagnostic testing and treatment services for COVID-19.

Section 8. The Illinois State Board of Education is directed to recommend, and, as appropriate, take necessary actions to address chronic absenteeism due to transmission of COVID-19 and to alleviate any barriers to the use of e-learning during the effect of this proclamation that exist in the Illinois School Code, 105 ILCS 5/1-1 et. seq.

Section 9. Pursuant to Section 7(14) of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7(14), increases in the selling price of goods or services, including medical supplies, protective equipment, medications and other commodities intended to assist in the prevention of or treatment and recovery of COVID-19, shall be prohibited in the State of Illinois while this proclamation is in effect:

Section 10. This proclamation can facilitate a request for Federal emergency and/or disaster assistance if a complete and comprehensive assessment of damage indicates that effective recovery is beyond the capabilities of the State and affected local governments.

Section 11. This proclamation shall be effective immediately and remain in effect for 30 days.

Issued by the Governor March 9, 2020 Filed by the Secretary of State March 9, 2020 ATTACHMENT C



Office of the Governor JB Pritzker

FOR IMMEDIATE RELEASE Monday, Mar. 9, 2020

CONTACT Gov.Press@illinois.gov

Gov. Pritzker Issues Disaster Proclamation to Build on State's COVID-19 Response, Unlock Additional Federal Resources

Proclamation Formalizes Emergency Procedures Currently Underway Across State Government, Makes New Resources Available

State Continues Robust Response with Federal, Local Partners to Contain Virus, Prepare for Potential Further Spread

Chicago — Building on the state's robust and coordinated response to COVID-19, Governor JB Pritzker issued a disaster proclamation today to unlock additional federal resources and help the state prepare for the potential of further spread. Issuing a disaster proclamation is the method of declaring a state of emergency in the state of Illinois, which 13 states across the United States have entered into.

"As we've said from the beginning, the state of Illinois will use every tool at our disposal to respond to this virus, and this is the next step in that commitment," **said Governor**

JB Pritzker. "We stand ready to put the full weight of state government in preparation for a full-fledged response when needed and will continue to update the public regularly, responsibly and honestly as the situation evolves."

The proclamation formalizes emergency procedures already underway across state government by activating the State Emergency Operations Center (SEOC), physically bringing together decision-makers from every state agency and the state's highly qualified mutual aid network to deploy resources as necessary during this public health threat.

State and local partners benefit from a disaster proclamation in the following ways:

- Allows federal reimbursement for state response costs
- Allows use of State Disaster Relief Fund, covering direct state costs and reimbursements to Illinois National Guard and mutual aid groups
- Allows use of the state's mutual aid network, groups of public safety response professionals including hundreds of health care providers and management professionals, law enforcement officers, fire fighters, emergency medical technicians and disaster response professionals that are available to deploy to areas of shortage
- Authorizes the Governor to activate Illinois National Guard reservists, some of whom may be doctors and nurses
- Allows expedited procurement should it be necessary
- Authorizes additional executive authorities to protect public health and safety

Since January, the Illinois Department of Public Health and Illinois Emergency Management Agency have been working with their local counterparts across the state to prepare for additional cases as expected.

Also Monday, IDPH and the Chicago Department of Public Health announced four new COVID-19 cases in Illinois, bringing the total to 11. (See attached medical information.) All four cases are in good condition. The first two cases in the state announced last month have recovered without known transmission to additional individuals. The remaining patients are in isolation either at home or in a hospital. As with every case, our federal, state, county and hospital-level public health officials are working to actively identify any individuals who came into contact with the patients.

HEALTH CARE SYSTEM

IDPH is currently operating three testing labs statewide – in Chicago, Springfield and Carbondale. These state labs meet current need, and commercial testing expansion is anticipated this week.

In addition, a sample of patients who present with flu-like symptoms are being tested at 15 hospitals statewide: seven hospitals in Cook County, three hospitals in other areas of northern Illinois, three hospitals in Central Illinois and two hospitals in Southern Illinois to monitor for the presence of the virus in our communities.

Gov. Pritzker has been in communication with the CEOs of the largest insurance companies in Illinois. Blue Cross and Blue Shield of Illinois, UnitedHealthcare, Aetna and Cigna have announced they will waive the costs for COVID-19 testing. Medicaid and Medicare are also covering testing costs.

PREVENTION FOR THE PUBLIC

To help prevent the spread of COVID-19, public health officials urge the general public to take the same precautions as during flu season — with renewed vigilance:

- Wash your hands frequently with soap and water for at least 20 seconds
- Cover your cough or sneeze
- Avoid touching your eyes, nose and mouth
- Clean often touched surfaces frequently
- Maintain social distance (3 feet) between yourself and anyone who is coughing or sneezing
- Avoid visiting long-term care facilities, such as nursing homes, especially if you're sick
- Stay home if you do not feel well
- Plan a safe visit to the doctor if you experience any symptoms

Vulnerable populations – including people 60 years and older or those with certain health conditions like heart disease, lung disease, and weakened immune systems – are recommended to avoid large gatherings.

The Illinois Department of Public Health has a statewide COVID-19 hotline and website to answer any questions from the public or to report a suspected case: call 1-800-889-3931 or visit <u>IDPH.illinois.gov</u>.

###

Preparedness

Emergency

ATTACHMENT D

PHE Home > Preparedness > Legal Authorities > Public Health Emergency Declaration

Public Health Emergency Declaration

The Secretary of the Department of Health and Human Services (HHS) may, under section 319 of the Public Health Service (PHS) Act, determine that: a) a disease or disorder presents a public health emergency (PHE); or b) that a public health emergency, including significant outbreaks of infectious disease or bioterrorist attacks, otherwise exists.

About ASPR

Duration and Notification: The declaration lasts for the duration of the emergency or 90 days, but may be extended by the Secretary. Congress must be notified of the declaration within 48 hours, and relevant agencies, including the Department of Homeland Security, Department of Justice, and Federal Bureau of Investigation, must be kept informed.

Prior to issuing the declaration, the Secretary should consult with public health officials as necessary.

Following a section 319 declaration, the Secretary can:

Take appropriate actions in response to the emergency consistent with other authorities, including: making grants; entering into contracts; and conducting and supporting investigations into the cause, treatment, or prevention of the disease or disorder. Upon request of the recipient of any such award and subject to corresponding reductions in payments, the Secretary may also provide supplies, equipment, and services, and detail employees of the Department to the recipient to aid the recipient in carrying out the award.

Access "no-year" funds appropriated to the Public Health Emergency Fund to rapidly respond to immediate needs resulting from the PHE, or to rapidly respond to a potential PHE when the Secretary determines that there is a significant potential for a PHE. The Fund may be used to facilitate coordination among federal, state, local tribal, and territorial entities and public and private health care entities affected by the PHE; to make grants, provide for awards, enter into contracts and conduct investigations including further supporting the Public Health Emergency Preparedness, Hospital Preparedness and Regional Health Care Emergency Preparedness awards; facilitate and accelerate advanced research and development of medical countermeasures; strengthen biosurveillance and laboratory capacity; support initial emergency operations related to preparation and deployment of National Disaster Medical System teams; and carry out other activities determined applicable and appropriate by the Secretary. The Secretary must report to Congress 90 days after the end of the fiscal year about any funds spent from the Public Health Emergency. Public Health Emergency Fund, the emergency for which funds were spent, and activities undertaken with respect to the emergency. Public Health Emergency Funds supplement, but do not supplant, other Federal, State, and local funds provided for public health grants, awards, contracts, and investigations.

Enable the Centers for Disease Prevention and Control Director to access the Infectious Diseases Rapid Response Reserve Fund (when funds are so appropriated) to prevent, prepare for, or respond to an infectious disease emergency, either when the Secretary has declared a public health emergency or when the Secretary determines that the emergency has significant potential to imminently occur and potential on occurrence, to affect national security or the health and security of US citizens, domestically, or internationally.

Grant extensions or waive sanctions relating to submission of data or reports required under laws administered by the Secretary, when the Secretary determines that, wholly or partially as a result of a public health emergency, individuals or public or private entities are unable to comply with deadlines for such data or reports. The Secretary must notify Congress and publish a Federal Register notice before or promptly after granting an extension or waiver.

Waive or modify certain Medicare, Medicaid, Children's Health Insurance Program (CHIP), and Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule requirements. Under section 1135 of the Social Security Act (SSA), the Secretary may waive or modify certain requirements as necessary to ensure to the maximum extent feasible that, in an emergency area during an emergency period, sufficient health care items and services are available to meet the needs of individuals Medicare, Medicaid, and CHIP, and that providers of such services in good faith who are unable to comply with certain statutory requirements are nonetheless reimbursed and exempted from sanctions for noncompliance, absent fraud, or abuse. There must also be a Presidential declaration of an emergency or disaster in order to exercise this authority.

Adjust Medicare reimbursement for certain Part B drugs. Most Medicare Part B drugs are paid on the basis of the manufacturer's average sales price (ASP), which manufacturers are required to report quarterly. The ASP-based

Q

Public Health Emergency

U.S. Department of Health & Human Services

Search ...

PHE Frequently Asked Questions List of Public Health Emergency Declarations 1135 Waivers

Legal Authorities

Legal Authorities Overview Legal Authority of the Secretary **Emergency Use Authorization** Pandemic and All-Hazards Preparedness Act Pandemic and All-Hazards Preparedness **Reauthorization Act** Pandemic and All-Hazards Preparedness and Advancing Innovation Act (PAHPAIA) Public Readiness and **Emergency Preparedness** (PREP) Act PREP Act Frequently Asked Questions

https://www.phe.gov/Preparedness/legal/Pages/phedeclaration.aspx

payment allowance is updated prospectively each quarter, using the data manufacturers report. The statutory scheme results in a two-quarter lag between the date of the reported sale and the date that sale's price is factored into the Medicare reimbursement rate. In the case of a public health emergency in which there is a documented inability to access drugs and biologicals and a concomitant increase in the price of a drug or biological that is not reflected in the manufacturer's ASP for one or more quarters, the Secretary may use the wholesale acquisition cost or other reasonable measure of drug or biological price instead of the manufacturer's ASP. The substituted price or measure may be used until the price of the drug or biological has stabilized and is substantially reflected in the manufacturer's ASP. As of April 2013, CMS has not formally interpreted, nor exercised, this authority. However, in the event of a public health emergency in which this authority were triggered, the price change could be implemented without rulemaking. (See Section 1847A(c)(5)(C) of the Social Security Act, which states that notwithstanding any other provision of law, the Secretary may implement any of the provisions of Section 1847A by program instruction or otherwise.)

Make temporary (up to one year or the duration of the emergency) appointments of personnel to positions that directly respond to the public health emergency when the urgency of filling positions prohibits examining applicants through the competitive process.

Use funds from the fiscal year 2019 appropriation to HHS that are available for salaries and expenses of HHS employees to pay travel and related expenses of an employee or family member when the employee is assigned to duty in the U.S. or in a U.S. territory during a period and in a location that are the subject of a public health emergency declaration, and travel is necessary to obtain medical care for an illness, injury, or medical condition that cannot be adequately addressed in that location at that time.

Enable the Secretary of Defense, in consultation with the Secretary, to deploy military trauma care providers providing care at high-aculty trauma centers pursuant to grants awarded under section 1291 of the PHS Act.

Waive certain Ryan White HIV/AIDS program requirements (section 2683 of the PHS Act). Under this authority, up to five percent of the funds available under each of the Parts A and B supplemental pools may be shifted to ensure access to care during a public health emergency declared by the Secretary under section 319 of the PHS Act or an emergency or disaster declared by the President under the Stafford Act or the National Emergencies Act in the geographic area where the emergency, major disaster, or public health emergency exists. In addition, the Secretary may waive such requirements of title XXVI of the PHS Act to Improve the health and safety of those receiving care under this title and the general public. This waiver authority is limited to the time period for which the emergency, major disaster, or public health emergency for which the emergency, major disaster, or public health emergency for which the emergency, major disaster, or public health emergency for which the emergency, major disaster, or public health and safety of those receiving care under this title and the general public. This waiver authority is limited to the time period for which the emergency, major disaster, or public health emergency declaration exists.

Modify practice of telemedicine. The Ryan Haight Online Pharmacy Consumer Protection Act and Implementing regulations allow the Secretary, with concurrence of the DEA Administrator, to designate patients, patient locations, and use of controlled substances during a public health emergency declared by the Secretary.

On a State by State basis, as the circumstances of the emergency reasonably require and for the period of the emergency, grant an extension or waive application deadlines or compliance with any other requirement of certain SAMHSA grants. Such grants include those authorized under sections 521, 1911, or 1921 of the PHS Act. This authority also applies to allotments authorized under Public Law 99-319.

Allow State and local governments to access the General Services Administration (GSA) Federal supply schedule when using federal grant funds, GSA policy allows state, local, and tribal government grantees to use federal supply schedules to respond to public health emergencies declared by the Secretary. Pursuant to 48 U.S.C. § 1469e as amended, Puerto Rico, Guam, American Samoa, the Commonwealth of the Northern Mariana Islands, and the U.S. Virgin Islands may always buy off of the GSA schedules regardless of whether there is a declared PHE.

Temporarily reassign state and local personnel. The Secretary may authorize a requesting Governor of a state or tribal organization to temporarily reassign state and local public health department or agency personnel funded in whole or in part through programs authorized under the PHS Act to immediately address a public health emergency in the state or Indian tribe during the period of the emergency.

Limit liability of health care professionals who are members of the Medical Reserve Corps or professionals included in the Emergency System for Advance Registration of Volunteer Health Professionals responding to a PHE in the initial 90 days so that such professionals shall be subject only to the State liability laws in which the professional has been deployed to the PHE and only to the extent permitted under the laws of the State in which care is provided.

Determine a waiver of Paperwork Reduction Act (PRA) requirements is necessary. Section 319(f), recently added by the 21st Century Cures Act, allows the Secretary to determine that the circumstances of a PHE or a disease or disorder, including a novel and emerging public health threat that is significantly likely to become a PHE, necessitate a waiver from PRA requirements. If the Secretary makes such a determination, then PRA requirements for voluntary collection of information do not apply during the immediate investigation of and response to the PHE during the period of the PHE or the time period necessary to determine if a disease or disorder, including a novel and emerging public health threat, will become a PHE.

3/10/2020

https://www.phe.gov/Preparedness/legal/Pages/phedeclaration.aspx

Waive certain requirements of the Drug Supply Chain Security Act (DSCSA). A public health emergency is considered an "emergency medical reason" under the DSCSA, 21 U.S.C. 360eee. Thus, upon the Secretary's declaration of a public health emergency, certain activities are automatically excluded through the time period of the declaration. Notably, product distribution for such emergency medical reasons is excluded from the DSCSA definitions of "transaction" and "wholesale distribution." Therefore, the DSCSA requirements related to product tracing and wholesale distribution do not apply to trading partner activities that address the public health emergency declaration.

Enable the Department of Labor (DOL) to issue dislocated worker program grants for disaster relief employment pursuant to 29 U.S.C. § 3225. A Federal agency emergency or disaster declaration or a Stafford Act declaration triggers an opportunity for eligible entities to apply for disaster relief employment National Dislocated Worker Grants. In order for a Federal agency declaration to trigger this authority, the chief official of a Federal agency with authority for or jurisdiction over the Federal response must declare or otherwise recognize an emergency or disaster situation of national significance that could result in a potentially large loss of employment.

This page last reviewed: November 26, 2019

Home | Contact Us | Accessibility | Privacy Policies | Disclaimer | HHS Viewers & Players | HHS Plain Language Assistant Secretary for Preparedness and Response (ASPR), 200 Independence Ave., SW, Washington, DC 20201 U.S. Department of Health and Human Services | USA.gov | GobiernoUSA.gov | HealthCare.gov in Other Languages



HHS.gov

ATTACHMENT E

U.S. Department of Health & Human Services

FOR IMMEDIATE RELEASE January 31, 2020 Contact: HHS Press Office 202-690-6343 <u>media@hhs.gov</u>

Secretary Azar Declares Public Health Emergency for United States for 2019 Novel Coronavirus

Health and Human Services Secretary Alex M. Azar II declared a public health emergency for the entire United States to aid the nation's healthcare community in responding to 2019 novel <u>coronavirus</u>.

"While this virus poses a serious public health threat, the risk to the American public remains low at this time, and we are working to keep this risk low," Secretary Azar said. "We are committed to protecting the health and safety of all Americans, and this public health emergency declaration is the latest in the series of steps the Trump Administration has taken to protect our country."

The emergency declaration gives state, tribal, and local health departments more flexibility to request that HHS authorize them to temporarily reassign state, local, and tribal personnel to respond to 2019-nCoV if their salaries normally are funded in whole or in part by Public Health Service Act programs. These personnel could assist with public health information campaigns and other response activities.

The Centers for Disease Control and Prevention is working closely with state health departments on disease surveillance, contact tracing, and providing interim guidance for clinicians on identifying and treating coronavirus infections. HHS is working with the Department of State to assist in bringing home Americans who had been living in affected areas of mainland China. HHS divisions also are collaborating with industry to identify and move forward with development of potential diagnostics, vaccines, and therapeutics to detect, prevent, and treat 2019-nCoV infections.

In declaring the <u>public health emergency</u>, Secretary Azar acted within his authority under the Public Health Service Act. This declaration is retroactive to January 27, 2020.

This U.S. public health emergency declaration follows a declaration by the World Health Organization that spread of the virus constituted a public health emergency of international concern.

###