

The Role of FEMA in COVID-19 Response

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The coronavirus pandemic is uncharted territory for our country's current disaster response and recovery system. In the lead up to the crisis, FEMA's role in the COVID-19 response was to supply logistical expertise to the Department of Health and Human Services (HHS), the lead agency for pandemic response. As the pandemic spread, first prompting President Trump's National Emergency Declaration and now Major Disaster Declarations for all 50 states, the District of Columbia, and four territories, FEMA has taken on a larger role in the COVID-19 response.

As a result of the national emergency declaration for COVID-19, FEMA activated its Public Assistance (PA) Grant Program to aid state, territorial, tribal, and local government entities and certain private non-profit organizations as they work quickly to respond to and recover from the pandemic. FEMA generally 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, such as hotels, motels, or dormitories. For the pandemic, however, FEMA determined that certain non-congregate sheltering costs will be reimbursable under the PA program to protect public health and save lives.

Since the start of the pandemic, state, local, and non-profit organizations have used FEMA PA funds in tandem with other federal and state funding streams to move individuals experiencing homelessness living in congregate settings – either in shelters or encampments – who have been exposed to COVID-19 or are medically at-risk into hotel rooms and other non-congregate shelters to quarantine. Given the heavy usage and strain on the current shelter system, the program has allowed many areas experiencing COVID-19 spikes to slow the spread

of the disease among individuals experiencing homelessness.

COVID-19 NATIONAL EMERGENCY DECLARATION AND MAJOR DISASTER DECLARATIONS

On March 13, 2020, President Donald Trump issued an Emergency Declaration under Section 501(b) of the "Robert T. Stafford Disaster Relief and Emergency Assistance Act," 42 U.S.C. 5121-5207 (the "Stafford Act"), making available critical resources from FEMA to help address public health needs in states and localities. This is the first time a national disaster has been declared under this section. Unlike a Major Disaster Declaration, this national declaration does not require a request from a governor or tribal government in order to be issued. The president need only determine that the emergency exists. In the case of the pandemic, the disaster is defined by the spread of an infectious disease, which is recognized as an area of federal primary responsibility.

Typically, when a major disaster occurs, the state or territorial governor or a tribal government will demonstrate to the White House that the disaster exceeds the ability of their jurisdiction and request a Major Disaster Declaration under Section 401 of the "Stafford Act." A Major Disaster Declaration permits the activation of the full suite of FEMA's assistance programs. This assistance must be specified in the request made by the state's governor. FEMA will then approve the forms of specified aid the federal government is willing to provide.

At the time of writing, all Major Disaster Declarations made in connection with the COVID-19 pandemic have included only public assistance grants and not any major assistance programs targeting individuals. This is in direct conflict with the requests of many governors who have asked FEMA to activate additional disaster assistance programs for their states. The only individual assistance that has been

approved for states is FEMA’s Crisis Counseling Program, which provides mental health counseling assistance to disaster survivors – an important, but relatively minor program given the scale of the pandemic. While FEMA has indicated that it is concentrating its COVID-19 efforts on public assistance, it is important for policymakers, service providers, and advocates working during the pandemic to understand the scope of FEMA assistance programs should advocates, governors, and tribal governments successfully petition a change in policy at FEMA. For more information about FEMA’s disaster housing assistance programs, see *Disaster Housing Programs* in chapter 6 of this *Advocates’ Guide*. In addition to the non-congregate sheltering program described in this section, FEMA’s Disaster Unemployment (DUA) was used by the Administration to provide block grants to state governments in the summer of 2020, allowing participating states to increase the payment levels of state-level unemployment assistance programs.

The Emergency Declaration issued in March was envisioned as a limited type of Major Disaster Declaration. As such, there are only several assistance programs authorized under Section 501 of the “Stafford Act.” The 501(b) declaration allows state, territorial, tribal, and local government entities and certain private non-profit organizations to apply for the FEMA PA Category A (debris removal) and Category B (emergency protective measures).

FEMA PUBLIC ASSISTANCE: NON-CONGREGATE SHELTERING

The FEMA PA program provides resources to allow communities to respond quickly to and recover from major disasters or emergencies. Given the lack of structural damage and debris caused by a pandemic, PA Category B: Emergency Protective Measures resources have been used during the current crisis. Under Category B, state and local governments can receive reimbursement for eligible emergency protective measures taken to respond to the COVID-19 pandemic. According to the [FEMA PA Program](#)

[and Policy Guide](#), emergency protective measures include “activities taken to eliminate or reduce an immediate threat to life, public health or safety, or significant damage to improved public or private property in a cost-effective manner.” Such measures include personal protective equipment, certain types of logistical and administrative costs, and “evacuation and sheltering.”

It is well-established that during pandemics congregate sheltering poses a severe risk to individuals experiencing homelessness and people with disabilities, who are more likely to have pre-existing medical conditions than the general public. People experiencing homelessness and people with disabilities who live in congregate settings are among those individuals who have been hardest hit by the pandemic, suffering from high rates of severe illness and death from coronavirus.

Recognizing that non-congregate sheltering may be necessary to protect public health and save lives, FEMA applied its statutory flexibility during the pandemic to offer reimbursements for non-congregate medical sheltering costs under the PA program. The term “medical sheltering” is meant to address the specific needs directly resulting from the public health emergency. For purposes of eligibility under the COVID-19 declarations, FEMA may approve reimbursement for some non-congregate sheltering for health and medical-related needs, such as isolation and quarantine resulting from the public health emergency.

All non-congregate sheltering must be approved by the FEMA Regional Administrator for such costs to be reimbursed. FEMA funding through the PA program typically covers 75% of eligible costs, leaving governments and nonprofits to cover the remaining 25%. President Biden signed an [executive order](#) on January 21 directing FEMA to provide 100% reimbursement for the cost of approved non-congregate sheltering in hotel and motels across the country through September 2021, including for people experiencing homelessness and residents of congregate living facilities. FEMA [announced](#) that President Biden’s

directive allows FEMA to fully cover the costs of moving individuals experiencing homelessness into hotels and motels and apply full funding retroactively. State and local governments will receive 100% reimbursement for all approved non-congregate sheltering costs they have incurred since the start of the pandemic in January 2020 to September 30, 2021.

As of this writing, the target population for FEMA-funded non-congregate sheltering is 1) individuals that tested positive for COVID-19 that do not require hospitalization but need isolation, 2) people who have been exposed to COVID-19 and need isolation, or 3) high-risk individuals that need social distancing as a precautionary measure. In order to be eligible for FEMA reimbursement, the CDC or state/local public health officials must require the non-congregate sheltering through an official order, or it must otherwise be done at the direction of health officials. To learn more, see NLIHC's comprehensive toolkit on FEMA's role in COVID-19 response.

NON-CONGREGATE SHELTERING CHALLENGES AND POLICY RECOMMENDATIONS

Homeless service providers and community leaders have worked tirelessly to use FEMA PA funds to address the urgent health and housing needs of people experiencing homelessness and others living in congregate settings during the pandemic, often encountering multiple challenges and employing various strategies to overcome these hurdles. While some of these challenges reflect the unprecedented nature of using federal funds for this purpose, others mirror persistent barriers to using FEMA resources seen in past disasters.

State and local officials and homeless service providers reported challenges related to FEMA's narrow eligibility criteria for non-congregate sheltering reimbursement, the agency's lack of clear guidance and transparency, and the federal cost-share requirement, among others. FEMA limited reimbursements for Category B expenses to only cover individuals experiencing

homelessness that have been exposed to or tested positive for COVID-19 or are medically at-risk. The agency's narrow eligibility criteria prevented individuals from accessing much-needed FEMA resources, further strained our nation's overstretched homeless shelter systems, and created a significant administrative burden on the part of municipalities and states to track FEMA-eligible non-congregate shelter residents separately from those funded through other programs. NLIHC urged Congress and the White House to expand eligibility for FEMA non-congregate sheltering reimbursements to all individuals experiencing homelessness. This would help ensure that everyone has access to safe, non-congregate shelter during the pandemic and lower the administrative burden on municipalities and states when submitting reimbursement requests.

During the pandemic, homeless shelter and service providers often lacked critical information needed from FEMA to plan and interface with the PA program, such as application processes and expiration dates. While FEMA issued additional guidance on non-congregate sheltering as the pandemic progressed, state and local officials continued to report challenges in accessing clear guidance on basic program rules. These include questions on who is eligible for non-congregate sheltering, whether the direct conversion of hotels into long-term non-congregate shelter can be reimbursed under the PA program, the extent to which administrative costs accrued running non-congregate shelter programs are eligible for reimbursement, and whether RVs or manufactured housing units fit with the definition of non-congregate shelter. FEMA should issue broad, clarifying guidance on non-congregate sheltering to enable states and localities to better utilize the program. The agency should ensure that regional offices consistently apply this guidance to reduce interregional variations in application decisions and program utilization. Additionally, FEMA should make publicly available online and in a timely manner all documentation surrounding the request, approval, and justification of non-congregate sheltering reimbursement. Full transparency

would enable housing and homeless service providers to utilize the PA program to the most effective extent possible and help policymakers and service providers better understand FEMA's role in providing non-congregate shelter.

Until mid-December, FEMA required state and local officials to request extensions for non-congregate sheltering reimbursement in short, 30 to 60-day increments. Time extension requests require substantial information gathering, reporting, and local or state level public health declarations from public health officials, constituting a substantial administrative lift for multiple sectors of state and local government – which are already under stress from the ongoing pandemic. Additionally, FEMA often refrained from granting extension requests until the last moment, creating confusion and concern among non-congregate shelter residents and advocates that the agency will abruptly stop reimbursing hotel rooms. Despite the ongoing public health emergency, some states and municipalities started to phase out their programs under the assumption that FEMA would stop reimbursing hotel rooms, forcing officials to abruptly shut down hotels before the pandemic is over and before they had the opportunity to move residents into permanent housing. NLIHC urged policymakers to announce that non-congregate sheltering will continue to be approved under the PA Program through six months after the expiration of the Department of Health and Human Service's COVID-19 Emergency Declaration. This would enable state and local officials to continue offering these critical programs needed to prevent and respond to outbreaks among people experiencing homelessness and to ensure non-congregate shelter residents can transition to permanent housing solutions when the programs eventually end. In December, FEMA announced that the agency will approve reimbursement for non-congregate sheltering for the “duration of the [COVID-19] emergency.” The policy change, announced in an [internal memo](#) sent to FEMA Regional Administrators, did not specify when the approval for non-congregate sheltering reimbursement will expire. The memo stated

that FEMA will direct its Regional Administrators to provide a 30-day notice of termination when the agency determines the need for non-congregate sheltering no longer exists. There will be an option for recipients to continue receiving funding for 30 days after the program ends. While the agency waived the requirement that recipients request and receive approval every 30 days, recipients are still required to send reporting data to FEMA every 30 days. NLIHC also urged FEMA to activate the [Disaster Housing Assistance Program \(DHAP\)](#), which plays a critical role in providing safe, decent, and affordable homes to individuals with the greatest needs after a disaster by providing longer-term rental assistance and wrap-around services. DHAP could be used to help transition individuals residing in FEMA-funded non-congregate shelters into permanent housing when the programs eventually end.

The federal-cost share requirement places significant strain on state and local budgets already depleted from COVID-19 response, resulting in some areas being unable to take advantage of this critical program. In many cash-strapped communities, the resources needed to keep people experiencing homelessness safe during the public health emergency exceeded the response and funding capabilities of state and local governments. NLIHC and the NLIHC-led Disaster Housing Recovery Coalition [urged](#) the Federal Emergency Management Agency (FEMA) to fully cover the costs to move individuals experiencing homelessness and living in congregate settings or encampments to safer living spaces in hotels and motels. In a major win for individuals who are homeless, advocates, and state and local officials, President Biden [directed](#) FEMA to cover 100% of these costs.

For additional information on steps FEMA can take to address the urgent housing needs of people experiencing homelessness during the pandemic, see the NLIHC-led Disaster Housing Recovery Coalition's (DHRC) [memorandum](#) to President Biden's FEMA transition team.

FORECAST FOR 2021

While the national emergency declaration activated FEMA's PA program and created opportunities for collaboration and funding at all levels of government, ensuring that these resources reached individuals with the greatest needs requires concerted effort and advocacy at the local, state, and national levels. Utilizing FEMA funds to address the urgent health and housing needs of people experiencing homelessness and others living in congregate settings during the pandemic represents an unprecedented use of federal funds, and advocates should continue to encourage policymakers to fully utilize FEMA funds to house the most people possible in non-congregate shelters.

Additionally, advocates should make note of the best practices and lessons learned from the COVID-19 pandemic to apply to the later stages of this pandemic and future disasters. Such best practices include, among others, collaborating with public health officials to ensure the broadest eligibility for FEMA resources and coordinating with emergency managers and elected officials to ensure that the needs of people experiencing homelessness are included in the scope of their disaster planning. For more information, see NLIHC's [guidance](#) on working with FEMA to fund non-congregate shelter and our [brief report on challenges, best practices, and policy recommendations](#) to improve FEMA programs to house people experiencing homelessness in non-congregate shelters.

In past disasters, FEMA has often interpreted current law to deny assistance to people who were experiencing homelessness prior to a disaster. During the COVID-19 pandemic, however, FEMA has interpreted the law much more broadly, determining that people who were homeless prior to the disaster are eligible for non-congregate sheltering. This demonstrates that FEMA can interpret the law much more broadly to serve people experiencing homelessness during other major disasters. In future disasters, advocates should urge FEMA to use the same creativity and broad eligibility

utilized during this pandemic to ensure that people experiencing homelessness can access needed resources.

FOR MORE INFORMATION

FEMA COVID-19 Public Assistance Guidance Documents: <https://bit.ly/39S5l85>.

FEMA COVID-19 Housing Resource Roadmap: <https://bit.ly/39UvK55>.

FEMA Public Assistance Program and Policy Guide: <https://bit.ly/3lVos3G>.

NLIHC Toolkit, "Working with FEMA to Address COVID-19 Housing and Homelessness Needs:" <https://bit.ly/3m1PcjT>.

NLIHC Guidance, "Working with FEMA to Fund Non-Congregate Shelter During COVID-19:" <https://bit.ly/2UZmiVu>.

NLIHC Brief Report, "Housing is Healthcare: Challenges, Best Practices, and Policy Recommendations to Improve FEMA Programs to House People Experiencing Homelessness in Non-Congregate Shelters During the Pandemic:" <https://bit.ly/2UZ97E8>.

NLIHC's DHRC Pandemic and Disaster Recovery Recommendations to President Biden: <https://bit.ly/37aJIUh>.

NLIHC, *Advocates Guide*, Disaster Housing Programs, chapter 6.