

Episode 2: Public Health Impacts of COVID-19

1 What is the current status of Department of Health and Human Services (HHS) programs and available funding support?

A: As of April 6, we still have widespread transmission in every state, and this first pandemic wave will continue through April and May. There are currently three main sources of funding for health and medical costs related to recovery and response operations:

- Centers for Disease Control and Prevention (CDC) CDC released a response supplemental of about \$570 million among the 62 recipients for six domains: (1) community resilience, (2) incident management, (3) information management, (4) counter measures and mitigation, (5) surge management, and (6) biosurveillance. CDC released an FAQ on allowable and unallowable expenses that can be accessed below.
 - Frequently Asked Questions: COVID-19 Crisis Response Cooperative Agreement Components A and B Supplemental Funding Interim Guidance
 - Funding Opportunity Announcement (FOA)
 - FOA Additional Information
- Office of the Assistant Secretary for Preparedness and Response (ASPR) \$100 million is in the process of being awarded and is being equally divided among existing recipient health departments. There is an additional cooperative agreement being added for 53 states, territories, and city hospital associations. The funds may not be used for clinical care or staffing to provide clinical care.
 - HHS Provides \$100 Million to Help U.S. Healthcare Systems Prepare For COVID-19 Patients
 - Hospital Preparedness Grants
- Federal Emergency Management Agency (FEMA) There is funding available through the Disaster Relief Fund for Category B Emergency Protective Measures under FEMA's Public Assistance Program in accordance with the COVID-19 Emergency Declaration.
 - Coronavirus (COVID-19) Pandemic: Eligible Emergency Protective Measures
 - Coronavirus (COVID-19) Pandemic: Emergency Medical Care
 - Coronavirus (COVID-19) Pandemic: Non-Congregate Sheltering



It is important here to track all costs related to preparation for, response to, and recovery from this pandemic to determine what is eligible for reimbursement and then to coordinate with insurers and state and local management departments to determine what is eligible for which programs.

What things should state and local officials be thinking about and planning for over the next few months?

A: Officials should emphasize the collaborative relationships between local, state, and federal health officials and should share lessons learned across the different states in their regions. They should also consider what equipment, supplies, and people are needed and how to resupply and access additional personnel to support alternate care sites and other medical surge activities. Some states, for example, are decreasing licensing restrictions to grow the pool of eligible healthcare professionals to add more healthcare professionals to the workforce.

3 How has this impacted our healthcare workers?

A: Healthcare workers continue to be the frontline responders, and this event has shown us that we can always rely on our healthcare professionals. It has also shown that we need to support them both physically and emotionally. There is a need for longer-term planning to prepare healthcare workers for events such as this.

4 How should individuals respond to and handle the challenges that have come along with COVID-19?

A: It is critical to maintain as much of a normal routine as possible, especially for those who care for the young and elderly. Also, continue to maintain boundaries between you and those who must continue to work and respond to this crisis. Try not to do too much that is new and different; your mind and body are already under stress.

5 How much should we be paying attention to the news and information available?

A: We are generally overloaded with news, and it is not always accurate. It is good to check in at key points in the day, when there is a need to know the status of your community. That said, try to avoid an overload of news, media, and social media, which can have a negative impact on your levels of stress and anxiety.

6 Does it help to talk about the anxiety and stress that we are currently feeling?

A: It is always good to share your stories, fears, and concerns with someone you trust and who understands and accepts how you feel. Emotional isolation in addition to social isolation is not always healthy. If you are not as comfortable sharing with others, consider creating a journal or other form of narrative to express how you are feeling.

7 Are there good stress management exercises that we could be doing?

A: Engage in some simple, one- to two-minute breathing exercises; simply focusing on your breath can help decrease blood pressure, heart rate, and stress levels. Walking in nature and stretching are also activities individuals and healthcare workers can do to help mitigate adrenaline and get rid of negative, toxic stress hormones.



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For more information and insights on COVID-19, visit:

https://www.icf.com/insights/covid-19

What do you see as the potential long-term impacts of how we behave and how the healthcare system will reshape itself in the future?

A: The healthcare system is by design a just-in-time system and designed to support the general day-to-day demand of a community. At this time, all non-elective surgeries and procedures are not happening, and hospital admissions outside of COVID-19 are low, so the long-term solvency of the healthcare system is concerning.

There also needs to be a recognition that our healthcare workers and facilities really are on the frontline and need our support and resources to be able to respond. We know that most people are showing their strength and resilience in times like this, a phenomenon known as post-traumatic growth. We are starting to see this on the news, on social media, and all over the world. We also need to be aware of and looking for the smaller percentage of individuals who may develop anxiety and health issues and connect them with resources.

