COVID-19

Emergency Legal Preparedness Primer

As of March 16, 2021

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COVID-19 Confirmed Cases & Deaths

Global Cases  120.56 million | Deaths: 2.67 million
U.S. Cases        30.10 million | Deaths: 547,300
U.S. Stats      25% all cases | 20% all deaths

COVID-19 Deaths

U.S. weekly deaths above & below normal since 2015

### Profile of U.S. COVID-19 Deaths

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Number of Deaths</th>
<th>Comparison</th>
</tr>
</thead>
<tbody>
<tr>
<td>81%</td>
<td>66,000+</td>
<td></td>
</tr>
<tr>
<td>of deaths</td>
<td>deaths of</td>
<td></td>
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<tr>
<td>in persons</td>
<td>persons ages</td>
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<td>ages 65+</td>
<td>64 &amp; under</td>
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<td></td>
<td>Overall U.S.</td>
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<tr>
<td></td>
<td>life expectancy</td>
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<tr>
<td></td>
<td>dropped by 1 year</td>
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<tr>
<td></td>
<td>to 77.8 yrs</td>
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- **2.8x* number of deaths among**
  - Blacks
  - Hispanics

- **2.6x* number of deaths among**
  - Native Americans

* Compared to White/Non-Hispanics persons
Antibodies may be insufficient to ward off additional infections.

Asymptomatic persons could account for 40-45% of infections spread.

Multiple vaccines are authorized for use; others remain in trials.

COVID-19 can cause milder outpatient illnesses among young adults & others.
Evidence is emerging of impacts of COVID infection on mental health.

“Long haul COVID” cases extend over months.

“Super spreader” events entail extensive risks for affected persons.

Viral variants challenge existing infection rates and vaccines.
Public health authorities & powers vary depending on the type of emergency declared at every level of government.

<table>
<thead>
<tr>
<th>International</th>
<th>WHO Public Health Emergency of Int’l Concern January 30, 2020</th>
<th>Emergency Declarations by Foreign Governments Ongoing</th>
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</thead>
<tbody>
<tr>
<td>Federal</td>
<td>Stafford Act or National Emergencies Act</td>
<td>HHS Public Health Emergency</td>
</tr>
<tr>
<td>State/Tribal</td>
<td>Emergency or Disaster</td>
<td>Public Health Emergency</td>
</tr>
<tr>
<td>Local</td>
<td>Emergency or Disaster</td>
<td>Public Health Emergency</td>
</tr>
</tbody>
</table>
Jan. 31: HHS Sec. Alex Azar declares national **public health emergency** effective as of Jan. 27, 2020 (and since renewed on 3 subsequent occasions).

- Encourages interjurisdictional coordination
- Allows waivers of specific federal laws
- Authorizes real-time countermeasures through emergency use authorizations
- Supports social distancing measures
Federal Emergencies/Invocations

- **HHS Public Health Emergency**: Jan. 31
- **HHS PREP Act Declaration**: Feb. 4
- **Stafford Act Emergency**: Mar. 13
- **National Emergencies Act**: Mar. 13
- **Defense Production Act**: Mar. 20
COVID State & Select Tribal/Local Emergency Declarations

Click on the **date** of each state to view declarations

Link [here](#) for updates re: jurisdictional requests for FEMA disaster relief
Select State Emergency Powers Explicitly Invoked by Declarations

**Note:** this table tracks select, express authorities referenced via state emergency declarations (link on each state acronym for access). *Additional emergency powers may be authorized under state law through which the declarations are issued.*

| Emergency Powers                  | A | A | A | C | C | C | D | F | H | I | I | K | L | M | M | M | M | M | N | N | N | N | N | O | O | O | P | R | T | V | U | W | W | W |
| Altered Contracts | Procurements   | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Emergency Plans | ICS               | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Funding | Resource Allocation | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Intrastate Coordination     | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Isolation | Quarantine      | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Licensure Reciprocity        | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Price Controls re: Gouging   | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Surveillance | Reporting     | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Testing | Screening | Treatment | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Travel Restrictions         | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |
| Waivers | Suspensions    | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ | ■ |

Note: this table tracks select, express authorities referenced via state emergency declarations (link on each state acronym for access). Additional emergency powers may be authorized under state law through which the declarations are issued.
Emergency Declaration Initial Timing & Projected Expiration by Month (2020-2021)

- Number of states issuing initial emergency declarations:
  - April 2020: 49
  - Other months: 1

- Number of states whose emergency declarations are projected to expire per month, absent further intervention:
  - March 2021: 19
  - April 2021: 9
  - May 2021: 3
  - June 2021: 1

For more information on the current status of state/territorial declarations, see the National Governors Association online resource.
COVID-19 Legislative Trends

- **1,565** COVID-related bills introduced at the federal level (as of 11/16/20) according to GovTrack.com—(42 enacted, either in-full or by incorporation)

- **3,333** COVID-related state bills (as of 11/16/20) according to NCSL—902 adopted

- Thousands more local ordinances proposed/enacted nationally (2,720 reported by NLC through 8/20/20)
Major Enacted Federal Legislation

Families First

Mar. 18: Families First Coronavirus Response Act
- Private health plans must provide $0 cost coverage for COVID-19 tests
- Temporarily increases federal portion of Medicaid
- Requires 14 days of paid sick leave for certain employees

CARES Act

Mar. 27: CARES Act
- Largest stimulus package in history
- Requires insurance providers to cover COVID-19 testing, vaccines & preventative services
- Protects volunteer HCWs from liability
- Authorizes PHI disclosure with written patient consent

PPP & HEA

Apr. 24: Paycheck Protection Program & Healthcare Enhancement Act
- Additional funding for hospitals & HCPs
- Supports testing & contact tracing efforts
- Requires governors to submit 2020 testing plan
- HHS Secretary must report on testing, cases & deaths
Dec. 27: President Trump signs $2.3 trillion CAA 2021 (largest stimulus package in history):

- Provides $900 billion in stimulus relief for COVID-19 & $1.4 trillion omnibus spending bill for 2021’s federal fiscal year
- Supplements CARES ACT Paycheck Protection Program with additional $284.5 billion for PPP loans
- Expands Medicare access to mental health services via telehealth
- Mitigates cuts to physician payments & provides $3 billion in increased physician services
- Establishes a new Rural Emergency Hospital Medicare designation
Feb. 5: Budget Reconciliation measure passes House & Senate  
March 11: President Biden signs the American Rescue Plan Act of 2021 into law

The $1.9 trillion package includes:
- $1,400 stimulus checks to adults/children at certain income thresholds;
- $350 billion in support for state/local governments;
- $47.8 billion to detect & trace COVID-19 infections;
- $7.7 billion to establish, expand & sustain the public health workforce;
- $7.6 billion for community health centers
- $7.5 billion to CDC to promote, distribute, administer & track COVID-19 vaccinations;
- $6 billion for research, development, purchase of vaccines, therapeutics & other products; and
- $1.5 billion for block grants towards community mental health services
Legal Triage: efforts of legal actors & others during declared emergencies to build a favorable legal environment by prioritizing issues & solutions facilitating legitimate public health responses
Balancing Individual & Communal Interests

Individual Interests:
- Privacy
- Religious Freedoms
- Due Process
- Equal Protection

Communal Interests:
- Surveillance
- Treatment
- Isolation & Quarantine
- Curfews & Closures

Emergency Preparedness & Response
Select Structural & Rights-based Constitutional Issues

- Separation of Powers
- Federalism
- Supremacy
- Preemption
- Judicial Deference

- Freedom of Expression
- Freedom of Assembly
- Freedom of Religion
- Due Process
- Right to Privacy

- Equal Protection
- Right to Travel
- Right to Bear Arms
- Cruel & Unusual Punishment
- Takings
Key Legal Issues

Topics

- Emergency Powers - Triage
- Crisis Standards of Care
- Social Distancing Measures
- Privacy
- Liability
- Surveillance & Reporting
- Testing/ Treatment/ Vaccination
March 3: VP Pence: “Any American can be tested . . . subject to doctor’s orders.”

March 21: Some health officials restrict coronavirus testing to HCWs & hospitalized persons, saying “the battle to contain the virus is lost [as we move] into a new phase of the pandemic response.”

April 11: CMS issues guidance requiring insurers to cover diagnostic testing & related services with no patient cost-sharing.

April 19: Antibody tests key to reopening country are in high demand, yet tests’ availability & inaccuracies raise alarms.

May 7: AZ Gov. Ducey withdraws access by university researchers to select health data for in-state surveillance, then reverses decision.

January 11, 2021: More than 260 million COVID-19 tests have been conducted in the U.S.
Contact tracing - efforts typically led by public health agents to ascertain specific contacts of persons infected with COVID-19 & notify them of potential exposure & seek testing.

States are hiring thousands for contact tracing activities within health agencies.

Apple & Google released Bluetooth technology on April 10 that sends automatic alerts to persons in range of COVID + persons, raising privacy concerns.

New bill signed into law in Kansas on June 8 restricts contact tracing to voluntary participants, provides strong confidentiality protections & extensively limits liability.
HIPAA, Health Information Exchanges, and Disclosures of Protected Health Information for Public Health Purposes

OCR Issues Guidance on HIPAA, Health Information Exchanges, and Disclosures of Protected Health Information for Public Health Purposes

Today, the Office for Civil Rights (OCR) at the U.S. Department of Health and Human Services (HHS) issued guidance on how the Health Insurance Portability and Accountability Act of 1996 (HIPAA) permits covered entities and their business associates to use health information exchanges (HIEs) to disclose protected health information (PHI) for the public health activities of a public health authority (PHA).

For additional expert analyses & guidance, contact Denise Chrysler, JD and colleagues at the Network–MidStates Region
• **Localities in 43 states & territories** require face masks to be worn by employees, customers, or others in public.
• **July 7**: Freedom Foundation files lawsuit challenging the constitutionality of WA state mask mandate. On **July 27**, it sues Oregon re: its mask mandate.
• **July 10**: Judge rejects FL lawsuit challenging the constitutionality of Orange County’s mask requirement.
• **Aug. 13**: GA Governor Kemp announces his office is dropping its case against the City of Atlanta re: its mask requirement.
• **Aug. 13**: Future President Joe Biden calls on states to craft face mask requirements.
• **Aug. 20**: NY Gov. Cuomo admits mask requirement should have been issued months earlier.
Sept. 2: CDC Director Dr. Robert Redfield signs declaration temporarily halting evictions.

- Order bans evictions of residential renters earning less than $99k annually ($198k jointly) through December 2020.
- Qualifying renters must present written declaration testifying to their circumstances to landlords
- Landlords who defy the moratorium may face criminal penalties
- CDC cites its authority under the Public Health Service Act § 361(42 U.S.C. 264) & an emergency action taken under 42 C.F.R. 70.2, “measures in the event of inadequate local control.”

Oct. 29: U.S. District Court of Georgia - Atlanta Division affirms CDC’s eviction order.
Social Distancing Measures

- Control modes of transportation
- Increase distance among workers
- Dismiss schools
- Restrict public gatherings
- Isolation & quarantine
- Evacuation
- Curfew
- Shelter-in-place/Lockdown
Justifying Social Distancing

Assess Epi
Assure Mobilization
Acquire PPE

Find Treatments
Develop Vaccines
Save Lives
Quarantine

Separation from others of people exposed to a contagious condition prior to knowing if they may be ill or contagious

Isolation

Separation from others of people who are known to be infected, or capable of infecting others, with a contagious condition

Best Practices

- Safe, hygienic premises
- Monitoring & care
- Basic necessities
- Means of communication
- Least restrictive means
- Termination
Closures & Cancellations

Places of Worship

Employers

Schools & Universities

Events

Sports

Festivals
**Curfews**

**Mar. 29:** Curfew order extending across Navajo Nation requires all persons (w/some exceptions) to stay home from 8:00 p.m. - 5:00 a.m., 7 days a week.

**May 5:** Gallup, NM imposes strict confinement measures via use of “riot act” authorities allowed by NM Gov. Grisham.

**Aug. 19:** Puerto Rico Gov. Wanda Vazquez imposes “Sunday” lockdown (in addition to weekly 10 pm – 5 am curfew).

**Jan. 20:** Arizona state court judge voids Pima County’s 10:00 p.m. curfew as violation of state law.
March 15, 2020: White House and CDC recommend no in-person events consisting of 10 or more people throughout the U.S. until April 30.

Jan. 8, 2021: CDC guidance states “The size of an event or gathering should be determined based on state, local, territorial or tribal safety laws and regulations.”
Travel Restrictions

- Flight Bans
- Immigration Activities
- Foreign Work Visas
- Border Crossings
- State Quarantines
- Closures
State Shelter-In-Place or Stay Home Orders

Click on the date of each state to view the order

Note: data are based in substantial part on NYT (March 24, 2020)

Shelter-in-Place or Stay Home Orders – 43 states

Shelter-in-Place or Stay Home Orders – 3 partial states
Collateral Consequences

Unemployment
Business Failures
Government Bailouts

Active Protests
Mental Health
Lost Lives
April 16: White House releases guidelines for “Opening Up America Again,” a 3 phased approach for state/local officials to consider. States must first meet regional gating criteria:

- Downward trajectory of COVID illnesses reported w/in 14 days
- Downward trajectory of cases or positive tests w/in 14 days
- Hospitals must treat all patients outside CSC or implementation of a “robust reporting system”

April 21: U.S. Attorney General William Barr instructs U.S. Attorneys to litigate against states failing to comply with national re-opening strategies
Re-opening Phases

Phase 1

- Vulnerable individuals shelter-in-place
- Practice social distancing & avoid socializing in groups >10
- Employers should encourage telework & most businesses remain closed

Phase 2

- Resume non-essential travel
- Schools, gyms & bars may re-open

Phase 3

- Vulnerable individuals may resume public interactions, with social distancing
- Large venues may reopen
Re-opening Efforts

Essential Business

Light Retail

Schools/Colleges

Bars

Gyms

Restaurants
Re-opening Infection Rates

Percent change in average daily cases since reopening

Source: New York Times
Substantial change in usual healthcare operations & level of care due to a pervasive or catastrophic disaster.
Practical, Ethical, and Legal Challenges Underlying Crisis Standards of Care

James G. Hodge, Jr., Dan Hanfling, and Tia P. Powell

- Allocation
- Patient’s Rights
- Reimbursement
- Licensure
- Scope of Practice
- Civil Rights
- Documentation
- Uniformity
- Liability
2 Paths Re: CSC Liability Claims

Path 1 - *Follow the Evolving Standard of Care*

- **Increasing:**
  - Patient #s
  - Patient needs
  - Risks

- **Lessening:**
  - HCWs
  - Volunteers
  - ICU beds
  - PPE

Path 2 - *Provide Enhanced Liability Protections for HCWs & Entities*
Multiple liability protections may apply to HCWs, volunteers & entities for acts of negligence – but not intentional misconduct.
### CSC Legal Issues – Key Take-aways

1. Emergency declarations authorize numerous powers essential to effectuating CSC
2. Legal invocation of CSC may arise via different routes and entail multiple options for public and private sectors
3. Resolving jurisdictional challenges across states may require utilizing emergency authorities to resolve conflicts
4. Alleviating licensure & scope of practice concerns through SOP expansions or reciprocity can ameliorate shortages
5. Shifting standards of care do not belie general legal duties or additional CSC duties owed to patients
6. Documenting decisions lawfully and transparently implicates CSC shifts internally and externally
7. Manifold liability protections help assure HCWs, volunteers, and entities can implement CSC
8. Mitigation of legal risks entails advance planning, real-time interventions & commitment to sound process/ethics
National Academies
Vaccine Allocation Guidance

Phase 1
- High-risk workers in health care facilities
- First responders
- People of all ages with comorbid & underlying conditions at significantly higher risk
- Older adults living in congregate settings

Phase 2
- Critical risk workers
- Teachers & school staff
- People of all ages with comorbid & underlying conditions at {\textit{moderately}} higher risk
- All other older adults
- People in homeless shelters & prisons

Phase 3
- Children
- Young adults
- Workers in essential industries

Phase 4
- Everyone else living in the US

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As of Jan. 3, 2021, U.S. readiness to receive the COVID-19 vaccine reaches 65%
| 1 | Relevance of Emergency Declarations |
| 2 | Legal Challenges to the Allocation Scheme |
| 3 | FDA Approval and EUA Authorization Process |
| 4 | Federal Authority over State, Tribal, & Local Governments |
| 5 | State Mandates to Vaccinate |
| 6 | Employer Mandates |
| 7 | Vaccine Exemptions |
| 8 | Informed Consent |
| 9 | Liability Protections for Providers & Entities |
| 10 | Compensation for Injuries Resulting from Vaccination |

**Slide Credit:** Jennifer L. Piatt, JD, Senior Attorney, Network – Western Region Office
Emergency Use Authorization (EUA): FDA evaluates evidence available, balancing known risks with known benefits, to determine whether the product “may be effective” and subsequently authorized.

Slide Credit: Jennifer L. Piatt, JD, Senior Attorney, Network – Western Region Office
“There are moments in history when more is asked of us as Americans. We are in that moment now and history will measure whether we were up to a task. **Beating this pandemic will be one of the most difficult operational challenges we have ever faced as a nation.**” Jan. 21, 2021
Objectives & Duties:
• Reduce disparities in COVID-19 response & treatment
• Coordinate efforts to produce & distribute PPE, vaccines, tests & other response supplies
• Ensure continuity of educational & other services for kids & elementary/secondary students
• Coordinate with state, tribal, territorial & local authorities
The Task Force shall guide heads of agencies on multiple subjects related to the federal workforce:

- Testing methodologies & protocols
- Case investigation & contact tracing
- Requirements & limitations on physical distancing
- Enhanced structures to support telework
Federal Agency Coordination

Right click on each image to link to COVID-19 sites
National Strategic Plan for the COVID-19 Response and Pandemic Preparedness

January 2021
National Strategic Plan – 6 Primary Domestic Goals

“We can and will beat COVID-19. America deserves a response to the COVID-19 pandemic that is driven by science, data, and public health — not politics.”

1. Restore trust with Americans
2. Comprehensive vaccination campaign
3. Mitigate spread through public health standards
4. Expand emergency relief via DPA
5. Reopen schools, business & travel
6. Equity across racial, ethnic & rural/urban lines
“To rebuild the trust of the American people, the National Strategy will signal **clear public leadership and a commitment to a robust whole-of-government response** that puts science first.”

A. National COVID-19 response structure driven by science & equity

B. Conduct regular science-based public briefings

C. Publicly share data around key response indicators

D. Lead science-first public health campaigns
Goal 2. Vaccination Campaign

“The [U.S.] will spare no effort to ensure Americans can get vaccinated quickly, effectively, and equitably. The federal government will execute an aggressive vaccination strategy, focusing on the immediate actions necessary to convert vaccines into vaccinations. . . .”

A. Ensure the availability of safe, effective vaccines

B. Accelerate vaccine administration to people & communities

C. Create new venues for people to be vaccinated

D. Focus on hard-to-reach & high-risk populations

E. Expand range of providers & assure they are compensated

F. Monitor vaccine safety & efficacy
Goal 3. Mitigate Spread

“A comprehensive national public health effort to control the virus — even after the vaccination program ramps up — will be critical to saving lives and restoring economic activity.”

A. National mask mandate & “challenges” to state, tribal & local governments

B. Establish COVID-19 Pandemic Testing Board to unify approaches

C. Effectively distribute tests & expand access to testing, especially among schools

D. Seek new treatments & therapeutics

E. Empower CDC to develop actionable, evidentiary guidance based on new data

F. Expand U.S. public health workforce & increase clinical care capacity
“It’s past time to fix America’s COVID-response supply shortage problems for good. The [U.S.] will immediately address urgent supply gaps, . . . while also steering the distribution of supplies to areas [of] greatest need.”

A. Increase emergency funding to states & bolster FEMA’s response efforts

B. Fill major supply shortfalls via the Defense Production Act

C. Develop a new Pandemic Supply Chain Resilience Strategy

D. Improve distribution, expand availability, & control pricing of critical materials
Goal 5. Re-opening

“At the same time that the [U.S.] takes immediate steps to achieve an overall decrease in COVID-19 spread, it will also support the safe operation of schools, businesses, and travel.”

A. Implement a national strategy to safely reopen schools

B. Fund safe operations at child care centers & at-home providers

C. Support equitable reopenings & operations at colleges

D. Protect workers via OSHA & other federal safety guidelines

E. Provide guidance & support to safely open commerce & small businesses

F. Promote safe travel domestically & abroad
Goal 6. Equity

“The COVID-19 pandemic has exposed & exacerbated severe & pervasive health inequities among communities defined by race, ethnicity, geography, disability, sexual orientation, gender identity & other factors.”

A. Establish a COVID-19 Health Equity Task Force
B. Ramp up data collection & reporting for at-risk populations
C. Ensure equitable access to critical PPE, tests, therapies & vaccines
D. Expand access to high quality health care
E. Enhance the “social service safety net” to meet basic needs
F. Address risks for persons in congregate settings
Goal 7. Restore U.S. leadership globally

The Assistant to the President for National Security Affairs (APNSA) shall convene the National Security Council (NSC) Principals Committee for guidance regarding:

• Preparing & responding to biological threats
• Identifying, monitoring & preparing for emerging pandemic threats
• Assessing secondary or tertiary effects of COVID-19
• Intersection of COVID-19 responses & other national security priorities
• Re-engaging with the World Health Organization
Major Strategic Changes in Approach

- Testing
- Screening
- Masks
- Vaccination
- Treatments
- Travel/Openings

Responsibility for:

- Science
- Guidance
- Data
- Best Practices
- Funding

Shared with:

Shifts to:
Emerging Law & Policy Issues

National Strategic Plan

- Scope of Powers
- Access
- Benefits
- Research
- Contracts
- Price Gouging
- Pre-emption
- Privacy
- Civil Rights
- Liability
- Duties
- Waivers
- Costs
Access these and other Network materials [here](https://www.thenetworkforpublichealthlaw.org).

- **Latest Resources**
- **Federal Public Health Emergencies**
- **Social Distancing Powers**
- **Liability of Health Care Workers and Entities**
- **Hospital Emergency Legal Preparedness**
- **State and Local Preparedness**
- **Emergency Declarations and Powers**
- **Mental and Behavioral Health Preparedness**
- **Model Emergency Laws**
- **Emerging Threats Preparedness and Response**
- **Crisis Standards of Care**
- **Public Health Emergency Ethics**

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- **Ask the Network** re: questions/comments
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