GUIDELINES

OPENING UP AMERICA AGAIN
## Proposed State or Regional Gating Criteria

(Satisfy Before Proceeding to Phased Opening)

<table>
<thead>
<tr>
<th>SYMPTOMS</th>
<th>CASES</th>
<th>HOSPITALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Downward trajectory of influenza-like illnesses (ILI) reported within a 14-day period</td>
<td>Downward trajectory of documented cases within a 14-day period</td>
<td>Treat all patients without crisis care</td>
</tr>
<tr>
<td>AND</td>
<td>OR</td>
<td>AND</td>
</tr>
<tr>
<td>Downward trajectory of covid-like syndromic cases reported within a 14-day period</td>
<td>Downward trajectory of positive tests as a percent of total tests within a 14-day period (flat or increasing volume of tests)</td>
<td>Robust testing program in place for at-risk healthcare workers, including emerging antibody testing</td>
</tr>
</tbody>
</table>

*State and local officials may need to tailor the application of these criteria to local circumstances (e.g., metropolitan areas that have suffered severe COVID outbreaks, rural and suburban areas where outbreaks have not occurred or have been mild). Additionally, where appropriate, Governors should work on a regional basis to satisfy these criteria and to progress through the phases outlined below.*
Core State Preparedness Responsibilities

TESTING & CONTACT TRACING

- Ability to quickly set up safe and efficient screening and testing sites for symptomatic individuals and trace contacts of COVID+ results
- Ability to test Syndromic/ILI-indicated persons for COVID and trace contacts of COVID+ results
- Ensure sentinel surveillance sites are screening for asymptomatic cases and contacts for COVID+ results are traced (sites operate at locations that serve older individuals, lower-income Americans, racial minorities, and Native Americans)

HEALTHCARE SYSTEM CAPACITY

- Ability to quickly and independently supply sufficient Personal Protective Equipment and critical medical equipment to handle dramatic surge in need
- Ability to surge ICU capacity

PLANS

- Protect the health and safety of workers in critical industries
- Protect the health and safety of those living and working in high-risk facilities (e.g., senior care facilities)
- Protect employees and users of mass transit
- Advise citizens regarding protocols for social distancing and face coverings
- Monitor conditions and immediately take steps to limit and mitigate any rebounds or outbreaks by restarting a phase or returning to an earlier phase, depending on severity
OPENING UP AMERICA AGAIN

BASED ON UP-TO-DATE DATA AND READINESS

Proposed Phased Approach

MITIGATES RISK OF RESURGENCE

PROTECTS THE MOST VULNERABLE

IMPLEMENTABLE ON STATEWIDE OR COUNTY-BY-COUNTY BASIS AT GOVERNORS’ DISCRETION
Guidelines for All Phases: Individuals

CONTINUE TO PRACTICE GOOD HYGIENE

- Wash your hands with soap and water or use hand sanitizer, especially after touching frequently used items or surfaces.
- Avoid touching your face.
- Sneeze or cough into a tissue, or the inside of your elbow.
- Disinfect frequently used items and surfaces as much as possible.
- Strongly consider using face coverings while in public, and particularly when using mass transit.

PEOPLE WHO FEEL SICK SHOULD STAY HOME

- Do not go to work or school.
- Contact and follow the advice of your medical provider.
Guidelines for All Phases: Employers

Develop and implement appropriate policies, in accordance with Federal, State, and local regulations and guidance, and informed by industry best practices, regarding:

- Social distancing and protective equipment
- Temperature checks
- Testing, isolating, and contact tracing
- Sanitation
- Use and disinfection of common and high-traffic areas
- Business travel

Monitor workforce for indicative symptoms. Do not allow symptomatic people to physically return to work until cleared by a medical provider.

Develop and implement policies and procedures for workforce contact tracing following employee COVID+ test.
Phase One

FOR STATES AND REGIONS

THAT SATISFY THE GATING CRITERIA
ALL VULNERABLE INDIVIDUALS* should continue to shelter in place. Members of households with vulnerable residents should be aware that by returning to work or other environments where distancing is not practical, they could carry the virus back home. Precautions should be taken to isolate from vulnerable residents.

All individuals, WHEN IN PUBLIC (e.g., parks, outdoor recreation areas, shopping areas), should maximize physical distance from others. Social settings of more than 10 people, where appropriate distancing may not be practical, should be avoided unless precautionary measures are observed.

Avoid SOCIALIZING in groups of more than 10 people in circumstances that do not readily allow for appropriate physical distancing (e.g., receptions, trade shows)

MINIMIZE NON-ESSENTIAL TRAVEL and adhere to CDC guidelines regarding isolation following travel.

*See Appendix 1 for Definition of Vulnerable Individuals
Continue to **Encourage Telework**, whenever possible and feasible with business operations.

If possible, **Return to work in phases**.

Close **Common areas** where personnel are likely to congregate and interact, or enforce strict social distancing protocols.

Minimize **Non-essential travel** and adhere to CDC guidelines regarding isolation following travel.

Strongly consider **Special accommodations** for personnel who are members of a **Vulnerable population**.

**Phase One**

**Employers**

Each phase of this guidance addresses those aspects of daily life for which restrictions remain appropriate due to COVID.
**Phase One**

**SCHOOLS AND ORGANIZED YOUTH ACTIVITIES** (e.g., daycare, camp) that are currently closed should remain closed.

**VISITS TO SENIOR LIVING FACILITIES AND HOSPITALS** should be prohibited. Those who do interact with residents and patients must adhere to strict protocols regarding hygiene.

**LARGE VENUES** (e.g., sit-down dining, movie theaters, sporting venues, places of worship) can operate under strict physical distancing protocols.

**ELECTIVE SURGERIES** can resume, as clinically appropriate, on an outpatient basis at facilities that adhere to CMS guidelines.

**GYMS** can open if they adhere to strict physical distancing and sanitation protocols.

**BARS** should remain closed.

**EACH PHASE OF THIS GUIDANCE ADDRESSES THOSE ASPECTS OF DAILY LIFE FOR WHICH RESTRICTIONS REMAIN APPROPRIATE DUE TO COVID.**
Phase Two

For states and regions with no evidence of a rebound and that satisfy the gating criteria a second time.
Phase Two

**ALL VULNERABLE INDIVIDUALS** should continue to shelter in place. Members of households with vulnerable residents should be aware that by returning to work or other environments where distancing is not practical, they could carry the virus back home. Precautions should be taken to isolate from vulnerable residents.

All individuals, **WHEN IN PUBLIC** (e.g., parks, outdoor recreation areas, shopping areas), should maximize physical distance from others. Social settings of more than 50 people, where appropriate distancing may not be practical, should be avoided unless precautionary measures are observed.

**NON-ESSENTIAL TRAVEL** can resume.

*Each phase of this guidance addresses those aspects of daily life for which restrictions remain appropriate due to COVID.*
Continue to **ENCOURAGE TELEWORK**, whenever possible and feasible with business operations.

Close **COMMON AREAS** where personnel are likely to congregate and interact, or enforce moderate social distancing protocols.

**NON-ESSENTIAL TRAVEL** can resume.

Strongly consider **SPECIAL ACCOMMODATIONS** for personnel who are members of a **VULNERABLE POPULATION**.
Phase Two

SCHOOLS AND ORGANIZED YOUTH ACTIVITIES (e.g., daycare, camp) can reopen.

VISITS TO SENIOR CARE FACILITIES AND HOSPITALS should be prohibited. Those who do interact with residents and patients must adhere to strict protocols regarding hygiene.

LARGE VENUES (e.g., sit-down dining, movie theaters, sporting venues, places of worship) can operate under moderate physical distancing protocols.

ELECTIVE SURGERIES can resume, as clinically appropriate, on an outpatient and in-patient basis at facilities that adhere to CMS guidelines.

GYMS can remain open if they adhere to strict physical distancing and sanitation protocols.

BARS may operate with diminished standing-room occupancy, where applicable and appropriate.

EACH PHASE OF THIS GUIDANCE ADDRESSES THOSE ASPECTS OF DAILY LIFE FOR WHICH RESTRICTIONS REMAIN APPROPRIATE DUE TO COVID.
Phase Three

FOR STATES AND REGIONS WITH NO EVIDENCE OF A REBOUND AND THAT SATISFY THE GATING CRITERIA A THIRD TIME
Phase Three

VULNERABLE INDIVIDUALS can resume public interactions, but should practice physical distancing, minimizing exposure to social settings where distancing may not be practical, unless precautionary measures are observed.

LOW-RISK POPULATIONS should consider minimizing time spent in crowded environments.

Phase Three

EMPLOYERS

Resume UNRESTRICTED STAFFING of worksites.
VISITS TO SENIOR CARE FACILITIES AND HOSPITALS can resume. Those who interact with residents and patients must be diligent regarding hygiene.

LARGE VENUES (e.g., sit-down dining, movie theaters, sporting venues, places of worship) can operate under limited physical distancing protocols.

GYMS can remain open if they adhere to standard sanitation protocols.

BARS may operate with increased standing room occupancy, where applicable.
Appendix

Vulnerable Individuals

1. Elderly individuals.

2. Individuals with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune system is compromised such as by chemotherapy for cancer and other conditions requiring such therapy.