

J. Kevin StittOffice of the Governor State of Oklahoma

Chairman James E. Clyburn Select Subcommittee on the Coronavirus Crisis 2157 Rayburn House Office Building Washington, D.C. 20515-6143

August 17, 2020

Dear Chairman Clyburn,

As promised, I am writing in follow up to my initial response on August 12, 2020. Dr. Deborah Birx visited yesterday as an ambassador of the White House Coronavirus Task Force and said she was encouraged by Oklahoma's sentinel surveillance testing strategy and that our plan to use saliva testing in university or school settings was innovative and one that should be shared with other states. The Governor's Solution Task Force, mayors, and health experts gathered to demonstrate the collaborative, data-driven approach Oklahoma has taken throughout this pandemic, and why our efforts were successful in the onset of COVID-19 and why it is working again as our trend lines continue to improve and our hospitalization rates and death rates remain well below the national average.

When COVID-19 arrived in Oklahoma with our first confirmed case on March 7, we took immediate action in two key areas: strengthening Oklahoma's healthcare infrastructure and establishing robust transparent reporting mechanisms.

First, we formed the Governor's Solution Task Force that reinforced coordination between the State Department of Health, Oklahoma National Guard, Emergency Management, State Cabinet of Science and Innovation, State Department of Veterans Affairs, Tulsa County Health Department, and Oklahoma City/County Health Department. We also brought in representatives from the Oklahoma Hospital Association and a representative for Oklahoma's nursing homes and long-term care facilities. We met seven days a week to problem solve hospital capacity, PPE access, testing supplies, and more. This team guided my administration's decision to file numerous executive orders that suspended red tape across state agencies and licensure boards, that established "Safer at Home" policies for high-risk individuals, and that suspended visitations for communal living facilities such as Veterans Affairs centers and prisons. My administration's actions resulted in the 28 executive orders that follow this letter.

Thanks to the cross-agency collaboration and support of the private sector, we also took innovative approaches to quickly stand up 80 testing pods across the state and convert our 211 hotline into a COVID-19 support center for citizens to talk with trained public health professionals. We brought online our state universities' research labs to increase Oklahoma's testing capacity by 1,133% within a month. We established permanent COVID-19 hospital units through public-private partnerships to build Oklahoma's ongoing capacity, instead of using temporary U.S. Army Corps of Engineers emergency response tents. We deployed 53 Telehealth units across rural Oklahoma to open up lines of communication with medical experts and allow patients to remain as long as possible in their local hospitals or in the care of their local doctor. Oklahoma also became one of the first states to pursue validation of saliva testing with Oklahoma State University's partnership with Rutgers University in April. My administration fought in the scuttled global marketplace to build Oklahoma's emergency PPE supply from enough to last one day to a supply of more than 2.5 million N95 masks and hundreds of thousands of gloves, gowns and other materials that local Oklahoma manufacturers produced by quickly altering their supply chain operations during the state's partial closure.

Our efforts to bolster Oklahoma's healthcare infrastructure to combat and minimize the presence of COVID-19 did not end as we reopened the state. The Governor's Solution Task Force has continued to meet and engage in the data. The State's lab testing capacity has since expanded again by another 35%, and the private sector's efforts to expand testing options have allowed us to see a 130% increase in Oklahomans getting tested between June and August. Furthermore, we have continued to modify the State's hospital surge plan to bring in more private hospital partnerships to expand bed capacity to deliver the highest quality of treatment and care of COVID-19 patients for the long-term until there is a cure or herd immunity with the delivery of a vaccine.

Our second significant effort when the pandemic first arrived was to prioritize data transparency. When the State Legislature voted in support of the Catastrophic Health Emergency declaration, we used this as an opportunity to lean in to delivering the nation's best data dashboard to keep local leaders, businesses and community citizens informed. Our efforts were praised early on by *The Atlantic*'s COVID Tracking Project, with Oklahoma being one of the first states to receive an A+ rating and recognized by the *Wall Street Journal* for leading the nation in data transparency on the presence of COVID-19 in long-term care facilities.

Our commitment to data transparency has allowed the State to issue recommendations that empowered cities and counties to formally adopt or modify to best fit the unique needs and demographics of their communities.

This most recent effort is seen with the OSDH's COVID-19 Risk Map, as outlined in my previous letter (attached). Just as we know that every state's situation is different, we recognize that situations vary within counties. This is why we believe strongly in providing local municipalities with data that enable them to make the right decisions for their residents. After OSDH first alerted counties on July 9 of their status for community spread and offered recommendations, 16 cities took action to adopt face covering requirements in the weeks following. They

represent Oklahoma's most densely populated cities and greater than 40% of the state's total population. On Aug. 12, I joined our Interim Commissioner of Health Lance Frye, MD, in issuing a Public Health Advisory (attached) strengthening our calls for various public health recommendations in orange counties and statewide for high-risk individuals and facilities in order to continue to drive down new COVID-19 cases and to rally around opening our schools safely for Oklahoma families and our dedicated teachers in the classroom.

But this pandemic has not only challenged Oklahoma's personal health and the foundation of our health care system. It has wreaked havoc on our economy. The uncertainty from the national trends of fewer flights, less tourist activity, and less demands for domestic energy has created concerns for hundreds of thousands of Oklahoma families on what the future will hold. The Oklahoma Employment Security Commission was inundated with an unprecedented number of claims as our unemployment rate hit 13%. As we reopened safely and methodically, Oklahoma cut its unemployment rate in half, achieving the 5th lowest unemployment in the country in June. Oklahoma opened in a three-phase approach, a plan crafted for my administration by a team of public health professionals and Oklahoma job creators. The Open Up and Recover Safely (OURS) plan is attached to this letter.

Sharing in the mission of Congress and the Trump administration to bolster public health efforts while protecting and reinvigorating the economy, my administration also formed the CARES *FORWARD* team to ensure proper fiscal oversight and targeted distribution of the \$1.25 billion in stimulus funds sent to Oklahoma as part of the CARES Act Coronavirus Relief Fund (CRF). This team is composed of state agency directors and public employees who have an expertise in finance, federal grants, and auditing and is led by the State's Chief Operating Officer and Secretary of Budget. CARES *FORWARD* also reports twice a month to a Legislative Advisory Board formed by my administration to receive input from the State Legislature.

The federal partnership has allowed Oklahoma to quickly deploy critical funds to the front lines of state agencies, cities and counties for their efforts on COVID-19. It has allowed us to be nimbler and quicker as governments in the midst of crisis. My administration has also strategically utilized these funds for economic grants to enhance the safe delivery of critical services in Oklahoma, from long-term care facilities, day care centers, mental health telemedicine, and more than 6,000 small business grants, to HOPE centers for underserved children. A summary of these CARES Act CRF economic grants is attached.

Oklahomans are grateful for the strong leadership of the Trump administration, and the regular communications and collaboration of Vice President Mike Pence and the White House Coronavirus Task Force. Their guidance, combined with the resources deployed by Congress, has helped us succeed because it has acknowledged that every state and community is faced with its own unique challenges and needs that require localized solutions. Their method has set aside Washington's typical one-size-fits-all approach and empowered governors and local leaders with the flexibility and resources to address this crisis with a local holistic effort to navigate the demands of public health, mental health, education, workforce, and more. It has

also allowed us to thoughtfully adapt Oklahoma's guidance and response as the clinical understanding of the virus evolves and changes day by day.

Finally, the request for documents regarding the White House Task Force's guidance and recommendations for Oklahoma beginning on June 29 are attached.

We appreciate Dr. Birx for visiting Oklahoma and meeting with my administration and key stakeholders in our response to the pandemic. Dr. Birx stressed she was very appreciative of our testing strategy as well as our hospital surge capacity to protect the system from being overwhelmed. Dr. Birx shared that while our case statistics are trending in a positive direction, she encouraged us to be forward thinking and consider actions that mitigate outbreaks spurred by asymptomatic individuals. As mentioned previously, Oklahoma is on the front end of receiving FDA validation for saliva testing, and we have great confidence that this cost-effective and less-invasive testing method will allow for Oklahoma to identify cases sooner and take quicker action for at-risk population centers.

Dr. Birx offered Oklahoma a glimmer of hope that we are months away from being on the other side of this pandemic, not years. With Oklahomans working together to adhere to the latest public health guidance, I share in her optimism.

My administration's top priority throughout this pandemic has been to protect the health and lives of Oklahomans, and you can rest assured my administration will remain vigilant to assess the latest data and advance new guidance to ensure Oklahoma's success.

Sincerely,

J. Kevin Stitt

Governor of Oklahoma