Overview of COVID-19 Emergency Declarations

Please see below brief explanations of emergency declarations in response to COVID-19 at federal, state/tribal, and local levels. Link to our Network website for considerable, additional information:

- **Federal Public Health Emergency** – Under §319 the Public Health Services Act (42 U.S.C. 247d), the Secretary of Health and Human Services (HHS) may declare a federal public health emergency (PHE) in response to “significant outbreaks of infectious disease or bioterrorist attacks.” A PHE declaration enables HHS to accelerate procurements and federal fund distribution, investigate causes and solutions, promote coordination and social distancing measures, and temporarily waive some federal laws. This declaration also speeds the use of medical countermeasures by allowing for emergency use authorization of products under 21 U.S.C. 360bbb-3.

- **Federal Stafford Act Emergency/Disaster** – The President may make an emergency or disaster declaration under the Stafford Act, 42 U.S.C. 5121–5208, triggering the Federal Emergency Management Agency (FEMA) to provide financial and other assistance to help affected communities respond and coordinate federal responses. Usually made at the request of specific states, Stafford Act declarations frequently respond to natural disasters, but have also been issued during COVID-19 to engage FEMA support and funding, among other authorities.

- **Federal National Emergency Act** – Under 50 U.C.S. 1601–1651, the President may declare a national emergency to access myriad powers, expressly defined in law or potentially implied by Constitutional authority. These powers may include redirecting federal funding or staff to address emergencies and some waivers of specific federal laws. In the COVID-19 pandemic, an emergency declaration on March 13, 2020 resulted in select waivers of federal regulations to increase access to health services, testing, and other interventions.
- **State/Tribal Emergency or Disaster** – State and tribal governments may draw on their sovereign police powers (e.g., powers to protect the public's health and safety) and statutory or constitutional authorizations to declare emergency or disaster declarations. Once declared, resulting powers include ready allocation of funds, coordination tools, and facilitating emergency services. Additional powers granted vary by jurisdiction and type of emergency, but may include public health powers such as surveillance, travel restrictions, or quarantine and isolation.

- **State/Tribal Public Health Emergency** – Over 30 states and various tribes have statutes and rules enabling them to declare PHEs based in large part on the [Model State Emergency Health Powers Act](https://www.who.int/). PHEs specifically enable responses to bioterrorism or infectious agents, like COVID-19, that present a high probability of causing death or disability. State and tribal PHEs grant powers such as closing roads or businesses, imposing social distancing, testing and screening, quarantine and isolation, or licensing reciprocity and liability protections for health care workers.

- **Local Emergency or Public Health Emergency** – Depending on authorities provided via state governments, cities and counties may enact ordinances to invoke declarations of local emergencies entailing various powers such as freeing up resources, coordinating local responses, or rapidly issuing emergency policies. Several localities have used these powers during the COVID-19 pandemic, for example, to enact shelter-in-place orders. Local emergency powers must generally align with state-based exercises of powers for purposes of uniformity.

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**SUPPORTERS**

Robert Wood Johnson Foundation

The Network for Public Health Law is a national initiative of the Robert Wood Johnson Foundation. The Network provides information and technical assistance on issues related to public health laws and policies.

This document was developed by James G. Hodge, Jr., J.D., LL.M., Director, Network for Public Health Law – Western Region, ASU Sandra Day O'Connor College of Law, and Walter Johnson, Legal Researcher, and J.D. Candidate (2020), ASU Sandra Day O'Connor College of Law. The legal information and guidance provided in this document do not constitute legal advice or representation. For legal advice, please consult specific legal counsel in your state.

March 2020