

DR-4355-AK COVID-19 Supplemental Information Document

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Applicant Eligibility/Eligible Applicants

General Information

Date Provided: 3/31/2020

Document Referenced: 033020 - PA Fact Sheet Emergency Medical Care for COVID-19.pdf

- State, local, tribal, and territorial (SLTT) government entities are eligible to apply for PA.

- Certain PNP organizations are eligible to apply for PA, including those that own and/or operate medical care facilities.
 - Please see [page 25](#), “Emergency Protective Measures Conducted by Private Nonprofit Organizations” for more information

- Private for-profit entities, including for profit hospitals, are not eligible for assistance from FEMA under PA. **SLTT government entities may contract with for profit hospitals or PNPs to carry out eligible emergency protective measures.** FEMA will reimburse the eligible Applicant for the cost of eligible work, and the Applicant will then pay the private entity for the provision of services.

- FEMA Cannot:
 - Provide assistance under PA that is covered by another funding source
 - Duplicate assistance provided by HHS, including the Centers for Disease Control and Prevention (CDC), or other federal agencies
 - Provide PA funding for emergency medical care costs if they are covered by another source, including private insurance, Medicare, Medicaid, or a pre-existing private payment agreement

Application

Expedited Funding

Date Provided: 3/25/2020

Document Referenced: PA FEMA Job Aid - Expedited Funding for COVID-19 (03.25.20).pdf

- FEMA may provide expedited funding for Emergency Protective Measure projects that exceed the large project threshold. Project scopes of work and cost estimates are:
 - Scoped in clear operational periods (30, 60, or 90 days);
 - Scoped with clear authorized activity lists;
 - Initially funded at 50% of the estimated cost; and
 - Funded at the incident's federal cost-share for the defined operational period.

- To apply for expedited funding for COVID-19, Applicants must provide the following information on the activities the Applicant performed or plans to perform:
 - 1) Information about the activities the Applicant performed or plans to perform:
 - Operational period (30, 60, or 90-days, or to mirror the declaration's cost-share periods); and
 - List and high-level description of activities.
 - 2) Information about how the Applicant performed or plans to be performed the activities:
 - Description of threat to life or property that necessitate activities; and
 - Location(s) where activities were performed.
 - Confirmation that the work is the legal responsibility of the Applicant.
 - 3) Confirmation that the Applicant has not and will not request funding for these activities from the U.S. Department of Health and Human Services (HHS), to include the Centers for Disease Control and Prevention (CDC), or other federal agencies.
 - 4) The total estimated cost, with the following information:
 - For labor costs:
 - Number of personnel; average hours per day; average days per week; and
 - Average pay rate. If not available, FEMA will estimate at \$20 per hour
 - For equipment:
 - If Applicant's own equipment: amount of equipment used, by type; average hours per day; and days per week; and hourly rate. If not available, FEMA will estimate based on FEMA equipment rates;
 - If rented equipment, rental agreement with pricing; or
 - Purchase price, if purchased.
 - For materials:
 - Amount of materials, by type; and
 - Purchase or stock replenishment cost.
 - For contract work:

- copy of request for proposals, bid documents or signed contracts, if available. If contracts are not available, provide unit price estimates with the basis for the unit prices (e.g., historical pricing, vendor quotes).
 - For other:
 - high-level information which can substantiate costs
- 5) Insurance documentation for activities, if applicable.

PA Simplified Application Steps

Date Provided: 3/21/2020

Documents Referenced: COVID-19 Public Assistance Simplified Application Fact Sheet.3.22.20.pdf & PA Application Simplification for COVID-19 Memo.3.22.20.signed.pdf

- Steps for FEMA PA Simplified Application Process:
 - 1) Attend virtual applicant briefing
 - 2) Log on to grantee.fema.gov or create account
 - 3) Submit Request for Public Assistance (RPA)
 - 4) Submit COVID-19 Project Worksheet (PW) and docs
 - 5) FEMA and state (recipient) review documents
 - 6) Sign final grant
- Funding is immediately available should state, tribal, territorial or local officials request expedited assistance. Prior to funding, recipients must:
 - 1) sign FEMA-State/Tribal/Territorial Agreements
 - 2) submit signed Federal Grant Applications (SF-424)
 - 3) Update Recipient Public Assistance Administrative Plans
 - 4) Receive funding

General Information

Date Provided: 3/20/2020

Document Referenced: COVID-19 PA Application Changes Talking Points v2.docx

- Applicants should be prepared to drive their own recoveries and directly apply for reimbursement without an assigned Program Delivery Manager (PDMG).
- FEMA is making adjustments to simplify the application process but not deviating from the basics experienced Recipients and Applicants will understand.
- FEMA is standing by to immediately provide funding, as requested
- This is a dynamic environment, and FEMA is doing everything they can to communicate and to improve their ability to deliver large-scale assistance rapidly.

Deadlines

Damage Identification

Date Provided: 5/14/2020

Document Referenced: 05142020 - COVID-19 60-Day Deadline to Identify Damage Memo.pdf

Based on the national impacts of COVID-19, the unprecedented nature of the national emergency declaration, the number of potential Public Assistance Applicants, and the fact that these Applicants are still actively engaged in life-saving operations, enforcing the 60-day deadline at this time is not appropriate. Therefore, the deadline to identify and report damage is extended for the national emergency declaration and all subsequent major disaster declarations for the COVID-19 pandemic, and will remain open for the duration of the Public Health Emergency, as declared by the Secretary of the U.S. Department of Health and Human Services, unless an earlier deadline is deemed appropriate by the Assistant Administrator of the Recovery Directorate. As such, Applicants must identify and report damage by either: 60-days from the end of the Public Health Emergency or 60-days from the approval of their Request for Public Assistance, whichever is later. At that time, the Regional Administrator, pursuant to 44 CFR 206.202(f)(2), may extend the time limitations in 44 CFR 206.202(d)(1)(ii).

Purchase and Distribution of Food

Date Provided: 5/14/2020

Document Referenced: FW_RX Public Assistance COVID-19 FEMA Daily Update 5_14_2020.msg

Public Assistance is clarifying that extensions beyond the initial 60 days (30 days or less per extension) are allowable when necessary as an Emergency Protective Measures for the purchase and distribution of food through the duration of the COVID-19 Public Health Emergency, as determined by HHS, in alignment with existing policy guidance. The Regional Administrator is authorized to grant these additional extensions.

- All applicant, work, and cost eligibility criteria in the current policy should continue based on persisting or worsening need.
- Allowing for additional extensions will address the timing constraint of other federal programs.
 - USDA expects to begin distribution of TEFAP product funded through the CARES Act in July 2020.
 - FEMA Regions report that current PA-funded programs may require up to two weeks to stand down operations.
 - Many stay-at-home orders are expected to be in place at least into June 2020. CDC recommends that at-risk populations remain at home even longer.
 - It is not possible to accurately evaluate the need for continued Emergency Protective Measures beyond July 2020. PA will coordinate with the Food Security Working Group to conduct an additional evaluation in June 2020, once more states have removed stay-at-home orders and the initial impacts of USDA programs can be evaluated.
- Extension Criteria Beyond 60 days
 - The SLTT should collaborate with government stakeholders including the HHS Administration for Community Living (ACL), State Units on Aging, Area Agencies on Aging (AAA), regional and local Housing and Urban Development Public Housing Authority (HUD/PHA) , and USDA Food and Nutrition Service to

understand what they are doing to address these needs and communicate assistance requirements.

- The SLTT should also collaborate with non-governmental organizations including volunteer organizations, senior centers and adult day care, and service/volunteer organizations including Meals on Wheels, the Salvation Army, the American Red Cross, faith-based communities, and other organizations. Identify what resources that might be applied or redirected to close gaps.
- All efforts should be made to prioritize the most vulnerable populations, then register those needing assistance into these more traditional nutrition assistance programs, thereby, further stabilizing the situation and ensuring FEMA eligibility. Refer to the FEMA/HHS Community Mitigation Task Force, Sustaining Nutritional Needs for At-Risk Individuals at <https://www.phe.gov/emergency/events/COVID19/atrisk/Documents/sustianin-g-nutritional-needs-atrisk-individuals.pdf> and Information on Federal Programs to Sustain Nutrition for At-Risk Individuals at <https://www.phe.gov/emergency/events/COVID19/Documents/Nutrition-ProgramChecklist.pdf>.
- While FEMA is coordinating with other partners to determine the appropriate level and source of support moving forward, it is very important that the SLTT work on transition plans that may be needed beyond additional extensions.

Appeals/Arbitration Requests/Net Small Project Overrun Requests

Date Provided: 3/30/2020

Document Referenced: PA Appeals Net Small Project Overrun Requests and Arbitration Deadlines (03.30.20).pdf

- FEMA is extending filing deadlines for 60 days – until May 30, 2020 – for Public Assistance first and second level appeals, arbitration requests, and net small project overrun requests, as established at 44 C.F.R. 206.204, 44 C.F.R. 206.206, 44 C.F.R. 206.209, and Section 423 Arbitration Fact Sheet.
- Public Assistance applicants and recipients who have deadlines under any of these provisions that expire prior to May 30, 2020, instead have until May 30, 2020.

Exceptions

Date Provided: 3/30/2020

Document Referenced: Admin Relief for Recipients and Subrecipients FEMA Memo per OMB M-20-17 (03.27.20).pdf

- 1) Flexibility with application deadlines. (2 C.F.R. § 200.202): Decisions to be made on a program by program basis
- 2) No-cost extensions on expiring awards. (2 C.F.R. § 200.308): FEMA may extend the period of performance of awards that are active as of March 31, 2020 and scheduled to expire through December 31, 2020 at no-cost (i.e., no additional Federal funding) for a period of up to twelve (12) months. Recipients should request extensions pursuant to the conditions

outlined in their award, and FEMA will provide flexibilities to approve those requests to the greatest extent possible.

- 3) Extension of financial, performance, and other reporting. (2 C.F.R. §§ 200.327, 200.328): FEMA will allow recipients to delay submission of pre-closeout financial, performance, and other reports (e.g., reports associated with enhanced monitoring) up to three (3) months beyond the normal due date. FEMA is also waiving the requirement for recipients to notify the Agency of problems, delays, or adverse conditions related to COVID-19 (2 C.F.R. § 200.328(d)(l))
- 4) Extension of currently approved indirect cost rates. (2 C.F.R. § 200.414(c)): FEMA will allow the recipient or subrecipient to continue to use the currently approved indirect cost rates (i.e., predetermined, fixed, or provisional rates) to recover their indirect costs on FEMA awards.
- 5) Extension of closeout. (2 C.F.R. § 200.343): FEMA will allow recipients to delay financial, performance, and other report submissions required by the terms of the award for closeout, provided that the recipients notify FEMA in writing of the closeout report submission delay before the original due dates.
- 6) Extension of Single Audit submission. (2 C.F.R. § 200.512): FEMA will allow recipients and subrecipients that have not yet filed their Single Audits with the Federal Audit Clearinghouse as of March 17, 2020, and that have fiscal year-ends through June 30, 2020 to delay completing and submitting the Single Audit reporting package, as required under Subpart F of 2 C.F.R. § 200.501 Audit Requirements, to six (6) months beyond the normal due date.

RPA deadline

Date Provided: 3/23/2020

Document Referenced: COVID-19 RPA Deadline.Updated.03.21.20.Final.signed.pdf

- The Request for Public Assistance deadline has been nationally extended and will remain open for the duration of the Public Health Emergency, as declared by the Secretary of the U.S. Department of Health and Human Services, unless an earlier deadline is deemed appropriate by the Assistant Administrator, Recovery Directorate. At that time, the Regional Administrator, pursuant to 44 CFR 206.202(f)(2), may extend the time limitations in 44 CFR 206.202(c). FEMA will accept RPAs for 30 days after the end of the declaration of the Public Health Emergency and provide 30-day advance notification if an earlier deadline is established or further extended by a Regional Administrator.

Duplication of Benefits

General Information

Date Provided: 4/24/2020

Document Referenced: RX Public Assistance COVID-19 FEMA Daily Update 4_24_2020.msg

- The CARES Act and supplemental appropriations provide significant Federal funding from a number of departments and agencies to address the impacts of the COVID-19 pandemic, including the Treasury, HHS, HUD, USDA and FEMA. Some of these authorities are very broad, and FEMA and other Federal agencies may be able to provide assistance for the same activities, however funding cannot be used to pay for the same cost twice. Applicants should not wait on funding determinations to take actions necessary to protect public health and safety.
- FEMA is working with other Federal agencies to coordinate the provision of assistance, so that applicants can make the best decisions on funding in order to meet the needs that they face. As part of this effort, FEMA is also coordinating with other agencies to ensure that Federal assistance is not duplicated from various sources. Section 312 of the Stafford Act prohibits FEMA from providing financial assistance where it would duplicate funding from another program, insurance, or any other source for the same costs. Applicants should not request funding for costs that are being claimed or paid for by other sources of funding. If FEMA or the Recipient later determines an Applicant has paid for costs using funding from another federal agency, FEMA may de-obligate funding and the Applicant will have to demonstrate that duplicate funding was not provided.
- The FEMA Public Assistance Program is implementing controls to prevent duplication of benefits in the provision of Public Assistance funding, and is highlighting this requirement in the program delivery process so that applicants are aware of this as they apply for Public Assistance funding. Applicants certify to the following in applying for PA funding: "I certify that the specific activities and costs in this project application were not requested from another funding source or, if they were requested, that other source has not yet approved the funding. Further, I certify that if the Applicant does receive funding for the specific activities and costs in this project application, I must notify the Recipient and FEMA, and funding will be reconciled to eliminate duplication."

Eligible Work

Alternate Care Sites “Warm Sites”

Date Provided: 5/13/2020

Document Referenced: FEMA ACS Warm Sites Fact Sheet (05122020).pdf

FEMA has the authority to provide funding for activities that eliminate or lessen immediate threats to lives, public health, or safety, such as operating an ACS facility.¹ To determine whether work related to ACS warm sites is necessary to eliminate or lessen an immediate threat, FEMA may consider SLTT assessments of need based on:

- Public health guidance, including the continued declaration of a Public Health Emergency by the U.S. Department of Health and Human Services (HHS), and other information on the likelihood of a resurgence of COVID-19 cases;
 - Whether the ACS facility is strategically located for areas projected to be most impacted by a resurgence (e.g., if the ACS facility needs to be relocated to better address the most impacted areas, it may not be prudent to maintain the facility as a warm site); and
 - SLTT hospital bed capacity relative to the projected need.
- FEMA regions will work with the state, territory, or tribe acting as the Recipient to:
- Identify ACS warm sites based on SLTT projections of need as supported by predictive modeling or other supporting information and in accordance with federal, state, and/or local public health guidance;
 - Provide support for ACS warm sites to either suspend medical care activities while maintaining minimal operational readiness for future rapid activation, or to demobilize the ACS and store necessary medical equipment and supplies for future rapid activation; and/or
 - Reduce excess capacity by demobilizing and closing ACS facilities that are no longer in use and not anticipated to be required in future planning scenarios based on the projected needs.

All claimed costs must be necessary and reasonable in order to effectively respond to the COVID-19 Public Health Emergency, in accordance with public health guidance, and are subject to standard program eligibility, the applicable cost share for the declaration, and other federal requirements.² Pursuant to Section 312 of the Stafford Act, FEMA is prohibited from providing financial assistance where such assistance would duplicate funding available from another program, insurance, or any other source for the same purpose. FEMA will reconcile final funding based on any funding provided by another agency or covered by insurance or any other source for the same purpose. FEMA will coordinate with HHS to share information about funding from each agency to assist in preventing duplication of benefits. Costs that may be necessary to maintain the minimum operational level of an ACS warm site include:

- Renting/leasing the space for an ACS facility and/or the necessary equipment to operate the facility and provide adequate medical care in the event of a COVID-19 resurgence;
- Other facility costs such as utilities, maintenance, and/or security;

- Keeping the necessary equipment and supplies (including PPE) in stock, including inspection and maintenance of equipment and supplies, and replacement of non-functioning equipment and expired supplies and commodities;
- Demobilization of ACS facilities when it is more cost effective than maintaining a warm site, and remobilizing in the event of a COVID-19 resurgence based on projected needs;
- Storage of equipment and supplies for ACS warm sites or demobilized ACS facilities which can be re-deployed for future rapid activation;
- Wraparound services, as defined in the ACS Toolkit,³ necessary for minimal operational readiness;
- Minimal level of medical and/or non-medical staffing, if necessary;
- Site restoration to allow a facility that was/is being used as an ACS to return to normal operations until such time as the facility is needed as an ACS again in the event of a COVID-19 resurgence; and/or
- Other costs necessary to maintain a minimum level of operational readiness.

General Eligibility Considerations

Date Provided: 5/11/2020

Document Referenced: FP 104-010-04 Public Assistance Medical Care Policy for COVID-19.signed.pdf

1. Eligible claimed costs must be necessary in order to respond to the COVID-19 Public Health Emergency and reasonable pursuant to Federal regulations and Federal cost principles.¹¹ A cost is considered reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost. All costs are subject to standard PA program eligibility and other Federal requirements. For COVID-19 declarations, FEMA will use Medicare rates¹² as the basis to determine reasonable costs for eligible clinical care not covered by another funding source. Both patient payments and insurance payments are considered another funding source; clinical care for which providers have received or will receive payments from patients or insurance is not eligible.
2. Cost Share for COVID-19 Declarations. PA funding authorized under COVID-19 declarations is subject to the following cost share provisions:
 - a. Eligible costs incurred by an eligible Applicant claiming reimbursement through PA are subject to the non-federal cost share established for the respective emergency or major disaster declaration. Pursuant to sections 403(b) and 503(a) of the Stafford Act, the federal share for FEMA PA funding is not less than 75 percent of eligible costs.
 - b. Direct Federal Assistance provided under Stafford Act authorities is also subject to the cost share established for the respective emergency or major disaster declaration, unless otherwise stipulated.

- c. Federal assistance provided by other federal departments and agencies, including instances in which provision of the assistance is facilitated by FEMA, is funded at the cost share of the other federal department or agency, some of which may be provided at 100 percent federal funding.
 - d. In most cases, federal assistance provided by other federal departments and agencies cannot be used to cover the non-federal cost share. The Applicant can only apply other federal award funds toward the PA non-federal cost share if the other federal award has specific statutory authority allowing it to be utilized to meet cost-share requirements, or is otherwise allowable under the other federal source of funding.
 - e. The Applicant cannot apply PA funds toward the non-federal cost share of other federal agency funding. For example, States may not use PA funding to meet the State share of Medicaid or the Children’s Health Insurance Program (CHIP).
3. Procurement Requirements for COVID-19 Declarations.
- a. States and territorial governments are required to follow their own procurement procedures as well as the Federal requirements for procurement of recovered materials and inclusion of required contract provisions per 2 C.F.R. §§ 200.317, 200.322, and 200.326 and Appendix II to 2 CFR Part 200.15
 - b. Tribal governments, local governments, and PNPs must comply with the requirements of 2 C.F.R. §§ 200.318-200.326.
 - c. In accordance with the March 17, 2020, memorandum from David Bibo, Acting Associate Administrator for the Office of Response and Recovery, and Bridget E. Bean, Assistant Administrator, Grant Programs Directorate, for the duration of the Public Health Emergency, as determined by HHS, local governments, tribal governments, nonprofits, and other non-state entities may proceed with new and existing non-competitively procured contracts using the exigent/emergency circumstances exception in 2 C.F.R. § 200.320(f)(2). The March 17, 2020 memorandum and other information related to procurement specific to COVID-19 declarations are available on the FEMA website at www.fema.gov/medialibrary/assets/documents/186350. Additional resources on COVID-19 specific to grants are also available at www.fema.gov/grants under “News and Announcements” and www.fema.gov/coronavirus.
 - d. SLTT governments may contract with medical providers, including private entities, to carry out any eligible activity described in Section C. Eligible Medical Care by Facility of this policy.
 - e. Contracts must include an actionable termination for convenience clause that will be implemented if any part of the scope of the contract is ultimately not needed, or the needs are less than projected, as determined by the legally responsible entity. Ongoing and projected needs should be based on regular reviews and the Applicant must document the review process to support its decision making. All claimed

contract costs must be necessary and reasonable pursuant to applicable Federal regulations and Federal cost principles.

Medical Care Work and Costs

Date Provided: 5/11/2020

Document Referenced: FP 104-010-04 Public Assistance Medical Care Policy for COVID-19.signed.pdf

1. Primary Medical Care Facility.

For medical care provided in a primary medical care facility, work must be directly related to the treatment of COVID-19 patients. Work may include both emergency and inpatient treatment of COVID-19 patients; this includes both confirmed and suspected cases of COVID-19. Medical care related to treatment of a non-COVID-19 illness or injury in a primary medical care facility is not eligible. The following medical care activities and associated costs are eligible in primary medical care facilities:

- a) Emergency and inpatient clinical care for COVID-19 patients, including, but not limited to:
 - i. Emergency medical transport related to COVID-19;
 - ii. Triage and medically necessary tests and diagnosis related to COVID-19 patients;
 - iii. Necessary medical treatment of COVID-19 patients; and
 - iv. Prescription costs related to COVID-19 treatment.
- b) Purchase, lease, and delivery of specialized medical equipment necessary to respond to COVID-19 (equipment purchases are subject to disposition requirements);
- c) Purchase and delivery of PPE, durable medical equipment, and consumable medical supplies necessary to respond to COVID-19 (supply purchases are subject to disposition requirements);
 - i. This includes the costs of eligible SLTT government Applicants providing PPE to any public or private medical care facility that treats COVID-19 patients.
- d) Medical waste disposal related to COVID-19; and
- e) Certain labor costs associated with medical staff providing treatment to COVID-19 patients may be eligible as outlined below. Any labor costs for medical staff that are included in patient billing and/or otherwise covered by another funding source (as described in Section D.4 Duplication of Benefits of this policy) are not eligible for PA. Otherwise, the following labor costs may be eligible:
 - i. Overtime for budgeted medical staff providing treatment to COVID-19 patients;
 - ii. Straight time and overtime for temporary medical staff providing treatment to COVID-19 patients; and

- iii. Straight time, overtime, and other necessary costs for contract medical staff providing treatment to COVID-19 patients. Work and associated costs must be consistent with the scope of the contract and may include costs for travel, lodging, and per diem for contract medical staff from outside the local commuting area.
 - f) For primary medical care facilities, increased operating costs for administrative activities (such as medical billing) are not eligible.
2. Temporary and Expanded Medical Facilities.

FEMA may approve work and costs associated with temporary medical facilities or expanded medical facilities when necessary in response to the COVID-19 Public Health Emergency. These facilities may be used to treat COVID-19 patients, non-COVID-19 patients, or both, as necessary. Medical care activities and associated costs related to treating both COVID-19 and non-COVID-19 patients in a temporary or expanded medical facility may be eligible.

- a) Costs must be reasonable and necessary based on the actual or projected need. The projected needs (i.e., capacity and capability) for a temporary or expanded medical facility must be supported by predictive modeling or other substantiating information used to determine the projected need.
- b) Eligible costs for temporary and expanded medical facilities include:
 - i. All eligible items and stipulations included in Section C.1 Primary Medical Care Facility, but applicable to both COVID-19 and non-COVID-19 patients;
 - ii. Lease, purchase, or construction costs, as reasonable and necessary, of a temporary facility as well as reasonable alterations to a facility necessary to provide medical care services;
 - iii. Mobilization and demobilization costs associated with setting up and closing the temporary or expanded medical facility;
 - iv. Operating costs including equipment, supplies, staffing, wraparound services (as defined in the Definitions section at the end of this document), and clinical care not covered by another funding source; and
 - v. Maintenance of a temporary or expanded medical facility in an operationally ready but unused status available for surge capacity for COVID-19 readiness and response when necessary to eliminate or lessen an immediate threat to public health and safety, based on public health guidance, location of areas expected to be impacted, and local/state hospital bed/ICU capacity.
- c) For contract costs related to establishing and/or operating a temporary or expanded medical facility, contracts must include a termination for convenience clause that will be implemented if the site is ultimately not needed, or the needs are less than projected, as determined by the legally responsible entity.

- i. Ongoing and projected needs regarding continuing operations at a temporary or expanded medical facility should be based on regular assessments and the Applicant must document the review process to support its decision making.
 - ii. The assessments should include adjustments to projected needs based on guidance from public health officials, caseload trends, and/or other predictive modeling or methodologies; lead times and associated costs for scaling up or down based on projected needs; and any other supporting information.
 - iii. The assessments and supporting information are necessary to determine eligibility of claimed costs and should align with PA reasonable cost guidance provided in the PAPPG and the Public Assistance Reasonable Cost Evaluation Job Aid.
- d) Costs related to expanding a primary medical care facility to effectively respond to COVID-19 must be feasible and cost effective. In most cases, permanent renovations are not eligible unless the Applicant can demonstrate that the work can be completed in time to address COVID-19 capacity needs and is the most cost effective option. Permanent renovations and other improvements to real property with PA funds are subject to real property disposition requirements.
- e) For temporary and expanded medical facilities, and the specific type of temporary medical facilities known as Alternate Care Sites, administrative activities and associated costs necessary for the provision of essential medical services are eligible.

PPE for Bulk Distribution

Date Provided: 5/01/2020

Document Referenced: RX Public Assistance COVID-19 FEMA Daily Update 5_1_2020.msg

- SLTT Applicants can purchase PPE and distribute it to public and private medical care facilities, and be reimbursed by PA at the prevailing cost share. However, an eligible Applicant could not procure PPE on behalf a private business and be reimbursed by PA. See also the agency's guidance on purchase of PPE in the Emergency Medical Care Fact Sheet. FEMA and HHS are working together to distribute cloth facial coverings as part of a multi-prong approach to re-open American economic activity while continuing to limit spread of COVID-19 through direct federal assistance.
- Regarding PNPs, only eligible PNP medical care facilities treating COVID-19 patients would be eligible for PPE. Purchase of PPE is only eligible as an emergency protective measure. For PNPs, emergency protective measures are generally limited to activities to prevent damage to its eligible facility. This is because emergency services are usually the legal responsibility of SLTT governments. In limited circumstances, FEMA may reimburse a PNP directly when essential components of a facility are urgently needed to save lives or protect health and safety, such as an emergency room of a PNP hospital. See PAPPG V3.1, Chapter 2:VI.B. For COVID-19 declarations, eligible PNP medical care facilities providing treatment to COVID-19

patients would be eligible to request reimbursement for medical care services including the purchase of PPE. Any other PNP facility would not be eligible under PA for PPE.

Emergency Food Commodities

Date Provided: 4/27/2020

Document Referenced: Food Commodity Job Aid_Memo FINAL 4.24.20.pdf

- Questions to consider when determining if work associated with emergency food commodities is eligible:
 - Is the requesting entity a State, Local, Territorial, or Tribal (SLTT) government that is legally responsible for emergency food distribution in its jurisdiction?
 - Does the Resource Request Form (RRF) adequately describe eligible work related to the purchase and distribution of food in response to the COVID-19 pandemic for a period limited to the amount of time required to meet the immediate need (e.g., not to exceed 30 days)? (See FEMA Policy FP 104-010-03.)
 - Has the SLTT government articulated a public health and safety need to perform emergency feeding, such as (See FEMA Policy FP 104-010-03):
 - a) Reduced mobility of people in need due to government-imposed restrictions, such as stay-at-home orders;
 - b) Marked increase or atypical demand for feeding resources;
 - c) Disruptions to the typical food supply chain; or
 - d) Identified populations in the impacted community that require provision of food as a lifesaving and life-sustaining commodity, which may include:
 - i. Individuals who test positive for COVID-19 or have been exposed to COVID-19, but do not require hospitalization;
 - ii. Individuals at high-risk, such as people over 65 or with certain underlying health conditions; or
 - iii. Other populations that may need food assistance based on direction or guidance of the appropriate public health official.
- Questions to consider when determining whether a SLTT Government applicant demonstrates a lack of capability to perform or contract for eligible emergency work:
 - Has the SLTT demonstrated that emergency feeding is beyond the SLTT's capability to perform or contract for the work? If so, how?
 - a) Has the SLTT described the scope of eligible work for which it needs DFA?
 - b) Has the SLTT explained the scope of emergency feeding needs.
 - c) Has the SLTT explained that it cannot meet an unusual demand for feeding resources?
 - d) Has the SLTT explained whether it can procure the food commodities in the necessary quantity?

- e) What alternatives did the SLTT explore to meet emergency feeding needs?

Purchase and Distribution of Food

Date Provided: 4/13/2020

Document Referenced: COVID-19 Purchase and Distribution of Food FP-.pdf

- When necessary as an emergency protective measure necessary to save lives and protect public health and safety, eligible work related to the purchase and distribution of food in response to the COVID-19 pandemic includes:
 - Purchasing, packaging, and/or preparing food, including food commodities, fresh foods, shelf-stable food products, and prepared meals;
 - Delivering food, including hot and cold meals if necessary, to distribution points and/or individuals, when conditions constitute a level of severity that food is not easily accessible for purchase; and
 - Leasing distribution and storage space, vehicles, and necessary equipment.

- Approval is required if costs are incurred for more than 30 days

Temporary Medical Staffing

Date Provided: 4/2/2020

Document Referenced: RX Public Assistance COVID-19 FEMA Daily Update 4.2.2020.pdf

- When the emergency medical delivery system within a declared area is destroyed, severely compromised, or overwhelmed, FEMA may fund extraordinary costs associated with providing temporary facilities for emergency medical care or expanding existing medical care capacity in response to the declared incident. Temporary facilities and expansions may be used to treat COVID-19 patients or non-COVID-19 patients, as appropriate. In COVID-19 declarations where temporary facilities and expansions require additional health care workers, SLTT governments may contract with medical providers to provide medical services in these facilities.

Emergency Medical Care Activities

Date Provided: 3/31/2020

Document Referenced: 033020 - PA Fact Sheet Emergency Medical Care for COVID-19.pdf

- Long-term medical treatment is not eligible. This includes:
 - Medical care costs incurred once a COVID-19 patient is admitted to a medical facility on an inpatient basis.
 - Costs associated with follow-on treatment of COVID-19 patients beyond the duration of the Public Health Emergency, as determined by HHS.
 - Administrative costs associated with the treatment of COVID-19 patients.

- Emergency medical care activities under the COVID-19 Declarations include, but are not limited to:

- Triage and medically necessary tests and diagnosis related to COVID-19 cases
- Emergency medical treatment of COVID-19 patients
- Prescription costs related to COVID-19 treatment
- Use or lease of specialized medical equipment necessary to respond to COVID-19 cases
- Purchase of PPE, durable medical equipment, and consumable medical supplies necessary to respond to COVID-19 cases (note that disposition requirements may apply)
- Medical waste disposal related to eligible emergency medical care
- Emergency medical transport related to COVID-19
- Temporary medical facilities and expanded medical care facility capacity for COVID-19 for facilities overwhelmed by COVID-19 cases and/or to quarantine patients infected or potentially infected by COVID-19.
- Medical sheltering (e.g., when existing facilities are reasonably forecasted to become overloaded in the near future and cannot accommodate needs)

Temporary Critical Facilities

Date Provided: 3/27/2020

Document Referenced: FP for Temp Facilities_COVID-19.pdf

- The following steps should be taken when considering the placement of a temporary facility providing medical services or other critical facility to determine if the function, building systems, and equipment can remain operational in the event of a flood:
 - Determine if the site, as well as ingress and egress to the site, is in a Coastal High Hazard Area (Zone V), the Special Flood Hazard Area (SFHA, or 1-percent-annual-chance flood hazard area), or the 500-year floodplain (0.2-percent-annual-chance flood hazard area);
 - If the site is located in any of these high-risk flood hazard areas, the facility should not be located at that site.
 - If no practicable alternative sites exist, and the site must be used, an assessment of the type of flood hazards at the site should be conducted (e.g., flood velocity, flood depth, wave action, etc.), practicable opportunities for flood mitigation assessed, and a flood evacuation plan/emergency plan developed.
 - The emergency plan should include a plan for site evacuation and contingency for loss of facility's function in the event the facility is damaged and can no longer serve its intended purpose.

Accessible Public Service Announcements

Date Provided: 3/23/2020

Document Referenced: COVID-19 EPM for Accessible Public Service Announcements Fact Sheet (03.21.20).pdf

- Under Title II of the Americans with Disabilities Act (ADA), all state, local, tribal and territorial governments are required to take steps to ensure that their communications with people with disabilities are as effective as communications with others.

- Under Category B of FEMA's Public Assistance Program, state, local, tribal, and territorial entities can request assistance for providing communications of general health and safety information to the public. Expenses associated with making those communications accessible and effective for the whole community, including people with disabilities, people with limited English proficiency, and others with access and functional needs, may also be eligible for assistance as Category B emergency protective measures.

- Dissemination of information to the public to provide warnings and guidance about health and safety hazards using various strategies, such as flyers, public service announcements, or newspaper campaigns are listed as eligible costs under Emergency Protective Measures (Category B). Costs associated with providing effective communication through the provision of auxiliary aids or services such as qualified sign language interpreters, Communication Access Real-Time Translation (CART), Braille, or large print materials can be eligible costs for reimbursement if the costs are directly tied to the performance of eligible work and adequately documented.

General Information

Date Provided: 3/19/2020

Document Referenced: COVID-19 Eligible Emergency Protective Measures Fact Sheet (FINAL)(3.19.20).pdf

- Management, control and reduction of immediate threats to public health and safety:
 - Emergency Operation Center costs
 - Training specific to the declared event
 - Disinfection of eligible public facilities
 - Technical assistance to state, tribal, territorial or local governments on emergency management and control of immediate threats to public health and safety

- Emergency medical care:
 - Non-deferrable medical treatment of infected persons in a shelter or temporary medical facility
 - Related medical facility services and supplies
 - Temporary medical facilities and/or enhanced medical/hospital capacity (for treatment when existing facilities are reasonably forecasted to become overloaded)

in the near term and cannot accommodate the patient load or to quarantine potentially infected persons)

- Use of specialized medical equipment
 - Medical waste disposal
 - Emergency medical transport
- Medical sheltering (e.g. when existing facilities are reasonably forecasted to become overloaded in the near future and cannot accommodate needs)
 - All sheltering must be conducted in accordance with standards and/or guidance approved by HHS/CDC and must be implemented in a manner that incorporates social distancing measures
 - Non-congregate medical sheltering is subject to prior approval by FEMA and is limited to that which is reasonable and necessary to address the public health needs of the event, is pursuant to the direction of appropriate public health officials and does not extend beyond the duration of the Public Health Emergency
 - Household pet sheltering and containment actions related to household pets in accordance with CDC guidelines
 - Purchase and distribution of food, water, ice, medicine, and other consumable supplies, to include personal protective equipment and hazardous material suits
 - Movement of supplies and persons
 - Security and law enforcement
 - Communications of general health and safety information to the public
 - Search and rescue to locate and recover members of the population requiring assistance
 - Reimbursement for state, tribe, territory and/or local government force account overtime costs

Force Account Labor

Date Provided: 3/18/2020

Document Referenced: FW_ Reimbursable labor costs.msg

- FEMA determines eligibility of overtime, premium pay, comp time, etc. based on Applicants pre-disaster written labor policy
- Any additional costs should be reasonable, equitable, and necessary

- overtime costs for backfills may be eligible
- overtime and straight-time for unbudgeted or temp employees may be covered

Environmental and Historic Preservation (EHP)

General Information

Date Provided: 3/27/2020

Document Referenced: EHP_EPM Fact Sheet_COVID-19.pdf

- Examples of eligible category B work requiring EHP considerations:
 - Repurposing, renovating, or reusing existing facilities as temporary medical or sheltering facilities
 - Placement of prefabricated facilities on a s
 - Construction of new temporary medical or sheltering facilities
 - Storage of human remains and mass mortuary services
 - Staging resources on an undeveloped site
 - Proper disposal of medical waste

- EHP Information requirements for projects that do have the potential to adversely affect natural, historic, and/or archaeological resources:
 - Location of the work, including and latitude/longitude in decimal degrees (to the fifth decimal point) and site address. Maps or aerial imagery of the project area is also helpful.
 - Description of any ground-disturbing activities, including site preparation, laying new or expanding existing utilities, and expansion of existing footprints.
 - Dates of construction for facilities that are being reused, repurposed, or renovated.
 - Description of modifications made to existing facilities.
 - Photographs of the project site or facility.

Exceptions

General Information

Date Provided: 3/30/2020

Document Referenced: Admin Relief for Recipients and Subrecipients FEMA Memo per OMB M-20-17 (03.27.20).pdf

- 1) Flexibility with SAM registration. (2 C.F.R. § 200.205): SAM registrations expiring before May 16, 2020 will be afforded a one-time 60-day extension. Applicants who are not already registered in SAM.gov will still need to register in SAM before the applicable grant application deadlines in order to apply for grant funding.
- 2) Allowability of salaries and other project activities. (2 C.F.R. §§ 200.403, 200.404, 200.405): FEMA will allow recipients and subrecipients to continue to charge salaries and benefits to currently active FEMA awards consistent with the recipients' and subrecipients' policy of paying salaries under unexpected or extraordinary circumstances from all funding sources, Federal and non-Federal.
- 3) Allowability of costs not normally chargeable to awards. (2 C.F.R. §§ 200.403, 200.404, 200.405): FEMA will allow recipients and subrecipients who incur cancellation costs related to event, travel, or other activities necessary and reasonable for the performance of the award, or costs associated with pausing and restarting grant-funded activities due to the public health emergency, to charge these costs to their awards. FEMA will allow recipients to charge the full cost of cancellation when the event, travel, or other activities are conducted under the auspices of the grant.
- 4) Prior approval requirement waivers. (2 C.F.R. § 200.407): Any prior approval requirements will be waived on a program-by-program basis by the specific grant program offices at their discretion.
- 5) Exemption of certain procurement requirements. (2 C.F.R. §§ 200.319(b), 200.321): FEMA is waiving the procurement requirements contained in 2 C.F.R. § 200.319(b) regarding geographical preferences and 2 C.F.R. § 200.321 regarding contracting small and minority businesses, women's business enterprises, and labor surplus area firms for non-State entities.

Grants Portal

Tutorials

Date Provided: 3/30/2020

Document Referenced: Admin Relief for Recipients and Subrecipients FEMA Memo per OMB M-20-17 (03.27.20).pdf

- Grants Portal Access, et cetera:
 - <https://www.youtube.com/channel/UCIjp91Ds2IaVIR1t8uXcEKg/videos>

- IS-1002: FEMA Grants Portal – Transparency at Every Step:
 - <https://training.fema.gov/is/courseoverview.aspx?code=IS-1002>

- IS-1010: Emergency Protective Measures:
 - <https://training.fema.gov/is/courseoverview.aspx?code=IS-1010>

- IS Course List Emergency Management Institute:
 - <https://training.fema.gov/is/crslist.aspx?all=true>

Procurement

Verbal Contracts/Agreements

Date Provided: 4/30/2020

Document Referenced: FW_ RX Public Assistance COVID-19 FEMA Daily Update 4_30_2020.msg

- If legally responsible SLTT governments enter into agreements with private organizations or PNPs verbally they should formalize the agreements in writing as soon as possible in order to receive reimbursement through FEMA PA. If the SLTT wants to acquire goods and services through a PNP, this would be considered a contract pursuant to 2 C.F.R. § 200.330(c). In sum, as a contract, the SLTT may be able to sole-source, depending on its rules, and it must be mindful of the requirement to include all required contract provisions:
 - Remedies
 - If above \$250k- this clause would apply
 - Termination for Cause and Convenience
 - If above \$10k- this clause would apply
 - EEO requirement doesn't apply
 - Davis Bacon requirement doesn't apply
 - Contract work hours provision
 - If above 100k and employing mechanics or laborers this clause applies
 - Rights to inventions doesn't apply
 - The clean air and federal water pollution act
 - If above \$100k- this clause would apply
 - Debarment and suspension
 - This clause applies
 - Byrd Anti-Lobbying Amendment
 - Would apply. If above \$100k- There is a certification that the contractor is required to complete.
 - Procurement of recovered materials
 - Would apply.

Emergency/Exigent Circumstances

Date Provided: 3/19/2020

Document Referenced: Procurement During EE Circumstances Fact Sheet (03.16.20).pdf & Procurement During EE Circumstances Signed Memo (03.17.20).pdf

- For the duration of the Public Health Emergency, which began January 27, 2020 as determined by HHS, local governments, tribal governments, nonprofits, and other non-state entities may proceed with new and existing noncompetitively procured contracts in order to protect property and public health and safety, or to lessen or avert the threats created by emergency situations for 1) Emergency protective measures under FEMA's Public Assistance Program and 2) Use of FEMA non-disaster grant funds by non-state recipients and sub-recipients to respond to or address COVID-19

- State entities must follow their own procurement procedures as well as Federal requirements for procurement per 2 C.F.R. §§ 200.317, 200.322, and 200.326
- Applicable federal requirements for non-state entities sole-sourcing a contract or modifying a pre-bid contract under emergency or exigent circumstances:
 - Contracts must include the required contract clauses (2 C.F.R. § 200.326 & Appendix II) (also applicable to states).
 - Contracts exceeding the Federal simplified acquisition threshold must include the Federal bonding requirements if the contract is for construction or facility improvement (2 C.F.R. § 200.325).
 - Contracts must be awarded to a responsible contractor (2 C.F.R. § 200.318(h)).
 - The non-state entity must complete a cost or price analysis to determine that the cost or price of the contract is fair and reasonable if the contract exceeds or is expected to exceed the Federal simplified acquisition threshold (2 C.F.R. § 200.323(a) and (b)).
 - The use of cost-plus-percentage-of-cost contracting is prohibited (2 C.F.R. § 200.323(c)).
 - Use of time and materials contracts must comply with 2 C.F.R. § 200.318(j).
 - The non-state entity must follow documentation, oversight, and conflict of interest requirements among other general procurement requirements in 2 C.F.R. § 200.318. If a conflict of interest is unavoidable due to the exigent/emergency circumstances, the non-state entity must explain that in the procurement documentation.
- Emergency/Exigent Procurement Justification Guidelines:
 - 1) Identify which of the four circumstances listed in 2 C.F.R. § 200.320(f) justify a noncompetitive procurement:
 - a) The item is available only from a single source;
 - b) The public exigency or emergency for the requirement will not permit a delay resulting from competitive solicitation;
 - c) The Federal awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from the non-Federal entity; or
 - d) After solicitation of a number of sources, competition is determined inadequate.
 - 2) Provide a brief description of the product or service being procured, including the expected amount of the procurement.
 - 3) Explain why a noncompetitive procurement is necessary. If utilizing the exigency/emergency exception, the justification should explain the nature of the public exigency or emergency, including specific conditions and circumstances that

clearly illustrate why procurement other than through noncompetitive proposals would cause unacceptable delay in addressing the public exigency or emergency. (Failure to plan for transition to competitive procurement cannot be the basis for continued use of noncompetitive procurement based on public exigency or emergency).

- 4) State how long the noncompetitively procured contract will be used for the defined scope of work and the impact on that scope of work should the noncompetitively procured contract not be available for that amount of time (e.g., how long do you anticipate the exigency or emergency circumstances will continue; how long will it take to identify your requirements and award a contract that complies with all procurement requirements; or how long would it take another contractor to reach the same level of competence).
- 5) Describe the specific steps taken to determine that full and open competition could not have been used, or was not used, for the scope of work (e.g., research conducted to determine that there were limited qualified resources available that could meet the contract provisions).
- 6) Describe any known conflicts of interest and any efforts that were made to identify possible conflicts of interest before the noncompetitive procurement occurred. If no efforts were made, explain why. If a conflict of interest is unavoidable, such as due to exigent/emergency circumstances, explain how it was unavoidable and any steps taken to address the impact of that conflict of interest.
- 7) Include any other information justifying the use of noncompetitive procurement in the specific instance."

Sheltering

Non-Congregate Sheltering

Date Provided: 4/17/2020

Document Referenced: FW_ Alaska Non Congregate Sheltering request.msg

- The State of Alaska has requested and been approved for statewide non-congregate sheltering for an initial 60-day period from **4/17/2020 - 6/17/2020**. This approval enables FEMA to consider non-congregate sheltering costs as ordered by the Governor, the Commissioner of HSS, and the Chief Medical Officer. FEMA will review requested extensions and eligible costs during project development. Prior to reimbursement, the applicants will need to submit (if they haven't already) an RPA and they will need to provide documentation to justify incurred costs in accordance with PA policy, and as required by the State and FEMA.

Date Provided: 3/27/2020

Document Referenced: RX Public Assistance COVID-19 FEMA Daily Update 3_27_2020.msg

- Non-congregate sheltering: Hoteling or a similar solution for existing shelter residents or other folks that the jurisdiction has legal responsibility to provide. Requires pre-approval or a waiver from FEMA in addition to meeting standard Category B requirements.
- Additional space for existing congregate sheltering: buying, renting, building to add space for existing shelter residents so physical/social distancing guidance of public officials can be met. This will generally be eligible subject to standard Category B requirements and does not require pre-approval.
- Quarantine/Isolation: buying, renting, building to create quarantine/isolation spaces for folks who do not need to be in the hospital but do need to be separated from their fellow humans. This is currently considered non-congregate sheltering and requires pre-approval or a waiver from FEMA and must meet standard Category B requirements. Jurisdictions can do this themselves and seek reimbursement, or they can seek Direct Federal Assistance. USACE is available for assessing sites and planning at 100% federal share and they also have standards plans available for converting hotels and other facilities available at no cost: <https://www.usace.army.mil/Coronavirus/Alternate-Care-Sites/> . USACE assistance for converting or constructing facilities is available at a 75/25 cost share. If you're interested in USACE assistance with your efforts, please contact David Clayton (202-440-2953 or David.clayton@fema.dhs.gov)

Date Provided: 3/24/2020

Document Referenced: RX Public Assistance COVID-19 FEMA Daily Update 3_24_2020.msg

- If jurisdictions are incurring costs prior to approval and need to request a waiver to the pre-approval requirement, that can be addressed in their "Non-Congregate Sheltering Request Letter" with an additional paragraph explaining why they were unable to seek pre-approval. (Templates available)

Date Provided: 3/18/2020

Document Referenced: Non-Congregate Sheltering Delegation of Authority Waiver Memo.3.18.20.final.signed.pdf

- The criteria for approval of non-congregate sheltering, along with necessary support services has been amended to meet the needs of the public health emergency, to the following criteria:
 - 1) The non-congregate sheltering must be at the direction of and documented through an official order signed by a state, local, tribal, or territorial public health official.

- 2) Any approval is limited to that which is reasonable and necessary to address the public health needs of the event and should not extend beyond the duration of the Public Health Emergency.
- 3) Applicants must follow FEMA's Procurement Under Grants Conducted Under Exigent or Emergency Circumstances guidance and include a termination for convenience clause in their contracts.
- 4) Prior to approval, the applicant must provide an analysis of the implementation options that were considered and a justification for the option selected.
- 5) The funding for non-congregate sheltering to meet the needs of the Public Health Emergency cannot be duplicated by another federal agency, including the U.S. Department of Health and Human Services or Centers for Disease Control and Prevention.
- 6) Applicable Environmental and Historic Preservation laws, regulations, and executive orders apply and must be adhered to as a condition of assistance.

Tribal Recipients

General Information

Date Provided: 3/19/2020

Document Referenced: COVID-19 Tribal Fact Sheet (03.17.20).pdf

- Separate emergency declarations are not necessary under the nationwide declaration
- A Tribal Government may choose to be a subrecipient under the state or a direct recipient of FEMA – **If a Tribal Entity applies for direct assistance from FEMA** as a Recipient of the FEMA Public Assistance Program, assistance will be provided at a 75% Federal/25% non-Federal cost share and **the Tribal Entity will be responsible for the 25% non-Federal cost share**
- Eligible emergency protective measures taken at the direction or guidance of public health officials in response to this emergency, and not supported by the authorities of another federal agency, will be reimbursed under the FEMA Public Assistance program.
- Tribal Entities that choose to be a sub-recipient to the State for FEMA Public Assistance should coordinate with the State.

Truncated Category B Guidance from FEMA Public Assistance Program and Policy Guide V3.1

Emergency protective measures conducted before, during, and after an incident are eligible if the measures:

- Eliminate or lessen immediate threats to lives, public health, or safety; OR
- Eliminate or lessen immediate threats of significant additional damage to improved public or private property in a cost-effective manner.

FEMA may require certification by Federal, State, Territorial, Tribal, or local government officials that a threat exists, including:

- Identification and evaluation of the threat
- Recommendations of the work necessary to cope with the threat

Saving Lives and Protecting Public Health and Safety

The following is a list of emergency protective measures and costs that are eligible. These actions save lives or protect public health or safety. This list is not all-inclusive. Some of these actions are discussed in detail below.

- Transporting and pre-positioning equipment and other resources for response
- Emergency Operation Center (EOC)-related costs
- Emergency access
- Supplies and commodities
- Medical care and transport
- Evacuation and sheltering, including that provided by another State or Tribal government
- Child care
- Safety inspections
- Animal carcass removal
- Demolition of structures
- Search and rescue to locate survivors, household pets, and service animals requiring assistance
- Security, such as barricades, fencing, or law enforcement
- Use or lease of temporary generators for facilities that provide essential community services
- Dissemination of information to the public to provide warnings and guidance about health and safety hazards using various strategies, such as flyers, public service announcements, or newspaper campaigns
- Searching to locate and recover human remains
- Storage and interment of unidentified human remains
- Mass mortuary services

The following are eligible under limited circumstances based on specific criteria described in each of the referenced sections:

- Expenses related to operating a facility or providing an emergency service (see

[Chapter 2:VI.B.2\)](#)

- Temporary relocation of essential services, see [Chapter 2:VI.B.17\)](#)

Emergency Protective Measures Conducted by Private Nonprofit Organizations

For PNPs, eligible emergency protective measures are generally limited to activities associated with preventing damage to an eligible facility and its contents.

Emergency services are usually the responsibility of State, Territorial, Tribal, or local governments. Therefore, PNPs are generally not legally responsible for those services and FEMA does not provide PA funding to PNPs for the costs associated with providing those services. When a PNP provides emergency services at the request of, and certified by, the legally responsible government entity, FEMA provides PA funding through that government entity as the eligible Applicant. These services include:

- Rescue activities
- Animal control
- Emergency ambulance service for evacuation
- 211 call services, if tracked and related to eligible work
- Other similarly urgent governmental services

PNPs that own or operate a medical or custodial care facility are eligible for direct reimbursement of costs related to patient evacuation. In limited circumstances, FEMA may also reimburse a PNP directly when essential components of a facility are urgently needed to save lives or protect health and safety, such as an emergency room of a PNP hospital or a PNP sewage or water treatment plant.

1. Pre-positioning Resources

Costs related to pre-positioning resources specifically for the declared incident are eligible if the resources are used in the performance of eligible Emergency Work.

Pre-positioning resources for the purpose of evacuating, or providing emergency medical care during the evacuation period (such as ambulances and busses), is eligible even if those resources are not ultimately used, provided the staging of those resources was necessary and prudent based on the data at the time of staging.

2. Expenses Related to Operating a Facility or Providing a Service

The Applicant may incur additional costs related to operating a facility as a result of the incident because of an increased demand for the services the facility provides.

These additional costs are only eligible if:

- The services are specifically related to eligible emergency actions to save lives or protect public health and safety or improved property;
- The costs are for a limited period of time based on the exigency of the circumstances; and
- The Applicant tracks and documents the additional costs.

Potentially eligible increased operating costs include, but are not limited to, costs for:

- Generators at a hospital or police station
- Water testing and treatment supplies in the immediate aftermath of the incident to

- counter a specific threat
- EOC facility costs (e.g., utilities)

Examples of ineligible operating costs include, but are not limited to, costs for:

- Patient care, except as noted in [Chapter 2:VI.B.9](#)
- Administrative activities
- Provision of food, except as noted in [Chapter 2:VI.B.5, 7, and 8](#)
- Obtaining electrical power from an alternate source
- Obtaining water from an alternate source
- School make-up days, including contracted costs for bus service for make-up days
- Provision of fuel for school bus service

For PNPs, operating costs are generally not eligible even if the services are emergency services, unless the PNP performs an emergency service at the request of and certified by the legally responsible government entity. In such case, FEMA provides PA funding through that government entity as the eligible Applicant.

3. Emergency Public Transportation and Communication (DFA only)

A State, Territorial, Tribal, or local government may provide emergency communication services and public transportation when existing systems are damaged to the extent vital functions of community life or incident response are disrupted. The costs of these services are not eligible for reimbursement. However, FEMA may provide short-term DFA for these services.

4. Emergency Operations Centers

The Applicant may use its EOC to direct and coordinate resources and response activities for a period of time. Response activities conducted at EOCs are eligible provided they are associated with eligible work. Costs associated with operating the EOC are also eligible, including, but not limited to:

- Increased utility costs
- Costs to lease a facility
- Supply costs
- Meal costs, as described in [Chapter 2:VI.B.8](#)

5. Supplies and Commodities

The purchase of supplies and commodities required for emergency protective measures is eligible.

Costs related to the Applicant purchasing supplies or using its own stock to perform Emergency Work are eligible and reimbursed in accordance with Chapter 2:V.D. Examples include, but are not limited to, safety equipment, personal protective equipment, radios, power tools, sand, and tarps.

Purchasing and packaging life-saving and life-sustaining commodities and providing them to the impacted community are eligible. Examples of such commodities include, but are not limited to, food, water, ice, personal hygiene items, cots, blankets, tarps, plastic sheeting for roof damage, and generators, as well as food and water for household pets and service animals. The cost of delivering these same commodities to unsheltered residents in communities where conditions constitute a level of severity such that these items are not easily accessible for purchase is also

eligible. This includes food and water for household pets whose owners are in shelters.

The cost of leasing distribution and storage space for the commodities is also eligible.

6. Meals

Applicants often provide meals for emergency workers. Provision of meals, including beverages and meal supplies, for employees and volunteers engaged in eligible Emergency Work, including those at EOCs, is eligible provided the individuals are not receiving per diem and one of the following circumstances apply:

- Meals are required based on a labor policy or written agreement that meets the requirements of [Chapter 2:V.A.1](#);
- Conditions constitute a level of severity that requires employees to work abnormal, extended work hours without a reasonable amount of time to provide for their own meals; or
- Food or water is not reasonably available for employees to purchase.

FEMA only reimburses the cost of meals that are brought to the work location and purchased in a cost-effective and reasonable manner, such as bulk meals. FEMA does not reimburse costs related to group outings at restaurants or individual meals.

7. Medical Care

When the emergency medical delivery system within a declared area is destroyed, severely compromised or overwhelmed, FEMA may fund extraordinary costs associated with operating emergency rooms and with providing temporary facilities for emergency medical care of survivors. Costs associated with emergency medical care should be customary for the emergency medical services provided. Costs are eligible for up to 30 days from the declaration date unless extended by FEMA.

Eligible medical care includes, but is not limited to:

- Triage and medically necessary tests and diagnosis
- Treatment, stabilization, and monitoring
- First-aid assessment and provision of first aid
- A one-time 30-day supply of prescriptions for acute conditions or to replace maintenance prescriptions
- Vaccinations for survivors and emergency workers to prevent outbreaks of infectious and communicable diseases
- Durable medical equipment
- Consumable medical supplies
- Temporary facilities, such as tents or portable buildings for treatment of survivors
- Leased or purchased equipment for use in temporary medical care facilities
- Security for temporary medical care facilities
- Use of ambulances for distributing immunizations and setting up mobile medical units

Long-term medical treatment is not eligible. FEMA determines the reasonableness of these costs based on Medicare's cost-to-charge ratio (a ratio established by Medicare to estimate a medical service provider's actual costs in relation to its charges).

FEMA does not provide PA funding for these costs if underwritten by private insurance, Medicare, Medicaid, or a pre-existing private payment agreement. The Applicant must take reasonable steps to provide documentation on a patient-by-patient basis verifying that insurance coverage or any other source funding including private insurance, Medicaid, or Medicare, has been pursued and does not exist for the costs associated with emergency medical care and emergency medical evacuations.

Ineligible costs include:

- Medical care costs incurred once a survivor is admitted to a medical facility on an inpatient basis
- Costs associated with follow-on treatment of survivors beyond 30 days of the declaration
- Administrative costs associated with the treatment of survivors

8. *Evacuation and Sheltering*

Evacuation and sheltering of survivors are eligible activities. This includes household pets and service and assistance animals, but not exhibition or livestock animals.

a) Evacuation Including Accessible Transportation and Emergency Medical Transportation

Transportation of evacuees, household pets, service animals, luggage, and durable medical equipment is eligible. This includes emergency medical transportation. The mode of transportation should be customary and appropriate for the work required. Eligible activities include, but are not limited to:

- Transferring patients from inoperable, compromised, or overwhelmed eligible medical or custodial care facilities to another medical facility or to a shelter.
- Transferring patients back to original medical or custodial care facility, when appropriate.
- Transporting survivors, including shelterees, who require emergency medical care to and from the nearest existing or temporary medical care facility equipped to adequately treat the medical emergency. Transport may include emergency air, sea, or ground ambulance services if necessary.
- Use of equipment such as buses, trucks, or other vehicles (including accessible vehicles) to provide one-time transportation to evacuate survivors and their household pets and service and assistance animals to emergency shelters from pre-established pick-up locations. This includes stand-by time for drivers and contracted equipment while waiting to transport survivors.
- Paratransit transportation services, such as vans, minibuses, and buses, (including accessible vehicles) to transport senior citizens, individuals with disabilities (including mobility disabilities) or access and functional needs, individuals in nursing homes and assisted-living facilities, and homebound

individuals impacted by the incident.

- Tracking of evacuees, household pets, service animals, luggage, and durable medical equipment. This includes the use of animal microchips for the purpose of tracking evacuated animals.
- Food and water provided during transport.
- Emergency medical care provided during transport, including emergency medical personnel and supply costs.
- Stabilization of individuals injured during evacuation.
- Costs incurred in advance of an incident necessary to prepare for evacuations in threatened areas. Costs may include mobilization of ambulances and other transport equipment. Contracts for staging ambulance services must be part of the State, Territorial, Tribal, or regional evacuation plan. Costs of staging ambulances are eligible even if the incident does not impact the area normally served by those ambulances. PA funding for activating, staging, and using ambulance services ends when any of the following occurs:
 - FEMA, and the State, Territorial, or Tribal Government, determines that the incident did not impact the area where it staged ambulances;
 - Evacuation and return of medical patients and individuals with disabilities or access and functional needs is complete; or
 - The immediate threat caused by the incident has been eliminated and the demand for services has returned to normal operation levels.

FEMA does not provide PA funding for ambulance services that are covered by private insurance, Medicare, Medicaid, or a pre-existing private payment agreement.

b) Sheltering

FEMA provides PA funding to State, Territorial, Tribal, and local government Applicants for costs related to emergency sheltering for survivors. Typically such sheltering occurs in facilities with large open spaces, such as schools, churches, community centers, armories, or other similar facilities. FEMA refers to these shelters as congregate shelters.

Generally, FEMA does not provide PA funding for emergency sheltering in non-congregate environments, which are locations where each individual or household has living space that offers some level of privacy (e.g., hotels, motels, casinos, dormitories, retreat camps, etc.). In limited circumstances, such as when congregate shelters are not available or sufficient, FEMA may reimburse costs related to emergency sheltering provided in non-congregate environments.

FEMA's Assistant Administrator for Recovery has the authority to approve this policy exception. The Applicant must submit a request for PA funding for costs related to emergency, non-congregate sheltering and obtain FEMA approval prior to sheltering survivors in non-congregate facilities. At a minimum, the Applicant should include

the following information in its request:

- Justification for the necessity of non-congregate sheltering;
- Whether the State or Tribal Government has requested Transitional Sheltering Assistance;
- The type of non-congregate sheltering available and which type the Applicant intends to utilize;
- An analysis of the available options with the associated costs of each option; and
- The time frame requested (i.e., date of activation and length of time).

FEMA will limit any approval to that which is reasonable and necessary to address the needs of the event (generally no more than 30 days). FEMA determines the eligible costs based on the contractual agreement, including reimbursement for repairing damage if it is the Applicant's legal responsibility based on the agreement. The Applicant must obtain FEMA approval for any time extensions, which should include a detailed justification for the continued need and a revised analysis of options, including the costs for each option.

If FEMA approves the request, the Recipient will need to maintain tracking mechanisms to provide sufficient data and documentation to establish eligibility (including the need for non-congregate sheltering resulting from the disaster, reasonableness, and costs). Sufficient documentation includes:

- The number of non-congregate shelterees:
 - By age groups 0-2, 3-6, 7-12, 13-17, 18-21, 22-65, and 66+;
 - With disabilities or access and functional needs;
 - Registered for assistance from FEMA's IA Programs; and
 - Referred to State or non-governmental organization programs for assistance.
- Number of household pets, and assistance and service animals sheltered and the type of shelter provided (e.g., stand alone, co-located, or co-habitational);
- Length of stay per "household unit;" and
- Number of meals and other services provided.

As with any activity, lack of full documentation may result in FEMA determining that some or all of the costs are ineligible.

Eligible costs related to sheltering include, but are not limited to, the items listed below, as necessary based on the type of shelter and the specific needs of the shelterees. If any of the items listed are donated, including labor, the Applicant may offset the non-Federal share of its eligible Emergency Work projects in accordance with [Chapter 2:V.L](#). Sheltering and caring for household pets is only eligible while the pet owner is in an emergency shelter.

Shelter Facility Costs

- Facility lease or rent, including space for food preparation
- Utilities such as power, water, and telephone
- Minor facility modifications if necessary to make the facility habitable, compliant with the Americans with Disabilities Act (ADA), functional as a

- child care facility, or functional as an animal shelter
- Restoration to return the facility to its condition prior to use
- Generator costs
- Secure storage space for medical supplies

If an eligible State, Territorial, Tribal, or local government Applicant owns or leases the shelter facility, and a volunteer agency operates the shelter, the facility costs described above are eligible. However, the labor costs for the volunteer agency's workers are not eligible (except as a donated resource in accordance with the criteria in [Chapter 2:V.L](#)).

Shelter Staff Costs

- Medical staff
- Personal assistance service staff
- Veterinary staff
- Public Information Officer
- Social workers
- Food service workers
- Custodial and facilities staff
- National Guard personnel (See [Chapter 2:V.J](#))

Shelter Supplies and Commodities

- Hot and cold meals, snacks, beverages, and related supplies for survivors
- Cooking and serving supplies
- Food, water, and bowls for household pets and service and assistance animals
- Durable medical equipment
- Consumable medical supplies
- Medication for animal decontamination and parasite control
- Infant formula, baby food, and diapers
- Refrigerators, microwaves, and crock pots
- Cots, cribs, linens, blankets, pillows, tables, and chairs
- Crates, cages, leashes, and animal transport carriers
- Personal hygiene kits with items such as shampoo, soap, toothpaste, a toothbrush, towels, and washcloths
- Animal cleaning tables and supplies
- Televisions or radios – one per 50 shelterees
- Basic cable service
- Computers – one per 25 shelterees
- Internet service
- Washers and dryers – one of each per 50 shelterees
- Toys and books Shelter Services
- Shelter services are eligible for the time the facility is actively used to shelter survivors.
- Shelter management
- Supervision of paid and volunteer staff

- Cleaning the shelter, linens, and animal crates
- Shelter safety and security
- Use of equipment, such as ambulances, buses, trucks, or other vehicles, to provide sheltering support
- Phone banks for survivors
- Care for survivors with disabilities or access and functional needs, including the provision of the following personal assistance services:
 - Grooming, eating, walking, bathing, toileting, dressing, and undressing
 - Movement between a cot and wheelchair (transferring)
 - Maintaining health and safety
 - Taking medications
 - Communicating or accessing programs and services
- Emergency medical and veterinary services for sheltered survivors, household pets, and service and assistance animals, including:
 - Emergency and immediate life stabilizing care, including necessary prescriptions (not to exceed 30-day supply)
 - Triage, medically necessary tests, diagnosis, treatment, stabilization, and monitoring
 - First-aid assessment
 - Provision of first aid and health information
 - Care for evacuees with chronic conditions
 - Administering vaccinations to shelterees and workers for transmissible or contagious diseases, including, but not limited to, tetanus and hepatitis
 - Administering vaccinations to household pets, and service and assistance animals, for transmissible or contagious diseases, including, but not limited to, Bordetella (kennel cough)
 - Medical waste disposal
 - Mental-health care
 - Outpatient costs for sheltered survivors requiring emergency life-sustaining treatment not available at the shelter for the period of time that a survivor is housed in a congregate shelter. Eligible outpatient services are limited to:
 - Physician services in a hospital outpatient department, urgent care center, or physician's office;
 - Related outpatient hospital services and supplies, including X-rays, laboratory and pathology services, and machine diagnostic tests; and
 - Local professional transport services to and from the nearest hospital equipped to adequately treat the emergency.
- Sheltering self-evacuees (self-evacuee transportation costs are not eligible)
- Costs paid to the American Red Cross (ARC) or other Non-Governmental Organizations (NGO) to operate shelters under a written agreement [costs that ARC or other NGOs incur under their own authorities (i.e., independent of any Federal, State, Tribal, or local request) are not eligible for reimbursement]

c) *Child Care Services*

FEMA reimburses State, Territorial, Tribal, and local governments for the cost of providing licensed child care services to support sheltered populations. This includes the cost of the labor, facility, supplies, and commodities. Additionally, FEMA may provide PA funding for the cost of child care services that the eligible Applicant provides to other survivors, and beyond the period of emergency sheltering, with certification that temporary child care is necessary to meet immediate threats to life, public health and safety, or property.

Child care includes services such as:

- Day care for children
- Before- and after-school care

The Applicant may provide these services within a shelter facility or in a separate facility, as appropriate. FEMA PA staff will coordinate with IA staff to ensure there is no duplication with IHP assistance.

d) *Host-State or Host-Tribe Evacuation and Sheltering*

If the impacted State or Tribe (Impact-State or Impact-Tribe) has evacuation and sheltering needs beyond its ability to address within its jurisdictional area, it may request assistance either from another State or Tribal Government (Host-State or Host-Tribe) through mutual aid agreements such as EMAC, or from FEMA.

If the Impact-State/Tribe requests assistance directly from another State or Tribal Government, FEMA reimburses costs based on the mutual aid agreement as described in Chapter 2:V.H. FEMA may also provide PA funding to a Host-State/Tribe directly, even if the Impact- State/Tribe already requested assistance directly from that Host-State/Tribe, provided that:

- The Host-State/Tribe agrees to accept evacuees based on need—without restriction;
- The Host-State/Tribe makes at least 10 percent of its normal day-to-day sheltering capacity available;
- An authorized official from the Host-State/Tribe transmits a written agreement of these two terms to FEMA; and
- The Governor or Tribal Chief Executive of the Host-State/Tribe signs the FEMA/Host- State or FEMA/Host-Tribe Agreement pursuant to the terms and conditions in 44 CFR § 206.44, FEMA-State Agreements, to establish the Host-State/Tribe as the Recipient.

If the Impact-State/Tribe requests assistance from FEMA, FEMA determines whether potential Host-States/Tribes have sufficient capability to meet some or all of the sheltering and evacuation needs of the Impact-State/Tribe. If FEMA determines a potential Host-State/Tribe has sufficient capability and the Host-State/Tribe meets the three conditions described above, FEMA provides PA funding to the Host-State/Tribe directly.

When FEMA provides PA funding directly to a Host-State/Tribe, FEMA reimburses 100 percent of the Host-State/Tribe's eligible costs, including straight-time and benefits of the Host- State/Tribe's permanent employees so that they have no out-

of-pocket costs. In these cases, the Impact-State/Tribe is responsible for the non-Federal cost share and must subsequently reimburse FEMA for the non-Federal cost share of the eligible costs incurred by the Host- State/Tribe. The non-Federal cost share is based on the Category B cost-share amount designated in the declaration. The Impact-State/Tribe cannot offset its non-federal cost share with the Host-State/Tribe's volunteer labor.

In addition to the evacuation and sheltering costs noted in [Chapter 2:VI.B.10](#), FEMA also reimburses Host-States/Tribes for the following:

- Straight-time and benefits of entities' employees that provide assistance under a mutual aid agreement or a contract with the Host-State/Tribe such as a local government or PNP.
- Costs to provide the requested shelter capacity, even if the shelter was underused or not used at all.
- Costs related to arrest and incarceration of evacuees who commit unlawful acts in a Host- State/Tribe congregate shelter, including costs incurred by on-duty law enforcement officers in order to detain, take into custody, or make an arrest (costs of chemical tests, processing, charging, booking, and holding such persons are not eligible costs). Costs to transport a detainee back to the shelter is eligible if the individual was not charged.
- When patients in hospitals in the Impact-State/Tribe are evacuated, transported, and admitted into hospitals in the Host-State/Tribe through mission assignment with U.S. Department of Health and Human Services (HHS), and the patients are treated and discharged but require follow-on care while they await transport and shelters are not available, the costs that a Host-State/Tribe's hospital incurs for hotel rooms during patients' follow-on care until the patients can be transported back to the Impact-State/Tribe, provided that Medicare, Medicaid, or private insurance does not cover these costs.
- Bus or shuttle transport to pick up evacuees at the airport, train station, or bus terminal when the expected plane, train, or bus is re-routed, canceled, or rescheduled.
- Ambulance costs for hospital-to-hospital transfers, provided it is a transfer within the Host-State/Tribe.
- When the Impact-State/Tribe determines that it is safe for re-entry, it will coordinate with the Host-State/Tribe and FEMA to return evacuees, household pets, and service and assistance animals to the Impact-State/Tribe by air, rail, or bus. Return transportation costs are eligible along with food, water, and security during transport.
- Return transportation costs for family members of an Impact-State/Tribe evacuee who was admitted to a hospital after the congregate shelters close.
- When evacuees are discharged from a hospital after all congregate shelters have closed and transportation cannot be arranged for departure on the same day discharged, FEMA will reimburse up to five (5) nights of hotel lodging while awaiting return transport.
- FEMA will reimburse a State agency from the Impact-State/Tribe for the

transportation costs and related expenses to transport deceased evacuees and accompanying family members to the Impact-State/Tribe. The costs of State/Tribe-mandated embalming or cremation of the body prior to return are also eligible.

The Host-State/Tribe must determine whether any ambulance or medical service costs are covered by a patient's private insurance, Medicare, Medicaid, or a pre-existing private payment agreement as FEMA will deduct this amount from the Host-State/Tribe's eligible cost.

Fees that a Host-State/Tribe waives for the use of State parks by self-evacuees with recreational vehicles (RVs) are not eligible. Additionally, purchase and distribution of gas cards, bus passes, cash vouchers, debit cards, food vouchers, or direct payments to evacuees are not eligible.

9. *Infectious Disease Event*

The HHS Centers for Disease Control and Prevention (CDC) has primary authority to enable support and assistance to States, Territorial, or Tribal Governments in response to an infectious disease event. FEMA may provide assistance for the rescue, evacuation, and movement of persons; movement of supplies; and care, shelter, and other essential needs of affected human populations. Any assistance provided by FEMA in response to an infectious disease event is done in coordination with the CDC. The Office of Response and Recovery Fact Sheet FP 104- 009-001, *Infectious Disease Event*, provides additional details.

10. *Temporary Relocation of Essential Services*

If the Applicant provides essential community services at a facility that is unsafe, inaccessible, or destroyed as a result of the incident, temporarily relocation of these services to another facility is eligible. Essential community services are those services of a governmental nature that are necessary to save lives, protect property and the public, and preserve the proper function and health of the community at large. These services differ from the list of eligible PNP essential social services. FEMA evaluates the criticality of the service and safety of the facility to determine the need for temporary relocation.

a) *Eligible for Temporary Relocation: State, Territorial, Tribal, and Local Government Applicants*

Essential community services provided by a State, Territorial, Tribal, or local government Applicant are eligible to be relocated. Services provided by these Applicants that are eligible for temporary relocation are:

- Police
- Fire protection
- Emergency services
- Medical care
- Education
- Election and polling
- Library
- Utility
- Other essential community services

Services provided in administrative and support facilities essential to the provision of the essential community service are also eligible for relocation.

If the Applicant provides the service at a leased, private facility prior to the incident, the service is still eligible to be relocated.

b) Eligible for Temporary Relocation: PNPs

Certain essential community services provided by PNPs are eligible to be relocated, provided the PNP owns and operates the facility in which the services are provided. These services differ from the list of eligible PNP essential social services. PNP services eligible for temporary relocation include:

- Alcohol and drug rehabilitation
- Child care
- Custodial care
- Fire protection and emergency services
- Education
- Homeless shelters
- Libraries
- Medical care
- Utilities
- Other facilities that provide public health and safety services of a governmental nature

Services provided in support facilities, such as administration buildings and hospital laundry facilities, essential to the operation of such facilities may also be eligible for relocation.

c) Ineligible for Temporary Relocation

Facilities that do not provide essential community services are ineligible for temporary relocation. These include facilities such as museums, zoos, community centers, shelter workshops, performing arts centers, recreation and parking facilities, athletic stadiums, research and warehouse facilities, and student union buildings.

d) Determining Eligibility for Temporary Relocation

FEMA determines the eligibility of relocating services to another facility based on the safety of the damaged facility as follows:

- If the facility can be made usable with the performance of emergency protective measures or minor repairs, a temporary facility may not be eligible.
- If the damage is to the extent that it cannot be occupied safely and restoration cannot be completed without suspending operations of the facility for an unacceptable period of time, then a temporary facility may be eligible.
- If the facility is not damaged but lacks a critical utility or operational item, such as potable water, electricity, or road access, and a temporary facility will restore services to the community before the restoration of the

disrupted critical utility or operational item at the current site, then a temporary facility may be eligible.

The capacity of the temporary facility must not exceed the pre-disaster capacity of the facility that housed the displaced services. The Applicant must use the temporary facility to provide the eligible service to the same extent and manner as was provided prior to the incident.

Relocation to a site that requires ground disturbance or alteration of an existing property requires EHP review before the Applicant implements the action.

FEMA does not require the Applicant to obtain and maintain insurance for temporary facilities.

If the Applicant has a facility that does not meet eligibility requirements for temporary relocation and the facility's damage is to such an extent that the contents are at risk, FEMA may provide PA funding for temporary space to store the contents as an emergency protective measure if the space is:

- Limited to an area necessary to house the contents;
- Used solely for storage; and
- Not intended for public access, alternate office space, exhibits, or other purposes. FEMA is not responsible for damage that may occur to contents in temporary storage.

e) Lease, Purchase, or Construct

The Applicant may lease, purchase, or construct a temporary facility. The Applicant needs to make the decision to rent or purchase space and equipment based on the most cost-effective and practical option. The Applicant must provide FEMA with a cost analysis, which should include at least three proposals with cost estimates based on the timeline to restore the original facility. Cost estimates for leasing a facility must account for the entire timeline of the project.

FEMA does not mandate that the Applicant pursue a specific option for a temporary facility, but FEMA only provides PA funding for the most cost-effective option.

If the Applicant relocates a service from a facility it owns, the lease costs of a temporary facility are eligible provided that leasing is the most cost-effective option. If the Applicant was leasing the damaged facility and had to temporarily relocate to another leased facility, the increase in rent is eligible.

Purchasing or constructing a temporary facility is eligible if FEMA confirms that it is the most cost-effective option. With the exception of modular or manufactured units, the Applicant must obtain FEMA approval prior to purchasing or constructing the facility.

f) Temporary Relocation Costs

Eligible work or costs associated with the provision of temporary facilities include, but are not limited to:

- Rental or purchase of equipment necessary to continue the services in the temporary facility
- Reasonable alterations of the temporary facility, if required to make the space functional based on the pre-disaster use of the damaged facility

- Restoration of the temporary facility to its pre-disaster condition when no longer needed
- Moving expenses to and from the temporary facility
- Minimal life-safety or other building upgrades required by an applicable code or standard in effect at the time the temporary facility is purchased or leased
- Public outreach and messaging costs necessary to inform the public that the service will temporarily be provided at a different location

FEMA does not provide PA funding for utility, maintenance, or operating costs in a temporary facility, even if these costs increase.

g) Time Limitations

The regulatory time limitation for temporary facilities (Emergency Work) is 6 months from the declaration date.

Depending on the extent of damage to the facility, the Applicant may be unable to restore the facility to its pre-disaster design and function within 6 months. Normally, the Recipient has the authority to extend the deadline for Emergency Work for up to 6 additional months. However, for temporary facilities, FEMA must approve any extensions to the project deadline.

FEMA considers the timeframe necessary to restore the damaged facility when evaluating time extensions for temporary facilities. If the Applicant requests funding for a temporary facility and knows at that time that the restoration of the original facility will exceed 6 months, FEMA may approve additional time and funding up to 12 months. If the Applicant needs additional time beyond this 12-month deadline, it must submit a written time extension request that includes the status of work and a timeline for completion.

FEMA only grants additional time if the Applicant begins construction on the damaged facility within 12 months of the declaration date, unless circumstances beyond the control of the Applicant prevented the start of construction within this 12-month timeframe.

h) Disposition Requirements

If the Applicant purchased or constructed a temporary facility, it must return to FEMA the Federal share of the equity in the facility. The Applicant must report the equity to FEMA when the approved deadline has expired or when the facility is no longer needed for the authorized purpose, whichever occurs first.

If FEMA only funded a portion of the cost of the facility, the Applicant must return to FEMA the Federal share of FEMA's proportionate equity in the facility. The amount due FEMA is

computed by applying FEMA's percentage of participation in the cost of the purchase or construction to the fair market value or sale proceeds, taking into consideration reasonable out-of-pocket costs related to the sale.

The Applicant may either retain the facility or sell it. If the Applicant disposes of real property (land or structures) acquired with PA funding and acquires replacement real

property using funds from the same PA project, the net proceeds of the sale may be used to offset the cost of the replacement property.

B. Damage Caused During Performance of Emergency Work (Category A or B)

An Applicant may damage improved property, supplies, or equipment during the performance of eligible emergency response activities or debris removal operations. The repair of this damage is eligible as part of that respective project if the damage was:

- Due to severe conditions resulting from the incident;
- Unavoidable; and
- Not due to improper or excessive use.

Replacement of damaged crops, trees, shrubs, or other ground cover is not eligible, unless the replacement meets the criteria in [Chapter 2:VII.H.5](#).

For equipment damage, FEMA requires maintenance records to demonstrate that the equipment was regularly maintained and in good operational order prior to the incident, and details regarding when, where, and how the damage occurred.