MAXIMIZING FEDERAL ASSISTANCE

FOCUS: Emergency Operations Centers & Staff Time

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In response to the COVID-19 pandemic on March 13, 2020, the President declared a nationwide emergency. This declaration triggered FEMA’s public assistance program that provides grants specific to Emergency Protective Measures (EPM). The purpose of EPMs, sometimes referred to as Category B, is to eliminate or lessen threats to lives, public health or safety.

As part of the COVID-19 warning, guidance and information sharing process, most Emergency Operations Center (EOC) costs are eligible for FEMA reimbursement. These costs include staff augmentation and capacity building/support for EOC and first line response, as well as staff time, materials and reasonable contract costs. Some teleworking solutions that serve to ensure continuous critical services for health and safety may also be eligible for reimbursement.

Moreover, even though the emergency was declared March 13, the incident period began on January 20. As such, costs incurred from January 20 forward may be reimbursable. However, COVID-19 will require extended EOC activations that will stress resources. Our team’s experience offers oversight and guidance throughout the intricate reimbursement process, as well as EOC staff augmentation support. Costs for these services are eligible for reimbursement through Direct Administrative Costs (DAC) under the declaration.

Outside of the EOC, overtime associated with responding to the emergency is eligible, but straight time is not. That said, local authorities may need to temporarily replace an employee who is responding to COVID-19. Overtime costs for the backfill employee are eligible even if the employee is not performing eligible work as long as their replacement is performing eligible work. FEMA determines the eligibility of overtime, premium pay and compensatory time costs based on the applicant’s pre-disaster written labor policy.

Accounting for hours attributable to the COVID-19 response will be essential for the eligibility of reimbursement costs. Hospitals should develop a process for coding as it relates to time keeping so they can designate emergency-specific hours worked, inclusive of overtime. This process for tracking hours may be utilized for both salaried and contract staff. The development of tools such as this one will serve to improve reporting and increase the speed of reimbursement.

We look forward to the opportunity to guide our municipal and healthcare clients. Please contact me for information or to schedule a step-by-step webinar which will provide details on costs that are potentially eligible for reimbursement under the emergency declaration.