**Introduction and Guide to the Document**

LeadingAge and the Visiting Nurse Associations of America (VNAA) wanted to provide a summary of the [National Strategy for the COVID-19 Response and Pandemic Preparedness](https://www.whitehouse.gov/wp-content/uploads/2021/01/National-Strategy-for-the-COVID-19-Response-and-Pandemic-Preparedness.pdf) (“National Strategy”) put out soon after the inauguration of President Biden. One way to characterize this document is a roadmap of all the ideas and goals for building and maintaining a national strategy for COVID-19 response, recovery, and future pandemic planning. The Administration has put together an outline of a legislative proposal that contains some of the elements of the National Strategy – that can be found [here](https://www.whitehouse.gov/briefing-room/legislation/2021/01/20/president-biden-announces-american-rescue-plan/) and is referenced as the “American Rescue Plan.” The Administration also continues to issue a number of executive orders – some related to the National Strategy and some not. The elements of the Executive Orders relevant to the National Strategy that matter to LeadingAge members are addressed in this document.

The National Strategy is organized into 7 goals

* Restore trust with the American people
* Mount a safe, effective, comprehensive vaccination campaign.
* Mitigate spread through expanding masking, testing, treatment, data, workforce, and clear public health standards.
* Immediately expand emergency relief and exercise the Defense Production Act.
* Safely reopen schools, businesses and travel while protecting workers
* Protect those most at risk and advance equity, including across racial, ethnic, and rural/urban lines
* Restore U.S. leadership globally and build better preparedness for future threats

We provide a top level summary of the key actions contained within each goal below and examples of tactics to accomplish the goals that matter to our members.

**Goal 1: Restore trust with the American people.**

Goal 1 will be accomplished through the following 5 key actions, which echo themes seen throughout the plan:

* Establish a national COVID-19 response structure where decision-making is driven by science and equity.
* Conduct regular expert-led, science-based public briefings.
* Publicly share data around key response indicators.
* Engage the American people.
* Lead science-first public health campaigns

While Goal 1 has its own key actions, it is also setting the tone for the National Strategy. A transparent approach to COVID-19 response with decision-making driven by science and equity are themes of the National Strategy that are emphasized in Goal 1 and throughout the strategy. The Administration is emphasizing that they pledge to be transparent within the government and with the public about what science and experts say is the best course of action on any given issue. This includes a greater focus on the quality and type of data collected. They also recognize both in goal 1 and throughout the National Strategy that engagement with the American people to build trust in response and in recovery is going to be a key component of a successful campaign to respond and recover from COVID-19. Finally, in recognition of the disproportionate impact of COVID on communities of color and other specific populations, both Goal 1 and the National Strategy as a whole have an equity lens.

*Key Takeaways for Members*

The frame of Goal 1 and the themes that it sets for the National Strategy generally put an emphasis on clear, evidence based communication. As outlined in later goals, the presence of a National Strategy will hopefully avoid or minimize the pandemonium experienced during the first months of the pandemic around PPE, testing, and other supply shortages. Our state and local public health departments will be in communication with the federal government to directly communicate our needs and any barriers or gaps in COVID-19 response. For example, we can hope for a more organized vaccine roll-out as more vaccines are authorized, produced, distributed, and administered.

One key responsibility that we may expect to fall upon providers is increased reporting requirements as data collection efforts are strengthened and potentially scaled up. While some information is already required on a federal level, such as the information required to be reported by nursing homes and hospitals, we may see additional reporting required of these settings and other settings our federal government works to get a clearer picture on how COVID-19 is impacting our communities and specific populations within our communities.

We may see requirements for reporting demographic information or information on vaccination in our provider settings. We may see requirements to report cases and deaths from settings that are not currently required to report. LeadingAge will encourage coordination between local, state, and federal governments to consolidate reporting so that information reported at one level of government is shared with all other levels and additional reporting is minimized to only essential data that is not otherwise being collected.

**Goal Two: Mount a safe, effective, comprehensive vaccination campaign.**

The key actions of Goal 2 are:

* Ensure the availability of safe, effective vaccines for the American public.
* Accelerate getting shots into arms and get vaccines to the communities that need them most.
* Create as many venues as needed for people to be vaccinated.
* Focus on hard-to-reach and high-risk populations.
* Fairly compensate providers, and states and local governments for the cost of administering vaccinations
* Drive equity throughout the vaccination campaign and broader pandemic response.
* Launch a national vaccinations public education campaign
* Bolster data systems and transparency for vaccination
* Monitor vaccine safety and efficacy.
* Surge the health care workforce to support the vaccination effort.

*Key Takeaways for Members*

LeadingAge continues to advocate for a comprehensive and effective vaccination program and this part of the National Strategy lays out the Biden Administration’s vision for what that would look like. It is consistent with ours and proposes tactical solutions to problems our members have encountered in the vaccine rollout to date.

There is a clear focus throughout Goal 2 on the logistics of a comprehensive vaccine strategy. The Biden Administration proposes (and has taken) steps to expand the production of currently approved vaccines through the Defense Production Act. They also propose to fill supply and distribution gaps not only in actual vaccines, but in the raw materials to ensure production can continue unhindered. They also pledge to obtain new FDA authorized vaccines as quickly as possible to expand supply and continueresearch and development to ensure the availability of safe and effective vaccines, including conducting assessments on the impact of emerging mutated viral strains on vaccine effectiveness and to prepare to alter vaccines as needed. We have already seen the Administration end the policy of holding back doses and a continued focus on expanding access for older adults and essential workers. The National Strategy also calls for more federal involvement in helping states understand their upcoming allocations and where opportunities for redistribution may lie. The National Strategy calls for as many venues as possible and specifically cites the need for mobile clinics, provider education, and expanding the number of available vaccinators through both federal resources like FEMA and the National Guard and expanding local resources by allowing EMS, firefighters, and other local resources to be trained to vaccinate.

Similarly to Goal 1, there is a focus on access and equity with more specific examples as these concepts relate to vaccinations. Critical to our members, the National Strategy underscores their focus on hard-to-reach and high-risk populations with tactics like:

* Launch new models to serve high-risk individuals and others who may need to take extra precautions, as identified by the CDC.
* Make models like the CDC Pharmacy Partnership for Long-Term Care Program available for other high-risk congregate settings.
* Reach seniors in congregate settings, in the community and in their homes. CMS will evaluate how to incorporate quality measures for COVID-19 immunizations into its value-based purchasing programs, including Medicare Advantage Star-Ratings, the physician quality payment program, and accountable care programs. Such measures would be similar to how Medicare today promotes distribution of the annual flu vaccine.
* Increase use of demographic data to identify and remedy disparities in rates of vaccination.
* Ensure no out-of-pocket costs for vaccines**.**

The National Strategy also recognizes the challenges LeadingAge members and others around the country are facing with vaccine hesitancy and propose to launch a national vaccinations public education campaign. The goals would be to support vaccination programs, address vaccine hesitancy, simplify the vaccination process, and educate the public on effective prevention measures and to meet the needs of diverse communities by getting information to trusted, local messengers. Tactics for this campaign include:

* Work with major provider associations to launch a targeted campaign to build vaccine trust.
* Emphasize the need to continue measures like masking, physical distancing, testing, tracing, and supported isolation.
* Partner with governors and State, Tribal, territorial and local health officials.
* Engage with public and private sector organizations.
* Launch a National COVID-19 Vaccination Ambassadors Program. CDC will develop a toolkit to support communities in developing their own local ambassador programs.
* Bring the full resources of the federal government to bear in reaching the U.S. public. Deploy a whole of government effort to reach the public through the federal agencies.

**Goal Three: Mitigate spread through expanding masking, testing, treatment, data, workforce, and clear public health standards.**

The key actions for Goal 3 are:

* Implement masking nationwide by working with governors, mayors, and the American people
* Scale and expand testing
* Prioritize therapeutics and establish a comprehensive, integrated COVID-19 treatment discovery and development program.
* Develop actionable, evidence-based public health guidance
* Expand the U.S. public health workforce and increase clinical care capacity for COVID-19
* Improve data to guide the response to COVID-19

Goal 3 aligns with LeadingAge’s longstanding priorities around reducing community spread through public health measures because reducing community spread in conjunction with vaccines is the path forward to moving to our “new normal.” Across all of the areas in Goal 3 and throughout the strategy, the Administration is focused on providing clear guidance that will be updated based on scientific evidence and best public health practice.

*Key Takeaways for Members*

*Masks*

The National Strategy emphasizes the importance of masks, calling on every American to “wear a mask for 100 days when they are around people outside of their household” and pushing governors, mayors and other state/local authorities to enact mask mandates if they have not already done so. Focusing on increasing mask mandates in other areas of public life like transportation, workplaces, and schools while promising technical support to help enforce infection control measures. All of these types of actions should help LeadingAge members by reducing community spread even if guidance on masks is already clear for our members.

*Testing*

The National Strategy has a huge focus on scaling and expanding testing which echoes our call for a national testing strategy. The Administration has already taken many of these actions including:

* Creating an interagency COVID-19 Pandemic Testing Board to coordinate a unified and equitable approach to testing.
* Increase manufacturing of/capacity for test kits and related supplies and lab test processing. Exercise legal authority, including DPA, to achieve these expansions. The Administration is pushing for more funding through the American Rescue Plan to accompany the use of the Defense Production Act.
* Directing federal agencies to facilitate free testing and clarify that insurers must also cover testing.
* Promote research and innovation specific to testing, including at-home and instant options. The Administration has already ordered a large number of one type of in-home tests and is continuing to explore other options that can facilitate this goal.
* Expand federal surveillance for COVID-19 hotspots, variants and emerging infectious disease threats.

*Workforce*

Goal 3 recognizes the continued need to workforce supports. Similarly to strategies to in Goal 2 to support vaccination, it proposes to increase the supply of providers and workers to treat COVID-19, including the use of National Guard/military personnel, retired providers and the federal clinical workforce. It also proposes to surge workforce by supporting 100,000 new COVID-19 contact tracers, community health workers, and public health nurses that reflects the communities where people will work. This will be accomplished through standing up a national contact tracing and workforce training program. While some of these goals are ambitious and may not happen as quickly as our members need the support, the National Strategy’s commitment to workforce aligns with workforce as a top LeadingAge priority.

*Data*

Throughout the National Strategy and in Goal 5, there is recognition that the country needs to strengthen data systems to better understand and manage the pandemic. One key and pressing aspect of this challenge is the need to improve data systems around scheduling vaccine appointments and tracking who has gotten a vaccination. The National Strategy also echoes a longstanding LeadingAge ask to identify and call on states to use unified data metrics rather than relying on state data systems that collect inconsistent data. Finally, it direct federal agencies to collect, produce, share and analyze data and collaborate with respect to COVID-19 response and recovery efforts.

**Goal 4: Immediately expand emergency relief and exercise the Defense Production Act.**

The key actions of Goal 4 are:

* Increase emergency funding to states and bolster the FEMA response
* Fill supply shortfalls by invoking the Defense Production Act
* Identify and solve urgent COVID-19 related supply gaps and strengthen the supply chain.
* Secure the pandemic supply chain and create a manufacturing base in the United States
* Improve distribution and expand availability of critical materials.

*Key Takeaways for Members*

This goal matters to LeadingAge members because the actions under this goal will increase access to emergency relief and keep vital supplies at the levels needed to effectively fight COVID-19. Goal 4 is implemented through [Presidential Memorandum: Extend Federal Support to Governors’ Use of National Guard to Respond to COVID-19 and to Increase Reimbursement and other Assistance Provided to States (January 21, 2021)](https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/21/extend-federal-support-to-governors-use-of-national-guard-to-respond-to-covid-19-and-to-increase-reimbursement-and-other-assistance-provided-to-states/) and [the Executive Order: A Sustainable Public Health Supply Chain (January 21, 2021)](https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/21/executive-order-a-sustainable-public-health-supply-chain/) which directs “immediate actions to secure supplies necessary for responding to the pandemic, so that those supplies are available, and remain available, to the Federal Government and State, local, Tribal, and territorial authorities, as well as to America’s health care workers, health systems, and patients.”

These directives instructs all relevant agencies to conduct an inventory of response supplies and identification of emergency needs; take all action to address shortfalls, requires the Secretary of HHS, through the COVID-19 Response Coordinator, to report to the President on the status of the Strategic National Stockpile; and requires the Coordinator to assess what actions should be taken to address shortfalls and other issues, including whether to invoke the Defense Production Act.

The Secretary of HHS is also directed to examine pricing issues and make recommendations as to whether the EO issued in March that addressed hoarding and other concerns needed to be changed. Several Secretaries are directed to address pricing, including in federal contracts.

The EO directs the Coordinator and agency heads to develop a Pandemic Supply Chain Resilience Strategy “ to design, build, and sustain a long-term capability in the United States to manufacture supplies for future pandemics and biological threats.”

The EO also directs the Secretary of HHS to work with the Tribal Nations to facilitate access to the National Strategic Stockpile.

All of these tactics will help LeadingAge members by supporting their states and localities who in turn can support members. It also ensures that supplies will be and remain in ample supply to ensure access and hopefully drive down prices.

**Goal 5: Safely reopen schools, businesses and travel while protecting workers**The key actions for Goal 5 are:

* Implement a national strategy to support safely reopening schools.
* Support safe operations at child care centers and at-home providers.
* Protect workers and issue stronger worker safety guidance.
* Provide guidance and support to safely open businesses.
* Promote safe travel.

*Key Takeaways for Members*

While much of Goal 5 does not directly focus on aging services providers, its key actions and associated tactics inform how the communities in which LeadingAge members work and live can return to more of a state of normalcy. The focus on supporting safe school re-openings will alleviate strain on our staff that are currently juggling remote schooling and work. The National Strategy outlines how these re-openings can happen through dedicated funding that will enable tactics like regular testing, additional staff to reduce class sizes and support mental health, supporting safe transport to and from school, and enable installation of appropriate ventilation. For colleges and universities, places that have been significant sources of community spread, the National Strategy propose to provide clear guidance on safe operational practices, support regular testing for under-resourced colleges and universities, and conducting outreach and education on vaccines to staff and students.

Another part of Goal 5 that will support LeadingAge members is the proposal to support safe operations at child care centers and at-home day care providers. Specific funding in this area would help providers pay rent, utilities, and payroll, as well as cover pandemic-related costs like personal protective equipment, ventilation supplies, smaller group sizes, and alterations to physical spaces that improve safety. The National Strategy also proposes funding the help families afford child care so that more can have access.

The National Strategy does support stronger guidance from OSHA to keep workers safe from COVID-19 and also supports a continuation and strengthening of the emergency paid leave provision authorized as part of the Families First Coronavirus Response Act of 2020. A continuation of the paid leave provisions would require Congressional action. We will monitor any proposals related to OSHA and advocate to be sure that there is a balance between worker safety and the needs of LeadingAge members.

The National Strategy proposes to provide guidance and support to safely open businesses as part of its overarching goa to reopen the economy as safely and quickly as possible. The proposals include to the extent possible under the law, prioritizing the latest round of Paycheck Protection Program funds to provide loans for businesses hardest hit by the pandemic. These loans help small businesses cover the costs of operating safely, including physical changes to the workplace, sanitizing supplies, and PPE.  
In addition, the National Strategy calls on Congress to continue to invest in grants and other small business financing programs. LeadingAge continue to work to ensure that these types of opportunities are available across our spectrum of members.

The President issued an [Executive Order](https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/20/executive-order-protecting-the-federal-workforce-and-requiring-mask-wearing/#:~:text=Accordingly%2C%20to%20protect%20the%20Federal,Federal%20lands%20should%20all%20wear) that requires mask wearing on certain public modes of transportation and at ports of entry to the United States. The [*Executive Order Promoting COVID-19 Safety in Domestic and International Travel*](https://www.whitehouse.gov/briefing-room/presidential-actions/2021/01/21/executive-order-promoting-covid-19-safety-in-domestic-and-international-travel/) requires a recent negative COVID-19 test result prior to departure and quarantine on arrival, consistent with CDC guidelines. These examples of uniform travel policies will help LeadingAge members as they create internal policies around staff time off.

**Goal 6: Protect Those Most at Risk and Advance Equity, Including Across Racial, Ethnic, and Rural/Urban Lines**

The key actions for Goal 6 are:

* Establish the COVID-19 Health Equity Task Force
* Increase data collection and reporting for high risk groups
* Ensure equitable access to critical COVID-19 PPE, tests, therapies, and vac­cines
* Expand access to high quality health care
* Expand the clinical and public health workforce, including communi­ty-based workers
* Strengthen the social service safety net to address unmet basic needs
* Support communities most at-risk for COVID-19

*Key Takeaways for Members*

The National Strategy spells out multiple actions the Biden Administration will take to achieve Goal 6, beginning with Executive Order for a COVID-19 Health Equity Task Force to identify ways to mitigate COVID-19 health inequities and coordinate their implementation. This Task Force will include federal officials from HHS, HUD, and other agencies.

Protecting those most at risk and advancing equity will also be achieved by an Executive Order on ensuring a data-driven response to COVID-19. The federal government will use data to identify high-risk communities, track resource distribution, and evaluate the effectiveness of the response. Part of the data-driven National Strategy includes HHS “optimiz[ing] data collection from public and private entities” to increase the availability of data by race, ethnicity, geography, disability, and other demographic variables. To inform this data-driven approach, CMS will report Medicare and Medicaid data on COVID-19 testing, cases, vaccinations, hospitalizations, therapeutic utilization, and deaths by race, ethnicity, geography, disability, and other sociodemographic factors. Equitable access to critical COVID-19 PPE, tests, therapies, and vaccines, including a targeted, stakeholder- and data-informed vaccination communication campaign to encourage vaccination in all communities, is also a key tenet of Goal 6.

To further realize this goal, the National Strategy includes expanding access to quality health care by increasing funding for the nation’s 1,400 community health centers, providing greater assistance to safety net institutions, strengthening home and community-based services, and expanding mental health care. On mental health, the National Strategy describes how individuals and communities, including the health workforce, are experiencing emotional trauma and exacerbation of existing mental health and substance use issues during the pandemic.

Goal 6 of the National Strategy would also significantly expand the number of people receiving home and community-based services, “with particular attention to people with disabilities and the home care workforce crisis.” Recognizing the need for a “sufficient workforce to serve the communities in greatest need,” Goal 6 commits to deploying federal workers to assist with the COVID-19 response in under-resourced areas and creating a United States Public Health Workforce Program of new community-based workers to assist with testing, tracing, and vaccination.

Because COVID-19 has only exacerbated pre-pandemic challenges to meet basic needs, the National Strategy seeks to provide paid sick leave, child care support, and rental assistance to more people as well as extend eligibility and enrollment flexibilities for select programs during the pandemic. To ensure a coordinated and comprehensive approach to meeting individual and family health and social needs, the National Strategy calls for HHS, HUD, and DOL to each designate a COVID-19 equity lead; this group will be convened by HHS.

Finally, Goal 6 will support communities most at-risk for COVID-19, including those in congregate settings, essential workers, and people with chronic medical conditions, the populations of which, the National Strategy notes “are disproportionately composed of people of color.” To supporting nursing home and long term care community residents and staff, HHS and CMS will strengthen guidance, funding, and requirements around infection control policies, and will also support long term care staffing levels sufficient to ensure patient safety, and support the accelerated distribution of vaccines to residential care settings.

**Goal 7: Restore U.S. leadership globally and build better preparedness for future threats**

The key actions for Goal 7 are:

* Restore the U.S. relationship with the World Health Organization and seek to strengthen and reform it
* Surge the international public health & humanitarian response
* Restore U.S. leadership to the international COVID-19 response and advance global health security and diplomacy
* Build better biopreparedness and expand resilience for biological threats

*Key takeaways for members*

The focus of Goal 7 is how the United States will relate to the international community with regards to continued COVID-19 response and preparing for future pandemics and biological threats. While the specific tactics are not directly relevant to LeadingAge members, this goal highlights that this and future pandemics know no borders. Engaging with the rest of the world will be vital for ending COVID-19 through worldwide vaccination, tracking of new variants, and other critical public health measures. In order to be truly prepared for future pandemics, we need to work with the international community because these threats can emerge and spread from any corner of our interconnected world.