



Case No. 2020-00717-FOIA-OS
American Oversight v. HHS, Civil No. 20-1169

April 8, 2024

Austin Evers
Executive Director
American Oversight
Sent via email: foia@americanoversight.org

Dear Mr. Evers:

This letter is the thirty-fifth interim response to your March 18, 2020, Freedom of Information Act (FOIA) request.

American Oversight requests that HHS produce the following records as soon as practicable, and at least within twenty business days:

All email communications (including email messages, complete email chains, email attachments, calendar invitations) sent by the government officials specified below containing any of the following key terms:

1. Coronavirus
2. Corona
3. Virus
4. Disease
5. Pandemic
6. Epidemic
7. Outbreak
8. containment
9. "public health emergency"
10. "COVID-19"
11. "COVID 19"
12. COVID19
13. SARS
14. "2019-nCoV"
15. POTUS
16. Test
17. Tests
18. Testing
19. EUA
20. Emergency
21. Wuhan
22. Hoax
23. Hubei
24. Princess
25. Cruise
26. Kirkland
27. Seattle
28. "New Rochelle"
29. "BioGen Conference"
30. CPAC

34. Vaccine
35. Vaccine
36. Antiviral
37. Antiretroviral
38. Quarantine
39. Distancing
40. Isolation
41. N95
42. Mask
43. Respirator

Government Officials

1. Alex Azar, Secretary
2. Brian Harrison, Chief of Staff
3. Eric Hargan, Deputy Secretary
4. Jerome Adams, Surgeon General
5. Robert Kadlec, Assistant Secretary for Preparedness and Response
6. John Brooks, Senior Advisor to the Secretary for Drug Pricing Reform

On February 10, 2021, you narrowed your request per the following:

Eliminate attachments, documents regarding “Red Dawn” and obvious marketing and news bulletins

- a. Limit the date range of the following key terms as stand-alone search terms from January 15, 2020 through February 29, 2020. ~~[[Limit responsive records to those that also include: (Test OR Tests OR Vaccine OR EUA OR “Emergency Use” OR Shortage OR Shortages OR Supplies OR “the WHO” OR States OR Governor OR Governors OR PPE OR Ventilators OR Respirators OR Swabs OR DPA OR “Defense Production Act” OR Trump OR Pence OR Jared OR Kushner OR “White House” OR “the WH”)]]~~

- i. Coronavirus
- ii. Corona
- iii. “COVID-19”
- iv. “COVID 19”
- v. COVID19
- vi. “2019-nCoV”

~~vii. SARS~~

~~viii. Epidemic~~

~~ix. Pandemic~~

~~x. Outbreak~~

~~xi. “Public Health Emergency”~~

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• Coronavirus • Corona • “COVID-19” • “COVID 19” • COVID19 • “2019-nCoV” • SARS • Epidemic • Pandemic • Outbreak • “Public Health Emergency”	• Test • Tests • Vaccine • Antiviral • Antiretroviral • EUA • “Emergency Use” • Shortage • Shortages • Supplies • “Emergency Use” • EUA • “the WHO” • “W.H.O.” • “World Health Organization” • States • Governor • Governors • PPE • Ventilators • Respirators • Swabs • DPA • “Defense Production Act”
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- c. For the key terms that are in Column A below, limit responsive records to those that also include one or more of the terms from Column B, for the full time period of the search.

Column A	Column B
• Test • Tests • “Extraction Kits”	• CV19 • “CV-19” • C19 • “C-19” • Roeche • RNA • Shortage • Shortages • Supplies • “Emergency Use” • “EUA” • “the WHO” • “W.H.O.” • “World Health Organization” • States • Governor • Governors • Kit • Kits • DPA • “Defense Production Act”

- d. ~~[~500 records] For the key terms that are in Column A below, limit responsive records to those that also include one or more of the terms from Column B, for the full time period of the search.~~

Column A	Column B
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• Antiviral • Antiretroviral	• "CV-19" • C19 • "C-19" • "EUA" • "Emergency Use" • "DPA" • "Defense Production Act" • "the WHO" • "W.H.O." • "World Health Organization"
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e. ~~[<50 records] For the key term "Emergency" limit responsive records to those that also include "DPA" or "Defense Production Act," for the full time period of the search.~~

f. For the following key terms, please limit the time period as indicated:

i. Princess - February 1, 2020, through March 1, 2020 ~~[[Limit responsive records to those that also include: Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH"]]]~~

~~ii. [~~150 records~~] Kirkland February 24, 2020, through March 24, 2020~~

~~iii. [~~750 records~~] Seattle February 24, 2020, through March 24, 2020~~

~~iv. [~~200 records~~] "New Rochelle" March 1, 2020, through March 31, 2020~~

~~v. [~~<50 records~~] "BioGen Conference" March 1, 2020, through March 31, 2020~~

~~vi. [~~50 records~~] CPAC February 21, 2020, through March 21, 2020~~

~~vii. [~~<50 records~~] AIPAC February 21, 2020, through March 21, 2020~~

g. For the following key terms, please run the search without any modifiers and using the full date range (i.e., no changes from original search)

i. Wuhan ~~[[Limit responsive records to those that also include: Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH"]]]~~

ii. Hoax ~~[[no changes]]~~

iii. Hubei ~~[[Limit responsive records to those that also include: Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH"]]]~~

iv. POTUS ~~[[no changes]]~~

v. Cruise ~~[[Limit responsive records to those that also include: Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH"]]]~~

vi. Quarantine ~~[[Limit responsive records to those that also include: Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH"]]]~~

vii. Distancing ~~[[Limit responsive records to those that also include: Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH"]]]~~

~~viii. Isolation~~

ix. N95 ~~[[Limit responsive records to those that also include: (CV19 OR "CV-19" OR C19 OR "C-19" OR Shortage OR Shortages OR Supplies OR "Emergency Use" OR "EUA" OR "the WHO" OR States OR Governor OR Governors OR DPA OR "Defense Production Act" OR Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH")]]~~

x. Mask ~~[[Limit responsive records to those that also include: (CV19 OR "CV-19" OR C19 OR "C-19" OR Shortage OR Shortages OR Supplies OR "Emergency Use" OR "EUA" OR "the WHO" OR States OR Governor OR Governors OR DPA OR "Defense Production Act" OR Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH")]]~~

xi. Respirator ~~[[Limit responsive records to those that also include: (CV19 OR "CV-19" OR C19 OR "C-19" OR Shortage OR Shortages OR Supplies OR "Emergency Use" OR "EUA" OR "the WHO" OR States OR Governor OR Governors OR DPA OR "Defense Production Act" OR Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH")]]~~

xii. Testing ~~[[Limit responsive records to those that also include: (CV19 OR "CV-19" OR C19 OR "C-19" OR Shortage OR Shortages OR Supplies OR "Emergency Use" OR "EUA" OR "the WHO" OR States OR Governor OR Governors OR DPA OR "Defense Production Act" OR Trump OR Pence OR Jared OR Kushner OR "White House" OR "the WH")]]~~

- i. Disease
- ii. Virus

The Department processed **421 pages** of potentially responsive records captured in the agency's search for FOIA request 2020-00717-FOIA-OS. After a careful review of these pages, I have determined to release **225 pages** to you in their entirety and I am further releasing in part **180 pages**, with portions redacted, pursuant to Exemptions (b)(5) and (b)(6) of the FOIA (5 U.S.C. §552 (b)(4), (b)(5), and (b)(6)). Furthermore, I have determined that **16 pages** should be sent for consultation to others and returned to this Department for final disposition.

FOIA exemption (b)(5) protects inter-agency or intra-agency memoranda or letters which would not be available by law to a party other than an agency in litigation with the agency. This exemption protects documents that would be covered by any privilege an agency could assert in a civil proceeding. These privileges include, among others, the deliberative process privilege, the attorney-client privilege, the attorney work-product privilege and the presidential communications privilege. I have considered the foreseeable harm standard when reviewing these records and applying the (b)(5) exemption.

FOIA exemption (b)(6) permits a federal agency to withhold information and records about individuals in "personnel and medical files and similar files, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy." The definition of "similar files" has historically been broadly interpreted to include a wide variety of files, and the United States Supreme Court has held that Congress intended the term "similar files" to be interpreted broadly, rather than narrowly. I have analyzed these records and find they meet the threshold requirement of this exemption. Additionally, I have reviewed and weighed the public interest in disclosure of this information against the privacy interest in nondisclosure and found that the privacy interest outweighs the public's interest in disclosure.

I have found that it is reasonably foreseeable that disclosure would harm an interest protected by one or more of the exemptions to the FOIA's general rule of disclosure and/or that disclosure is prohibited by law.

We will continue to review the remaining records as efficiently and expeditiously as possible, consistent with our available resources. Should you have questions or concerns regarding the Department's response and/or the processing of your request, any such issues should be communicated to your legal counsel and Department of Justice Attorney representing the Department in this matter.

Sincerely yours,

**Alesia Y.
Williams -S**

Alesia Y. Williams
Director, FOIA Appeals and Litigation
FOI/Privacy Act Division

Digitally signed by Alesia Y.
Williams -S
Date: 2024.04.08 15:52:24
-04'00'

Enclosures: 405 pages

From:	Evaluation Only. Created with Aspose.HTML. Copyright 2013-2020 Aspose Pty Ltd.YDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0280B227911B40B6B30A81B8574EDE6B-STECKER, JU>
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Subject:	Fwd: Axios Alerts: State Department authorizes personnel to evacuate China
Date:	2020/01/30 15:46:11
Priority:	Normal
Type:	Note

Sent from my iPhone

Begin forwarded message:

From: Axios <newsdesk@axios.com>

Date: January 30, 2020 at 3:07:38 PM EST

To: "Stecker, Judy (OS/IOS)" <Judy.Stecker@hhs.gov>

Subject: Axios Alerts: State Department authorizes personnel to evacuate China

AXIOS Axios Logo Alerts



Axios

State Department authorizes personnel to evacuate China due to coronavirus

Why it matters: The decision, which comes as the WHO declared a public health emergency, is one step down from an order for personnel to leave the country.

Read on Axios

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Axios, 3100 Clarendon Blvd, Suite 1300, Arlington VA 22201

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Sender:	Stecker, Judy (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0280B227911B40B6B30A81B8574EDE6B-STECKER, JU>
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 Mark Hartell (mark.g.hartell.mil@mail.mil) <mark.g.hartell.mil@mail.mil>;
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 Michels, Adam S CIV NORAD-USNC NCJ3 (USA) <adam.s.michels.civ@mail.mil>;
 SOC Chief Medical Officer (HHS/ASPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user6d537a3c>;
 SOC Critical Infrastructure Protection (OS/ASPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ada0b5d9907b4ef0b4adc2aca5542d68-EMGCIP.os@e>;
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 SOC Recovery (OS/ASPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user42218aba>;
 SOC Safety Officer (HHS/ASPR/OEM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user9ed978c7>;
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 SOC Resource Coordination Section Chief (HHS/ASPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user4cd4f1f6>;
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 Kleinman, Gary (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user5e5250c2>;
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 Mackay, Thomas (OS/ASPR/EEAA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user2e5f70d8>;
 Hill, Jerry (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user01dd7505>;
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 Moudy, Robin (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d421d3e0f6474bc3857583cfc5870d69-Moudy, Robi>;
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 Williams, Aimee (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=2a833ce49cc444e7a299327c5551463c-Williams, A>;
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Kushner, Diana (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group
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 NC SG Ops Director </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=77093185dc6a4efc9ae7b12428e87fb0-william.mac>;
 Sherman, Susan (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user161a2a33>;
 Czarasty, James (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usere3efe6ee>;
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 Evans, Pamela (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userac4ac959>;
 White, Catalina (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ca5d04357494dc6b5119a29da5eeabb-White, Cata>;
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 Garza, Roberto (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4838358d6792484d92f4f877295140be-Garza, Robe>;
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 audrey.mazurek@icf.com </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user1f4219f8>;
 Watson, Katie (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9e3c4e0833f04d33acc1b23c1a494cae-Watson, Kat>;
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 Libby, Mark (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usere888c9fb>;
 Smith, Kimberly (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=fd29f355c5d84fdb93a9f6b89908173e-Smith, Kimb>;
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 Jackson, Jacklyn (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user92784444>;
 Frenette, Jennifer (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user0d6867d6>;
 Dreyzehner, John (CDC/DDPHSIS/CPR/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7572776246e34d2ba1047ba324019eb8-john.dreyze>;
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 Chen, Andrew (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user62c2cda0>;
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 Colf, Leremy (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=Colf, Leremy>;

White, Jonathan (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e9b5fe526f1d4ba0a6cc8ddee8ec4d87-Jonathan Wh>; Gutierrez, Felipe (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user630ca552>; Green, Tracy (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=69c9761b84b14981abd3b10febde1eea-Green, Trac>; Nguyen, Ann (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=84d848848c584087a52b93a96e512e1b-Nguyen, Ann>; Carlee, John (OS/ASPR/SIIM) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b242f0b5081b43eda3035283abe3d02c-Carlee, Joh>; Bell, Carlos (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8923e289e8c746998ef899819b736206-Bell, Carlo>; Shankman, Rob (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user7d089792>; Wagner, Duane (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e3cc4fccf0084945ad0a50e2d166e05b-Wagner, Dua>; Rykken, David (OS/ASPR/SOC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user3e79bb77>; Miskis, Constantinos (ACL) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5be61be4b4fb41b79f7011221fc73bde-Miskis, Con>; Romine, Jarrod (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8f202b8e16084837aedc6ce7cc41962f-Romine, Jar>; Sturrock, Kenneth (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user4d481dc8>; Danso, Kojo (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=916e93025bf14c6bbd317b8cb79dc2ae-Danso, Kojo>; Patterson, Janice (OS/ASPR/SPPR) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=04826672b5a54037b186f9fb0257b33b-Patterson,>; Diaz, Walter I CIV SOUTHCOM SC-CC (USA) <walter.diaz14.civ@mail.mil>; Casey-Lockyer, Mary (REDCROSS.ORG) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8f9cc4b50f8d4abd8d95d4c2b62dc938-mary.CaseyL>; Rooks, Mercedes (OS/ASPR/BARDA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ad13f173d6894f30b1e0a2e9a378a715-Rooks, Merc>; Fox, LeAnne M. (CDC/DDID/NCIRD/DBD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=eadca2edaf424b35b78b2764defe1d09-Fox, LeAnne>; Christopher, Kenneth (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userb1b3dfdc>; Jarrett, Elizabeth (OS/ASPR/OEA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9b3d14cf1823486e90e4cd0814351ce9-Jarrett, El>; Hannah, Jennifer (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user873262b>; Payne, Pamela (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=809046dce4d947f597e3aa8336718ac3-Payne, Pame>; Dugas, Robert (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userf3b287ac>; Lamoureux, Joseph (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=acfeaa1540a4400f987beaf00162d90e-Lamoureux,>; Lazreq, Hafid (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e05fc76cbfab4057947e7917b274d5ed-Lazreq, Haf>; Butterworth, Virginia (OS/ASPR/EEAA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=db6f0df4494a4081be98a6dda8d98d48-Butterworth>; Swanson, Lisa (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d90d6fa88326476b8086b94c119f36c4-Swanson, Li>; Phillips, Sally (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5d6ce8134846423cb83b5b28464edb60-Phillips, S>; Marlowe, Amelia (OS/ASPR/OEA) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e054d11b345e4187b30608e734c984a9-Marlowe, Am>; Giroir, Brett (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a56fce4755704c4ca031d621b46fd6f7-Girori, Bre>; Leddy, Brennan (OS/ASPR/EMMO) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=06adaa58a00d45bab7ccf9a42119624e-Leddy, Bren>; Sorensen, Kirsten (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=51c984b2e8a94b02a7485750081c65cf-Sorensen, K>; Cosgrove, Sandra (OS/ASPR/EEAA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user0e81e587>; Hall, Dana (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group

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Subject:	ASPR Coordination Call Coronavirus
Date:	2020/01/30 15:51:58
Priority:	Normal
Type:	Note

ALCON,

Please be advised that this coordination call has been changed from 30Jan20, 1600ET to 31Jan20, 1600ET. This is a one-time occurrence the calls will revert back to the Tuesday and Thursday call schedule.

Very Respectfully,

Secretary's Operation Center

U.S. Department of Health and Human Services (HHS)
Assistant Secretary for Preparedness and Response (ASPR)
200 Independence Ave., S.W.
Washington, D.C. 20201
Office: (202) 619 – 7800
Fax: 1-800-514-4256
Email: hhs.soc@hhs.gov



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Sender:	OS Secretarys Operations Center </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=32B1F28D808B43B6903C00083291303E-SECRETARYS>
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 CIP Team Projects </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=2d31286f45a1434ea40249ca7862b740-Test964_5d0>;
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 Ray Gorrie, Jennifer (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userdee6c80e>;
 Falcon, Jessica (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d2f34b1b5a874e108d1dedfa20a01eb7-Falcon, Jes>;
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 Wyche, Shari (OS/ASPR/COOP) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user6f6a6d6b>;
 Cote, Mick (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user9459b24b>;
 Wilson-Egbe, Wanda (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b7f53f417b604a73a770d565e1c82445-Wilson-Egbe>;
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 Spells, Ashley (OS/ASPR/ORM) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e280edfe5d6949fcb5dff2607158efc0-Spells, Ash>;
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 Mark Hartell (mark.g.hartell.mil@mail.mil) <mark.g.hartell.mil@mail.mil>;
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 SOC DOD Northcom Liaison Officer (HHS/ASPR) </o=ExchangeLabs/ou=Exchange Administrative
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 SOC Resource Coordination Mobilization Travel (OS/ASPR/SOC) </o=ExchangeLabs/ou=Exchange
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 SOC Support Section Chief (HHS/ASPR/OEM) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Mason, Byron (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Grant, Natalie (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Brown, Charles (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Wallace, Monte (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Hooban, Christopher (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Logan, Robert D. (ACL) </o=ExchangeLabs/ou=Exchange Administrative Group
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(IHS/HQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8a1b02af827145828465615fda0f88a9-christopher>; Collins, Robert (IHS/HQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f3872eeb12804d708020bc21cda8ce9f-robert.coll>; Marston, Hilary (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=93be476c17024bbcb5b44add01fe6a8-hilary.mars>; German, Claire (NIH/CIT) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=672c9f7ae51b4b94abed10f0b6fa3297-claire.germ>; Norris, Andrea (NIH/CIT) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a9d3b1bc935f4be18d60c78330dcef91-andrea.norr>; Heesters, Nicholas (HHS/OCR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9583a7d0912f437e9d31de3c3caac8e3-Heesters, N>; Smith, Malikah (OS/OCPO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c81a5e7a88a84321ac74663e88d44ce5-Smith, Mali>; OS HHS.International </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5522bed35c8543ef8bdd1164dc69776d-HHS Interna>; Weinberger, Collin (OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=641554fc7843407585827af5898d9c26-Weinberger,>; Marinissen, Maria (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5d42fb4d94b041ee88e4f7dd5743e893-Marinissen,>; Globberman, Adam L (OIG/OI) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5f9eab63f562456bb10b51df9aa7211f-adam.glober>; Thompson, Denise C (OIG/OMP) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=cd4223292e6841e1ad82fe10ad23a356-denise.thom>; Vantrease, Scott A (OIG/OI) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6c39031b1f0242cfaa28a4c3d7e7b080-scott.vantr>; Smith, Tyler (OIG/OI) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=873734675e084f6387347a47dbb2d47a-tyler.smith>; Cannatti, James A III (OIG/OI) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9413bd1589574f9786c3903398b1fb6a-james.canna>; Niemczak, Stephen L (OIG/OI) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1a6bcb249e934bd9aafb5e11822f54ad-stephen.nie>; Lee, Jessica (OS/IOS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0ecf959dde3e4d2c959f54b0586570c5-Lee, Jessic>; Stenzel, Anna (OS/IOS/ONS) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f99860fe2e449969881f603293eb5a1-Stenzel, An>; Stremlau, Elizabeth (HHS/OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=bd8c496c21cb4869aad648fa0f12406c-Stremlau, E>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Hudgens, Alisa (HHS/OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f064041806f84d2e9709a8afa04bf2b7-Hudges, Ali>; Woodrome, Anthony (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=027e4cd9e2ce400e878e590372493b9c-Woodrome, A>; Mccracken, Jessica (OS/IOS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8efd298c36e34c8bbbc15bbff132272b7-Mccracken,>; Chappell, Joshua (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a3174fea2d7f40c7b6b0794391e2abfa-Chappell, J>;

PHS Readiness (OS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6613994f07c44408b4c9ed57e62219b3-PHSReadines>;

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Degrance, Elizabeth (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6311a56c8d504cd1b0301ce0fa2fe646-Degrance, E>;

Smith, Damon (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user3d29ea3f>;

Bailey, Daveta (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6550892a36494577a7d2d2ae467b36dd-Bailey, Dav>;

Van Meter, Alesya (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8d90178069f349048b0c3adc1241bf77-Oleynik, Al>;

Allely, Eric (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a000d38a72ef4af0b2ebb40e337fd74a-Allely, Eri>;

Johns, Michael J (IHS/OKC/CLA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=88e29004e4df4a838620185f5f5c1d69-michael.joh>;

Guyton, Cedric (OS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6ad5d331c0f34da2bc5cee2fb20b141b-Guyton, Ced>;

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Berger, James J. (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=dcaf2b2f7b1a479d82a2d970d3bef40e-Berger, Jam>;

Spear, Terri (SAMHSA/OPPI) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c0965b90a91845abb3a073a4466f8c07-Spear, Terr>;

Bishop, Ralph (SAMHSA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e68f6979b407419dba5dd160043193eb-Bishop, Ral>;

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Derek R. Sakris </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b8b888c89db142b7bd3bef77e3171509-Derek.r.sak>;

Soza, Liza (MIL) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=53c7702edcdd4d5fbf47894ca895a736-Liza.D.Soza>;

'jean-pierre.p.debarros.mil@mail.mil' <jean-pierre.p.debarros.mil@mail.mil>;

OS - ASPR - IO - OEA - Cong </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=2cd9b14cca154409a553ba8c7debc51a-OS - ASPR ->;

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OS CIP (HHS/OS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userf2cedc7d>;

OS - ASPR - PDAS - EEAA </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ae8a1d5868f6478ea66156965f2510a1-OS - ASPR ->;

OS - ASPR - PDAS - MFHC - Finance - Admin Finance </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=023f8a0280a148a298aefc5966ff233c-OS-ASPR-PDA>;

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Jenkins, Robert (OS/ASPR/SOC) </o=ExchangeLabs/ou=Exchange Administrative Group
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Peitzman, Matthew (OS/ASPR/SOC) </o=ExchangeLabs/ou=Exchange Administrative Group
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Espinosa, Gregorio (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group
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Wolf, Laura (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group
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Garner, Michael (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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Vineyard, Michael (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group
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Kleinman, Gary (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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Lepore, Kristen (OS/ASPR/EMMO) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Mackay, Thomas (OS/ASPR/EEAA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user2e5f70d8>;
 Hill, Jerry (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user01dd7505>;
 Evans, Catherine (OS/ASPR/SPPR) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ebbee9a0a2254741849d45dc630d7d1d-Evans, Cath>;
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 <duane.caneva@hq.dhs.gov>;
 Smart, DeRamus (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userd4c65dbc>;
 Moudy, Robin (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d421d3e0f6474bc3857583cfc5870d69-Moudy, Robi>;
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 Williams, Aimee (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=2a833ce49cc444e7a299327c5551463c-Williams, A>;
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 Llopis, Alvarez (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userca62611c>;
 Perkins, Dana (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=58d7ed6e2cba4c4a8e4ce7a84127cbf2-Perkins, Da>;
 McClellan, Wesley (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8660a885de1a40bdad88ec678ba68a1a-McClellan,>;
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 Hoang, Duc (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user82d2d79a>;
 Kushner, Diana (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userfdd91d08>;
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 Pettis, Patricia (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user9b6de962>;
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 Smith, Clifton (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Scharf-Bell, Helga (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Horahan, Kevin (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Thomas, Richard (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Zernick, Timothy (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Levine, Cheryl (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Adams, Steven A. (CDC/SNS/DSNS) </o=ExchangeLabs/ou=Exchange Administrative Group
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 'Kim, Paul D., MD' <Paul.Kim@va.gov>;
 Houchens, Christopher (OS/ASPR/BARDA) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Lincoln, Carol (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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 NC SG Ops Director </o=ExchangeLabs/ou=Exchange Administrative Group
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 Sherman, Susan (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Czarzasty, James (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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 Barton, Jessie-Kate (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group
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Evans, Pamela (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userac4ac959>;

White, Catalina (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ca5d04357494dc6b5119a29da5eeabb-White, Cata>;

Austin, Brad (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5daa376fbdec43dcb81955ae13a4d740-Austin, Bra>;

Brown, Marsha (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=eface679003842d287f1315770d0399e-Brown, Mars>;

Bentley, Lisa Marie (OS/ASPR/SIIM) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ab7f0b8349ab42359d0e9e757f617a0a-Bentley, Li>;

Formanski, Stephen (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user5877cefc>;

Garza, Roberto (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4838358d6792484d92f4f877295140be-Garza, Robe>;

Faison, Tremel (OS/ASPR/BARDA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=2bbab0bceb1342fbbdbbcc94deeb80f-Faison, Tre>;

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Watson, Katie (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9e3c4e0833f04d33acc1b23c1a494cae-Watson, Kat>;

Zarychta, William (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user6b29fc14>;

Libby, Mark (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usere888c9fb>;

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Sharkey, Matthew (OS/ASPR/SPPR) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=de31fe9582b84fa39c8a2bf94ca2d80e-Sharkey, Ma>;

Cascio, Stephanie (OS/ASPR/SIIM) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=31ddbc46f618476daf27f930c213a0f0-Cascio, Ste>;

Clay, Matt (OS/ASPR/SIIM) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7137fe008b3143fc95c219c276b771c3-Clay, Matt>;

Malvin, Gregory (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user71219f6b>;

Jackson, Jacklyn (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user92784444>;

Frenette, Jennifer (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user0d6867d6>;

Dreyzehner, John (CDC/DDPHSIS/CPR/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7572776246e34d2ba1047ba324019eb8-john.dreyze>;

Wallace, Rodney (OS/ASPR/BARDA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b4654f8f0c0f4623b9e47465e9e1037a-Wallace, Ro>;

Dodgen, Daniel (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c23f0d7c1d634508918e1c87cf50c48c-Dodgen, Dan>;

Rodgers, Jerry (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userb1f880e9>;

Sheehan, Kevin (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e0c33d2ccfae40d790134fec90e7d0dd-Sheehan, Ke>;

Gaines, David (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a0bdadfe822f4b54aafa3f14a59e326d-Gaines, Dav>;

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Andrews, Sean (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userc7185523>;

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Moore, William (OS/ASPR/EEAA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user63dfef06>;

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Lekan, Scott (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=90a98b322aba4ec2ae332c84a1ddc613-Lekan, Scot>;

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Green, Tracy (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=69c9761b84b14981abd3b10febde1eea-Green, Trac>;

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Wagner, Duane (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e3cc4fccf0084945ad0a50e2d166e05b-Wagner, Dua>;

Rykkken, David (OS/ASPR/SOC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user3e79bb77>;

Miskis, Constantinos (ACL) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5be61be4b4fb41b79f7011221fc73bde-Miskis, Con>;

Romine, Jarrod (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8f202b8e16084837aedc6ce7cc41962f-Romine, Jar>;

Sturrock, Kenneth (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user4d481dc8>;

Danso, Kojo (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=916e93025bf14c6bbd317b8cb79dc2ae-Danso, Kojo>; Patterson, Janice (OS/ASPR/SPPR) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=04826672b5a54037b186f9fb0257b33b-Patterson,>; Diaz, Walter I CIV SOUTHCOM SC-CC (USA) <walter.diaz14.civ@mail.mil>; Casey-Lockyer, Mary (REDCROSS.ORG) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8f9cc4b50f8d4abd8d95d4c2b62dc938-mary.CaseyL>; Rooks, Mercedes (OS/ASPR/BARDA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=ad13f173d6894f30b1e0a2e9a378a715-Rooks, Merc>; Fox, LeAnne M. (CDC/DDID/NCIRD/DBD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=eadca2edaf424b35b78b2764defe1d09-Fox, LeAnne>; Christopher, Kenneth (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userb1b3dfdc>; Jarrett, Elizabeth (OS/ASPR/OEA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9b3d14cf1823486e90e4cd0814351ce9-Jarrett, El>; Hannah, Jennifer (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usere873262b>; Payne, Pamela (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=809046dce4d947f597e3aa8336718ac3-Payne, Pame>; Dugas, Robert (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userf3b287ac>; Lamoureux, Joseph (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=acfeaa1540a4400f987beaf00162d90e-Lamoureux,>; Lazreq, Hafid (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e05fc76cbfab4057947e7917b274d5ed-Lazreq, Haf>; Butterworth, Virginia (OS/ASPR/EEAA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=db6f0df4494a4081be98a6dda8d98d48-Butterworth>; Swanson, Lisa (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d90d6fa88326476b8086b94c119f36c4-Swanson, Li>; Phillips, Sally (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5d6ce8134846423cb83b5b28464edb60-Phillips, S>; Marlowe, Amelia (OS/ASPR/OEA) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e054d11b345e4187b30608e734c984a9-Marlowe, Am>; Giroir, Brett (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a56fce4755704c4ca031d621b46fd6f7-Girori, Bre>; Leddy, Brennan (OS/ASPR/EMMO) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=06adaa58a00d45bab7ccf9a42119624e-Leddy, Bren>; Sorensen, Kirsten (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=51c984b2e8a94b02a7485750081c65cf-Sorensen, K>; Cosgrove, Sandra (OS/ASPR/EEAA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user0e81e587>; Hall, Dana (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user0d0640af>; Nelson, Maurice (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e8e5a3929ec34aeda6807a21092e8aea-Nelson, Mau>; Cockrill, Jennifer (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e8e59c35b5914108bd63bb8489c0a486-Cockrill, J>; Davids, Kimberly (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f8fe96676cde4e97b970a61c7ebfd5d1-Davids, Kim>; Beckham, Tammy (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=79787474893348a48f149dd5a1064e6c-Beckham, Ta>; Bateman, Ronita (OS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e98d025d4c124bd7b178e1f0773e0361-Bateman, Ro>; Everson, Ms. Suzanne (ACF) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=aa48ae7160754c6b839ae42831923019-Everson, Su>; Prasher, Joanna (CDC/DDPHSIS/CPR/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e13ced68f0e44e7b81e9698d31849967-joanna.pras>; Stephan, Briana (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usera42ca911>; Shuy, Bryan (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=fdeb5ca04b6b4ed19fec2209b5f571e7-Shuy, Bryan>; Greer, Thomas (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user37a6a56b>; Fitzgerald, William (REDCROSS.ORG) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a61d137e871944648c150aec57b2fbaa-William.Fit>; Ospina, Juan (OS/ASPR/SOC) </o=ExchangeLabs/ou=Exchange Administrative Group

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Subject:	Accepted: AMA White House Task Force on Coronavirus
Date:	2020/01/30 16:37:23
Start Date:	2020/01/30 16:00:00
End Date:	2020/01/30 17:00:00
Priority:	Normal
Type:	Schedule.Meeting.Resp.Pos.SilentResponse
Location:	Wh Situation Room

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Subject:	VPOTUS pool report #5 -- Pence speaks to the pool
Date:	2020/01/30 17:08:51
Priority:	Normal
Type:	Note

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From: "Restuccia, Andrew" <andrew.restuccia@wsj.com>
Date: January 30, 2020 at 4:04:48 PM CST
Subject: [EXTERNAL] VPOTUS pool report #5 -- Pence speaks to the pool

Vice President Mike Pence spoke to your print and TV pooler for about 40 minutes off the record. We spoke on his bus between Sioux City and Council Bluffs. Recordings were not permitted, pen and pad only. Marc Short and Katie Waldman were also present.

We negotiated with the VP's office to put the following on the record:

ON IMPEACHMENT

Pence said he's been "very impressed" with the President's legal team, and had the opportunity to watch a "fair amount" of the trial Saturday during his flight back from Europe. He is "hopeful for a quick outcome," and pressed on a timeline, said "soon," and that he has a feeling it is resolving.

He said he talked to the President at length ahead of his meeting with President Zelensky in Poland – making sure to note that that was the only bilateral meeting he had during that trip. There were concerns about corruption, and Trump told Pence that he wanted him to "see what you make of him."

“I was very impressed,” with Zelensky, he said, noting that he had signed 250 anti-corruption bills since taking office.

Pence reiterated that he never heard the President tie aid to Ukraine to an investigation of the Bidens: “Never.”

Asked if the American voters are better off not hearing from witnesses, Pence noted that 17 witnesses have spoken and there is a transcript. “I think it would be good for the country for the senate to vote, to acquit, and move on,” he said.

ON CORONAVIRUS

Pence said there is a whole-of-government approach toward Coronavirus. There was a principals meeting yesterday and on Tuesday, he led a deputy-level meeting. He noted that approximately 250 Americans have gotten out and WHO is on the scene. The US government, he said, is making resources available – “whatever they need.” He cited screenings at 20 US airports. Pence took an interest because he was Governor when the first MERS case was discovered in Indiana and saw the process “firsthand.” Pence said he spoke to Sec. Azar and Nancy Messonnier from the CDC.

ON VENEZUELA

Pence said he spent about a third of his conversation with the Pope last week discussing the situation in Venezuela. The administration, he said, will continue to isolate Maduro economically and diplomatically. He said the US is looking at broader sanctions, praising your print pooler’s recent WSJ article about other countries, like Russia, and says the US will “continue to ratchet pressure” on the Maduro regime. “It’s hard to imagine how he could sustain” power, he said, reiterating that all options remain on the table.

ON UK/5G

Pence said the US is “disappointed” that in the UK and the administration has “made that very clear to them.” He said he does not believe Huawei’s technology is compatible with US national security and privacy rights.

ON CAMPAIGN 2020

Pence noted he will be in Pennsylvania for another bus tour and he likes the retail politicking. “It’s easier for me to move around, I like doing the diner stops,” he said, calling himself a “small town guy.” He said he will work to get around the country like he did in 2016. Pence said it was important to him that he spent a couple days campaigning together with Trump in 2016 when he was first added to the ticket and they were still getting to know each other and build a relationship, and saying that they ultimately campaigned together about once a week, which is expected to continue this cycle.

ON USMCA

He called the deal an “incredible accomplishment.” He said it’s a model for future trade talks: “Trump showed the world: I’m ready to do deals.” But he added that the president will “drive a hard bargain.” He touted how it impacts Wisconsin dairy farmers and called NAFTA “flawed from the beginning.” He said that the US will work on a free trade deal with the UK next.

Andrew Restuccia

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Subject:	Novel Coronavirus Open Media Report- 30Jan2020
Date:	2020/01/30 17:11:05
Priority:	Normal
Type:	Note

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Good Evening All,

Attached is the 30Jan20, 2019 Novel Coronavirus Open Media Report.

BLUF: The number of confirmed cases and deaths has dramatically increased since yesterday. CDC has confirmed the first U.S. human-to-human transmission, raising the total to six cases in the United States. The World Health Organization (WHO) declared the novel coronavirus outbreak a global public health emergency. Department of State has announced plans to repatriate more Americans from Wuhan, China. There is an increase in false information being shared widely online, and it was reported that cybercriminals are using malicious software – posing as guidance and assistance to prevent coronavirus infections – to access and cause damage to computers and networks.

Epidemiology:

Traditional news media reports death toll of 170, with almost 7,819 cases confirmed across China.

- CDC confirms first human-to-human transmission in US, noting that the new US case was in close contact with another US case (husband of infected woman).
- Since yesterday's open media report, first cases reported in India and the Philippines.
- Today, Defense Secretary Esper plans to advise what precautionary measures U.S. troops should take, particularly in the Asia-Pacific theater.

Public Health Response:

- The World Health Organization (WHO) declares the novel coronavirus a public health emergency of international concern.
- White House announced a new task force that's meeting daily to discuss the threat of the coronavirus.
- France develops a coronavirus test to assist in diagnosing cases.

Supply Chain:

- Mask hoarding in US may lead to risk of shortages.
 - Local pharmacies have reported short supply, and online deliveries may be delayed.
 - Some experts want the government to educate the public about the dangers of hoarding.
 - CDC is reaching out to manufacturers to head off possibility of shortages.
- A dramatic increase in face masks are being bought in the U.K. and the US.

Evacuation/Repatriation:

- US DoS announces plans to evacuate more Americans by aircraft from Wuhan as early as Monday (03Feb). DoS did not provide details on flight size or whether there could be additional flights beyond this next flight.
- Local delegates in California were angered about not being informed of current repatriation efforts.

False Information and Public Sentiment:

- Cyber criminals reportedly using malicious files disguised as pdfs, mp4, and docx files and purporting to be guidance and assistance to prevent coronavirus infections to infect computers (malware, Trojan, worms, etc.).
- The rise in false or misleading online posts about the virus, which has infected thousands of people primarily in mainland China, could once again test the ability of social media companies to handle viral misinformation on their platforms.

Please see the attached Open Media Report for additional information. This message was distributed to ASPR SLT, SOC Section Chiefs, SOC Leadership, and appropriate SMEs.

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Prepared by:**Secretary's Operations Center**

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Subject:	FW: Press Briefing by Senior Counselor Kellyanne Conway, ONDCP Director Jim Carroll, and Assistant Secretary of Public Health ADM Brett Giroir
Date:	2020/01/30 17:27:34
Priority:	Normal
Type:	Note

Dr. Adams & team – Below is the transcript for today’s WH press briefing with the ASH and KAC. I’ve highlighted the naloxone portions for reference. We also tweeted about it earlier today.

From: White House Press Office <info@mail.whitehouse.gov>

Sent: Thursday, January 30, 2020 5:03 PM

To: Sherman, Jennifer (HHS/OASH) <Jennifer.Sherman@hhs.gov>

Subject: Press Briefing by Senior Counselor Kellyanne Conway, ONDCP Director Jim Carroll, and Assistant Secretary of Public Health ADM Brett Giroir



The White House

Office of the Press Secretary

FOR IMMEDIATE RELEASE

January 30, 2020

PRESS BRIEFING

BY SENIOR COUNSELOR KELLYANNE CONWAY,

ONDCP DIRECTOR JIM CARROLL,

AND ASSISTANT SECRETARY OF PUBLIC HEALTH ADM. BRETT GIROIR

James S. Brady Press Briefing Room

10:15 A.M. EST

MS. CONWAY: Good morning. Thank you for being here. We come before you bearing good news. For the first time in four years, life expectancy in the United States of America has increased. And for the first time in 29 years, the number of drug overdose deaths has decreased.

This has not happened through coincidence. It's happened through causation. It's owing in large part to a whole-of-government approach to treat the whole person, led by President Trump, First Lady Melania Trump, and really, the entire administration.

Nearly 70,000 of our fellow Americans died from an overdose last year, and 48,000 of those involved opioids. About 70 percent of those deaths also involved some type of synthetic opioid, most prominently fentanyl, which could be an instant killer. A couple of tiny grains are a lethal dose.

We've met with first responders, parents who have lost children, people in recovery, people who are running recovery centers. We've met with mothers whose babies were born chemically dependent. And we certainly have met with health professionals. All of them have shared stories of loss but, increasingly, of courage and recovery.

This is a crisis that we call the "crisis next door," because we want people to know, from the beginning, that the silence and stigma that it tends to -- many people, it prevents them from seeking out the kind of treatment and help that is available to

them is a very big priority for us -- busting through that stigma and silence.

We also want to make clear, in this crisis next door, that it is indiscriminate. It affects all races, socioeconomic status, gender, age, and certainly other affiliations. If the crisis is indiscriminate, then the response must be indiscriminate.

And that's why, in addition to everything that the President and the First Lady and the administration have done, I wanted to share with you, as a reflection, what I consider to be the most robust and significant bipartisan accomplishment of the President's first term: H.R.6, the SUPPORT Act. The President signed it into law following overwhelmingly unanimous support from every Democrat who voted for it in the House and the Senate. This overwhelmingly bipartisan action has led to an increase in the money and awareness on the opioid and poly-drug crisis.

Features of the SUPPORT Act include the CRIB Act, where there is more money and more action for those neonatal abstinence syndrome babies that I mentioned before. Medical professionals tell us it's best to keep the mother -- it's best for the mother and it's best for the baby to keep them together. And, increasingly, that is happening.

Also, the nearly \$3.7 billion in new grants put forth by the administration have made a real difference in our municipalities. The STOP Act has helped us increase the number of seizures of fentanyl and other synthetic opiates coming through our mail. It's up to about 38 percent, and we have a goal, if not a mandate, of 100 percent.

Let me go through a couple of the numbers: 4.1 percent overdose death decline overall in our nation. And that is the first time in 29 years -- nearly three decades. But in some of the hardest-hit states, we're off a peak of over 20 percent: 19 percent in Pennsylvania, 22 percent decline over the peak high in Ohio, 11 percent in West Virginia, 14 percent in Minnesota, 7 percent in North Carolina -- just to highlight a few of them. Also, the Customs and Border Protection in the last fiscal year increased the seizures of fentanyl by 21 percent.

We also launched a targeted ad campaign geared at youth that was seen by over 1.4 billion views and over 58 percent. In fact, the longer documentary type won an Emmy.

Naloxone prescriptions have increased over 400 percent. Our Surgeon General, in April of 2018, issued the first advisory by a surgeon general in over a decade. And Dr. Adams said at the time: We need to have naloxone more available to our first responders, to our health professionals, to our school systems, libraries, YMCAs and the rest, but also to each and every one of us. The Surgeon General says, if each of us were to carry naloxone on our person, we too can be part of the solution, reversing these overdose deaths by administering this overdose-reversing medication.

Last night, Congress passed a 15-month extension of the current emergency scheduling of fentanyl analogues. This is a critical tool for law enforcement because it allows them to continue to detect, analyze, and handle safely and effectively this very lethal drug.

In our effort to focus on prevention education, treatment and recovery, law enforcement interdiction, I'm also happy to report that we have record back-to-back-to-back-to-back collections on Take Back Day. And I do want to credit our partners, like Google, who have been incredibly helpful to us in raising awareness and action among the public in understanding how to safely and broadly dispose of your unused, unneeded expired drugs.

In addition to Take Back Day, the prescriptions of high-dose opioids have fallen by over 32 percent since the President came into office. If you need the pain medication, it will be there. People are walking around with what's left from a bottle of 30, 40 pills, and that's where some of the peril begins.

In addition, we launched [FindTreatment.gov](https://www.findtreatment.gov) -- a completely overhauled tool for every American to access so that they can customize finding treatment for their needs. You can customize it by age, by geography, whether you're veteran, by LGBT, certainly by gender. And this promotes quality over quantity. When you type it in and you customize it, you can find treatment centers that are best for you. Maybe you need to be there for a short amount of time. Maybe you need to be there in-patient, out-patient. Maybe you need to be there a longer amount of time. You can customize that quite confidentially.

From 1999 to 2015, the government reported a 20 percent reduction in our workforce due to opioid and other drug abuse and addiction. A 20 percent decline over 16 years. I'm happy to report that because we've invested over \$100 million in displaced worker grants across 17 states in the Cherokee Nation, those numbers are moving.

We are trying to treat the whole person, not just check in person. We got you in drug court; we got you in drug treatment. Isn't that terrific. It's really terrific if we can then help them acquire employment, education, skills, training, and certainly housing, on the way to full recovery.

There is so much more work to be done. We're very pleased that the overdose deaths have declined, but 68,000 of our fellow Americans died last year from drug overdose. That's 68,000 too many. If you look at the Super Bowl this coming Sunday, that number could be represented by every single seat with 3,000 left over at the Super Bowl this coming Sunday -- just to give you the actual enormity of the problem.

We will continue to fight this every single day, and we will continue to make the investments of money, of time, of education.

And with that, I'd love to turn this over to Director Jim Carroll of the Office of National Drug Control Policy and then Admiral Giroir, the Assistant Secretary for Health of the United States of America. Thank you very much.

Jim?

DIRECTOR CARROLL: Thank you, Kellyanne. A couple of years ago, when President Trump and I first talked about me taking the job as the Director of the Office of National Drug Control Policy and serving as his drug czar, he instructed me to be relentless in our efforts to save lives. And that's exactly what we've done to tackle this drug problem here in the United States.

The good news that we're announcing today is a testament to

the President and his leadership on this issue. It's an example of what can happen when we come together and apply that whole-of-government approach.

The obstacles we face could not be greater, but through our efforts on prevention, treatment and recovery, and reducing availability, we've made real progress for the American people -- which we not only want to sustain, we want to accelerate.

Kellyanne discussed how we got here and what these numbers mean. Admiral Giroir will discuss the incredible headway we're making with getting people into treatment.

But I want to highlight the progress that we have made with our international partners and our law enforcement who are critical in reducing the supply of these dangerous drugs.

Back at the G20 Summit in 2018, President Trump raised the issue of fentanyl production with the head of China and demanded a solution. He made it clear that the United States would not tolerate the flow of fentanyl and other deadly synthetic drugs coming into our country.

Because of this, in May 2019, China scheduled fentanyl and other similar analogues, such as controlled substances, which was a historic and significant event.

Last night, the House of the Representatives passed a 15-month extension on the ban in scheduling of fentanyl, but a long-term solution is still needed.

In September of 2019, I led a White House delegation to

Beijing to ensure that China was keeping up with their commitment to President Trump. The Chinese government agreed to improve the legal framework, agreed to improve their standards for prosecution for fentanyl-related trafficking, and established law enforcement methods there that were not heard of before.

In every meeting I had with the Chinese, my counterpart said they heard the President loud and clear: that the flow of fentanyl into the United States was not tolerated. Since then, the Chinese officials have invited our U.S. counterparts back there to watch the first-ever prosecutions of Chinese nationals for trafficking drugs into the United States.

This progress, combined with President Trump's commitment to secure our southwest border -- which is critical to stopping the flow of drugs into our country -- brings together several lines of effort that will serve to keep Americans safe from the dangers of illicit drugs.

A wall acts as a force multiplier for our Border Patrol agents, and is one of the many tools that we are using to counter drug traffickers.

Taking the steps towards the humanitarian crisis at our southern border has also been critical to keeping those drugs out of the country. The more men and women we have in uniform, the more that we have on line, the more that are stopping these traffickers -- the greater chance we have of saving lives.

The Department of Justice has played a critical role in this, as they have been cracking down in unprecedented numbers on drug traffickers.

Under President Trump, the DOJ has ramped up trafficking prosecutions -- not only here domestically, but internationally.

Under this administration, the U.S. Treasury Department has made more kingpin designations against operators of distributors in foreign countries.

The High Intensity Drug Trafficking Areas that we fund out of the White House here -- which provides assistance to federal, state, and local drug task forces -- has received unprecedented funding from this administration, and that is beginning to show and is part of the paradigm shift that we're seeing.

These HIDTA initiatives, for example, have dismantled 3,000 drug trafficking organizations, they've removed \$16.5 billion of illicit drugs off our streets, and they have made nearly 99,000 arrests of drug traffickers.

In 2018, we even added, for the first time in 17 years, the first new HIDTA to make sure that we're tackling this.

The men and women of law enforcement, whether they're in uniform or not, are playing this vital role and putting their lives on the line every day.

What this shows is the President's efforts are working and we are saving lives.

Before I turn this over to Admiral Giroir, I want to ask that when you're reporting on this issue, that when you're reporting on these numbers, that numbers are really just part of the

story. Behind each of these numbers is a person, is a child, is a mom, a dad, someone whose loss has left a great mourning in a family.

I was with three parents yesterday who had lost their child to an overdose. Today, we remember Jason, Amber, and Eddie, and all of the other people that we have lost. And we continue this fight in their honor to make sure that we fulfill the President's commitment to save American lives.

And with that, I'll turn it over to my friend, Admiral Giroir.

ASSISTANT SECRETARY GIROIR: Thank you very much, Director Carroll. Again, I'm Brett Giroir. I'm the Assistant Secretary for Health at the Department of Health and Human Services. I'm also Secretary Azar's principal advisor on opioid policy, and I've been that for about two years. And I'm honored to wear the uniform of the U.S. Public Health Service Commissioned Corps.

What we see today is no accident. This is the result of an intentional whole-of-government, whole-of-society approach to overuse -- to over- -- to opioid use disorders and other substance use disorders.

First of all, we recognize this as the public health emergency as it is. And as such, we have focused on many different areas to yield these results.

First, as Kellyanne said, the number of opioids that have been produced -- the total amount of opioids that have been prescribed since January 2017 is reduced by 30 percent

nationally. And we have been able to do that while preserving and expanding options for pain control for those who truly are in chronic pain or have debilitating injuries.

Secondly, we've approached this as a public health emergency, because addiction -- opioid use disorder -- is a chronic brain disease. We have unprecedented numbers of individuals who are now receiving treatment. Our estimates are over 1.3 million individuals are now on medication-assisted treatment, and they're also getting the psycho-behavioral support and wrap-around services that they need.

You heard about naloxone -- very, very important because everybody deserves a second chance at life. You have the power. I hope all of you in the media carry naloxone with you. It's very easy. You can save a life, give a person a second chance.

This has resulted in, as you heard, a 4.1 percent decrease in the number of deaths and a 4.6 percent decrease in the actual overdose age-adjusted mortality rate. Very important.

A couple comments on the overall longevity. I have been shocked. Everyone in the public health community has been shocked that over the three years, previously, our longevity has decreased. That really means that our children and grandchildren will live less long and less quality of lives than we have. This is shocking, and we have not seen this since the height of the AIDS epidemic in the '90s.

This has been reversed. We're now on the trajectory of increasing years of longevity, and that's associated with a number of things. What does that mean? It's only one-tenth of a

year, but that's 25 million person years we just gained by this increase in longevity. And the good news is the preliminary data from quarter one into quarter two of 2019 is our mortality rates continue to drop.

Now, I want to talk about all the Health and Human Services issues like treatment, like prevention, but I do want to mention the social determinants of health that are very important.

There was a nationwide study in December, published in JAMA, that highlighted what we all know: When an auto plant closes, opioid mortality rate among the young goes up 85 percent. We have to keep our eye on those socioeconomic issues and everything that we're doing to increase employment, increase opportunity. These all directly affect the rates that we see and that we celebrate today.

And the final thing is, we are not taking our foot off the gas. We understand that this is a dynamic issue -- opioid use disorder, other use disorders -- and it's being fueled by transnational cartels. So we are going to keep working together. We work weekly, daily, together across the government to make sure we continue a whole-of-government, whole-of-society approach.

MS. CONWAY: Thank you. Any questions? Kristen?

Q Kellyanne, a couple of questions. How should we think about this moment? Is this, in fact, a turning point? As you point out, the rate is still very high, but do you see this as a turning point? And I have a couple of other ones.

MS. CONWAY: Sure. I'll have my colleagues speak to that as well, Kristen.

It's a turning point and we hope it becomes a trend. So what we're doing is working, and it is a multifaceted approach. So I can't say it's just law enforcement and surveillance, or Customs and Border Protection; it's just a new treatment locator; it's just Take Back day and more education -- that that tiny little bottle that bears a label of the family doc and local pharmacy that was prescribed to help someone could, in fact, be very dangerous in the wrong hands, or even in your own hands, if you're the prescribe [sic], if you use it for purposes other than why it was prescribed.

So we want to keep and redouble our efforts. We certainly hope that we can count on continued bipartisan action and agreement on this, because as I said earlier and I'll repeat here: H.R.6 had every single Democratic vote in the House and the Senate, including all the people in the House and the Senate running for President. So there is tremendous agreement and action on this issue because it affects every single district and state.

So we want -- we want to see the trend line. We recognize that the mortality rate -- excuse me, that the life expectancy is increasing because of strides in the drug space. We still -- and cancer, frankly. We know that suicides and flu -- and flu combined with pneumonia -- are keeping that rate down among other Americans. But we're going to continue, and we hope that we have -- we have what I call the horizontal and vertical government approach.

Horizontally, it's across state, federal, and local. And vertically I -- you know, I call it in terms of the federal government apparatus. To have 13 or 14 departments and agencies actively engaged on this -- ones you would expect, like HHS and FDA and NIH and CDC; SAMHSA certainly; but also Veterans Affairs, Veterans Administration; DHS; State Department has been very helpful; Department of Justice, obviously; but also Department of Labor and Department of Education; and Department of Interior to help with rural and tribal America.

So there's much more work to be done. But we feel like we have a protocol that's helped us get to this point of progress.

Q Let me ask you one -- if you want to weigh in on that one, I do have one on the coronavirus.

ASSISTANT SECRETARY GIROIR: It is -- it absolutely is a turning point, but we have to look at the complexity of the problem. Some states still have increasing rates of death. Most states have decreasing rates of death. We now know that prescription opioid overdoses that caused death are really down tremendously as a result of our work, down 13 percent in 2018, and they continue to decline.

The newest data says cocaine is starting to level off, but we still have issues with fentanyl. It used to be up 30 to 40 percent year over year. Now it's up under 10 percent, so we're making progress. But we're all worried about the next wave, which is evolving, and that is psychostimulants or methamphetamine. Those continue to increase across the nation. They're being driven all almost entirely by transnational Mexican cartels, and we have been on that problem for about a

year right now.

So, yes, we're at a turning point but this is a dynamic, rapidly evolving crisis.

DIRECTOR CARROLL: To follow up, I think one of the things that can make this a turning point is for this to give hope to those people that are suffering from an addiction, for them to be able to come forward and realize that there is, in fact, lifesaving measures that they can take and that we can help them to get on the path to recovery: the prevention programs that we fund, like through our drug-free community programs, the efforts that we're making to get people the help that they need, and also while we're striking hope in the minds of people who have an addiction, we're striking fear in those who want to traffic, and will look to other legitimate opportunities instead of turning to selling drugs in our country.

Q And just a quick question on the other big health news of the day: Has the White House ruled out stopping flights into and out of China? Can you update us on any conversations going on related to that?

MS. CONWAY: So there's a new task force that's been created. It's being led by Secretary of Health and Human Services Alex Azar. As you are probably aware, the President was briefed yesterday in the Situation Room. I've been a part of those staff-level briefings, senior staff-level briefings, and I won't make an announcement about that right now.

I will say that we're all very relieved and happy and heartened to see what happened with the flight of the 201 or so

Americans who landed in Anchorage and then California. So we will continue to monitor the situation, as you know. And I think that Secretary Azar had a few interviews just this morning, maybe addressed this as well as.

Q Is there a second flight next week?

MS. CONWAY: I don't want to comment on that.

Q I just have sort of two -- I wanted to follow up on that one. Do you know whether the President has spoken to President Xi about this situation with the coronavirus? But I also have a follow-up on fentanyl and the overdose deaths.

MS. CONWAY: Well, the President has tweeted about President Xi, I believe last week or maybe earlier this week. You can see that, obviously, we've offered assistance. And obviously, we are also monitoring the fact that other countries now have cases.

And in this kind -- I think that's all I'll say right now. The CDC director and Dr. Fauci, they're all very involved. And, Admiral Giroir, maybe you want to address that --

ASSISTANT SECRETARY GIROIR: (Shakes head.)

MS. CONWAY: -- or you don't.

So we are monitoring -- the President is briefed daily on this, and yesterday in the Situation Room. So I'm going to leave it at that.

Q And my follow-up on the issue of overdose deaths: As you

mentioned, fentanyl is up, and there are a number of other overdose areas involving drugs that are up as well. I'm not asking for a silver bullet, but if you were to pick out two or three pieces of policy that might bring down those numbers, what would it be?

ASSISTANT SECRETARY GIROIR: So let me say that not only does it make common sense, but the academic community has proven that there is no such thing as a silver bullet to this issue, that there has to be multimodal approaches that span prevention, that span treatment.

And again, I'm a pediatric intensive care doctor. I use fentanyl every day on suffering children in the ICU in microgram quantities. This is coming into our country in hundreds of pounds -- thousands of pounds, potentially. So we have to have a law enforcement component.

Overall, I would say we have to treat this as a public health emergency, which we do. Addiction -- I'd rather use "use disorders" as a more appropriate term -- is a chronic brain disease. Once you have that chronic brain disease, it is very difficult but possible to treat, but it requires medication treatment and all the supporting services we have.

So a combination of prevention, stop it before it happens, get people into treatment. And that's reduction of stigma across the board. This is a disease. You need treatment. And then, again, all the kinds of follow-ups that we're doing on a national level.

Q Kellyanne, can you speak to what the administration

believes -- what more the administration believes needs to be done to address this crisis? Particularly, what should we expect to see in the President's forthcoming budget in terms of any additional programs?

MS. CONWAY: Sure. Well, thank you, Zeke, for your interest in the issue. We're very happy that last night -- I mean, really at the eleventh hour, because it was set to expire February 6 -- but the Congress took action. It's disappointing that 86 Democrats, I think, voted against extending the fentanyl analogue scheduling that, honestly, is a no-brainer, especially when you consider that they were all on board with the larger compilation of dozens and dozens of bills that became H.R.6 that included several different focuses on fentanyl reduction, handling, analysis, and the like.

So we hope that we can -- again, notwithstanding anything else that's happening -- count on everyone to belly up and help.

I think we also need to -- to Admiral Giroir's point, we're all obviously very concerned about what we consider to be the fourth wave now of the drug crisis, meth. And we hear from law enforcement routinely that whereas they're whacking the moles of fentanyl more and more, up pops meth more and more, and I think, to some extent, heroin as well.

One thing I would say is, in the states that have the Good Samaritan laws where if I'm driving the car and my friend is overdosing, perhaps I have also used with that friend, in the past, I basically pull up to the emergency room, and the bluing friend starts rolling out the door and I pull away because I'm afraid of being prosecuted. That doesn't happen in many of these

states now where you won't be prosecuted. In fact, both people will go in and try to get some services.

So I think so much of it is education. And I think the incomplete or underwhelming coverage of this issue is probably something I would want to solve with you, in that we talk about so many things that don't affect 72,000 lost lives, and then if you draw the concentric circles around those lost lives, the dozens and dozens, or hundreds of people who are affected beyond that one lost life.

So I think it's also making sure that law enforcement, which includes Customs and Border Protection; includes local law enforcement sheriffs; includes our ports of entry; and then, between our ports of entry -- where, increasingly last year, Customs and Border Protection did interdict these poisonous drug -- I think respecting the fact that making sure they have more respect and better resources.

And also, I think for all the things that we're teaching our kids in the formal curricula in school today -- and speaking as a mom of four school-aged children -- it would be terrific if, on a volunteer basis even, educational programs like this were more incorporated into the formal curricula and/or for after-school programs or with the local law enforcement or health professionals.

This should absolutely be included because they are in -- they're in the line of peril, all of them. This is indiscriminate.

And so I think the treatment and recovery -- one thing I'll

mention -- it didn't get mentioned today because they're so much to talk about -- but one of the big things that has happened in this administration is, I believe, HHS or CMS has granted -- are we up to 22 or --

ASSISTANT SECRETARY GIROIR: Twenty-seven.

MS. CONWAY: Twenty-seven. I mean, it's really remarkable. Was it four when we got here?

ASSISTANT SECRETARY GIROIR: Yes.

MS. CONWAY: Four states or so. Now we're up to 27 states where this IMD 1115 exclusion has occurred. This is really helping people get into treatment because that was a ban on mental institutions keeping people too long. It's existed for 40 years, and it had a lot of merit for that reason. But it had a cruel -- the cruel irony, the cruel result of it was a long waiting list for treatment and empty beds, because if you filled that 17th bed, you would risk not getting Medicaid reimbursement.

So we have granted twenty- -- we now, as a government, as a nation, 27. More than half the states have a waiver so that you can treat that 17th, to 50th, to 60th person in your facility and still count on Medicaid reimbursement.

And I'd also say something about the veterans. The President took action several months ago on veteran suicides. He's always been very concerned about that. We are taking action, as a government also, on opioid and other drug misuse disorder among our veterans.

I visited the Cleveland Veterans Administration, for example -- not the Cleveland Clinic, but for the veterans across the street from there -- and I was really struck by how there, and other places -- but by way of example, pain management may not mean pain medication. They're trying other protocols first. They're doing Reiki and swimming and yoga and other less addictive drugs to help our veterans.

So I think looking at each and every department and asking them what they're doing, it's unusual for the Department of Education, Department of Labor to be so involved, but they are. I mean Labor has all these displaced worker grants, because we know -- and Dr. Giroir can speak about the factories, I think, for a moment -- we know that if you lose your job because of a substance use disorder, you lose your job because you tested positively for drugs, for many Americans, you also lose your hope of recovery.

And I visited a great place called Belden -- B-E-L-D-E-N -- Industries -- just, again, by way of example -- with Second Lady Mrs. Karen Pence, and Dr. Adams, the Surgeon General, and then Secretary of Labor Alex Acosta in Indiana, where Belden's -- one of many examples now where, if you fail a drug test, instead of you losing your job immediately, they hold the job for you but you agree to go into immediate treatment. And they work with the local -- they work with the local hospital, they work with the local community college to make sure that you keep your skills and education up. And that job is waiting for you when you are ready to re-assimilate.

Again, I think the government far too often pats itself on

the back: "Oh, look at all the numbers." And Director Carroll and Admiral Giroir said it beautifully and brilliantly that these aren't just numbers, these are people. So you want to help these people re-assimilate into society. And if they qualify for skills education or employment opportunities, housing opportunities, we want to be able to connect them with that information.

So that's a very lengthy answer because we have to -- I would -- I would never say just treatment recovery, which was the emphasis of the last administration; just, "Oh, we can arrest and punish our way out of it." No, we can't. That would be a ridiculous idea, and thankfully, this President agrees with that. And we can't just say to people, "Gee, don't start." What about all the people who are already there?

Weijia and then --

Q Thank you so much.

Q (Inaudible.)

MS. CONWAY: I'm sorry, we'll get to you.
Weijia and then Andrew.

Q Oh. Thank you, Kellyanne. Can you walk us through the life expectancy increase? What are the numbers? What factors do you think contributed to that? And also, how do Americans fare with other people in the world?

And, Admiral, since you're going to take this, I have another question for you on corona.

ASSISTANT SECRETARY GIROIR: Okay, so the life expectancy data -- again, this reverses a three- to four-year trend and a loss of life expectancy. You can look at this in many different ways. Some of the principal components that resulted in the increasing expectancy was a reduction in cancer mortality, a reduction in unintentional deaths -- and that really deals with overdoses primarily, but also things like car crashes.

There was also, though, a reduction in cardiovascular mortality, a reduction in Alzheimer's mortality. So it was very broad across many causes of death. There was also a 4.8 percent decrease in homicides in 2018. So these are all positive factors.

The negative factors -- the only ones that were there -- were an increase in suicides, which the administration has been incredibly attentive to with many new programs rolling out, and also influenza.

Again, we talk about coronavirus, and we need to talk about that. But remember, over 8,000 Americans have died this year of influenza. There's still time to get your influenza vaccine.

How do we rate? We still don't rate very well compared to the rest of the developed world, and certainly the last few years have lowered our ratings. But as I said, we continue -- our mortality rate in 2019 continues to really plummet.

And I do want to make the case -- we talk about these outcomes as if it's all medical care, and medical care is very important, but about 80 percent of health outcomes in the United States are due to social determinants of health and behavior. It's really the economy, it's the jobs, it's smoking,

it's alcohol and other use. So 80 percent of our outcomes are expected to be -- to come from those kinds of impacts.

Q And what is the number?

ASSISTANT SECRETARY GIROIR: Pardon me?

Q What is the life expectancy number?

ASSISTANT SECRETARY GIROIR: The life expectancy is 78.6 years. And that's the life expectancy in the United States right now. Women live about five years longer than men, and that's been common across the board. So women, I think, are 81.2 if I'm correct, and men are five years less than that.

So again, it seems like a small increase -- an increase of a 10th of a year. But when you look at it, a 10th of a year across 300 million Americans, it's really 25 million life years of increased life expectancy. And again, this is against three years of losses in life expectancy that we haven't seen since the early '90s.

Q And on coronavirus, how confident are you that it can be contained at this point? And what is the White House's plan -- contingency plan -- in case it is not?

ASSISTANT SECRETARY GIROIR: Well, I will say that this is an all-hands-on-deck effort. There's tremendous leadership from the White House, Secretary Azar, and Director Redfield from the CDC, the Assistant Secretary Bob Kadlec.

Again, resources have been put to airports. We're doing

screenings. The Commissioned Corps of the Public Health Service has been deployed to support the repatriation mission as well as the airport screening.

And again, this is no cause for urgent panic in any way in the United States. This is currently under control. But, really, this is a dynamic, rapidly changing event. And, you know, the news can change at any given moment.

But the resources are deployed, the government is mobilized, and we feel confident and we know the steps to take right now to contain it.

And you know everything else: We have good diagnostics now by the CDC. The NIH already has candidate vaccines as well as many other individuals. That is a result of dozens of years of medical research to get us to the point of being rapid.

Q And, Kellyanne, I know you wear so many hats, and we're lucky to have you because you have an attorney cap as well. And I have to ask whether you agree with Alan Dershowitz's argument that every politician weaves their public -- their private interest in with public interest and there's absolutely nothing wrong with that.

MS. CONWAY: I actually am not going to discuss politics from the podium. So I will tell you I was very struck by his argument that no one is above the law, including the Congress.

But just generally speaking, I think we'll leave what else is going on on Capitol Hill to Capitol Hill today and our crack group of attorneys who are doing an amazing job of not preening

for the cameras and not being partisan politicians, frankly, but lawyers effectively in a courtroom speaking to the jury and speaking to the American people.

So I'll leave that there. But I'm not going to address the political aspect of that from the podium.

Q Thank you. Admiral, I have two questions. The first: Two weeks ago, the administration announced that it was repealing a number of rules that required social service providers that receive federal funding to -- that are religious in nature -- to refer people who might not be interested in faith-based approaches to secular outside organizations.

Is that going -- has there been any discussion or study as to whether that will make it more difficult for some people -- religious minorities or other vulnerable groups -- to receive drug treatment?

And the second: Last year, Attorney General Barr criticized prosecutors who, for instance, might decline to prosecute low-level drug possession crimes as social justice reformers who let criminals off the hook, and said they're demoralizing to law enforcement and dangerous to public safety. Is that disdain for declining to prosecute low-level drug crimes in favor of steering people into treatment consistent with the scientific literature?

ASSISTANT SECRETARY GIROIR: Do you want to take the prosecution question?

DIRECTOR CARROLL: Sure.

ASSISTANT SECRETARY GIROIR: But I'll just -- I'll just say that I work on a regular basis with DOJ, with DEA. And at the leadership level, there is absolutely no distance between us and approaching this as a public health issue.

It doesn't make sense to put a person with a use disorder, who has been using because of their addiction, into long-term incarceration without treatment. It makes absolute sense for me to get the people who are pushing tons of methamphetamine to our youth across the country, to get them behind bars as soon as possible.

But I'll let Director Carroll, because he deals with the law enforcement. I'll come back to -- I'll come back to that.

DIRECTOR CARROLL: What we know is that drug courts work for people that have an addiction. We're able to push people and hold their hand and get them into treatment if they are suffering from the disease of addiction.

What is so disheartening is that when there are prosecutors or judges out there that don't take seriously the peoples whose addiction is to greed. The only thing that they care about is lining their pockets and preying on the victims who do have a substance use disorder. Those are the people that we need to target. That's what the Department of Justice is doing. That's what our top-notch prosecutors across the country are doing. And those are the people that need to be in jail.

The people who have an addiction -- we support, with record funding from the White House, National Drug Court programs across

the country, and putting them in federal courts as well to make sure that people who have an addiction are not the ones that are going to jail.

ASSISTANT SECRETARY GIROIR: And just to comment, I want -- I want to make it clear that this administration stands to treat all people who are in need. I have the privilege of running the ending the HIV epidemic presidential priority announced at the State of the Union last year. And we provide care to everyone regardless of who they are, where they are, what circumstances they are. And we'll continue to support that. That is the humane thing to do, and that is the position of the administration.

Q But ending the referral requirement, wouldn't that make it more difficult for some people to seek treatment if they -- if the only treatment facility in the area is a faith-based one and they won't be referred to somewhere that they might be more comfortable?

ASSISTANT SECRETARY GIROIR: So we work with all -- we work with all communities. I think faith-based providers have an important component in this, particularly in wrap-around services. For opioid-use disorder, MAT is the standard of care. But MAT alone, if you don't have a job, if you don't have a place to live, if you don't have a welcoming community, is not going to be the entire solution. So all of those things are important.

We'll continue to study every policy and make sure there are no adverse events. But, again, we want everyone to be treated. That's the core administration policy.

Q And, Kellyanne, another follow-up question on the evacuations of --

MS. CONWAY: If I could just add just one quick thing to Andrew. I just, again, would point you to [FindTreatment.gov](https://www.findtreatment.gov) also. We worked on that for years, and it's the first overhaul. If you go back and look at it previously, we can show you the difference.

It basically just generated quantity. If you put in your ZIP code and say, "Look all of the -- look at the 400 facilities you can go to within 500 miles." And people would shut it down because, like, "Well, how do I find the one right for me?" You can customize it by any number of criteria, whether you're a veteran, male or female, LGBT, in-patient, out-patient, temporary, longer term, type of insurance -- if you're on Medicaid, Medicare, private insurance, no insurance, for example.

So I would also point you to that because that is a new tool for every American to access, and they are doing it.

Yes, ma'am.

Q Thank you so much. This is a question for the Admiral about coronavirus again. I want to know: How high, do you think, is the risk of coronavirus spreading in the U.S.? And do you think this could be a global emergency, since we just saw the number surpass the number from SARS in 2002, 2003?

ASSISTANT SECRETARY GIROIR: Well, it's really hard to take theoreticals because it really is a rapidly emerging and a

rapidly changing environment. There has been, at least of this situation -- the sitrep, this morning, there's been no person-to-person transmission within the United States. There clearly has been person-to-person transmission in China, but there has been no person-to-person transmission.

There's extensive screening, appropriate quarantine and isolation that is currently going on, and we certainly hope that continues.

But to sort of project what's going to happen over the next couple of weeks -- again, it's a dynamic situation; all of the resources are in place. The situation rooms are in place, the operation centers are in place. We have CDC deployed. We're working with the World Health Organization. Again, my organization, the Public Health Service, is deploying in support of the repatriation missions as well as the airport screenings.

And there'll be updates, you know, on a regular basis from Secretary Azar, my boss, who is leading the -- leading the efforts.

Q Sir, can I follow up on that coronavirus question, if you don't mind? Because you're talking about, obviously, the importance of combatting what could potentially become serious, although you don't want to get into hypotheticals. And one of the President's Cabinet members, this morning, referenced or suggested that perhaps coronavirus could be good for jobs in the United States. I'm wondering if you find that kind of rhetoric or language helpful, and what you might suggest to public officials as they talk about this.

And, Kellyanne, if you want to weigh in on that as well.

ASSISTANT SECRETARY GIROIR: I don't have any knowledge of the comments this morning.

MS. CONWAY: I didn't see that. I'm sorry.

Q A follow-up question on the repatriation efforts?

Q Can I just ask really quickly: In terms of the evacuations of U.S. personnel, I know it's already happened with respect to Wuhan, but will the U.S. government give diplomatic personnel throughout China the option of leaving their posts?

MS. CONWAY: I'd refer that to the State Department.

Q Kellyanne, on the STOP Act -- you mentioned the STOP Act, some numbers. Can you give us an update on how far the Post Office has gotten in compliance? I think they have to screen all packages or refuse them by the end of the year. Are they anywhere close to getting there?

MS. CONWAY: Yeah, so it's gone basically from zero -- if any of you ever go to the JFK facility -- I'm going to have Director Carroll address that -- if you ever want to take a field trip to JFK airport, you'll see how few packages actually are screened coming in from China and elsewhere.

But the STOP Act essentially means that foreign origin packages now must have sender recipient and contents listed on them. Our third-party carriers have been doing that for a long time -- your UPS, your FedEx, for example. And so, now, our own

U.S. Postal Service needs to get on board with that.

So the last numbers that I saw were somewhere in the 35th percentile. And we're on our way to -- it needs to be 100 percent at some point. We're really pleased -- about 16 months since the STOP Act, maybe less, was signed into law -- that we're already at 37 percent. But Jim can really amplify that.

DIRECTOR CARROLL: I'd love to lead a delegation if you want to go to the JFK Airport, or one of the other ones, and show you what Customs and Border Protection, as well as the USPS -- U.S. Postal Service -- are up against.

What we need is additional capital, additional investments from Congress, to make sure that we have the technology. But what we have seen is actually the President attacking this at the core, at the countries where it's coming from. And so we -- as I said at the beginning, we do have a dramatic reduction in the amount of fentanyl that is coming in the mail from China. And so that is helping at the outset, while we continue to develop the resources, technology, to tackle it actually at the facilities themselves.

Q It seems like they're a long way off though. I mean, are they going to get there? The law says what the law says. Can they comply?

DIRECTOR CARROLL: That's our goal.

MS. CONWAY: That's our goal.

Just quickly, none of us mentioned the first-of-their-kind

fentanyl advisories, which we issued as an administration in August, and that included the Department of Treasury, the departments that are here right now, and others.

Essentially, we are trying to show the private sector how easy it is to disrupt and divert their otherwise legitimate supply chain. So we gave first-of-their-kind advisories on the movement, the money, the manufacturing, and the marketing by these fentanyl traffickers who are very clever, because you could have a couple of blocks of fentanyl in your otherwise legitimate supply chain. And so we're dealing with the private sector so they're more aware of how they could be unwittingly helping us to come into the country.

Q Do you have any -- on the coronavirus again: Do you have any evidence or information about China's use for these biological weapons for coronavirus?

MS. CONWAY: I have no comment on that whatsoever.

Q Secretary Azar said that U.S. officials should have more cooperation with China in order to get coronavirus under control. Is there any sign that China is wanting to have more cooperation? And how are those negotiations going?

ASSISTANT SECRETARY GIROIR: Well, I'd really refer you to Secretary Azar. But there's been, at least our perception, a high degree of cooperation with China. And there is ongoing request for assistance, and I would refer you to Dr. Redfield who runs the CDC for that.

Q Kellyanne, one other question. Your former coworker, John

Kelly, said he believes John Bolton. What do you make of John Kelly's statements? And -- yeah, what do you make of John Kelly's statement saying that he believes John Bolton?

MS. CONWAY: Well, I respect General Kelly enormously, and like him, personally. I don't know what he's referring to, so I can't answer it. In other words, that's just a "I believe John Bolton." I have not seen --

Q Do you believe that John Bolton --

MS. CONWAY: Well, I have not seen a manuscript. And I will tell you that --

Q -- had a conversation with President Trump where President Trump directly tied the aid to Ukraine's --

MS. CONWAY: He didn't say that.

Q -- investigation? That's what John Bolton said. He said that he believes that.

MS. CONWAY: Did John Bolton say that --

Q Yes. He said that he believes --

MS. CONWAY: -- or are we talking about an unpublished manuscript? I'm sorry. Where did John Bolton say that?

Q John Bolton said he believes --

MS. CONWAY: Where?

Q John Kelly says he believes John Bolton. Are you now saying that he is confused?

MS. CONWAY: Yamiche, where did John Bolton say that?

Q He said that in front of a number of people. It's pretty clear that John --

MS. CONWAY: No, no, no.

Q It's pretty clear that John --

MS. CONWAY: Where did Ambassador John Bolton say that?

Q -- Kelly is saying that if John Bolton said that President Trump directly tied the aid --

MS. CONWAY: No, no, no. Back up. Yamiche, where did Ambassador John Bolton say that this week?

Q It was in front of cameras. Everybody saw it.

MS. CONWAY: John Bolton or John Kelly?

Q John Kelly said that in front of cameras.

MS. CONWAY: Okay, Yamiche, where did John -- what did Ambassador John Bolton say this week?

Q So are you saying that John Kelly did not understand what he was saying when he said "I believe John Bolton"?

MS. CONWAY: I'm not saying that. But you're not answering my question. I can't answer your question unless I understand it.

Q But it's a very clear question.

MS. CONWAY: It's not clear at all because I'm asking you --

Q It is a very clear question.

Q John Bolton said in his book that he had a conversation -

-

MS. CONWAY: Is that what you're talking about? An unpublished manuscript? Are you talking about a leak of an unpublished manuscript, as reported by the New York Times?

Q John Kelly was talking about that manuscript.

MS. CONWAY: No, I'm asking you what he is referring to.

Q I'm talking about that, and John Kelly was talking about that as well.

MS. CONWAY: Okay. Because I don't know that to be true and neither do you. In other words, I don't know what John Kelly was referring to. And I'm asking you, what exactly did Ambassador John Bolton say this week, in advance of John -- General Kelly's comments? What did he say? I didn't see him say anything. I hear about unpublished manuscripts that I, frankly, haven't seen and I bet you haven't either.

Q Well, what do you make of John Kelly making that statement?

MS. CONWAY: So you want me to -- you want me to answer a hypothetical wrapped up in a conundrum.

Q Yes.

Q Well, yeah. But why don't you just answer: What do you make of John Kelly commenting that, if the manuscript is true, that he believes John Bolton?

MS. CONWAY: If the manuscript is true? You want me to --

Q Yeah. What do you make of John Kelly making that statement?

MS. CONWAY: You want me to answer a hypothetical wrapped up in --

Q No, it's not a hypothetical.

MS. CONWAY: It is a hypothetical.

Q John Kelly commented and said, "I believe John Bolton." What do you make of John Kelly saying those words?

MS. CONWAY: I don't make anything of it. I don't make anything of it.

Q You don't make anything of it?

MS. CONWAY: No. But I will tell you, particularly by NBC and MSNBC, you guys couldn't stop day after --

Q I work for PBS NewsHour.

MS. CONWAY: I know where you work. Day after day -- you appear there plenty, and I think you're paid by them. But day after day after day -- day after day after day, you know what you talked about with John Kelly? That he was on his way out. He was going to be the next one to be fired. He was on his way out.

He started doing that -- there was -- first, it was the Politico article in October of 2017, about six weeks after he took the job. That person has moved on to a different outlet now, but it was still a ridiculous article. So for a year and a half, while he was on the job, the main story about General Kelly was that he was going to be on his way out.

Now you want me to answer a question -- I haven't talked to General Kelly about this or Ambassador Bolton about this. And I'm not going to comment, particularly from the podium, in the press briefing room, on a hypothetical -- on a leaked unpublished manuscript that I haven't seen.

I hope it doesn't -- I hope it doesn't include classified information. And I know there's always this rush to imbue credibility on whomever you think is against the President at that moment. If it's not Michael Cohen, it's Michael Avenatti. If it's not them, it's Lev Parnas -- who couldn't even get into the Senate chamber yesterday because he's wearing a tracking device because he's been charged with crimes. So that's not a hypothetical.

Q But my question was about what do you think --

MS. CONWAY: You're asking me to answer --

Q -- of John Kelly's comments?

MS .CONWAY: I already told you what I think of General Kelly.

Q You don't make anything of that?

MS. CONWAY: I respect him and I like him. And you're asking me to comment on -- he said, "I believe John Bolton." I don't know what he is referring to when he says that and neither do you.

Q Kellyanne, on the President's State of the Union Address next week, the President --

Q Can I follow up on a question about -- just this question now?

MS. CONWAY: Probably not.

Q Has the White House responded to Mr. Bolton's attorney's urgent request that you at least review the chapter on Ukraine --

MS. CONWAY: It has nothing to do with me.

Q -- so that he can use it, if he's called as soon as next week to give evidence?

MS. CONWAY: Well, I'll tell you what the President of the United States is doing. In addition to eliminating from the face of the Earth dangerous terrorists; completing two trade deals; continuing to reshape the federal judiciary -- we're close to 200 judges and we'll get there soon enough; keeping this unbelievable economy going -- and that's why his approval rating is at its highest point ever in his presidency, according to some polls -- including by your outlets, if not reported by your outlets; he is helping to bring the overdose death rate down and to improve the life expectancy.

He's focused on those types of things. He will go to Michigan today to -- and I believe an auto manufacturing plant, and then to do Moines, Iowa. That's what he's doing. The idea that we should stop what we're doing to review somebody's book strikes me as not a big priority, in my view, for the President. And so --

Q He could be a key witness in the trial if witnesses are called next week.

MS. CONWAY: You would hope so, wouldn't you?

But anyway, I -- again, "if," "if," "if," "if" -- hypotheticals -- I'm not answering that here.

Here's what I know to be real: Sixty-eight thousand Americans died last year of a drug overdose. That's why we're here, and I'm always happy to answer all of your questions as you full well know. But I got to stick to -- I got to stick to reality and not hypotheticals and frankly -- and, frankly, wishful thinking.

Q Are you confident you have the votes, Kellyanne, to prevent witnesses? Are you confident you have the votes, Kellyanne?

Q Admiral, can I ask you a question on a different health topic? The Pentagon announced this week that the number of victims -- U.S. service members with traumatic brain injuries -- went up to 50, from 34, from a dozen (inaudible) before that. The President said recently that he considers that to be not very serious injuries. You, as a health professional, do you agree with that assessment?

DIRECTOR CARROLL: I really can't comment. I really do not know any of the details of the traumatic brain injuries on the DOD side. We know that traumatic brain injury can be from mild to very serious. It really depends. And I just don't know what the DOD injuries are. I have not seen those.

MS. CONWAY: Last question?

Q On the President's State of the Union address next week, obviously there's a big issue for you. You know, the issue of opioid abuse, opioid addiction, it's a priority for the President. Will he make this a part of the State of Union address next week?

MS. CONWAY: He will. And I'd have to go back and check for sure, but I think that'll make it the third consecutive year that he has. We've even had guests in the First Lady's box, like little baby Hope two years ago, who was adopted by a police officer and his wife in Arizona after said police officer saw

this woman using drugs visibly pregnant. I think it was behind a shopping center. And he said to her, "You're hurting -- you're hurting yourself and you're hurting your baby." And he and his wife adopted baby Hope.

They were in -- also, I would just remind you that this is a huge part of the First Lady's BE BEST initiative and the work that she does. I think she has single handedly helped raise awareness and funding for NAS babies, neonatal abstinence syndrome.

And happy to report -- while we're talking about a decline in overdose deaths, we also see a decline in some counties in the state of Maine and across Appalachia in the number of neonatal abstinence syndrome babies either being born or, in fact, getting into treatment right away.

While we're on the topic, I think what we're talking about today is really part of the President's overall healthcare vision, because he's done things like improve kidney health initiative, surprise medical billing, transparency. We're also going to be doing maternal mortality, which is way up in this country; the highest -- one of the highest in developed countries, and increasing. We're working on rural care.

I don't think the country wants to have another protracted conversation or argument about health insurance. I think healthcare -- we want to put the healthcare back in healthcare, which means improving health outcomes and preventing and curing disease. And that is precisely why we're here before you today. Thank you.

END

11:11 A.M. EST

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How the feds missed their chance at a coronavirus vaccine

By Arthur Allen

01/30/2020 05:20 PM EST

Vaccine researchers Peter Hotez and Maria Elena Bottazzi were hanging around their Houston office Thursday, waiting for the phone to ring so they could plead with federal scientific agencies to fund their vaccine, which they think could protect against the Wuhan coronavirus.

The two scientists from the Texas Children's Hospital Center for Vaccine Development had developed the vaccine against another coronavirus, SARS — but that epidemic ended before their vaccine was ready. And once the crisis was over, most of their funding dried up.

"Everybody lost interest," Hotez said.

That was a big missed opportunity, they and other scientists believe. SARS should have been seen as a coronavirus warning shot, not an isolated outbreak, and it should have triggered federal investments like the billions sunk into flu vaccines a decade or so earlier. Now, they believe, the federal government needs to act rapidly to declare a public health emergency, get a vaccine developed, have it approved by the FDA and ready to slow the Wuhan virus' march across China and globe.

Based on past experience, though, the chances of all that falling into place fast enough to turn the tide aren't great, many scientists say.

The NIH is working with a U.S. company Moderna Therapeutics to get a separate promising

vaccine prospect into early testing within three months, NIAID director Anthony Fauci said this week. But in the best case scenario, he warned, it will take many months longer to get a vaccine into widespread use.

Fauci at a scientific conference this week acknowledged the need to take the long view of coronavirus now that the world has experienced three outbreaks in the 21st century — SARS, MERS and now Wuhan.

“Clearly they have pandemic potential, and novel coronaviruses are likely to continue to emerge,” he said. “You know, I’ve been talking about a universal flu vaccine for a long time — maybe we should start talking about a universal coronavirus vaccine. Because this is three in 18 years, I mean that is heavy stuff.”

Hotez and Bottazzi hope that NIH, the Biomedical Advanced Research and Development Authority or others will fund a new round of studies for their vaccine; a public health emergency declaration for the Wuhan threat would facilitate that. The pair had worked swiftly after SARS swept out of a Chinese live game market in 2003 and across the world, killing 800 people and sickening 10 times that number. They developed a vaccine, tested it in animals, got a military lab to create a batch of it — and ran out of money before they could test it on people.

In the intervening years, researchers have gained new scientific tools for vaccine development. And China’s rapid release of genetic data on the virus is hugely important. But that’s not enough.

“The frustrating part is, if the global community was less reactive and more anticipatory we could already have had this vaccine through clinical development and it would be ready to roll in China,” Hotez said.

Michael Osterholm, one of the world’s leading experts on pandemics at the University of Minnesota, said the government needs to start looking at vaccines for civilians “as a security procurement,” just as the military does. Otherwise, mistakes are just repeated.

“Every time we enter into one of these epidemics — SARS, MERS, Lassa fever, Zika ... we hear, ‘We’re going to have a vaccine!’” Osterholm said.

“The only one we have a vaccine for is Ebola,” a virus that, while deadly, poses only a remote risk to U.S. citizens. That vaccine enjoyed steady funding because the Pentagon saw Ebola as a bioterror threat, Osterholm says.

While Hotez and Bottazzi try to wrangle finances for their work, a London-based group called the Coalition for Epidemic Preparedness Innovations, or CEPI, which was created in 2017, has already committed \$12.5 million to two U.S.-based startups and an Australian university with promising coronavirus vaccine platforms.

The NIH’s partner, Moderna Therapeutics, says it could produce up to 100 million doses of a vaccine. The company can use genetic sequence of the virus that China released to get started on its vaccine, and doesn’t need a sample of the virus itself, said Tal Zaks, the company’s chief medical officer.

The Moderna vaccine works by converting genetic sequences of the virus into RNA which when injected into the body, causes cells to make a protein that stimulates immunity to the disease.

The second company, Inovio Pharmaceuticals, based outside Philadelphia, uses vaccines based on inserting virus sequence into bacterial DNA.

A Queensland University group grows its vaccine in cell cultures, and will take a bit longer to produce enough to test in people.

But while the new technologies are exciting, none have ever been used in a licensed vaccine. And the road from promising science to a safe vaccine for millions is littered with thousands of failures.

Some of the earlier SARS vaccines — though not the one that Hotez and Bottazzi developed — showed some dangerous side effects when tested in animals. In this light, the government can't be entirely faulted for its waning interest in a SARS vaccine, said Stanley Perlman, a coronavirus expert at the University of Iowa.

"In retrospect, they might have been pursued with more vigor, but at the time it was not an unreasonable decision," Perlman said.

Moderna's vaccine is using a "plug and play" platform that has been tested with a variety of other germs on about 1,000 people without unusual side effects, while producing good evidence of immunity, Zaks said.

Drew Weissman, whose University of Pennsylvania lab licensed the technology Moderna is using, says the vaccine causes some local pain and fever because it stimulates a vigorous immune response, but "in theory it should be very safe."

The Moderna vaccine could get a relatively quick review from the Food and Drug Administration. Normally, the agency requires extensive animal safety data for any new vaccine before allowing human trials, but in a public health emergency it can proceed with small-scale human vaccine testing based on safety data from other vaccines using the same technology. This approach was taken with some experimental Zika vaccines, for example.

If one of the new vaccines showed promise it would still take the resources of a major pharmaceutical company to make it available for global use, Osterholm said.

"We tend to gear up rhetoric around vaccines when an event occurs, then forget about it," Osterholm said. CEPI is a promising organization for stimulating early vaccine development for emergencies, but it will only provide "20 feet of rope when we're drowning 50 feet out."

"Yet each time we have a coronavirus epidemic," he said, "we start making vaccines from scratch."

No one knows if the Wuhan coronavirus epidemic will die out — as was the case with SARS in 2003. Respiratory viruses tend to be seasonal, favoring the winter months, though of course

many recur year after year.

Or in the coming months the Wuhan virus could worsen.

Vaccine work will proceed, Fauci said, in preparation for “the worst case scenario.”

Sarah Oweremohle contributed to this report.

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Today's update from the Armed Forces Health Surveillance Branch is attached. Summary below:

BLUF:

- **(FOUO) DoD Public Health Threat: Moderate (Unchanged)**

- From mid-DEC to 30 JAN, 8,124 cases of infection with a novel coronavirus (2019-nCoV), including 171 deaths (case fatality proportion 2.1%) have been reported in mainland China. Additionally, 112 cases have been reported in 21 countries and regions outside of mainland China, including 15 countries/regions in USINDOPACOM, three in USEUCOM, two in USNORTHCOM, and one in USCENCOM.
- On 30 JAN, the first local transmission of 2019-nCoV in the U.S. was confirmed in IL, in the spouse of the first travel-associated case in the state. In total, six confirmed cases have been reported in four U.S. states: AZ (1), CA (2), IL (2), and WA (1). Local transmission of nCoV-2019 outside of mainland China has also been reported in Germany, Japan, Taiwan, and Vietnam.
- On 30 JAN, the WHO International Health Regulations Emergency Committee (EC) regarding 2019-nCoV concluded that the outbreak now constitutes a Public Health Emergency of International Concern (PHEIC).
- The declaration of a PHEIC is likely to result in FDA's approval of an Emergency Use Authorization (EUA) for a rRT-PCR assay developed by CDC for the detection of 2019-nCoV. Once the EUA is approved, CDC plans to make the assay available for clinical diagnostic testing purposes to domestic and international partners, including military treatment facility laboratories.

CASE REPORT:

As of 30 JAN, 8,124 (+7,294) confirmed cases of infection with a novel coronavirus (2019-nCoV), including 171 (+146) deaths (case fatality proportion 2.1%), have been reported in mainland China since mid-DEC 2019. Cases have been reported from all provinces (including municipalities and autonomous regions) of mainland China, with the majority of cases (59%) reported from Hubei Province, where Wuhan City, the suspected epicenter of the outbreak, is located. Approximately 88,000 (+78,000) close contacts of confirmed cases have been identified in China, of which >82,000 (+73,600) remain under medical observation. As of 30 JAN, sixteen (+1) cases have been reported in healthcare workers (HCWs) (all in China). Eighteen percent of all confirmed cases in China have been classified as severe.

As of 30 JAN, at least 111 (+94) cases of 2019-nCoV have been reported in 21 (+12) countries and regions outside of mainland China, including 15 (+7) countries/regions in USINDOPACOM, three in USEUCOM, two (+1) in USNORTHCOM, and one in USCENCOM (see table). As of 30 JAN, six (+4) confirmed cases of 2019-nCoV infection have been reported in four (+2) U.S. states: AZ (1), CA (2), IL (2 (+1)), and WA (1).

While the majority of cases reported outside mainland China are travel-associated, local transmission has been reported in Germany, Japan, Taiwan, Vietnam, and the U.S. On 30 JAN, the first local transmission of 2019-nCoV was reported in the U.S. The case occurred in Chicago, IL, in the spouse of the first travel-associated case reported in the state. The second case had not traveled to China. On 28 JAN, ECDC reported the first confirmed locally acquired case in Germany as well as in Europe. The case was a 33-year-old male who had not traveled to China, but had contact with a pre-symptomatic colleague visiting from Shanghai who developed symptoms and was confirmed as a case upon returning to China. Three additional individuals from the same company, all of whom had exposure to the pre-symptomatic case from Shanghai, were subsequently confirmed as cases.

On 30 JAN, the WHO International Health Regulations Emergency Committee (EC) regarding 2019-nCoV concluded that the outbreak now constitutes a Public Health Emergency of International Concern (PHEIC). This marks the third time the EC has convened to discuss this outbreak since late JAN.

EPIDEMIOLOGY:

According to WHO's latest reporting, the incubation period for 2019-nCoV (time from infection to development of symptoms) ranges from 2-10 days, and cases are infectious during this period. Estimates of the R_0 (basic reproduction number) of 2019-nCoV range from WHO's estimate of 1.4 to 2.5 to a much higher estimation of 3.3 to 5.37 in a recent academic [study](#). For comparison, the R_0 of SARS-CoV ranges from 2-5. R_0 represents the expected number of people an infected individual could spread a virus to in a fully susceptible population. WHO reports that "virus amplification" has occurred in one healthcare facility, with one confirmed case reportedly infecting at least 14 HCWs in Hubei Province.

The source of 2019-nCoV is still unknown, but is most likely an animal reservoir. WHO reported on 12 JAN that evidence strongly suggests the outbreak is associated with exposures in a wet market in Jiangnan District, Wuhan City, with a number of the initial cluster of cases reportedly occurring in stallholders and visitors of the Huanan South China Seafood Wholesale Market. The market sold aquatic animals as well as birds, bats, marmots, snakes, and other wildlife. Coronaviruses are common in many different species of animals, including camels and bats. The South China Seafood Market has been closed for environmental cleaning and disinfection since 1 JAN.

BACKGROUND:

On 31 DEC, Wuhan City health authorities reported a cluster of 27 viral pneumonia cases (7 severe) of unknown etiology, with clinical signs and symptoms including fever, difficulty breathing, and bilateral lung infiltrates. All of the cases tested negative for respiratory pathogens including Middle East respiratory syndrome coronavirus (MERS-CoV), Severe Acute Respiratory Syndrome coronavirus (SARS-CoV), and avian/seasonal influenza. On 7 JAN, Chinese health officials reported the isolation of a novel coronavirus (subsequently labelled "2019-nCoV") from a sample collected from one of the hospitalized cases. Chinese health authorities subsequently made the full genetic sequence available through publicly accessible databases/platforms including GenBank and GISAID, enabling multiple countries to develop PCR assays for the detection of 2019-nCoV. As of 27 JAN, assays and sequencing protocols have been released by China, Hong Kong, Germany, Japan, Thailand, and the U.S. Preliminary analysis of 2019-nCoV found it to be 73% similar to Severe Acute Respiratory Syndrome coronavirus (SARS-CoV).

TRAVEL ADVISORIES:

On 23 JAN, Chinese officials closed off all transport out of and within Wuhan, including cancelling all outgoing flights and trains and suspending buses, subways, and ferries that move within the city. As of 30 JAN, Chinese authorities have imposed travel restrictions across 17 (+7) cities, affecting approximately 61 (+41) million people. CDC is continuing to implement enhanced entry screening, and has expanded screening to include 20 (+15) international airports in the U.S.; screening at all 20 airports are scheduled to be fully operational by 31 JAN. As of 27 JAN, CDC maintains its [Warning – Level 3, Avoid Nonessential Travel](#) notice for 2019-nCoV in China. On 23 JAN, the U.S. Department of State issued a [Level 2: Exercise Increased Caution](#) travel advisory for 2019-nCoV in China, and a [Level 4: Do Not Travel](#) advisory specifically for Hubei Province.

DoD RELEVANCE:

(FOUO) As of 30 JAN, no confirmed cases of 2019-nCoV infection have been reported among MHS beneficiaries. To date, five PUIs among MHS beneficiaries have been reported to CDC, of which four have been ruled out and one remains under investigation. For additional DoD-specific information, refer to the [MHS Patient Safety Advisory for 2019-nCoV](#). USINDOPACOM AOR-

specific information is available in the [USINDOPACOM 2019-nCoV Information and Posture Statement](#).

(FOUO) All DoD medical reporting entity patients under investigation (PUIs) are to be reported by the local public health officer via the Disease Reporting System internet (DRSi) in coordination with the Service-specific public health chain of command, per the [DoD Force Health Protection Guidance for the 2019-nCoV Outbreak](#) released on 30 JAN. All DoD medical reporting entities should report 2019-nCoV PUIs in DRSi as “Any other unusual condition not listed”, with the notation “2019-nCoV” entered into the comments field, along with additional pertinent information such as clinical presentation, travel history, and hospital admission status/dates. As the situation evolves, additional Service-specific guidance as well as DoD Reportable Medical Event (RME) Working Group guidance are likely to be released. At this time, diagnostic testing for 2019-nCoV can only be conducted by the CDC. State and local health departments, when contacted by a DoD Public Health Authority and upon concurring with a case’s designation as a PUI, will, in coordination with the DoD Public Health Authority, immediately notify CDC’s Emergency Operations Center (EOC) to report the PUI and determine whether testing for 2019-nCoV is indicated. For PUIs within the U.S., DoD public health authorities should contact the relevant state and local health departments, who, upon concurring with a case’s designation as a PUI, will notify CDC’s EOC at 770-488-7100 to report the PUI and determine whether testing for 2019-nCoV is indicated. The EOC will assist with the collection, storage, and shipment of specimens to CDC, including after hours or on weekends/holidays. CDC has issued [interim guidance](#) including PUI criteria and recommendations for reporting, diagnostic testing, and specimen collection.

MEDICAL COUNTERMEASURES & DIAGNOSTICS:

(FOUO) On 24 JAN, CDC posted the [protocol](#) and [primer-probe sequences](#) for a 2019-nCoV real-time RT-PCR panel. Per disclaimers in the primers and probes PDF, the procedures and/or reagents are for purposes of respiratory virus surveillance and research use, and are intended for public health surveillance and evaluation. These documents have been provided to all AFHSB/Global Emerging Infections Surveillance (GEIS) Section-participating laboratories worldwide. The U.S. Army Medical Research Institute of Infectious Diseases (USAMRIID) is now working to generate the primer-probes. An assay to detect 2019-nCoV has been added to the CDC’s Clinical Laboratory Improvement Amendments (CLIA) certificate and is being used by the CDC for clinical diagnostic testing.

(FOUO) WHO’s declaration of a PHEIC is likely to result in a DHHS Secretary Emergency Declaration and enable CDC to submit this assay to the FDA for approval of an Emergency Use Authorization (EUA). Once the EUA is granted, CDC will make the assay available for clinical diagnostic testing purposes to domestic and international partners, including military and medical treatment facilities, through CDC’s International Reagent Resource (IRR). Currently, all clinical diagnostic testing must take place at the CDC. Until further guidance is issued, any suspected case within the Military Health System should be referred to the State Public Health Department, who, upon concurrence of designation as a PUI, will assist in coordinating with the CDC EOC regarding the collection, storing, and the appropriate means of shipment of specimens to the CDC, as spelled out in the DoD Relevance Section of this summary.

(FOUO) AFHSB/GEIS section is coordinating efforts with DoD and Interagency partners to ensure DoD network labs can globally support 2019-nCoV-related surveillance activities (detection & characterization) as well as rapidly procure and distribute critical analytical supplies/reagents. Current GEIS funding enables ongoing surveillance efforts of animal markets on the Vietnam-China border as well as providing laboratory support for respiratory diseases in

Southeast Asia. GEIS-funded laboratories in Southeast Asia and across the network are poised to provide information and analytical laboratory support to the Geographic Combatant Commands and countries in their region should a request be made or surveillance samples be obtained. Currently, DoD labs in the USINDOPACOM AOR have the capability to detect 2019-nCoV using a multi-step, "general approach" for all coronaviruses by PCR and sequencing. GEIS is in the process of procuring and providing more specific and enhanced analytical reagents and methods through a partner laboratory to improve capability and throughout the network. Laboratories providing diagnostic support for U.S. civilians/U.S. military personnel must ensure they are in compliance with the regulatory requirements of the DoD Clinical Laboratory Improvement Program (DoD Manual 6440.02).

(FOUO) The antiviral Remdesivir is under consideration for DoD therapeutic use. DoD is partnering with NIH for the development of monoclonals (which should have a timeframe similar to vaccine development). Diagnostics available through the Joint Program Executive Office for Chemical and Biological Defense (JPEO-CBD) do not cross-react with 2019-nCoV, and JPEO is therefore recommending a partnership with CDC. DoD is also coordinating with NIH/NIAID on developing expanded access protocols for Remdesivir. The manufacturer (Gilead) will provide Remdesivir on a single patient protocol within the U.S and is in early dialogue with agencies in China, but has not discussed expanded access.

Respectfully,
CDR Kenneth Monahan, USPHS
ASPR Immediate Office
HHS Senior Advisor & Global Health Engagement Officer to NORAD-USNORTHCOM
Desk: (719) 554-1127
BB (b)(6)

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Subject:	IOS Nightly Note
Date:	2020/01/30 18:12:39
Priority:	Normal
Type:	Note

Sent to White House (Night Note):

(b)(5)

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Other Newsworthy Items:

- N/A

From Today:

- Dr. Fauci participated in the following interviews re: Coronavirus
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- (CMS) [CMS Administrator Seema Verma's remarks at Healthy Adult Opportunity Event](#)

Notable Coverage:

[Anti-human-trafficking groups refuse to attend Ivanka Trump's White House summit](#)
Washington Post // Jessica Contrera

[New FDA chief vows tougher action on youth vaping if needed](#)
Washington Post // Laurie McGinley

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CNN // New Day

[HHS Secretary Azar leading coronavirus task force to address US response to outbreak](#)
Fox News // Ed Henry

[HHS Secretary Alex Azar on preventing coronavirus spread in the US](#)
CNBC // Squawk on the Street

[Trump announces coronavirus task force](#)
Washington Examiner // Katherine Doyle

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US News & World Report // Gabby Galvin

[Trump administration's Medicaid block-grants option touches off ideological fight](#)
Washington Post // Amy Goldstein

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KJRH // No Byline

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[Changing Oklahoma Healthcare - SoonerCare 2.0 Unveiled](#)
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Subject:	Trump pledges close cooperation with China to fight coronavirus
Date:	2020/01/30 18:16:40
Priority:	Normal
Type:	Note

Trump pledges close cooperation with China to fight coronavirus

By Caitlin Oprysko

01/30/2020 06:15 PM EST

President Donald Trump on Thursday said his administration was working “very closely” in tandem with China to combat the Wuhan coronavirus, proclaiming a rosy outlook hours after the World Health Organization declared the outbreak a global emergency.

“Hopefully it won’t be as bad as some people think it could be,” Trump said of the outbreak during a speech on trade at a Michigan manufacturing plant.

The coronavirus, which originated in China, has killed more than 100 in the country and has sickened thousands across the globe — including in the U.S., where the first case of human-to-human transmission of the disease was reported earlier Thursday.

Trump has kept uncharacteristically quiet on the outbreak, leaving the bulk of the response to his health advisers but sounding an optimistic note about the virus when he has weighed in.

“We think we have it very well under control. We have very little problem in this country at this moment — five — and those people are all recuperating successfully,” Trump told his audience on Thursday, though a sixth U.S. case of the respiratory illness was confirmed hours before his speech. “But we’re working very closely with China and other countries, and we think it’s going to have a very good ending for us ... that I can assure you.”

While no one has died from the virus in the U.S. and health officials have maintained that the threat to the general American public remains low, close to 100 potential cases of the coronavirus are under investigation here. The accuracy of Trump’s claim — reiterated in a tweet — that those infected are “in good recovery” was not immediately clear.

The handful of times Trump has weighed in on the outbreak, he has thanked President Xi Jinping of China for his “transparency” about the virus, which first appeared in a central province of the country last month. While health experts have expressed similar appreciation in comparison with how Beijing has handled previous outbreaks, the praise has not been universal.

On Wednesday, the White House announced that the president had formed a coronavirus task

force headed by Alex Azar, the secretary of Health and Human Services, to coordinate the U.S. response to the disease through the National Security Council.

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FYI.

From: "POLITICO Pro Health Care" <politicoemail@politicopro.com>
Subject: Trump pledges close cooperation with China to fight coronavirus
Date: 30 January 2020 18:16
To: "Sherman, Jennifer (HHS/OASH)" <Jennifer.Sherman@hhs.gov>

Trump pledges close cooperation with China to fight coronavirus

By Caitlin Oprysko

01/30/2020 06:15 PM EST

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While no one has died from the virus in the U.S. and health officials have maintained that the threat to the general American public remains low, close to 100 potential cases of the coronavirus are under investigation here. The accuracy of Trump’s claim — reiterated in a tweet — that those infected are “in good recovery” was not immediately clear.

The handful of times Trump has weighed in on the outbreak, he has thanked President Xi Jinping of China for his “transparency” about the virus, which first appeared in a central province of the country last month. While health experts have expressed similar appreciation in comparison with how Beijing has handled previous outbreaks, the praise has not been universal.

On Wednesday, the White House announced that the president had formed a coronavirus task force headed by Alex Azar, the secretary of Health and Human Services, to coordinate the U.S. response to the disease through the National Security Council.

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Very respectfully,

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Ashley Grandberry
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The White House

Office of the Press Secretary

FOR IMMEDIATE RELEASE

January 30, 2020

PRESS BRIEFING
BY SENIOR COUNSELOR KELLYANNE CONWAY,
ONDCP DIRECTOR JIM CARROLL,
AND ASSISTANT SECRETARY OF PUBLIC HEALTH ADM. BRETT GIROIR

James S. Brady Press Briefing Room

10:15 A.M. EST

MS. CONWAY: Good morning. Thank you for being here. We come before you bearing good news. For the first time in four years, life expectancy in the United States of America has increased. And for the first time in 29 years, the number of drug overdose deaths has decreased.

This has not happened through coincidence. It's happened through causation. It's owing in large part to a whole-of-government approach to treat the whole person, led by President Trump, First Lady Melania Trump, and really, the entire administration.

Nearly 70,000 of our fellow Americans died from an overdose last year, and 48,000 of those involved opioids. About 70 percent of those deaths also involved some type of synthetic opioid, most prominently fentanyl, which could be an instant killer. A couple of tiny grains are a lethal dose.

We've met with first responders, parents who have lost children, people in recovery, people who are running recovery centers. We've met with mothers whose babies were born chemically dependent. And we certainly have met with health

professionals. All of them have shared stories of loss but, increasingly, of courage and recovery.

This is a crisis that we call the "crisis next door," because we want people to know, from the beginning, that the silence and stigma that it tends to -- many people, it prevents them from seeking out the kind of treatment and help that is available to them is a very big priority for us -- busting through that stigma and silence.

We also want to make clear, in this crisis next door, that it is indiscriminate. It affects all races, socioeconomic status, gender, age, and certainly other affiliations. If the crisis is indiscriminate, then the response must be indiscriminate.

And that's why, in addition to everything that the President and the First Lady and the administration have done, I wanted to share with you, as a reflection, what I consider to be the most robust and significant bipartisan accomplishment of the President's first term: H.R.6, the SUPPORT Act. The President signed it into law following overwhelmingly unanimous support from every Democrat who voted for it in the House and the Senate. This overwhelmingly bipartisan action has led to an increase in the money and awareness on the opioid and poly-drug crisis.

Features of the SUPPORT Act include the CRIB Act, where there is more money and more action for those neonatal abstinence syndrome babies that I mentioned before. Medical professionals tell us it's best to keep the mother -- it's best for the mother and it's best for the baby to keep them together. And, increasingly, that is happening.

Also, the nearly \$3.7 billion in new grants put forth by the administration have made a real difference in our municipalities. The STOP Act has helped us increase the number of seizures of fentanyl and other synthetic opiates coming through our mail. It's up to about 38 percent, and we have a goal, if not a mandate, of 100 percent.

Let me go through a couple of the numbers: 4.1 percent overdose death decline overall in our nation. And that is the first time in 29 years -- nearly three decades. But in some of the hardest-hit states, we're off a peak of over 20 percent: 19 percent in Pennsylvania, 22 percent decline over the peak high in Ohio, 11 percent in West Virginia, 14 percent in Minnesota, 7 percent in North Carolina -- just to highlight a few of them. Also, the Customs and Border Protection in the last fiscal year increased the seizures of fentanyl by 21 percent.

We also launched a targeted ad campaign geared at youth that was seen by over 1.4 billion views and over 58 percent. In fact, the longer documentary type won an Emmy.

Naloxone prescriptions have increased over 400 percent. Our Surgeon General, in April of 2018, issued the first advisory by a surgeon general in over a decade. And Dr. Adams said at the time: We need to have naloxone more available to our first responders, to our health professionals, to our school systems, libraries, YMCAs and the rest, but also to each and every one of us. The Surgeon General says, if each of us were to carry naloxone on our person, we too can be part of the solution, reversing these overdose deaths by administering this overdose-reversing medication.

Last night, Congress passed a 15-month extension of the current emergency scheduling of fentanyl analogues. This is a critical tool for law enforcement because it allows them to continue to detect, analyze, and handle safely and effectively this very lethal drug.

In our effort to focus on prevention education, treatment and recovery, law enforcement interdiction, I'm also happy to report that we have record back-to-back-to-back-to-back collections on Take Back Day. And I do want to credit our partners, like Google, who have been incredibly helpful to us in raising awareness and action among the public in understanding how to safely and broadly dispose of your unused, unneeded expired drugs.

In addition to Take Back Day, the prescriptions of high-dose opioids have fallen by over 32 percent since the President came into office. If you need the pain medication, it will be there. People are walking around with what's left from a bottle of 30, 40 pills, and that's where some of the peril begins.

In addition, we launched [FindTreatment.gov](https://www.findtreatment.gov) -- a completely overhauled tool for every American to access so that they can customize finding treatment for their needs. You can customize it by age, by geography, whether you're veteran, by LGBT, certainly by gender. And this promotes quality over quantity. When you type it in and you customize it, you can find treatment centers that are best for you. Maybe you need to be there for a short amount of time. Maybe you need to be there in-patient, out-patient. Maybe you need to be there a longer amount of time. You can customize that quite confidentially.

From 1999 to 2015, the government reported a 20 percent

reduction in our workforce due to opioid and other drug abuse and addiction. A 20 percent decline over 16 years. I'm happy to report that because we've invested over \$100 million in displaced worker grants across 17 states in the Cherokee Nation, those numbers are moving.

We are trying to treat the whole person, not just check in person. We got you in drug court; we got you in drug treatment. Isn't that terrific. It's really terrific if we can then help them acquire employment, education, skills, training, and certainly housing, on the way to full recovery.

There is so much more work to be done. We're very pleased that the overdose deaths have declined, but 68,000 of our fellow Americans died last year from drug overdose. That's 68,000 too many. If you look at the Super Bowl this coming Sunday, that number could be represented by every single seat with 3,000 left over at the Super Bowl this coming Sunday -- just to give you the actual enormity of the problem.

We will continue to fight this every single day, and we will continue to make the investments of money, of time, of education.

And with that, I'd love to turn this over to Director Jim Carroll of the Office of National Drug Control Policy and then Admiral Giroir, the Assistant Secretary for Health of the United States of America. Thank you very much.

Jim?

DIRECTOR CARROLL: Thank you, Kellyanne. A couple of years ago, when President Trump and I first talked about me taking the job as

the Director of the Office of National Drug Control Policy and serving as his drug czar, he instructed me to be relentless in our efforts to save lives. And that's exactly what we've done to tackle this drug problem here in the United States.

The good news that we're announcing today is a testament to the President and his leadership on this issue. It's an example of what can happen when we come together and apply that whole-of-government approach.

The obstacles we face could not be greater, but through our efforts on prevention, treatment and recovery, and reducing availability, we've made real progress for the American people -- which we not only want to sustain, we want to accelerate.

Kellyanne discussed how we got here and what these numbers mean. Admiral Giroir will discuss the incredible headway we're making with getting people into treatment.

But I want to highlight the progress that we have made with our international partners and our law enforcement who are critical in reducing the supply of these dangerous drugs.

Back at the G20 Summit in 2018, President Trump raised the issue of fentanyl production with the head of China and demanded a solution. He made it clear that the United States would not tolerate the flow of fentanyl and other deadly synthetic drugs coming into our country.

Because of this, in May 2019, China scheduled fentanyl and other similar analogues, such as controlled substances, which was a historic and significant event.

Last night, the House of the Representatives passed a 15-month extension on the ban in scheduling of fentanyl, but a long-term solution is still needed.

In September of 2019, I led a White House delegation to Beijing to ensure that China was keeping up with their commitment to President Trump. The Chinese government agreed to improve the legal framework, agreed to improve their standards for prosecution for fentanyl-related trafficking, and established law enforcement methods there that were not heard of before.

In every meeting I had with the Chinese, my counterpart said they heard the President loud and clear: that the flow of fentanyl into the United States was not tolerated. Since then, the Chinese officials have invited our U.S. counterparts back there to watch the first-ever prosecutions of Chinese nationals for trafficking drugs into the United States.

This progress, combined with President Trump's commitment to secure our southwest border -- which is critical to stopping the flow of drugs into our country -- brings together several lines of effort that will serve to keep Americans safe from the dangers of illicit drugs.

A wall acts as a force multiplier for our Border Patrol agents, and is one of the many tools that we are using to counter drug traffickers.

Taking the steps towards the humanitarian crisis at our southern border has also been critical to keeping those drugs out of the country. The more men and women we have in uniform, the

more that we have on line, the more that are stopping these traffickers -- the greater chance we have of saving lives.

The Department of Justice has played a critical role in this, as they have been cracking down in unprecedented numbers on drug traffickers.

Under President Trump, the DOJ has ramped up trafficking prosecutions -- not only here domestically, but internationally.

Under this administration, the U.S. Treasury Department has made more kingpin designations against operators of distributors in foreign countries.

The High Intensity Drug Trafficking Areas that we fund out of the White House here -- which provides assistance to federal, state, and local drug task forces -- has received unprecedented funding from this administration, and that is beginning to show and is part of the paradigm shift that we're seeing.

These HIDTA initiatives, for example, have dismantled 3,000 drug trafficking organizations, they've removed \$16.5 billion of illicit drugs off our streets, and they have made nearly 99,000 arrests of drug traffickers.

In 2018, we even added, for the first time in 17 years, the first new HIDTA to make sure that we're tackling this.

The men and women of law enforcement, whether they're in uniform or not, are playing this vital role and putting their lives on the line every day.

What this shows is the President's efforts are working and we are saving lives.

Before I turn this over to Admiral Giroir, I want to ask that when you're reporting on this issue, that when you're reporting on these numbers, that numbers are really just part of the story. Behind each of these numbers is a person, is a child, is a mom, a dad, someone whose loss has left a great mourning in a family.

I was with three parents yesterday who had lost their child to an overdose. Today, we remember Jason, Amber, and Eddie, and all of the other people that we have lost. And we continue this fight in their honor to make sure that we fulfill the President's commitment to save American lives.

And with that, I'll turn it over to my friend, Admiral Giroir.

ASSISTANT SECRETARY GIROIR: Thank you very much, Director Carroll. Again, I'm Brett Giroir. I'm the Assistant Secretary for Health at the Department of Health and Human Services. I'm also Secretary Azar's principal advisor on opioid policy, and I've been that for about two years. And I'm honored to wear the uniform of the U.S. Public Health Service Commissioned Corps.

What we see today is no accident. This is the result of an intentional whole-of-government, whole-of-society approach to overuse -- to over- -- to opioid use disorders and other substance use disorders.

First of all, we recognize this as the public health emergency

as it is. And as such, we have focused on many different areas to yield these results.

First, as Kellyanne said, the number of opioids that have been produced -- the total amount of opioids that have been prescribed since January 2017 is reduced by 30 percent nationally. And we have been able to do that while preserving and expanding options for pain control for those who truly are in chronic pain or have debilitating injuries.

Secondly, we've approached this as a public health emergency, because addiction -- opioid use disorder -- is a chronic brain disease. We have unprecedented numbers of individuals who are now receiving treatment. Our estimates are over 1.3 million individuals are now on medication-assisted treatment, and they're also getting the psycho-behavioral support and wrap-around services that they need.

You heard about naloxone -- very, very important because everybody deserves a second chance at life. You have the power. I hope all of you in the media carry naloxone with you. It's very easy. You can save a life, give a person a second chance.

This has resulted in, as you heard, a 4.1 percent decrease in the number of deaths and a 4.6 percent decrease in the actual overdose age-adjusted mortality rate. Very important.

A couple comments on the overall longevity. I have been shocked. Everyone in the public health community has been shocked that over the three years, previously, our longevity has decreased. That really means that our children and grandchildren will live less long and less quality of lives than we have. This

is shocking, and we have not seen this since the height of the AIDS epidemic in the '90s.

This has been reversed. We're now on the trajectory of increasing years of longevity, and that's associated with a number of things. What does that mean? It's only one-tenth of a year, but that's 25 million person years we just gained by this increase in longevity. And the good news is the preliminary data from quarter one into quarter two of 2019 is our mortality rates continue to drop.

Now, I want to talk about all the Health and Human Services issues like treatment, like prevention, but I do want to mention the social determinants of health that are very important.

There was a nationwide study in December, published in JAMA, that highlighted what we all know: When an auto plant closes, opioid mortality rate among the young goes up 85 percent. We have to keep our eye on those socioeconomic issues and everything that we're doing to increase employment, increase opportunity. These all directly affect the rates that we see and that we celebrate today.

And the final thing is, we are not taking our foot off the gas. We understand that this is a dynamic issue -- opioid use disorder, other use disorders -- and it's being fueled by transnational cartels. So we are going to keep working together. We work weekly, daily, together across the government to make sure we continue a whole-of-government, whole-of-society approach.

MS. CONWAY: Thank you. Any questions? Kristen?

Q Kellyanne, a couple of questions. How should we think about this moment? Is this, in fact, a turning point? As you point out, the rate is still very high, but do you see this as a turning point? And I have a couple of other ones.

MS. CONWAY: Sure. I'll have my colleagues speak to that as well, Kristen.

It's a turning point and we hope it becomes a trend. So what we're doing is working, and it is a multifaceted approach. So I can't say it's just law enforcement and surveillance, or Customs and Border Protection; it's just a new treatment locator; it's just Take Back day and more education -- that that tiny little bottle that bears a label of the family doc and local pharmacy that was prescribed to help someone could, in fact, be very dangerous in the wrong hands, or even in your own hands, if you're the prescribe [sic], if you use it for purposes other than why it was prescribed.

So we want to keep and redouble our efforts. We certainly hope that we can count on continued bipartisan action and agreement on this, because as I said earlier and I'll repeat here: H.R.6 had every single Democratic vote in the House and the Senate, including all the people in the House and the Senate running for President. So there is tremendous agreement and action on this issue because it affects every single district and state.

Evaluation Only. Created with Aspose.HTML. Copyright 2013-2020 Aspose Pty Ltd. recognize that the mortality rate -- excuse me, that the life expectancy is increasing because of strides in the drug space. We still -- and

cancer, frankly. We know that suicides and flu -- and flu combined with pneumonia -- are keeping that rate down among other Americans. But we're going to continue, and we hope that we have -- we have what I call the horizontal and vertical government approach.

Horizontally, it's across state, federal, and local. And vertically I -- you know, I call it in terms of the federal government apparatus. To have 13 or 14 departments and agencies actively engaged on this -- ones you would expect, like HHS and FDA and NIH and CDC; SAMHSA certainly; but also Veterans Affairs, Veterans Administration; DHS; State Department has been very helpful; Department of Justice, obviously; but also Department of Labor and Department of Education; and Department of Interior to help with rural and tribal America.

So there's much more work to be done. But we feel like we have a protocol that's helped us get to this point of progress.

Q Let me ask you one -- if you want to weigh in on that one, I do have one on the coronavirus.

ASSISTANT SECRETARY GIROIR: It is -- it absolutely is a turning point, but we have to look at the complexity of the problem. Some states still have increasing rates of death. Most states have decreasing rates of death. We now know that prescription opioid overdoses that caused death are really down tremendously as a result of our work, down 13 percent in 2018, and they continue to decline.

The newest data says cocaine is starting to level off, but we still have issues with fentanyl. It used to be up 30 to 40 percent

year over year. Now it's up under 10 percent, so we're making progress. But we're all worried about the next wave, which is evolving, and that is psychostimulants or methamphetamine. Those continue to increase across the nation. They're being driven all almost entirely by transnational Mexican cartels, and we have been on that problem for about a year right now.

So, yes, we're at a turning point but this is a dynamic, rapidly evolving crisis.

DIRECTOR CARROLL: To follow up, I think one of the things that can make this a turning point is for this to give hope to those people that are suffering from an addiction, for them to be able to come forward and realize that there is, in fact, lifesaving measures that they can take and that we can help them to get on the path to recovery: the prevention programs that we fund, like through our drug-free community programs, the efforts that we're making to get people the help that they need, and also while we're striking hope in the minds of people who have an addiction, we're striking fear in those who want to traffic, and will look to other legitimate opportunities instead of turning to selling drugs in our country.

Q And just a quick question on the other big health news of the day: Has the White House ruled out stopping flights into and out of China? Can you update us on any conversations going on related to that?

MS. CONWAY: So there's a new task force that's been created. It's being led by Secretary of Health and Human Services Alex Azar. As you are probably aware, the President was briefed yesterday in the Situation Room. I've been a part of those staff-

level briefings, senior staff-level briefings, and I won't make an announcement about that right now.

I will say that we're all very relieved and happy and heartened to see what happened with the flight of the 201 or so Americans who landed in Anchorage and then California. So we will continue to monitor the situation, as you know. And I think that Secretary Azar had a few interviews just this morning, maybe addressed this as well as.

Q Is there a second flight next week?

MS. CONWAY: I don't want to comment on that.

Q I just have sort of two -- I wanted to follow up on that one. Do you know whether the President has spoken to President Xi about this situation with the coronavirus? But I also have a follow-up on fentanyl and the overdose deaths.

MS. CONWAY: Well, the President has tweeted about President Xi, I believe last week or maybe earlier this week. You can see that, obviously, we've offered assistance. And obviously, we are also monitoring the fact that other countries now have cases.

And in this kind -- I think that's all I'll say right now. The CDC director and Dr. Fauci, they're all very involved. And, Admiral Giroir, maybe you want to address that --

ASSISTANT SECRETARY GIROIR: (Shakes head.)

MS. CONWAY: -- or you don't.

So we are monitoring -- the President is briefed daily on this, and yesterday in the Situation Room. So I'm going to leave it at that.

Q And my follow-up on the issue of overdose deaths: As you mentioned, fentanyl is up, and there are a number of other overdose areas involving drugs that are up as well. I'm not asking for a silver bullet, but if you were to pick out two or three pieces of policy that might bring down those numbers, what would it be?

ASSISTANT SECRETARY GIROIR: So let me say that not only does it make common sense, but the academic community has proven that there is no such thing as a silver bullet to this issue, that there has to be multimodal approaches that span prevention, that span treatment.

And again, I'm a pediatric intensive care doctor. I use fentanyl every day on suffering children in the ICU in microgram quantities. This is coming into our country in hundreds of pounds -- thousands of pounds, potentially. So we have to have a law enforcement component.

Overall, I would say we have to treat this as a public health emergency, which we do. Addiction -- I'd rather use "use disorders" as a more appropriate term -- is a chronic brain disease. Once you have that chronic brain disease, it is very difficult but possible to treat, but it requires medication treatment and all the supporting services we have.

So a combination of prevention, stop it before it happens, get people into treatment. And that's reduction of stigma across the

board. This is a disease. You need treatment. And then, again, all the kinds of follow-ups that we're doing on a national level.

Q Kellyanne, can you speak to what the administration believes -- what more the administration believes needs to be done to address this crisis? Particularly, what should we expect to see in the President's forthcoming budget in terms of any additional programs?

MS. CONWAY: Sure. Well, thank you, Zeke, for your interest in the issue. We're very happy that last night -- I mean, really at the eleventh hour, because it was set to expire February 6 -- but the Congress took action. It's disappointing that 86 Democrats, I think, voted against extending the fentanyl analogue scheduling that, honestly, is a no-brainer, especially when you consider that they were all on board with the larger compilation of dozens and dozens of bills that became H.R.6 that included several different focuses on fentanyl reduction, handling, analysis, and the like.

So we hope that we can -- again, notwithstanding anything else that's happening -- count on everyone to belly up and help.

I think we also need to -- to Admiral Giroir's point, we're all obviously very concerned about what we consider to be the fourth wave now of the drug crisis, meth. And we hear from law enforcement routinely that whereas they're whacking the moles of fentanyl more and more, up pops meth more and more, and I think, to some extent, heroin as well.

One thing I would say is, in the states that have the Good Samaritan laws where if I'm driving the car and my friend is overdosing, perhaps I have also used with that friend, in the

past, I basically pull up to the emergency room, and the bluing friend starts rolling out the door and I pull away because I'm afraid of being prosecuted. That doesn't happen in many of these states now where you won't be prosecuted. In fact, both people will go in and try to get some services.

So I think so much of it is education. And I think the incomplete or underwhelming coverage of this issue is probably something I would want to solve with you, in that we talk about so many things that don't affect 72,000 lost lives, and then if you draw the concentric circles around those lost lives, the dozens and dozens, or hundreds of people who are affected beyond that one lost life.

So I think it's also making sure that law enforcement, which includes Customs and Border Protection; includes local law enforcement sheriffs; includes our ports of entry; and then, between our ports of entry -- where, increasingly last year, Customs and Border Protection did interdict these poisonous drug -- I think respecting the fact that making sure they have more respect and better resources.

And also, I think for all the things that we're teaching our kids in the formal curricula in school today -- and speaking as a mom of four school-aged children -- it would be terrific if, on a volunteer basis even, educational programs like this were more incorporated into the formal curricula and/or for after-school programs or with the local law enforcement or health professionals.

This should absolutely be included because they are in -- they're in the line of peril, all of them. This is indiscriminate.

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Aspose Pty Ltd.g I'll mention -- it didn't get mentioned today
because they're so much to talk about -- but one of the big things
that has happened in this administration is, I believe, HHS or CMS
has granted -- are we up to 22 or --

ASSISTANT SECRETARY GIROIR: Twenty-seven.

MS. CONWAY: Twenty-seven. I mean, it's really remarkable. Was
it four when we got here?

ASSISTANT SECRETARY GIROIR: Yes.

MS. CONWAY: Four states or so. Now we're up to 27 states where
this IMD 1115 exclusion has occurred. This is really helping
people get into treatment because that was a ban on mental
institutions keeping people too long. It's existed for 40 years,
and it had a lot of merit for that reason. But it had a cruel --
the cruel irony, the cruel result of it was a long waiting list
for treatment and empty beds, because if you filled that 17th bed,
you would risk not getting Medicaid reimbursement.

So we have granted twenty- -- we now, as a government, as a
nation, 27. More than half the states have a waiver so that you
can treat that 17th, to 50th, to 60th person in your facility and
still count on Medicaid reimbursement.

And I'd also say something about the veterans. The President
took action several months ago on veteran suicides. He's always
been very concerned about that. We are taking action, as a
government also, on opioid and other drug misuse disorder among

our veterans.

I visited the Cleveland Veterans Administration, for example -- not the Cleveland Clinic, but for the veterans across the street from there -- and I was really struck by how there, and other places -- but by way of example, pain management may not mean pain medication. They're trying other protocols first. They're doing Reiki and swimming and yoga and other less addictive drugs to help our veterans.

So I think looking at each and every department and asking them what they're doing, it's unusual for the Department of Education, Department of Labor to be so involved, but they are. I mean Labor has all these displaced worker grants, because we know -- and Dr. Giroir can speak about the factories, I think, for a moment -- we know that if you lose your job because of a substance use disorder, you lose your job because you tested positively for drugs, for many Americans, you also lose your hope of recovery.

And I visited a great place called Belden -- B-E-L-D-E-N -- Industries -- just, again, by way of example -- with Second Lady Mrs. Karen Pence, and Dr. Adams, the Surgeon General, and then Secretary of Labor Alex Acosta in Indiana, where Belden's -- one of many examples now where, if you fail a drug test, instead of you losing your job immediately, they hold the job for you but you agree to go into immediate treatment. And they work with the local -- they work with the local hospital, they work with the local community college to make sure that you keep your skills and education up. And that job is waiting for you when you are ready to re-assimilate.

Again, I think the government far too often pats itself on the

back: "Oh, look at all the numbers." And Director Carroll and Admiral Giroir said it beautifully and brilliantly that these aren't just numbers, these are people. So you want to help these people re-assimilate into society. And if they qualify for skills education or employment opportunities, housing opportunities, we want to be able to connect them with that information.

So that's a very lengthy answer because we have to -- I would -- I would never say just treatment recovery, which was the emphasis of the last administration; just, "Oh, we can arrest and punish our way out of it." No, we can't. That would be a ridiculous idea, and thankfully, this President agrees with that. And we can't just say to people, "Gee, don't start." What about all the people who are already there?

Weijia and then --

Q Thank you so much.

Q (Inaudible.)

MS. CONWAY: I'm sorry, we'll get to you.
Weijia and then Andrew.

Q Oh. Thank you, Kellyanne. Can you walk us through the life expectancy increase? What are the numbers? What factors do you think contributed to that? And also, how do Americans fare with other people in the world?

And, Admiral, since you're going to take this, I have another question for you on corona.

ASSISTANT SECRETARY GIROIR: Okay, so the life expectancy data -- again, this reverses a three- to four-year trend and a loss of life expectancy. You can look at this in many different ways. Some of the principal components that resulted in the increasing expectancy was a reduction in cancer mortality, a reduction in unintentional deaths -- and that really deals with overdoses primarily, but also things like car crashes.

There was also, though, a reduction in cardiovascular mortality, a reduction in Alzheimer's mortality. So it was very broad across many causes of death. There was also a 4.8 percent decrease in homicides in 2018. So these are all positive factors.

The negative factors -- the only ones that were there -- were an increase in suicides, which the administration has been incredibly attentive to with many new programs rolling out, and also influenza.

Again, we talk about coronavirus, and we need to talk about that. But remember, over 8,000 Americans have died this year of influenza. There's still time to get your influenza vaccine.

How do we rate? We still don't rate very well compared to the rest of the developed world, and certainly the last few years have lowered our ratings. But as I said, we continue -- our mortality rate in 2019 continues to really plummet.

And I do want to make the case -- we talk about these outcomes as if it's all medical care, and medical care is very important, but about 80 percent of health outcomes in the United States are due to social determinants of health and behavior. It's really the economy, it's the jobs, it's smoking, it's alcohol and other

use. So 80 percent of our outcomes are expected to be -- to come from those kinds of impacts.

Q And what is the number?

ASSISTANT SECRETARY GIROIR: Pardon me?

Q What is the life expectancy number?

ASSISTANT SECRETARY GIROIR: The life expectancy is 78.6 years. And that's the life expectancy in the United States right now. Women live about five years longer than men, and that's been common across the board. So women, I think, are 81.2 if I'm correct, and men are five years less than that.

So again, it seems like a small increase -- an increase of a 10th of a year. But when you look at it, a 10th of a year across 300 million Americans, it's really 25 million life years of increased life expectancy. And again, this is against three years of losses in life expectancy that we haven't seen since the early '90s.

Q And on coronavirus, how confident are you that it can be contained at this point? And what is the White House's plan -- contingency plan -- in case it is not?

ASSISTANT SECRETARY GIROIR: Well, I will say that this is an all-hands-on-deck effort. There's tremendous leadership from the White House, Secretary Azar, and Director Redfield from the CDC, the Assistant Secretary Bob Kadlec.

Again, resources have been put to airports. We're doing

screenings. The Commissioned Corps of the Public Health Service has been deployed to support the repatriation mission as well as the airport screening.

And again, this is no cause for urgent panic in any way in the United States. This is currently under control. But, really, this is a dynamic, rapidly changing event. And, you know, the news can change at any given moment.

But the resources are deployed, the government is mobilized, and we feel confident and we know the steps to take right now to contain it.

And you know everything else: We have good diagnostics now by the CDC. The NIH already has candidate vaccines as well as many other individuals. That is a result of dozens of years of medical research to get us to the point of being rapid.

Q And, Kellyanne, I know you wear so many hats, and we're lucky to have you because you have an attorney cap as well. And I have to ask whether you agree with Alan Dershowitz's argument that every politician weaves their public -- their private interest in with public interest and there's absolutely nothing wrong with that.

MS. CONWAY: I actually am not going to discuss politics from the podium. So I will tell you I was very struck by his argument that no one is above the law, including the Congress.

But just generally speaking, I think we'll leave what else is going on on Capitol Hill to Capitol Hill today and our crack group of attorneys who are doing an amazing job of not preening for the

cameras and not being partisan politicians, frankly, but lawyers effectively in a courtroom speaking to the jury and speaking to the American people.

So I'll leave that there. But I'm not going to address the political aspect of that from the podium.

Q Thank you. Admiral, I have two questions. The first: Two weeks ago, the administration announced that it was repealing a number of rules that required social service providers that receive federal funding to -- that are religious in nature -- to refer people who might not be interested in faith-based approaches to secular outside organizations.

Is that going -- has there been any discussion or study as to whether that will make it more difficult for some people -- religious minorities or other vulnerable groups -- to receive drug treatment?

And the second: Last year, Attorney General Barr criticized prosecutors who, for instance, might decline to prosecute low-level drug possession crimes as social justice reformers who let criminals off the hook, and said they're demoralizing to law enforcement and dangerous to public safety. Is that disdain for declining to prosecute low-level drug crimes in favor of steering people into treatment consistent with the scientific literature?

ASSISTANT SECRETARY GIROIR: Do you want to take the prosecution question?

DIRECTOR CARROLL: Sure.

ASSISTANT SECRETARY GIROIR: But I'll just -- I'll just say that I work on a regular basis with DOJ, with DEA. And at the leadership level, there is absolutely no distance between us and approaching this as a public health issue.

It doesn't make sense to put a person with a use disorder, who has been using because of their addiction, into long-term incarceration without treatment. It makes absolute sense for me to get the people who are pushing tons of methamphetamine to our youth across the country, to get them behind bars as soon as possible.

But I'll let Director Carroll, because he deals with the law enforcement. I'll come back to -- I'll come back to that.

DIRECTOR CARROLL: What we know is that drug courts work for people that have an addiction. We're able to push people and hold their hand and get them into treatment if they are suffering from the disease of addiction.

What is so disheartening is that when there are prosecutors or judges out there that don't take seriously the peoples whose addiction is to greed. The only thing that they care about is lining their pockets and preying on the victims who do have a substance use disorder. Those are the people that we need to target. That's what the Department of Justice is doing. That's what our top-notch prosecutors across the country are doing. And those are the people that need to be in jail.

The people who have an addiction -- we support, with record funding from the White House, National Drug Court programs across the country, and putting them in federal courts as well to make

sure that people who have an addiction are not the ones that are going to jail.

ASSISTANT SECRETARY GIROIR: And just to comment, I want -- I want to make it clear that this administration stands to treat all people who are in need. I have the privilege of running the ending the HIV epidemic presidential priority announced at the State of the Union last year. And we provide care to everyone regardless of who they are, where they are, what circumstances they are. And we'll continue to support that. That is the humane thing to do, and that is the position of the administration.

Q But ending the referral requirement, wouldn't that make it more difficult for some people to seek treatment if they -- if the only treatment facility in the area is a faith-based one and they won't be referred to somewhere that they might be more comfortable?

ASSISTANT SECRETARY GIROIR: So we work with all -- we work with all communities. I think faith-based providers have an important component in this, particularly in wrap-around services. For opioid-use disorder, MAT is the standard of care. But MAT alone, if you don't have a job, if you don't have a place to live, if you don't have a welcoming community, is not going to be the entire solution. So all of those things are important.

We'll continue to study every policy and make sure there are no adverse events. But, again, we want everyone to be treated. That's the core administration policy.

Q And, Kellyanne, another follow-up question on the

evacuations of --

MS. CONWAY: If I could just add just one quick thing to Andrew. I just, again, would point you to [FindTreatment.gov](https://www.findtreatment.gov) also. We worked on that for years, and it's the first overhaul. If you go back and look at it previously, we can show you the difference.

It basically just generated quantity. If you put in your ZIP code and say, "Look all of the -- look at the 400 facilities you can go to within 500 miles." And people would shut it down because, like, "Well, how do I find the one right for me?" You can customize it by any number of criteria, whether you're a veteran, male or female, LGBT, in-patient, out-patient, temporary, longer term, type of insurance -- if you're on Medicaid, Medicare, private insurance, no insurance, for example.

So I would also point you to that because that is a new tool for every American to access, and they are doing it.

Yes, ma'am.

Q Thank you so much. This is a question for the Admiral about coronavirus again. I want to know: How high, do you think, is the risk of coronavirus spreading in the U.S.? And do you think this could be a global emergency, since we just saw the number surpass the number from SARS in 2002, 2003?

ASSISTANT SECRETARY GIROIR: Well, it's really hard to take theoreticals because it really is a rapidly emerging and a rapidly changing environment. There has been, at least of this situation - the sitrep, this morning, there's been no person-to-person

transmission within the United States. There clearly has been person-to-person transmission in China, but there has been no person-to-person transmission.

There's extensive screening, appropriate quarantine and isolation that is currently going on, and we certainly hope that continues.

But to sort of project what's going to happen over the next couple of weeks -- again, it's a dynamic situation; all of the resources are in place. The situation rooms are in place, the operation centers are in place. We have CDC deployed. We're working with the World Health Organization. Again, my organization, the Public Health Service, is deploying in support of the repatriation missions as well as the airport screenings.

And there'll be updates, you know, on a regular basis from Secretary Azar, my boss, who is leading the -- leading the efforts.

Q Sir, can I follow up on that coronavirus question, if you don't mind? Because you're talking about, obviously, the importance of combatting what could potentially become serious, although you don't want to get into hypotheticals. And one of the President's Cabinet members, this morning, referenced or suggested that perhaps coronavirus could be good for jobs in the United States. I'm wondering if you find that kind of rhetoric or language helpful, and what you might suggest to public officials as they talk about this.

And, Kellyanne, if you want to weigh in on that as well.

ASSISTANT SECRETARY GIROIR: I don't have any knowledge of the comments this morning.

MS. CONWAY: I didn't see that. I'm sorry.

Q A follow-up question on the repatriation efforts?

Q Can I just ask really quickly: In terms of the evacuations of U.S. personnel, I know it's already happened with respect to Wuhan, but will the U.S. government give diplomatic personnel throughout China the option of leaving their posts?

MS. CONWAY: I'd refer that to the State Department.

Q Kellyanne, on the STOP Act -- you mentioned the STOP Act, some numbers. Can you give us an update on how far the Post Office has gotten in compliance? I think they have to screen all packages or refuse them by the end of the year. Are they anywhere close to getting there?

MS. CONWAY: Yeah, so it's gone basically from zero -- if any of you ever go to the JFK facility -- I'm going to have Director Carroll address that -- if you ever want to take a field trip to JFK airport, you'll see how few packages actually are screened coming in from China and elsewhere.

But the STOP Act essentially means that foreign origin packages now must have sender recipient and contents listed on them. Our third-party carriers have been doing that for a long time -- your UPS, your FedEx, for example. And so, now, our own U.S. Postal Service needs to get on board with that.

So the last numbers that I saw were somewhere in the 35th percentile. And we're on our way to -- it needs to be 100 percent at some point. We're really pleased -- about 16 months since the STOP Act, maybe less, was signed into law -- that we're already at 37 percent. But Jim can really amplify that.

DIRECTOR CARROLL: I'd love to lead a delegation if you want to go to the JFK Airport, or one of the other ones, and show you what Customs and Border Protection, as well as the USPS -- U.S. Postal Service -- are up against.

What we need is additional capital, additional investments from Congress, to make sure that we have the technology. But what we have seen is actually the President attacking this at the core, at the countries where it's coming from. And so we -- as I said at the beginning, we do have a dramatic reduction in the amount of fentanyl that is coming in the mail from China. And so that is helping at the outset, while we continue to develop the resources, technology, to tackle it actually at the facilities themselves.

Q It seems like they're a long way off though. I mean, are they going to get there? The law says what the law says. Can they comply?

DIRECTOR CARROLL: That's our goal.

MS. CONWAY: That's our goal.

Just quickly, none of us mentioned the first-of-their-kind fentanyl advisories, which we issued as an administration in August, and that included the Department of Treasury, the departments that are here right now, and others.

Essentially, we are trying to show the private sector how easy it is to disrupt and divert their otherwise legitimate supply chain. So we gave first-of-their-kind advisories on the movement, the money, the manufacturing, and the marketing by these fentanyl traffickers who are very clever, because you could have a couple of blocks of fentanyl in your otherwise legitimate supply chain. And so we're dealing with the private sector so they're more aware of how they could be unwittingly helping us to come into the country.

Q Do you have any -- on the coronavirus again: Do you have any evidence or information about China's use for these biological weapons for coronavirus?

MS. CONWAY: I have no comment on that whatsoever.

Q Secretary Azar said that U.S. officials should have more cooperation with China in order to get coronavirus under control. Is there any sign that China is wanting to have more cooperation? And how are those negotiations going?

ASSISTANT SECRETARY GIROIR: Well, I'd really refer you to Secretary Azar. But there's been, at least our perception, a high degree of cooperation with China. And there is ongoing request for assistance, and I would refer you to Dr. Redfield who runs the CDC for that.

Q Kellyanne, one other question. Your former coworker, John Kelly, said he believes John Bolton. What do you make of John Kelly's statements? And -- yeah, what do you make of John Kelly's statement saying that he believes John Bolton?

MS. CONWAY: Well, I respect General Kelly enormously, and like him, personally. I don't know what he's referring to, so I can't answer it. In other words, that's just a "I believe John Bolton." I have not seen --

Q Do you believe that John Bolton --

MS. CONWAY: Well, I have not seen a manuscript. And I will tell you that --

Q -- had a conversation with President Trump where President Trump directly tied the aid to Ukraine's --

MS. CONWAY: He didn't say that.

Q -- investigation? That's what John Bolton said. He said that he believes that.

MS. CONWAY: Did John Bolton say that --

Q Yes. He said that he believes --

MS. CONWAY: -- or are we talking about an unpublished manuscript? I'm sorry. Where did John Bolton say that?

Q John Bolton said he believes --

MS. CONWAY: Where?

Q John Kelly says he believes John Bolton. Are you now saying that he is confused?

MS. CONWAY: Yamiche, where did John Bolton say that?

Q He said that in front of a number of people. It's pretty clear that John --

MS. CONWAY: No, no, no.

Q It's pretty clear that John --

MS. CONWAY: Where did Ambassador John Bolton say that?

Q -- Kelly is saying that if John Bolton said that President Trump directly tied the aid --

MS. CONWAY: No, no, no. Back up. Yamiche, where did Ambassador John Bolton say that this week?

Q It was in front of cameras. Everybody saw it.

MS. CONWAY: John Bolton or John Kelly?

Q John Kelly said that in front of cameras.

MS. CONWAY: Okay, Yamiche, where did John -- what did Ambassador John Bolton say this week?

Q So are you saying that John Kelly did not understand what he was saying when he said "I believe John Bolton"?

MS. CONWAY: I'm not saying that. But you're not answering my question. I can't answer your question unless I understand it.

Q But it's a very clear question.

MS. CONWAY: It's not clear at all because I'm asking you --

Q It is a very clear question.

Q John Bolton said in his book that he had a conversation --

MS. CONWAY: Is that what you're talking about? An unpublished manuscript? Are you talking about a leak of an unpublished manuscript, as reported by the New York Times?

Q John Kelly was talking about that manuscript.

MS. CONWAY: No, I'm asking you what he is referring to.

Q I'm talking about that, and John Kelly was talking about that as well.

MS. CONWAY: Okay. Because I don't know that to be true and neither do you. In other words, I don't know what John Kelly was referring to. And I'm asking you, what exactly did Ambassador John Bolton say this week, in advance of John -- General Kelly's comments? What did he say? I didn't see him say anything. I hear about unpublished manuscripts that I, frankly, haven't seen and I bet you haven't either.

Q Well, what do you make of John Kelly making that statement?

MS. CONWAY: So you want me to -- you want me to answer a

hypothetical wrapped up in a conundrum.

Q Yes.

Q Well, yeah. But why don't you just answer: What do you make of John Kelly commenting that, if the manuscript is true, that he believes John Bolton?

MS. CONWAY: If the manuscript is true? You want me to --

Q Yeah. What do you make of John Kelly making that statement?

MS. CONWAY: You want me to answer a hypothetical wrapped up in --

Q No, it's not a hypothetical.

MS. CONWAY: It is a hypothetical.

Q John Kelly commented and said, "I believe John Bolton." What do you make of John Kelly saying those words?

MS. CONWAY: I don't make anything of it. I don't make anything of it.

Q You don't make anything of it?

MS. CONWAY: No. But I will tell you, particularly by NBC and MSNBC, you guys couldn't stop day after --

Q I work for PBS NewsHour.

MS. CONWAY: I know where you work. Day after day -- you appear there plenty, and I think you're paid by them. But day after day after day -- day after day after day, you know what you talked about with John Kelly? That he was on his way out. He was going to be the next one to be fired. He was on his way out.

He started doing that -- there was -- first, it was the Politico article in October of 2017, about six weeks after he took the job. That person has moved on to a different outlet now, but it was still a ridiculous article. So for a year and a half, while he was on the job, the main story about General Kelly was that he was going to be on his way out.

Now you want me to answer a question -- I haven't talked to General Kelly about this or Ambassador Bolton about this. And I'm not going to comment, particularly from the podium, in the press briefing room, on a hypothetical -- on a leaked unpublished manuscript that I haven't seen.

I hope it doesn't -- I hope it doesn't include classified information. And I know there's always this rush to imbue credibility on whomever you think is against the President at that moment. If it's not Michael Cohen, it's Michael Avenatti. If it's not them, it's Lev Parnas -- who couldn't even get into the Senate chamber yesterday because he's wearing a tracking device because he's been charged with crimes. So that's not a hypothetical.

Q But my question was about what do you think --

MS. CONWAY: You're asking me to answer --

Q -- of John Kelly's comments?

MS .CONWAY: I already told you what I think of General Kelly.

Q You don't make anything of that?

MS. CONWAY: I respect him and I like him. And you're asking me to comment on -- he said, "I believe John Bolton." I don't know what he is referring to when he says that and neither do you.

Q Kellyanne, on the President's State of the Union Address next week, the President --

Q Can I follow up on a question about -- just this question now?

MS. CONWAY: Probably not.

Q Has the White House responded to Mr. Bolton's attorney's urgent request that you at least review the chapter on Ukraine --

MS. CONWAY: It has nothing to do with me.

Q -- so that he can use it, if he's called as soon as next week to give evidence?

MS. CONWAY: Well, I'll tell you what the President of the United States is doing. In addition to eliminating from the face of the Earth dangerous terrorists; completing two trade deals; continuing to reshape the federal judiciary -- we're close to 200 judges and we'll get there soon enough; keeping this unbelievable economy going -- and that's why his approval rating is at its

highest point ever in his presidency, according to some polls -- including by your outlets, if not reported by your outlets; he is helping to bring the overdose death rate down and to improve the life expectancy.

He's focused on those types of things. He will go to Michigan today to -- and I believe an auto manufacturing plant, and then to do Moines, Iowa. That's what he's doing. The idea that we should stop what we're doing to review somebody's book strikes me as not a big priority, in my view, for the President.
And so --

Q He could be a key witness in the trial if witnesses are called next week.

MS. CONWAY: You would hope so, wouldn't you?

But anyway, I -- again, "if," "if," "if," "if" -- hypotheticals -- I'm not answering that here.

Here's what I know to be real: Sixty-eight thousand Americans died last year of a drug overdose. That's why we're here, and I'm always happy to answer all of your questions as you full well know. But I got to stick to -- I got to stick to reality and not hypotheticals and frankly -- and, frankly, wishful thinking.

Q Are you confident you have the votes, Kellyanne, to prevent witnesses? Are you confident you have the votes, Kellyanne?

Q Admiral, can I ask you a question on a different health topic? The Pentagon announced this week that the number of victims

-- U.S. service members with traumatic brain injuries -- went up to 50, from 34, from a dozen (inaudible) before that. The President said recently that he considers that to be not very serious injuries. You, as a health professional, do you agree with that assessment?

DIRECTOR CARROLL: I really can't comment. I really do not know any of the details of the traumatic brain injuries on the DOD side. We know that traumatic brain injury can be from mild to very serious. It really depends. And I just don't know what the DOD injuries are. I have not seen those.

MS. CONWAY: Last question?

Q On the President's State of the Union address next week, obviously there's a big issue for you. You know, the issue of opioid abuse, opioid addiction, it's a priority for the President. Will he make this a part of the State of Union address next week?

MS. CONWAY: He will. And I'd have to go back and check for sure, but I think that'll make it the third consecutive year that he has. We've even had guests in the First Lady's box, like little baby Hope two years ago, who was adopted by a police officer and his wife in Arizona after said police officer saw this woman using drugs visibly pregnant. I think it was behind a shopping center. And he said to her, "You're hurting -- you're hurting yourself and you're hurting your baby." And he and his wife adopted baby Hope.

They were in -- also, I would just remind you that this is a huge part of the First Lady's BE BEST initiative and the work that

she does. I think she has single handedly helped raise awareness and funding for NAS babies, neonatal abstinence syndrome. And happy to report -- while we're talking about a decline in overdose deaths, we also see a decline in some counties in the state of Maine and across Appalachia in the number of neonatal abstinence syndrome babies either being born or, in fact, getting into treatment right away.

While we're on the topic, I think what we're talking about today is really part of the President's overall healthcare vision, because he's done things like improve kidney health initiative, surprise medical billing, transparency. We're also going to be doing maternal mortality, which is way up in this country; the highest -- one of the highest in developed countries, and increasing. We're working on rural care.

I don't think the country wants to have another protracted conversation or argument about health insurance. I think healthcare -- we want to put the healthcare back in healthcare, which means improving health outcomes and preventing and curing disease. And that is precisely why we're here before you today. Thank you.

END

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Date:	2020/01/30 22:09:50
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By Nancy Cook, Dan Diamond

01/30/2020 10:08 PM EST

In the span of a day, Secretary of Health and Human Services Alex Azar suddenly became the face of the Trump White House's public response to the Wuhan coronavirus.

He could just as easily become the fall guy if the president grows unhappy with the speed or nature of the virus' transmission, or the increasingly intense media coverage surrounding the administration's actions.

Azar's elevation to chief responder — and leader of President Donald Trump's coronavirus task force — comes after a rocky week for him internally as the virus spread globally and triggered worries across financial markets, corporate executive suites and the White House. The virus is expected to spread further and lead to more U.S. cases. The State Department late Thursday issued its most severe travel warning, telling Americans "do not travel" to China due to the coronavirus.

Inside the White House, pressure has been building up throughout the week in the background of the president's Senate impeachment trial.

On Monday, several senior officials expressed extreme frustration with Azar and the White House's response, feeling that the administration was caught flat-footed. Some specifically criticized Azar for not widely sharing information and being too slow to ramp up the administration's efforts. The health secretary was chided in at least one meeting and told to get the U.S. response in higher gear and work better alongside staffers from the National Security Council, Domestic Policy Council and various agencies, according to three senior administration officials.

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Inside the health department, both political and career staff defended the health secretary’s response to a mystery outbreak that’s sickened more than 8,000 people around the globe, including six confirmed cases in the United States. “I can say without hesitation that Alex Azar is doing a very good job in a very difficult job,” said Tony Fauci, a civil servant who’s the nation’s top infectious disease doctor.

The White House stressed that Azar would not have been elevated to lead the administration’s response to the coronavirus if the president and top aides did not trust him.

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“Secretary Azar is leading the efforts of the United States’ response to the novel coronavirus, and is the strongest and most competent health secretary I have ever observed,” Robert Redfield, the nation’s CDC director, said in a statement.

The health department also dismissed criticism of Azar’s efforts to fight the outbreak, with HHS spokesperson Caitlin Oakley calling assertions of a slow response “the exact opposite of the truth.”

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In reality, Trump behind the scenes has repeatedly quizzed aides about the coronavirus and its risks to Americans. Officials say Trump wants to project the image of the White House on the offensive toward the coronavirus, which the World Health Organization on Thursday declared a

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White House officials are now holding at least one daily meeting on the coronavirus and convening multiple calls. Trump tweeted photos on Wednesday of one high-powered session in the White House Situation Room, where the president was surrounded by top aides like Mulvaney and Dan Scavino alongside Azar, Redfield and Fauci.

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Subject: Trump health chief tries to contain coronavirus — and White House frustration

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Subject:	Fwd: Trump health chief tries to contain coronavirus — and White House frustration
Date:	2020/01/30 22:11:38
Priority:	Normal
Type:	Note

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From: POLITICO Pro Health Care <politicoemail@politicopro.com>
Date: January 30, 2020 at 10:10:04 PM EST
To: "Stecker, Judy (OS/IOS)" <Judy.Stecker@hhs.gov>
Subject: Trump health chief tries to contain coronavirus — and White House frustration
Reply-To: "POLITICO subscriptions" <reply-fe971c727160017c75-553241_HTML-880489367-1376319-215300@politicoemail.com>

Trump health chief tries to contain coronavirus — and White House frustration

By Nancy Cook, Dan Diamond

01/30/2020 10:08 PM EST

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He could just as easily become the fall guy if the president grows unhappy with the speed or nature of the virus' transmission, or the increasingly intense media coverage surrounding the administration's actions.

Azar's elevation to chief responder — and leader of President Donald Trump's coronavirus task force — comes after a rocky week for him internally as the virus spread globally and triggered worries across financial markets, corporate executive suites and the White House. The virus is expected to spread further and lead to more U.S. cases. The State Department late Thursday issued its most severe travel warning, telling Americans "do not travel" to China due to the coronavirus.

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the president's Senate impeachment trial.

On Monday, several senior officials expressed extreme frustration with Azar and the White House's response, feeling that the administration was caught flat-footed. Some specifically criticized Azar for not widely sharing information and being too slow to ramp up the administration's efforts. The health secretary was chided in at least one meeting and told to get the U.S. response in higher gear and work better alongside staffers from the National Security Council, Domestic Policy Council and various agencies, according to three senior administration officials.

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Acting White House chief of staff Mick Mulvaney this week urged Azar to begin holding a daily briefing to keep the public informed about the virus, officials said. Azar also appeared on Thursday on Fox News, where he told the anchor that the coronavirus "does not at this time pose a risk to the American public." Later in the day, the Centers for Disease Control and Prevention confirmed the first instance of person-to-person transmission of the virus in the United States.

Inside the health department, both political and career staff defended the health secretary's response to a mystery outbreak that's sickened more than 8,000 people around the globe, including six confirmed cases in the United States. "I can say without hesitation that Alex Azar is doing a very good job in a very difficult job," said Tony Fauci, a civil servant who's the nation's top infectious disease doctor.

The White House stressed that Azar would not have been elevated to lead the administration's response to the coronavirus if the president and top aides did not trust him.

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"Secretary Azar is leading the efforts of the United States' response to the novel coronavirus, and is the strongest and most competent health secretary I have ever observed," Robert Redfield, the nation's CDC director, said in a statement.

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In reality, Trump behind the scenes has repeatedly quizzed aides about the coronavirus and its risks to Americans. Officials say Trump wants to project the image of the White House on the offensive toward the coronavirus, which the World Health Organization on Thursday declared a global public health emergency.

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White House officials are now holding at least one daily meeting on the coronavirus and convening multiple calls. Trump tweeted photos on Wednesday of one high-powered session in the White House Situation Room, where the president was surrounded by top aides like Mulvaney and Dan Scavino alongside Azar, Redfield and Fauci.

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Delivered Date:	2020/01/30 22:11:38

From:	Sherman, Jennifer (HHS/OASH) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=F30FE7FAE664419FA654B20EDCCB1E78-SHERMAN, JE>
To:	Adams, Jerome (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=184fe51f7350400b8a99dabd65ac0db5-Adams, Jero>; Wright, Janet (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=41f672e2527b4f44891fb4f4be08cdfd-Wright, Jan>; Kotwicki, Lauren (HHS/OASH) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=54d62ddb3fc4b358ab573ccc13fbbb7-Kotwicki, L>
Subject:	Fwd: Trump health chief tries to contain coronavirus — and White House frustration
Date:	2020/01/30 22:23:54
Priority:	Normal
Type:	Note

From: "POLITICO Pro Health Care" <politicoemail@politicopro.com>
Subject: Trump health chief tries to contain coronavirus — and White House frustration
Date: 30 January 2020 22:09
To: "Sherman, Jennifer (HHS/OASH)" <Jennifer.Sherman@hhs.gov>

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By Nancy Cook, Dan Diamond

01/30/2020 10:08 PM EST

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Sent Date:	2020/01/30 22:23:53
Delivered Date:	2020/01/30 22:23:54

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CC:	Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Wolf, Laura (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userb232d38c>; Stephan, Briana (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usera42ca911>; Lee, Scott (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userf6879348>
Subject:	RE: Need today an update on our supply chain analysis at risk during this outbreak
Date:	2020/01/30 22:53:58
Priority:	Normal
Type:	Note

All

Per conversations earlier today, there are a few documents attached. (b)(5)

(b)(5)

(b)(5)

Thank you
Jessica

Jessica Falcon
Deputy Assistant Secretary
Director, Office of Security, Intelligence, and Information Management
Office of the Asst. Secretary for Preparedness and Response (ASPR)
U.S. Department of Health and Human Services
Jessica.Falcon@hhs.gov
202-401-4055 (Office)

-----Original Message-----

From: Kadlec, Robert (OS/ASPR/IO) <Robert.Kadlec@hhs.gov>
Sent: Thursday, January 30, 2020 6:44 AM
To: Falcon, Jessica (OS/ASPR/SIIM) <Jessica.Falcon@hhs.gov>; Yeskey, Kevin (OS/ASPR/IO) <Kevin.Yeskey@hhs.gov>; Dodgen, Daniel (OS/ASPR/SPPR) <Daniel.Dodgen@HHS.GOV>; Shuy, Bryan (OS/ASPR/IO) <Bryan.Shuy@hhs.gov>; Phillips, Sally (OS/ASPR/SPPR) <Sally.Phillips@hhs.gov>; Bright, Rick (OS/ASPR/BARDA) <Rick.Bright@hhs.gov>; Cooper, Kevin (OS/ASPR/ORM)

<Kevin.Cooper@hhs.gov>; Adams, Steven A. (CDC/SNS/DSNS) <saa1@cdc.gov>
Cc: Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Abram, Anna (FDA/OC)
<Anna.Abram@fda.hhs.gov>
Subject: RE: Need today an update on our supply chain analysis at risk during this outbreak

Thank you for this Jessica. (b)(5)

(b)(5)

-----Original Message-----

From: Falcon, Jessica (OS/ASPR/SIIM) <Jessica.Falcon@hhs.gov>
Sent: Wednesday, January 29, 2020 8:56 PM
To: Yeskey, Kevin (OS/ASPR/IO) <Kevin.Yeskey@hhs.gov>; Kadlec, Robert (OS/ASPR/IO) <Robert.Kadlec@hhs.gov>; Dodgen, Daniel (OS/ASPR/SPPR) <Daniel.Dodgen@HHS.GOV>; Shuy, Bryan (OS/ASPR/IO) <Bryan.Shuy@hhs.gov>; Phillips, Sally (OS/ASPR/SPPR) <Sally.Phillips@hhs.gov>; Bright, Rick (OS/ASPR/BARDA) <Rick.Bright@hhs.gov>; Cooper, Kevin (OS/ASPR/ORM) <Kevin.Cooper@hhs.gov>
Cc: Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>
Subject: RE: Need today an update on our supply chain analysis at risk during this outbreak

All

I am glad the information got out there while a storyboard was worked. The information has now been made into a single storyboard thanks to the collaboration of IM, SNS, and CIP. Attached is the storyboard that is marked interagency use only based on the information sources.

Thank you

Jessica

Jessica Falcon
Deputy Assistant Secretary
Director, Office of Security, Intelligence, and Information Management Office of the Asst. Secretary for Preparedness and Response (ASPR) U.S. Department of Health and Human Services Jessica.Falcon@hhs.gov
202-401-4055 (Office)

-----Original Message-----

From: Yeskey, Kevin (OS/ASPR/IO) <Kevin.Yeskey@hhs.gov>
Sent: Wednesday, January 29, 2020 5:36 PM
To: Kadlec, Robert (OS/ASPR/IO) <Robert.Kadlec@hhs.gov>; Falcon, Jessica (OS/ASPR/SIIM) <Jessica.Falcon@hhs.gov>; Dodgen, Daniel (OS/ASPR/SPPR) <Daniel.Dodgen@HHS.GOV>; Shuy, Bryan (OS/ASPR/IO) <Bryan.Shuy@hhs.gov>; Phillips, Sally (OS/ASPR/SPPR) <Sally.Phillips@hhs.gov>; Bright, Rick (OS/ASPR/BARDA) <Rick.Bright@hhs.gov>
Cc: Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>
Subject: RE: Need today an update on our supply chain analysis at risk during this outbreak

Attached are our preliminary works on this topic.

The power point slide indicates our focus in working with partners and a focus on respiratory protection, as we are hearing about potential shortages in PPE from our S/L partners The pdf is a list of the SNS "Top 20" MCMs and some notes on their vulnerabilities. Highlighted are those medications that are already in short supply, manufactured off shore, have one manufacturer, or are novel agents.

Our goal is to determine for MCMs on this list the following: country of manufacture, API country of manufacture (if possible), estimated surge capacity for production, and alternatives (if any).

-----Original Message-----

From: Kadlec, Robert (OS/ASPR/IO) <Robert.Kadlec@hhs.gov>

Sent: Wednesday, January 29, 2020 1:05 PM

To: Falcon, Jessica (OS/ASPR/SIIM) <Jessica.Falcon@hhs.gov>; Dodgen, Daniel (OS/ASPR/SPPR) <Daniel.Dodgen@HHS.GOV>; Yeskey, Kevin (OS/ASPR/IO) <Kevin.Yeskey@hhs.gov>; Shuy, Bryan (OS/ASPR/IO) <Bryan.Shuy@hhs.gov>; Phillips, Sally (OS/ASPR/SPPR) <Sally.Phillips@hhs.gov>; Bright, Rick (OS/ASPR/BARDA) <Rick.Bright@hhs.gov>

Cc: Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>

Subject: Need today an update on our supply chain analysis at risk during this outbreak

Sent from my iPhone

Sender:	Falcon, Jessica (OS/ASPR/SIIM) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=D2F34B1B5A874E108D1DEDF2A0A01EB7-FALCON, JES>
Recipient:	Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Yeskey, Kevin (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6fe6cf13518445fd9c3a1c254e166b3f-Yeskey, Kev>; Dodgen, Daniel (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c23f0d7c1d634508918e1c87cf50c48c-Dodgen, Dan>; Shuy, Bryan (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=fdeb5ca04b6b4ed19fec2209b5f571e7-Shuy, Bryan>; Phillips, Sally (OS/ASPR/SPPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5d6ce8134846423cb83b5b28464edb60-Phillips, S>; Bright, Rick (OS/ASPR/BARDA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=53034752f35a4317aa74f46348442d39-Bright, Ric>; Cooper, Kevin (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3460d98a33e6478a9baf70248f5432bc-Cooper, Kev>; Adams, Steven A. (CDC/SNS/DSNS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f98462fe8d124743a437c7a80b3f60dd-Adams, Stev>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Wolf, Laura (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userb232d38c>; Stephan, Briana (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usera42ca911>; Lee, Scott (OS/ASPR/EMMO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userf6879348>
Sent Date:	2020/01/30 22:53:55
Delivered Date:	2020/01/30 22:53:58

From:	OS Secretarys Operations Center </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=32B1F28D808B43B6903C00083291303E-SECRETARYS>
To:	OS Secretarys Operations Center </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=32b1f28d808b43b6903c00083291303e-Secretarys>
Subject:	HHS International SPOTREP: Novel Coronavirus, Wuhan, China (Update #24)
Date:	2020/01/30 22:57:34
Priority:	Normal
Type:	Note

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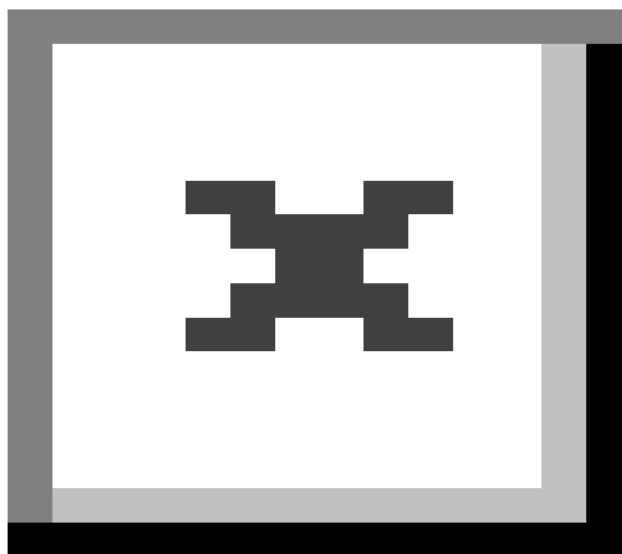
HHS International SPOTREP: Novel Coronavirus, Wuhan, China (Update #24)

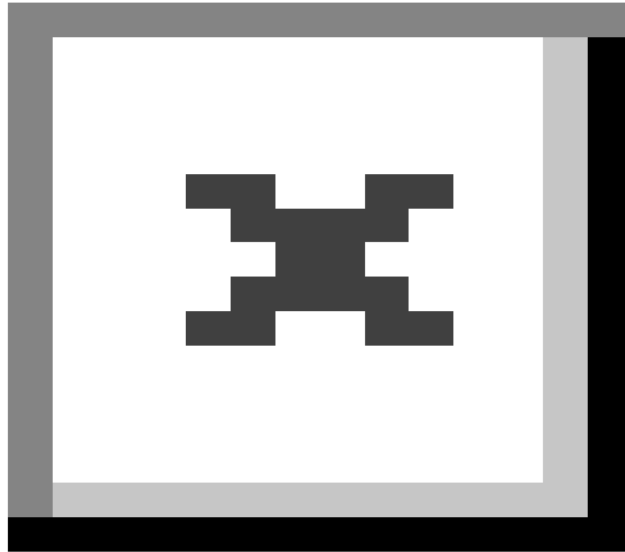
What: There are 7,822 cases of confirmed 2019-nCoV in 22 locations as of 30Jan20, with six of these cases confirmed in the United States (Arizona, Illinois (2), California (2), and Washington).

- The World Health Organization (WHO) on 30Jan20 declared the outbreak of novel coronavirus a Public Health Emergency of International Concern (PHEIC).
- 2,851 travelers have been screened as of 29Jan20. To date, four persons have been referred for medical evaluation following entry screening and station illness response activities, and one tested positive.
- PHS identifying officer to deploy / support quarantine stations

State Coordination

- Hosting a routine call between CDC IM leadership and state health officials to provide situational awareness and bi-directional communication. Calls held twice a week (Tuesday and Thursday) from 1630 to 1730ET.
- Coordinated call with state epidemiologists, state health officials, and nongovernmental partners to provide a repatriation flight update and the screening of 195 individuals returning to the U.S. from China.
- The next national call is scheduled from 1400-1445ET on 3Feb20.





For more details, please see attached CDC SITREP and HHS SLB for Novel Coronavirus.

When: 30Jan20 2300ET

Where: International

Why: CIR: Disease - International

Actions/Follow-Up: The SOC will continue to monitor this incident and report as needed.
This message was distributed to the SOC SPOTREP-SITREP Distribution List.

Prepared by: Charley Hammel, Watch Officer

Approved by: RHibano Dokong, Senior Watch Officer

Secretary's Operations Center

U.S. Department of Health and Human Services (HHS)

Assistant Secretary for Preparedness and Response (ASPR)

200 Independence Ave S.W.
Washington D.C. 20201
Office: (202) 619 – 7800
Fax: 800 – 514 - 4256
Email: hhs.soc@hhs.gov



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Sent Date:	2020/01/30 22:57:12
Delivered Date:	2020/01/30 22:57:34
Message Flags:	Unread

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To:	OS Secretarys Operations Center </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=32b1f28d808b43b6903c00083291303e-Secretarys>
Subject:	HHS International SPOTREP: Novel Coronavirus, Wuhan, China (Update #24)
Date:	2020/01/30 22:57:33
Priority:	Normal
Type:	Note

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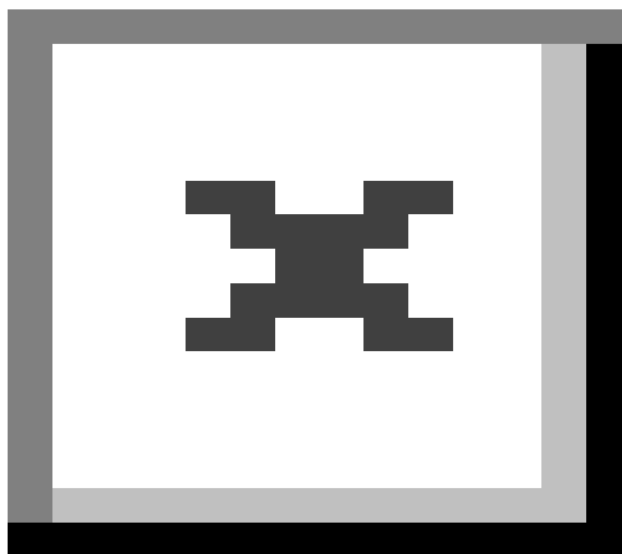
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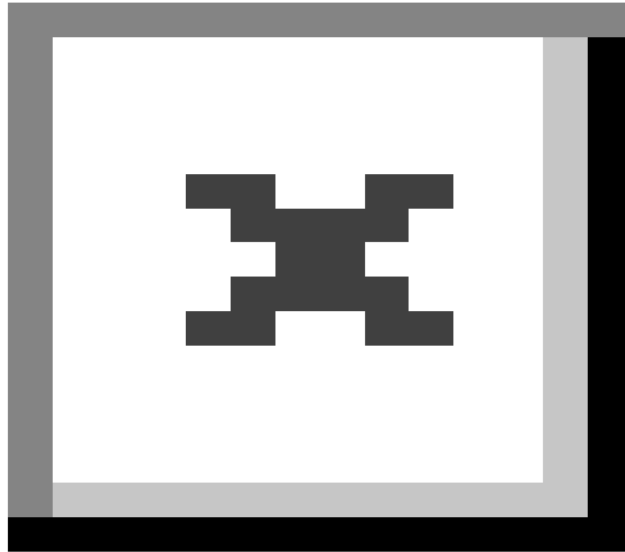
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Prepared by: Charley Hammel, Watch Officer

Approved by: RHibano Dokong, Senior Watch Officer

Secretary's Operations Center

U.S. Department of Health and Human Services (HHS)

Assistant Secretary for Preparedness and Response (ASPR)

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Office: (202) 619 – 7800
Fax: 800 – 514 - 4256
Email: hhs.soc@hhs.gov



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Sent Date:	2020/01/30 22:57:12
Delivered Date:	2020/01/30 22:57:33

From:	White House: Office of the Vice President <info@mail.whitehouse.gov>
To:	Evaluation Only. Created with Aspose.HTML. Copyright 2013-2020 Aspose Pty Ltd. (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>
Subject:	VPOTUS pool report #9 — back at JBA
Date:	2020/01/30 23:23:27
Priority:	Normal
Type:	Note

-->

From: "Restuccia, Andrew" <andrew.restuccia@wsj.com>
Date: January 30, 2020 at 11:02:15 PM EST
Subject: [EXTERNAL] VPOTUS pool report #9 — back at JBA

After an uneventful flight, AF2 was wheels down at 10:45 pm local time. Pence exited AF2 at 10:56 pm and Marine 2 was in the air airborne at 11:01 pm.

That's it from us for tonight.

Quick update on our interview with Pence — the VP's office has agreed to put one more segment on the record:

Pence said he had not spoken with his Chinese counterparts about the Coronavirus. But he believes China has been "transparent" throughout the process so far.

--

Andrew Restuccia
 WHITE HOUSE REPORTER, WASHINGTON BUREAU



The Wall Street Journal

M: (202) 380.6193

E: andrew.restuccia@wsj.com | **T:** @andrewrestuccia

A: 1025 Connecticut Ave. NW, Suite 800 | Washington, D.C. 20036



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Sender:	White House: Office of the Vice President <info@mail.whitehouse.gov>
Recipient:	Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>
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From:	Kadlec, Robert (OS/ASPR/IO) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A182EDA693D040D3832BAE6EFCF7A255-KADLEC, ROB>
SentVia:	Ford-Barnes, Arwenithia (OS/ASPR/IO) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=D533ABC24CBE44B79F6FDDC6B08737A6-FORD-BARNES>
To:	Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Wolf, Laura (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userb232d38c>; Falcon, Jessica (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d2f34b1b5a874e108d1dedfa20a01eb7-Falcon, Jes>; Cooper, Kevin (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3460d98a33e6478a9baf70248f5432bc-Cooper, Kev>; Seiler, Brittney (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0b6aaf930ef7475faa25d8e1d9640808-Seiler, Bri>; Shuy, Bryan (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=fdeb5ca04b6b4ed19fec2209b5f571e7-Shuy, Bryan>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Moreno, Rafael (OS/ASPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1dcc2da7031645b39c430a140fd4c446-Moreno, Raf>; Callahan, Victoria (OS/ASPR/IO) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=95162cb185624a6ebe5fadf08484c141-Callanhan,>; Carlson, Craig (OS/ASPR/ICC/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9c86ecf95d0a41148f19ba99dfddeee7-Carlson, Cr>; Christl, Thomas (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9f4ff7673b404ee289efb5329c319e90-Christl, Th>; Adams, Steven A. (CDC/SNS/DSNS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f98462fe8d124743a437c7a80b3f60dd-Adams, Stev>; Stephan, Briana (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usera42ca911>
CC:	<akhil.agrawal@amdnext.com>; <jason.radick@amdnext.com>; <Marc.DeLorenzo@cardinalhealth.com>; <Chris.Kerski@cardinalhealth.com>; <raymond.milnes@cardinalhealth.com>; <rebecca.mcgrath01@cardinalhealth.com>; <balmon@claflin.com>; Lisa Hohman <lhohman@concordancehs.com>; <GMarchese@concordancehs.com>; <bill.barr@henryschein.com>; <Brad.Connett@henryschein.com>; <Seema.Bhansali@henryschein.com>; <kelly.gibney@mckesson.com>; <Andrew.Proctor@mckesson.com>; <WJABrams@medline.com>; <GHylton@medline.com>; <Gavin.Jeffs@owens-minor.com>; <mdelvacchio@mmm.com>; <ejsimmons@mmm.com>; <ahechavarria@mmm.com>; <EMartin@dukal.com>; <GLoDuca@dukal.com>; <Cheryl.Abernathy@sempermedusa.com>; <Mjr@hida.org>; <rouse@hida.org>; <babb@hida.org>; Karavitch, Stephen <Stephen.Karavitch@cardinalhealth.com>; Pildis, Jon <Jon.Pildis@McKesson.com>; Barr, Bill <William.Barr@henryschein.com>; Parch, Mary Heather <MaryHeather.Parch@McKesson.com>; Ottem, Ronald (Ron) (CDC/SNS/DSNS) <rco9@cdc.gov>; Bedwell, Kim <Kim.Bedwell@owens-minor.com>; Slagle, Jack <Jack.Slagle@McKesson.com>; Patel, Anita (CDC/DDID/NCIRD/OD) </o=ExchangeLabs/ou=Exchange Administrative Group

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Subject:	HIDA (Medical Surge)	
Date:	2020/01/30 23:28:09	
Start Date:	2020/02/03 13:00:00	
End Date:	2020/02/03 13:30:00	
Priority:	Normal	
Type:	Appointment	
Location:	ASPR MAIN CONFERENCE ROOM - Humphrey (b)(6) (b)(6)	
Attendees:	Kadlec, Robert (OS/ASPR/IO); Wolf, Laura (OS/ASPR/SIIM); Falcon, Jessica (OS/ASPR/SIIM); Cooper, Kevin (OS/ASPR/ORM); Seiler, Brittney (OS/ASPR/SIIM); Shuy, Bryan (OS/ASPR/IO); Ford-Barnes, Arwenithia (OS/ASPR/IO); Moreno, Rafael (OS/ASPR); Callahan, Victoria (OS/ASPR/IO) (CTR); Carlson, Craig (OS/ASPR/ICC/SIIM); Christl, Thomas (OS/ASPR/SIIM); Adams, Steven A. (CDC/SNS/DSNS); Stephan, Briana (OS/ASPR/SIIM); akhil.agrawal@amdnext.com; jason.radick@amdnext.com; Marc.DeLorenzo@cardinalhealth.com; Chris.Kerski@cardinalhealth.com; raymond.milnes@cardinalhealth.com; rebecca.mcgrath01@cardinalhealth.com; balmon@clafin.com; Lisa Hohman; GMarchese@concordancehs.com; bill.barr@henryschein.com; Brad.Connett@henryschein.com; Seema.Bhansali@henryschein.com; kelly.gibney@mckesson.com; Andrew.Proctor@mckesson.com; WJAbrams@medline.com; GHylton@medline.com; Gavin.Jeffs@owens-minor.com; mdelvacchio@mmm.com; ejsimmons@mmm.com; ahechavarria@mmm.com; EMartin@dukal.com; GLoDuca@dukal.com; Cheryl.Abernathy@sempermedusa.com; Mjr@hida.org; rouse@hida.org; babb@hida.org; Karavitch, Stephen; Pildis, Jon; Barr, Bill; Parch, Mary Heather; Ottem, Ronald (Ron) (CDC/SNS/DSNS); Bedwell, Kim; Slagle, Jack; Patel, Anita (CDC/DDID/NCIRD/OD); Chang, William (HHS/OGC)	

Good evening Laura, You are good to forward – but please tell me the list of names and the company they are with

ASPR Meeting Request Form
Dr. Robert P. Kadlec
 Assistant Secretary for Preparedness and Response (ASPR)
 200 Independence Ave, SW – Washington DC 20201

Date of your request: 1/31/20	Thursday, January 30, 2020
Date/time of the event: (DUE TO THE HIGH DEMAND MEETING REQUEST(S) WITH DR. KADLEC EACH MEETING WILL BE MAX TO 30MINS – THE FORM MUST BE COMPLETED AND RETURNED TO ME BEFORE YOUR MEETING IS CONFIRMED)	Monday 2/3/20
Topic of the meeting:	Level set with private sector on PPE manufacturing and distribution in the context of coronavirus
Objective/Goal of the meeting:	Understanding between private sector and
Lead Staff /Who did you speak to about your request: (Dr. Kadlec	Bryan Shuy

requested this meeting is NOT an answer)	
Has this request been approved by anyone from the Immediate Office (IO) staff? If yes, by whom?	Bryan Shuy
Dr. Kadlec's Role (make a decision/way forward):	Gain an understanding of the current situation regarding PPE availability, production capacity, and reliance on china
Who is requesting this meeting/POC (Name, Cell and email): <i>(Dr. Kadlec requested this meeting is not sufficient/be specific)</i>	Laura Wolf, 202-823-2011; laura.wolf@hhs.gov
Proposed Timing for the meeting: 30mins/45mins/1 hour:	30 min
Is a Conference Call Line needed? If so, who will initiate the conference call?	Yes- ArwenithaFB
Exact location/city/state/room number of the event/meeting:	Humphrey Building Suite 638G
Will there be briefing material provided? If yes, please send to Arwenitha Ford-Barnes and Victoria Callahan BY NOON THE DAY BEFORE YOUR ACTUAL MEETING	no
HHS Staff Attendees:	Laura Wolf Brittney Seiler Steve Adams Ron Ottem Kevin Cooper Jessica Falcon
External Attendees (please provide name/title/email)	See attached

POC FOR THE ASPR: Arwenitha.FordBarnes@hhs.gov – off: 202 205 8905 iphone: (b)(6)

(b)(6)

Laura Kwinn Wolf, Ph.D.
 Director, Division of Critical Infrastructure Protection
 HHS/ASPR
 Unclassified: Laura.wolf@hhs.gov
 HSDN: Laura.wolf@dhs.sgov.gov
 Desk: 202-260-0666
 Cell: (b)(6)

Sender:

Kadlec, Robert (OS/ASPR/IO) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A182EDA693D040D3832BAE6EFCF7A255-KADLEC, ROB>; Ford-Barnes, Arwenitha (OS/ASPR/IO) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=D533ABC24CBE44B79F6FDDC6B08737A6-FORD-

	BARNES>
Recipient:	Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Wolf, Laura (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=userb232d38c>; Falcon, Jessica (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d2f34b1b5a874e108d1dedfa20a01eb7-Falcon, Jes>; Cooper, Kevin (OS/ASPR/ORM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3460d98a33e6478a9baf70248f5432bc-Cooper, Kev>; Seiler, Brittney (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0b6aaf930ef7475faa25d8e1d9640808-Seiler, Bri>; Shuy, Bryan (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=fdeb5ca04b6b4ed19fec2209b5f571e7-Shuy, Bryan>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Moreno, Rafael (OS/ASPR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1dcc2da7031645b39c430a140fd4c446-Moreno, Raf>; Callahan, Victoria (OS/ASPR/IO) (CTR) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=95162cb185624a6ebe5fadf08484c141-Callanhan,>; Carlson, Craig (OS/ASPR/ICC/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9c86ecf95d0a41148f19ba99dfddee7-Carlson, Cr>; Christl, Thomas (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9f4ff7673b404ee289efb5329c319e90-Christl, Th>; Adams, Steven A. (CDC/SNS/DSNS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=f98462fe8d124743a437c7a80b3f60dd-Adams, Stev>; Stephan, Briana (OS/ASPR/SIIM) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=usera42ca911>; <akhil.agrawal@amdnext.com>; <jason.radick@amdnext.com>; <Marc.DeLorenzo@cardinalhealth.com>; <Chris.Kerski@cardinalhealth.com>; <raymond.milnes@cardinalhealth.com>; <rebecca.mcgrath01@cardinalhealth.com>; <balmon@claflin.com>; Lisa Hohman <lhohman@concordancehs.com>; <GMarchese@concordancehs.com>; <bill.barr@henryschein.com>; <Brad.Connett@henryschein.com>; <Seema.Bhansali@henryschein.com>; <kelly.gibney@mckesson.com>; <Andrew.Proctor@mckesson.com>; <WJABrams@medline.com>; <GHylton@medline.com>; <Gavin.Jeffs@owens-minor.com>; <mdelvacchio@mmm.com>; <ejsimmons@mmm.com>; <ahechavarria@mmm.com>; <EMartin@dukai.com>; <GLoDuca@dukai.com>; <Cheryl.Abernathy@sempermedusa.com>; <Mjr@hida.org>; <rouse@hida.org>; <babb@hida.org>; Karavitch, Stephen <Stephen.Karavitch@cardinalhealth.com>; Pildis, Jon <Jon.Pildis@McKesson.com>; Barr, Bill <William.Barr@henryschein.com>; Parch, Mary Heather <MaryHeather.Parch@McKesson.com>; Ottem, Ronald (Ron) (CDC/SNS/DSNS) <rco9@cdc.gov>; Bedwell, Kim <Kim.Bedwell@owens-minor.com>; Slagle, Jack <Jack.Slagle@McKesson.com>; Patel, Anita (CDC/DDID/NCIRD/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1281344f1dab4bd28aff1cf48cc25420-Patel, Anit>; Chang, William (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3cf70c842da144ab9bee61f353d932a0-Chang, Will>
Sent Date:	2020/01/30 23:28:09

From:	Dr. Eva K Lee <evalee-gatech@protonmail.com>
To:	Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>
Subject:	2019-nCoV response effort
Date:	2020/01/30 23:31:29
Priority:	Normal
Type:	Note

Hi Bob, I am most certainly you must be superbusy dealing with the 2019-nCoV global health emergency response. I want to offer my help. I have developed many biological-operational models that allow us to model the disease spread while optimizing various operational strategies for containment and casualty mitigation. One can analyze the tradeoff to determine the best possible strategies and operational procedures.

One of my papers on human influenza antigenicity prediction and vaccine recommendation has been accepted, and another paper on "Smarter wall" for CBP has been accepted too. I continue to spend a lot of time on medicine and emergency preparedness, interlacing with homeland security - cybersecurity with critical infrastructure, and also on design of vaccines, drug delivery, and personalized treatment planning.

Recently I finished designing a protocol on the drones (autonomous systems) for last mile and first strike. I hope to work with James (Lawler) to make it operational for testing. Now the design is showing on a computer system how all the pieces can be combined into a powerful operational system. It can be for CBRN or any disaster response effort. And clearly it has many commercial potentials also.

Very best, Eva

evalee-gatech@pm.me
<https://newton.isye.gatech.edu/DrLee/>

(b)(6)

Sent with ProtonMail Secure Email.

Sender:	Dr. Eva K Lee <evalee-gatech@protonmail.com>
Recipient:	Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>
Sent Date:	2020/01/30 23:31:12
Delivered Date:	2020/01/30 23:31:29

From:	OS Secretarys Operations Center </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=32B1F28D808B43B6903C00083291303E-SECRETARYS>
To:	OS Secretarys Operations Center </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=32b1f28d808b43b6903c00083291303e-Secretarys>
Subject:	HHS International SPOTREP: Novel Coronavirus, Wuhan, China (Update #25)
Date:	2020/01/31 00:44:56
Priority:	Normal
Type:	Note

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HHS International SPOTREP: Novel Coronavirus, Wuhan, China (Update #25)

Source: HHS

What: The US Department of State has chartered flight has repatriated 195 American Citizens back to the US from Wuhan, China to the continental United States.

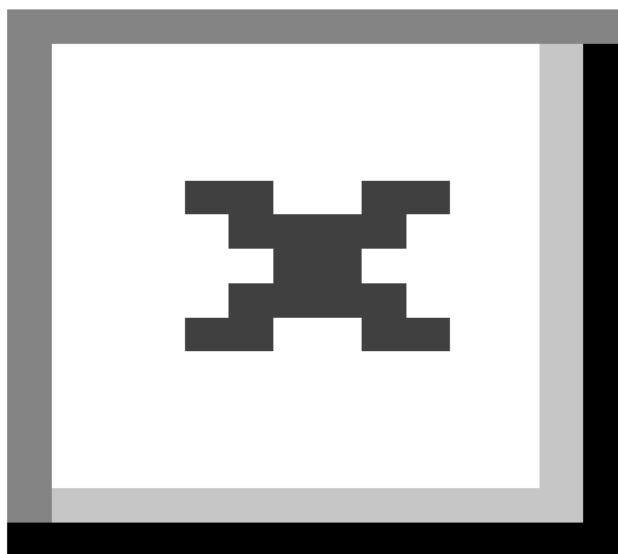
- **HHS is currently planning for additional evacuees from Wuhan, China as an ongoing activity.**
- **A IMT has been activated and is deploying to DC to serve as a national command and control element.**

Activation &Personnel

- **A IMT is being activated to deploy to March, ARB to provide field command and control.**

Medical Screening

- **Local Public Health Department issued quarantine order for one passenger that attempted to depart March ARB.**



For more details, please see attached SLB for Repatriation Wuhan (nCoV).

When: 31Jan20 0045ET

Where: International

Why: CIR: Disease - International

Actions/Follow-Up: The SOC will continue to monitor this incident and report as needed.
This message was distributed to the SOC SPOTREP-SITREP and Region 9 Distribution Lists.

Prepared by: Charley Hammel, Watch Officer

Approved by: RHibano Dokong, Senior Watch Officer

Secretary's Operations Center

U.S. Department of Health and Human Services (HHS)
Assistant Secretary for Preparedness and Response (ASPR)
200 Independence Ave S.W.

Washington D.C. 20201
Office: (202) 619 – 7800
Fax: 800-514-4256
Email: hhs.soc@hhs.gov



Description: Description: Description: Description: Description:
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cid:image001.png@01CCFC4D.92F36DD0

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Recipient:	OS Secretarys Operations Center </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=32b1f28d808b43b6903c00083291303e-Secretarys>
Sent Date:	2020/01/31 00:44:43
Delivered Date:	2020/01/31 00:44:56
Message Flags:	Unread

From:	Mike Allen <mike@axios.com>
To:	Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>
Subject:	Axios AM: Mike's Top 10 — Trump heads for quick acquittal — Pooch politics — Super bets
Date:	2020/01/31 06:16:58
Priority:	Normal
Type:	Note



Happy Friday! *Today's Smart Brevity™* count: 1,149 words ... 4½ minutes.

1 big thing: Trump heads for quick acquittal



Sen. Lamar Alexander leaves the trial last night. Photo: Brendan McDermid/Reuters

President Trump is poised to win his long-expected acquittal in the Senate impeachment trial.

- • **That's because** of the dramatic 11 p.m. announcement — literally, the 11th hour — by

Barring a tectonic twist, the big question is no longer whether the Senate will sink this afternoon.

- • **Without Alexander**, neither side sees how there could be enough votes for the motion to acquit.
- • **The other** most closely watched senators: Susan Collins of Maine announced she'll vote to acquit.

After leaving the Capitol (photo above) right after the trial ended for the night at 10:41 p.m., Alexander said it was "inappropriate for the president to ask a foreign leader to investigate Americans to decide what to do about it."

- • **Alexander said** it was "inappropriate for the president to ask a foreign leader to investigate Americans to decide what to do about it."



Reporters try to get a statement from Sen. Lamar Alexander during a recess in the trial yesterday. Photo: Samuel Corum/Getty Images

Being there: Last night was the liveliest night of the two-week trial. Reporters shot up from the

- • **The reporters** huddled, coatless, by the doors and engulfed senators as they walked to

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2. ⚖️ Impeachment scenes

What's next: The Senate reconvenes at 1 p.m. today and will begin up to four hours of debate,

- • **After "jury deliberations,"** as several senators described it, McConnell will likely int

Senate Majority Whip John Thune (R-S.D.) told reporters that Republicans support movi

ground rules of the trial until just after 2 a.m.

- • **Asked about** the optics of a midnight vote on Trump's acquittal, Thune didn't seem pa

Some scenes for the history books:

Photo: Senate TV via AP

Above, Chief Justice John Roberts, the presiding officer, reads questions from senators.

Below is an image of a Democratic exhibit that included a clip from the trial, and highlighted a





Photo: Senate TV via AP

Photos: Tom Brenner/Getty Images

On what looked like the eve of his acquittal, President Trump counter-programmed the trial

- • **Trump slammed** Joe Biden for the size of his campaign crowds, mocked "Crazy Bern



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3. Iowa closing arguments: "2020 is not 2016"



Joe Biden in Waukeee, Iowa, yesterday. Photo: Justin Sullivan/Getty Images

Pete Buttigieg has changed his tone for his closing appeal ahead of Monday's Iowa caucus

- • **Why it matters:** Buttigieg's pugilistic turn reflects what the polling keeps showing: It'
- • **Biden follows** "the same Washington playbook" and recycles "the same arguments," E

Neither Biden nor Sanders mentioned Buttigieg or any rival Democrat in events Axios obser

- • **Biden** has been arguing he offers stability and will build on the Obama years, while itc

Elizabeth Warren, who hosted a tele-town hall while she attended the impeachment trial thi

- • **"The data shows** that women have been outperforming men as candidates in compet
- • **"Women have been doing really well** since Donald Trump was inaugurated," she s

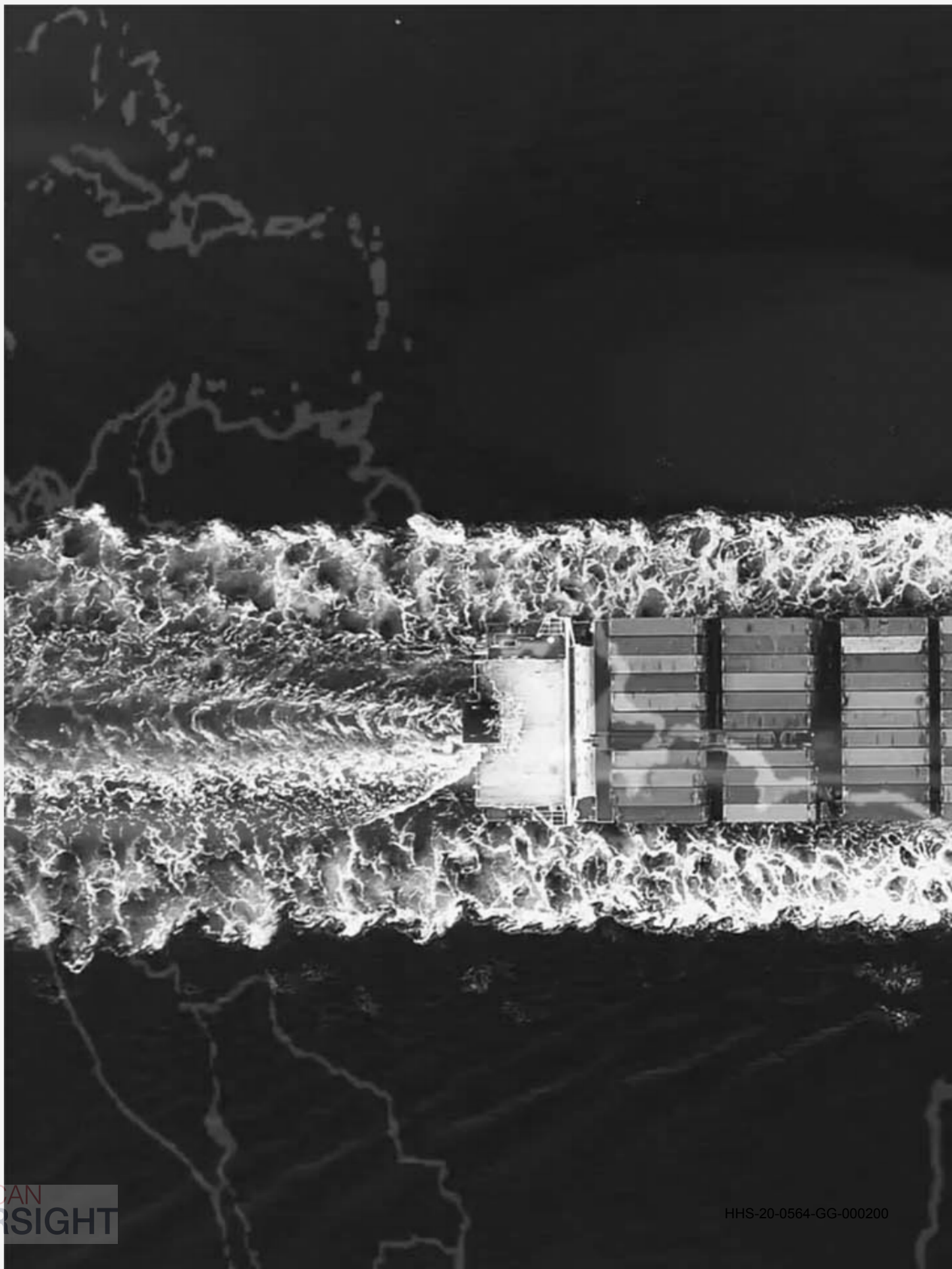
Sanders' closing leans on the consistency of his progressive record and his grassroots moveme

- • **"I am here,** but I'd rather be there," Sanders told a Wednesday night rally in Iowa City
- • **To raucous cheers,** he ticked off his plans as president: Raise the minimum wage, leg

f Sha

A MESSAGE FROM BLACKROCK

3 themes driving markets in 2020



Sender:	Mike Allen <mike@axios.com>
Recipient:	Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>
Sent Date:	2020/01/31 06:16:23
Delivered Date:	2020/01/31 06:16:58

From:	Evaluation Only. Created with Aspose.HTML. Copyright 2013-2020 Aspose Pty Ltd.P (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A1EC840C6A2D4ADBBC91E420A23C7EAF-MOUGHALIAN,>
To:	Chang, William (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3cf70c842da144ab9bee61f353d932a0-Chang, Will>; Arbes, Sarah (HHS/ASL) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=106db0ac70a241a8b1323647c093d9bf-Arbes, Sara>
CC:	Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; Agnew, Ann (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e5174d56b97948d0820e90e8d8136ee5-Agnew, Ann>
Subject:	RE: Public Health Declaration
Date:	2020/01/31 06:35:30
Priority:	Normal
Type:	Note

Plus Ann Agnew. I forwarded the attachments.

From: Chang, William (HHS/OGC) <William.Chang@hhs.gov>
Sent: Friday, January 31, 2020 12:41 AM
To: Arbes, Sarah (HHS/ASL) <Sarah.Arbes@hhs.gov>
Cc: Moughalian, Jen (HHS/ASFR) <Jen.Moughalian@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Kadlec, Robert (OS/ASPR/IO) <Robert.Kadlec@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>
Subject: RE: Public Health Declaration

Here they are.

Office of the General Counsel
U.S. Department of Health and Human Services
202-690-7741

From: Chang, William (HHS/OGC)
Sent: Thursday, January 30, 2020 10:28 PM
To: Arbes, Sarah (HHS/ASL) <Sarah.Arbes@hhs.gov>
Cc: Moughalian, Jen (HHS/ASFR) <Jen.Moughalian@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Kadlec, Robert (OS/ASPR/IO) <Robert.Kadlec@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>
Subject: Re: Public Health Declaration

We will be sending updated copies soon which has an updated date. Please stand by.

Office of the General Counsel

U.S. Department of Health and Human Services
202.819.0810

On: 30 January 2020 22:26,
"Arbes, Sarah (HHS/ASL)" <Sarah.Arbes@hhs.gov>wrote:

Upon signature, ASL will transmit electronic copies. And then paper version during normal business hours.

On Jan 30, 2020, at 10:19 PM, Chang, William (HHS/OGC) <William.Chang@hhs.gov>wrote:

These are ready to go.

(b)(5)

Jenn

From: Misrahi, James J. (CDC/OCOO/OGC) <zmr0@cdc.gov>
Sent: Thursday, January 30, 2020 9:21 PM
To: Ray Gorrie, Jennifer (HHS/OGC) <Jennifer.Ray-Gorrie@hhs.gov>; Sherman, Susan (HHS/OGC) <Susan.Sherman@HHS.GOV>
Cc: Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Benor, David E. (HHS/OGC) <david.benor@hhs.gov>; Tress, Deborah W. (CDC/OCOO/OGC) <dew3@cdc.gov>; Chang, William (HHS/OGC) <William.Chang@hhs.gov>
Subject: RE: Draft PHE Declaration

Here it is. Thanks for the late night review. Jim

From: Ray Gorrie, Jennifer (HHS/OGC) <Jennifer.Ray-Gorrie@hhs.gov>
Sent: Thursday, January 30, 2020 9:19 PM
To: Sherman, Susan (HHS/OGC) <Susan.Sherman@HHS.GOV>; Misrahi, James J. (CDC/OCOO/OGC) <zmr0@cdc.gov>
Cc: Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Benor, David E. (HHS/OGC) <david.benor@hhs.gov>; Tress, Deborah W. (CDC/OCOO/OGC) <dew3@cdc.gov>; Chang, William (HHS/OGC) <William.Chang@hhs.gov>
Subject: Re: Draft PHE Declaration

I didn't get the draft.

Jennifer Ray Gorrie, JD, MPH
Senior Attorney
Office of the General Counsel
U.S. Department of Health and Human Services
200 C St., SW

Suite 6170
Washington, D.C. 20515
(Office) 202.205.9360
(Cell) (b)(6)
Jennifer.ray-gorrie@hhs.gov

On: 30 January 2020 21:02,
"Sherman, Susan (HHS/OGC)" <Susan.Sherman@HHS.GOV>wrote:

Adding in Jennifer Ray Gorrie, who usually drafts PHEs and probably has the template on hand.

(b)(5)

On Jan 30, 2020, at 8:08 PM, Misrahi, James J. (CDC/OCOO/OGC) <zmr0@cdc.gov>wrote:

Here is the draft again.

From: Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>
Sent: Thursday, January 30, 2020 8:07 PM
To: Misrahi, James J. (CDC/OCOO/OGC) <zmr0@cdc.gov>
Cc: Sherman, Susan (HHS/OGC) <Susan.Sherman@HHS.GOV>; Benor, David E. (HHS/OGC) <david.benor@hhs.gov>; Tress, Deborah W. (CDC/OCOO/OGC) <dew3@cdc.gov>; Chang, William (HHS/OGC) <William.Chang@hhs.gov>
Subject: RE: Draft PHE Declaration

Would you please forward me the declaration? Also, would you please copy me on all emails related to the PHE declaration going forward? Thanks, Brian

From: Chang, William (HHS/OGC) <William.Chang@hhs.gov>
Sent: Thursday, January 30, 2020 8:04 PM
To: Misrahi, James J. (CDC/OCOO/OGC) <zmr0@cdc.gov>
Cc: Sherman, Susan (HHS/OGC) <Susan.Sherman@HHS.GOV>; Benor, David E. (HHS/OGC) <david.benor@hhs.gov>; Tress, Deborah W. (CDC/OCOO/OGC) <dew3@cdc.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>
Subject: RE: Draft PHE Declaration

Thank you.

James, can you please get program input?

Susan, can you please review tonight?

This may have a potentially very short fuse.

Best,
Will

Office of the General Counsel
U.S. Department of Health and Human Services
202-690-7741

From: Misrahi, James J. (CDC/OCOO/OGC) <zmr0@cdc.gov>
Sent: Thursday, January 30, 2020 8:02 PM
To: Chang, William (HHS/OGC) <William.Chang@hhs.gov>
Cc: Sherman, Susan (HHS/OGC) <Susan.Sherman@HHS.GOV>; Benor, David E. (HHS/OGC) <david.benor@hhs.gov>; Tress, Deborah W. (CDC/OCOO/OGC) <dew3@cdc.gov>
Subject: Draft PHE Declaration

Here is the draft declaration. Susan Sherman is the real OGC expert on this. Also program input would be suggested.

James J. Misrahi, Attorney
HHS Office of the General Counsel
Public Health Division
CDC/ATSDR Branch
1600 Clifton Road, NE D-53
Atlanta, GA 30033
Telephone: (404) 639-7208
E-mail: JMisrahi@cdc.gov

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<Draft PHE Declaration Coronavirus.docx>
<PHE nCoV Jan 2020.docx>
<Senate Majority Leader Notification nCoV Jan 2020.docx>
<House Notification nCoV Jan 2020.docx>

Sender:	Moughalian, Jen (HHS/ASFR) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=A1EC840C6A2D4ADBBC91E420A23C7EAF-MOUGHALIAN,>
Recipient:	Chang, William (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3cf70c842da144ab9bee61f353d932a0-Chang, Will>; Arbes, Sarah (HHS/ASL) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=106db0ac70a241a8b1323647c093d9bf-Arbes, Sara>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>;

	Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; Agnew, Ann (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=e5174d56b97948d0820e90e8d8136ee5-Agnew, Ann>
Sent Date:	2020/01/31 06:35:29
Delivered Date:	2020/01/31 06:35:30

From:	OS Secretarys Operations Center </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=32B1F28D808B43B6903C00083291303E-SECRETARYS>
To:	OS Secretarys Operations Center </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=32b1f28d808b43b6903c00083291303e-Secretarys>
Subject:	HHS Executive Summary 31Jan20
Date:	2020/01/31 07:05:42
Importance:	Low
Priority:	Low
Type:	Note

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HHS Executive Summary: Friday, 31Jan20

1. HHS

Today's Noteworthy Topics:

Novel Coronavirus (2019-nCoV)

As of 30Jan20 there are 7,822 cases of confirmed 2019-nCoV in 22 locations, with six of these cases confirmed in the United States (Arizona, Illinois (2), California (2), and Washington). On 30Jan20 the first case of human to human transmission was confirmed in Chicago, Illinois. World Health Organization (WHO) Emergency Committee has declared a Public Health Emergency of International Concern (PHEIC). There have been 5 previous declarations since 2002.

Daily Operational Schedule:

0800 – IST Section Chief Meeting
0830 – FEMA Daily OPS Briefing
0830 – DHS & CDC Daily 2019-2020 Novel Coronavirus Sync Call
0930 – Daily Novel Coronavirus Resource Coordination CONCALL
1430 – NICCL Call - Coronavirus
1600 – ASPR Coordination Call

Public Health Emergency of National Significance:

Puerto Rico (Earthquake): 08Jan20
Opioid Crisis, Nationwide: 24Jan20

HHS Response Status Summary:

HHS SOC: Level II (Partial Activation)
CDC EOC: Level III (Polio/Ebola)
CDC EOC: 2019 Novel Coronavirus (Agency-Wide Response)
FDA EOC: Level II (Vape Product Response)

Emergency Support Function (ESF) Activation:

ESF – 8: Not Activated
ESF – 6: Not Activated

Recovery Support Function (RSF) Activation:

H&SS RSF: Activated Region II (2017 Irma/Maria, Puerto Rico projected end date of 05Mar20). Activated Region IX (2018 California Wildfires projected end date of 31Mar20)

HHS Deployments: (Total = 341)

ASPR: 92 – (10) State of the Union, (69) Novel Coronavirus, (3) Irma/Maria, (9) 2020 Earthquake Puerto Rico, (1) 2018 California Wildfires

CDC: 249 – (40) Polio, (51) Ebola, (7) Puerto Rico, (151) Coronavirus

FMS Status:

- • * 32 (250 Bed) FMS sets are deployable
- • * 10 (50 Bed) FMS sets are deployable

New Mission Assignments (MA): 4473DR-PR-HHS-04: FEMA has sent, and A&F has accepted, a Mission Assignment in support of 2020 Earthquake, Puerto Rico. As requested by the Commonwealth of Puerto Rico and directed by and in coordination with FEMA. Health & Human Services (HHS) will provide a team to assess the medical conditions in the pop up shelters. In addition, provide health communicators to assist PRDH in providing targeted health communication to displaced persons in both pop up and official Shelters. This mission assignment provides a cumulative amount of \$120,000.00 with estimated projected end date of 20Feb20.

Active Situations (7):

- • * Influenza Season
- • * Irma/Maria, Puerto Rico, & USVI (Recovery)
- • * Ebola in Eastern Democratic Republic of the Congo
- • * California Wildfires (Recovery)
- • * Novel Coronavirus
- • * Bravo Response
- • * Earthquake, Puerto Rico

U.S. International Health Regulation National Focal Point Status: World Health Organization (WHO) Emergency Committee has declared a Public Health Emergency of International Concern (PHEIC).

2. FEMA:**Interagency Response Status Summary:**

NWC: Monitoring

NRCC: Blue

National IMATs: Red – Fully Mission Capable; Blue – Deployed – PR; Gold – Fully Mission Capable

Regional IMATs: Region II, PR

Significant National Weather:

A developing coastal low will produce rain and thunderstorms from the Gulf Coast and Southeast into the Mid-Atlantic region through Saturday. A few of these thunderstorms may be severe across south Florida, including in the Miami metro area. Meanwhile, a powerful cold front will plunge through the Northwest into the Interior West this weekend. Expect heavy rain and widespread mountain snow.

3. OPDIV/STAFFDIV Overnight Reports:

CDC:

- • * 2019 Novel Coronavirus – China, Australia, Canada, Germany, Hong Kong, Japan, Macau, Malaysia, Singapore, Taiwan, UAE– Update
- • * Measles (Rubeola) – Central African Republic – Update
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FDA:

- • * Adverse Events Possibly Linked to Vaping Products/Unknown/Aug 2019
- • * *Listeria monocytogenes*/Leafy Greens (suspect)/Dec 2019
- • * Hepatitis A/Fresh Fruit (suspect)/Nov 2019
- • * *Listeria monocytogenes*/Dairy (suspect)/Nov 2019
- • * E. coli O157:H7/Leafy Greens (suspect)/Dec 2019
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Prepared by:**Secretary's Operations Center**

U.S. Department of Health and Human Services (HHS)
Assistant Secretary for Preparedness and Response (ASPR)
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Washington, D.C. 20201
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Subject:	HHS Executive Summary 31Jan20
Date:	2020/01/31 07:05:40
Importance:	Low
Priority:	Low
Type:	Note

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HHS Executive Summary: Friday, 31Jan20

1. HHS

Today's Noteworthy Topics:

Novel Coronavirus (2019-nCoV)

As of 30Jan20 there are 7,822 cases of confirmed 2019-nCoV in 22 locations, with six of these cases confirmed in the United States (Arizona, Illinois (2), California (2), and Washington). On 30Jan20 the first case of human to human transmission was confirmed in Chicago, Illinois. World Health Organization (WHO) Emergency Committee has declared a Public Health Emergency of International Concern (PHEIC). There have been 5 previous declarations since 2002.

Daily Operational Schedule:

0800 – IST Section Chief Meeting
0830 – FEMA Daily OPS Briefing
0830 – DHS & CDC Daily 2019-2020 Novel Coronavirus Sync Call
0930 – Daily Novel Coronavirus Resource Coordination CONCALL
1430 – NICCL Call - Coronavirus
1600 – ASPR Coordination Call

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Prepared by:**Secretary's Operations Center**

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Subject:	FW: (SBU) TFCN01 - Wuhan Evacuation Task Force SitRep No. 12 0630ET
Date:	2020/01/31 08:35:21
Priority:	Normal
Type:	Note

Team see attached and below. Attached adds some small granularity to evacuees:

(SBU) Evacuation Operations:

- (SBU) Nearly 1,000 people have expressed interest in USG-assistance to depart Wuhan, along with 15 third country nationals and 93 legal permanent residents. Post reports 790 potential evacuees, 675 of which are American citizens, with 210 still being reviewed for eligibility. **(Embassy Beijing)**
- (SBU) Several hundred personnel will depart under Mission China's Authorized Departure. Approximately 150 are ticketed so far for flights February 1-4. **(Embassy Beijing)**
- (SBU) Mission China and numerous Department offices are working to create and execute viable plans to extract private American citizens from Wuhan. **(Wuhan Evacuation Task Force)**

Note, specific demographics (sex, age, family, etc) are still not known but the RFI remains.

Below is from State's OPCENTER specific to WuFlu TF and is provided FYSA:

Subject: FW: Wuhan OD TF5: 1/31 GPA 0615 Read-Ahead: Level 4 Travel Advisory, Wuhan Evacuation Latest, AD, and U.S./Intl Narratives

Good morning from TF5 – The upgrade to Level 4 Advisory, the Wuhan Evacuation Plan, Mission China's Authorized Departure. Please check against final 0650 Sitrep. Kind regards, Tim Gowa – Wuhan Evacuation Task Force.

MOBILE JUMP: [Wuhan Evacuation Efforts & Media Reactions](#) | [International Reactions / Foreign Evacuations](#) | [Coronavirus in China](#) | [DOS H/Leg Update](#) | [Interagency Comms](#) (attached) | [Asia Pacific, Chinese and International Narratives](#) | [Messaging/Statement Snapshot](#)

- **Wuhan Evacuation Efforts:**

- • **Plane/Consular Demand:** The plan is still for four planes with 250 seats each. The four planes will first go to March Air Force Base and will then fly to four separate locations (TBD) in the United States. Consular Beijing said that, as of early this morning, they have been contacted by 880 American citizens, 15 third country nationals, and 88 LPRs. Chinese MFA and Hubei authorities provided verbal assurances to Mission China (as of 0620 ET) that there would not be objection to the charter evacuation.
- • **Relief Assistance/Posture:** MED has worked with the Church of Latter Day Saints, Samaritans' Purse, and Boeing to coordinate assistance, and will be able to fill the planes to capacity (104 pallets). MED has talked to Project Hope about facilitating the delivery with the Chinese Red Cross. Mission China, DOS and interagency will continue to discuss preferred posture/announcement on the flight, especially with assistance goods as significant positive point.

- **California March ARB Coverage:** Coverage continues of the unidentified evacuee who tried to flee the military base, but was “ordered to stay in quarantine until the entire incubation period or until otherwise cleared.” One NYT story cites the experience of two evacuees who describe their “good luck” at having been on the flight out of Wuhan, and express appreciation for the good treatment they are getting at March Air Reserve Base.
- **Media Reactions / Sampling of Domestic Headlines:** GPA R&A reports the Department’s Level 4 Travel Advisory upgrade tops press and online conversation along with yesterday’s WHO announcement and the news of additional evacuation flights. Some commentators suggest additional U.S. precautionary actions to come, such as the U.S. banning travelers and flights from China, amid widely-reported news of the first American human-to-human transmission. Stories on the U.S. evacuees include the report of an unidentified passenger who tried to flee and was ordered to stay in quarantine, as well as others who are thankful to be evacuated and appreciate the good treatment they are getting at the base. Commerce Sec Ross comments that Coronavirus will “accelerate” returning jobs to the United States garnered high-engagement, and Russian-language misinformation propagating negative narratives continue.

Sampling of Domestic Headlines, as of 5:53 AM ET:

- **WSJ:** U.S. Plans to Evacuate More Americans From Wuhan
 - Coronavirus Spurs Fresh Fears About Growth in Emerging Markets
- **Reuters:** U.S. warns citizens against travel to China
 - Travelers breach China virus lockdown by taking bridge over Yangtze
 - Pilots, flight attendants demand flights to China stop as virus fear mounts worldwide
- **AP:** US advises no travel to China, where virus deaths top 200
 - Tokyo Olympic organizers try to dampen cancellation rumors
- **FOX:** Trump says US working closely with China on coronavirus
- **CNN:** State Department elevates China travel advisory to 'Do Not Travel' due to coronavirus
 - CNN: No pillows, no hot meals: Airlines adopt preventative measures against the coronavirus
- **LATimes:** U.S. advises against travel to China amid virus fears
- **Bloomberg:**
- **NYT:** U.S. Issues 'Red Alert' After Week of Skyrocketing Coronavirus Cases
- **WaPo:** Coronavirus deaths surge as U.S. warns on China travel; Hong Kong shuts schools until March
- **POLITICO:** Trump sticks embattled health chief with coronavirus response
 - POLITICO: State Department urges against travel to China
 - POLITICO: Trump: Coronavirus will have ‘a very good ending for us’

▪ **Southern California: Quarantine Order Issued for Wuhan Passenger Who Tried Leaving Military Base**

• **International Reactions/Foreign Evacuations:**

- **JAPAN:** The Government of Japan has completed their third evacuation flight. Their chartered plane departed Wuhan at 1730hrs ET on Thursday, 1/30.
- **UK:** A plane carrying UK citizens departed the Chinese city of Wuhan just before 0200 GMT on Friday, the UK embassy in China said.
- **S KOREA:** A charter flight carrying 368 South Koreans from Wuhan arrived in Seoul on Friday as tensions simmered around quarantine centers where they will be isolated.

• • **Coronavirus – Overnight Developments:**

- • Traditional news media reports death toll of 170 worldwide (all in China), with 7,819 cases confirmed (7,711 (98.6%) in China). This represents a dramatic increase from yesterday's reporting of 6,061 cases and 132 deaths in China.
 - • On January 31 Ambassador Branstad and HHS Secretary Azar had a phone call to discuss the situation on the ground in China. Secretary Azar noted the importance of U.S. experts being part of a WHO response team to China but also emphasized the need for more information to be provided by the Chinese government, especially related to the incubation period of the virus and human-to-human transmission data and any evidence of asymptomatic transmission. The Ambassador reiterated his continued dedication to raising these issues at the highest levels of the Chinese government and his focus on protecting the health and safety of all Mission China staff and American citizens in China.
 - • CDC has confirmed the first U.S. human-to-human transmission, raising the total to six cases in the United States.
 - • The World Health Organization (WHO) declared the novel coronavirus outbreak a global public health emergency.
 - • A union representing 15,000 American Airlines pilots sued to halt American's U.S.-China service.
 - • There is an increase in false information being shared widely online, and it was reported that cybercriminals are using malicious software – posing as guidance and assistance to prevent coronavirus infections – to access and cause damage to computers and networks. Facebook and Twitter announced steps to stop the spread of coronavirus misinformation on their platforms. California state officials are warning residents about misinformation online.
- • **Post Impact:** Yesterday there were only 3 flights out of China daily direct to the U.S., so concerns regarding commercial availability and routing or impact of transit through third-country quarantine countries.
- • **Leg Update:** WH is arranging an interagency congressional call today (Friday 1/31) with the Hill. At request of Senate leadership, call was split to bicameral calls (13:00), with DOS-only calls with House/Senate Approps, SFRC, and HFAC. (GPA to join H pre-brief for latest messaging sync.)

- **China/AsiaPacific Media Narratives:** PA/IME reports that with yesterday's WHO designation, AsiaPac media further increases already relentless coverage and focuses on reporting from Philippines and India as latest countries confirming cases. Continued reporting on regional govt response/containment measures, and/or mitigate impacts from evacuation (e.g. In Japan, 3 more people — all of whom were among the 206 Japanese nationals evacuated to Japan on the government-chartered plane from Wuhan — tested positive, bringing the total number of confirmed cases in Japan to 14.) The virus is fueling anti-China sentiments in many Asian countries, with xenophobic statements frequently being expressed, and with several petitions to blanket ban all Chinese nationals. Economic reporting on the impact of the coronavirus continues, with Singapore and Thailand seen as likely to be hardest hit in the ASEAN region as they are most dependent on China's trade and tourism.

 - **Rise in Regional Anti-Chinese Sentiment:** Reporting also has focused on how the Wuhan coronavirus is not merely causing health concerns, but also raising social problems and fueling anti-Chinese sentiment in the region, including widespread social media harassment of ethnic Chinese people. East Asians beyond those of Chinese heritage are reporting a rise in discrimination, and stories focused on the Twitter hashtag #JeNeSuisPasUnVirus (#ImNotAVirus), which has trended in France by people living there of Asian descent. Media continues to report on the persistent spread of false information about the virus, prompting government officials including the Cambodian PM, to appeal to all media to join the effort to combat false virus narratives. On the virus' impact on economies, media are reporting that the economies of Singapore and Thailand will likely be hit hardest by the virus amongst ASEAN countries, as they are the most dependent on China's trade and tourism.
 - **In China:** People's Daily continued to call the epidemic a battlefield and noted that China will "resolutely win this hard battle." Xinhua and others report on the WHO announcement, but that China disfavors travel and trade restrictions. Articles quote WHO DG Tedros Ghebreyesus that he believes that China will effectively contain and eventually defeat the epidemic, adding that China's efforts to combat the disease deserve respect and appreciation, and are worth learning. Wu Zunyou, chief epidemiologist of the Chinese Center for Disease Control and Prevention, said that the PHEIC declaration is a standard practice. "China's current prevention and control measures are the strictest and very effective. We are confident that we can effectively contain the epidemic and finally overcome it," Wu said.
 - **Other International Narratives:** PA/IME reports European media outlets are seized with Brexit countdown today, but continue to report on the spread of the Coronavirus. Some Brussels-based outlets report on the W.H.O. "declaring Coronavirus a global health emergency," while others note the "tricky test for the almighty Communist regime," (France, Germany, UK) with President Xi "orchestrating himself as crisis manager in front of the cameras." Finally, commentators warn "world growth could suffer as well" as the global economy

“monitors China with concern.” (Poland, Austria, Germany) In Africa, coverage remains muted with most coverage from Nigeria (53%) and South Africa, and appears factual, with narratives focused on nationals “trapped” in Wuhan, health surveillance of Chinese travelers, and airlines cancellations.

- **Messaging/Statement Snapshot:**

- **WH** - Working closely with China and others on Coronavirus outbreak. Only 5 people in U.S., all in good recovery. [updated to 6 by CDC]
- **EAP/CA: Level 4** – “On January 30, the Department of State upgraded our Travel Advisory for China to Level 4: Do Not Travel, due to novel coronavirus first identified in Wuhan. The U.S. Department of State has no greater responsibility than the safety and security of U.S. citizens overseas. Due to increased risk from the spread of the Coronavirus along with the disruption caused by measures taken throughout China to contain the virus, we took the precaution of raising the travel advisory level. We encourage all travelers to read the entire Travel Advisory.”
- **CA: Second Evacuation Flight** – The Department of State is working with the U.S. Government interagency and PRC counterparts on staging additional flights for U.S. citizens to return to the United States from Wuhan. As space is available, seating will be offered to U.S. citizens on a reimbursable basis, to leave from Wuhan Tianhe International Airport to the United States.
- **S**: The Chinese Communist Party presents the central threat of our times...The Chinese Communist Party, under President Xi, has made clear that they have an agenda that is not always consistent with the very values...I have been speaking about
- **DOD, SecDef briefing 1/30**: “The department is providing housing support at March Air Reserve Base in California to assist Health and Human Services in caring for the nearly 200 State Department employees, dependents, and U.S. citizens evacuated from Wuhan, China. I want to thank our men and women for their rapid response and assistance in this important effort. DOD personnel are not in direct contact with the evacuees, nor will the evacuees have access to any other locations on-base outside of their assigned housing. The Department of Defense continues to work closely with our interagency partners as we monitor the situation and protect our service members and their families, which is my highest priority.”
- **OES/EAP** - NTR

- **CDC: First U.S. human-to-human transmission** – “Given what we’ve seen in China and other countries with the novel coronavirus, CDC experts have expected some person-to-person spread in the U.S. We understand that this may be concerning, but based on what we know now, we still believe the immediate risk to the American public is low.”
- **Additional Interagency of Note:** NSTR

V/r

Mike Sauer
U.S. Army Fellow to US Dept. Health and Human Services (HHS)
Immediate Office, Assistant Secretary for Preparedness and Response (ASPR)
Mobile: (b)(6)
Desk: (202) 730-8668
michael.sauer@hhs.gov
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From: White, John E <WhiteJE@state.gov>
Sent: Friday, January 31, 2020 8:27 AM
To: Sauer, Michael (OS/ASPR) <Michael.Sauer@hhs.gov>
Subject: FW: (SBU) TFCN01 - Wuhan Evacuation Task Force SitRep No. 12 0630ET

Respectfully,

John White, DHSc
Senior Medical Planning Fellow
U.S. Department of State, Bureau of Medical Services
Directorate of Operational Medicine
Phone: (703) 594-7211
Unclassified: WhiteJE@state.gov
Classified: WhiteJE@state.gov

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From: zTask Force 4 Mailbox <TaskForce4Mailbox@state.gov>
Sent: Friday, January 31, 2020 6:42 AM
Subject: (SBU) TFCN01 - Wuhan Evacuation Task Force SitRep No. 12 0630ET



United States Department of State

TFCN01 - Wuhan Evacuation Task Force

SITREP No. 12

January 31, 2020 0630 ET

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(SBU//FOUO)

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(U) Latest Update:

- (U) 9,658 cases and 213 deaths are confirmed in China. The global total of confirmed cases is 9,779. **(CNN, China National Health Commission)**
- (U) The State Department raised the Travel Advisory for all of China to Level 4. **(CA)**
- (U) CDC expanded screening to 20 U.S. ports of entry. **(CNN)**
- (U) A union representing 15,000 American Airlines pilots sued to halt American's U.S.-China service. **(CNN)**
- (U) Chicago health officials reported the first human-to-human coronavirus transmission in the United States. **(BBC)**

(SBU) Evacuation Operations:

- (SBU) Nearly 1,000 people have expressed interest in USG-assistance to depart Wuhan, along with 15 third country nationals and 93 legal permanent residents. Post reports 790 potential evacuees, 675 of which are American citizens, with 210 still being reviewed for eligibility. **(Embassy Beijing)**
- (SBU) Several hundred personnel will depart under Mission China's Authorized Departure. Approximately 150 are ticketed so far for flights February 1-4. **(Embassy Beijing)**
- (SBU) Mission China and numerous Department offices are working to create and execute viable plans to extract private American citizens from Wuhan. **(Wuhan Evacuation Task Force)**

(U) Response Efforts:

- (U) China will charter planes to repatriate Hubei residents living overseas. **(CNN)**
- (U) Trinidad and Tobago imposed a 14-day travel restriction on travelers from China effective immediately. **(CNN)**
- (U) Egypt's Ministry of Health will provide 2.5 million surgical masks and 430 temperature measurement devices to local hospitals. **(Rassd News Network)**
- (U) El Salvador suspended cultural events nationwide. **(El Salvador Ministry of Culture)**
- (U) Four Pakistani students in Wuhan tested positive. Five hundred Pakistani students study in Wuhan. **(Dawn)**
- (U) Brunei banned entry of Chinese nationals from Hubei province or any non-Bruneian citizens or residents who visited Hubei in the past 14 days. **(Bandar Seri Begawan 28)**
- (U) The Philippines banned entry of Chinese nationals from Hubei province. **(CNN Philippines)**
- (U) Macau will delay reopening schools. **(CNN)**
- (U) Hong Kong announced that schools will remain closed until March. **(South China Morning Post)**

- (U) Tesla announced that it will donate RMB 5 million (USD 720,500) to China CDC efforts. **(Embassy Beijing)**

(U) Third Country Evacuations and International Travel:

- (U) The first group of South Korean evacuees from Wuhan arrived in Seoul early January 31 on a government-chartered flight. The plane carried 368 of the roughly 720 South Koreans in Wuhan. **(Washington Post)**
- (U) The third Japanese government-charted flight from Wuhan arrived in Tokyo January 31 with 149 Japanese evacuees. **(Tokyo 128)**
- (U) A UK-chartered flight evacuated 20 Spanish nationals from Wuhan. **(Agencia EFE)**
- (U) A plane carrying UK nationals departed Wuhan January 30 at 2100 ET. **(Reuters)**
- (U) A French military aircraft evacuated 200 French citizens from Wuhan on January 31. **(CNN)**
- (U) Turkey will send a plane to airlift 34 nationals from Wuhan, as well as several Georgian, Azerbaijani, and Albanian nationals. **(Anadolu Agency)**
- (U) Canada is attempting to evacuate nearly 200 nationals from Wuhan; it remains unclear when the extraction will occur. **(CNN)**
- (U) India is planning to evacuate 400 citizens from Wuhan on January 31. **(Gulf Times, CNN)**
- (U) Italy and Pakistan suspended all flights to and from China. Royal Bruneian Airlines, Thai Lion Air, and Kenya Airways suspended all flights to and from China. EgyptAir will suspend all flights to China beginning February 1, Turkish Airlines suspended some flights to China until February 9, and Air Mauritius suspended flights to Shanghai. **(New York Times, Reuters, AP, Youm7, CNN, Bandar Seri Begawan 28, Embassy Beijing, Embassy Port Louis)**
- (U) Japan issued a travel advisory urging citizens to "avoid nonessential travel" to China and Seychelles banned its citizens from traveling to China. **(Mainichi, Seychelles News Agency)**
- (U) Singapore, Kyrgyzstan, and Mongolia will close their borders and all ports of entry to visitors from China. Mongolia's borders will be closed until March 2. **(Ulaanbaatar 60, Reuters, 24.kg, South China Morning Post)**
- (U) More than 3,000 tour groups from Hong Kong to mainland China have been cancelled. **(CNN)**

(U) Support for U.S. Citizens:

- (U) Consular Affairs cleared and posted a level 4 Travel Advisory warning U.S. citizens not to travel to China. **(CA)**

(SBU) Post Operations:

- (SBU) China's Diplomatic Services Bureau (DSB) which controls Mission LE Staff employment informed Consulate General Guangzhou that LE Staff should not report to work before February 10. Local Guard Force (LGF) are included in this restriction which could affect post's ability to remain open. Embassy Beijing will inform the DSB that emergency LE staff will continue to work. **(Guangzhou 54)**
- (SBU) At least three residential compounds housing Embassy personnel in Beijing have begun mandatory temperature checks for anyone entering the buildings. Embassy personnel living in Diplomatic Residence Compound facilities received a notice to fill out a health and travel survey. **(Embassy Beijing)**
- (SBU) All city pair flights from Guangzhou to the United States are sold out and most Fly America compliant flights are booked. **(Embassy Beijing)**

- (SBU) CG Guangzhou's Nurse Practitioner (NP) traveled with the Wuhan evacuees to the United States. PRC officials told him he is unable to return to Guangzhou given his travel to Wuhan. (**Embassy Beijing**)

(U) Global Coronavirus Developments:

- (U) Cases outside mainland China are confirmed in Japan (14), Thailand (14), Hong Kong (12), South Korea (11), Singapore (10), Australia (9), Taiwan (9), Malaysia (8), Macau (7), United States (6), France (5), Vietnam (5), Germany (5), United Arab Emirates (4), Canada (3), Italy (2), UK (2), Cambodia (1), Finland (1), India (1), Nepal (1), Philippines (1), and Sri Lanka (1). (**Johns Hopkins CSSE, CDC, CNN, Washington Post**)
- (U) Australia's Animal Health Lab aims to test a vaccine on humans within 16 weeks. (**Canberra 202**)

(U) Traditional and Social Media Developments:

- (U) CNN interviewed a U.S. citizen evacuee from Wuhan who shared images from the plane. There are reports that a U.S. evacuee has been placed under quarantine after attempting to prematurely leave the quarantine site. (**CNN, KFIAM**)
- (U) Chinese media report the Communist Party of China (CPC) and the Chinese people are fighting coronavirus and that they will "resolutely win this hard battle." (**Embassy Beijing**)
- (U) Facebook and Twitter announced steps to stop the spread of coronavirus misinformation on their platforms. California state official are warning residents about misinformation online. (**New York Times, CNN**)

Approved: AhmedNS

Please direct all questions to the Wuhan Evacuation Task Force at 202-485-1888 or taskforce4mailbox@state.gov

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Delivered Date:	2020/01/31 08:35:21

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Subject:	AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	TBC-
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenhithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

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	Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebbley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebbley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)
Participant Code: (b)(6)

Best,

Ryan Shellooe

(b)(6)

Recipient:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
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Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
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Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
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Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
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To:

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Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
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Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>;
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at 202-456-1059.

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)
Participant Code: (b)(6)

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>; Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=464729cc8a584516adbbbc50d76a94a8-Tignor, Bet>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>;
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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conradpa@niaid.nih.gov;
垩□滓垩勳↵麓稠卅伯涂垩勳↵麓漣禮义卉剔哟嘅[則問□校甜觚輒⊗匱跡咄□乃劓齡偉藁呖□乃悵坭些
簫伏↵參襖梁琴膈將藹捌恣窵□↵軫乏□秋U <Fauci, Anthony (NIH/NIID) [E]>;
垩□滓垩勳↵麓稠卅伯涂垩勳↵麓漣禮义卉剔哟嘅[則問□校甜觚輒⊗匱跡咄□乃劓齡偉藁呖□乃悵磚碼
悃↵嬪仔格栢因(名)匱棲桂崎蟾□佚蕙吒刮勝F <Redfield, Robert R. (CDC/OD)>;
垩□滓垩勳↵麓稠卅伯涂垩勳↵麓漣禮义卉剔哟嘅[則問□校甜觚輒⊗匱跡咄□乃劓齡偉藁呖□乃臙圉補
穢穀□劬膾簾插些格挂航↵纏□鐵鯉經卅T <Williams, Teresa (CDC/OD/OCS)>;
垩□滓垩勳↵麓稠卅伯涂垩勳↵麓漣禮义卉剔哟嘅[則問□校甜觚輒⊗匱跡咄□乃劓齡偉藁呖□乃栖曩莖
穢彪膾卍膾卍他格垩襖襖襖圉□稅觚齡佚B <Kadlec, Robert (OS/ASPR/IO)>;
垩□滓垩勳↵麓稠卅伯涂垩勳↵麓漣禮义卉剔哟嘅[則問□校甜觚輒⊗匱跡咄□乃劓齡偉藁呖□乃臙↵祉
鈺伏蔣佐簾恰垩膳筵客智↵秬□但窈窕刺蒔S <Ford-Barnes, Arwenthia (OS/ASPR/IO)>;
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<q>

Type: OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Recipient: Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>;

From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;

	Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, GI>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
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Williams, Teresa (CDC/OD/OCS) (b)(6)
 Redfield, Robert R. (CDC/OD) (b)(6)
 Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
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Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Pending notice from NSC with details

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebbley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebbley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
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To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS) (b)(6); Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>
Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenhitha (OS/ASPR/IO) <Arwenhitha.FordBarnes@hhs.gov>;
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Pending notice from NSC with details

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebbley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebbley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, GI>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Recipient:	
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;

	Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenhitha (OS/ASPR/IO) <Arwenhitha.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenhitha (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6) Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenhitha (OS/ASPR/IO) <Arwenhitha.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Subject:	AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	TBC-
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenhitha (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

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	Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebbley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebbley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)
Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>;
Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>;
Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>;
Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>;
Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>;
Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;
Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>;
Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>;
Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>;
Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>;
Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>;
Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

To:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
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Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group
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	Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shelloue with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In (b)(6)

Participant Code: (b)(6)

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;

Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>; Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=464729cc8a584516addbb50d76a94a8-Tignor, Bet>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>;

To:

	Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, GI>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Wednesday, February 5, 2020, from 4:00 – 4:45 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>;
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Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>;
Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>;
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?? <蜚菜口纒醢閑𪛗怱>;
conradpa@niaid.nih.gov;
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𦵏𠂔嬾仔窠陌因俗匳悽桂嬌𧯓口俠蓬吮刮腩F <Redfield, Robert R. (CDC/OD)>;
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	秘穀口 働膽簪補些格垚航 纒口 鐵鯨極出T <Williams, Teresa (CDC/OD/OCS)>; 垚口 滓垚動 丩 麓稠刊伯添垚動 丩 麓漣禮义 弄剔哟噉[則問口 校甜觚輒 ㊟ 廔跡叫口 乃 劍齡偉羣呖口 乃 栖翼登 秘慍膽佢 膺令 佢 格垚襖襖和 甌口 稅觚齡俠B <Kadlec, Robert (OS/ASPR/IO)>; 垚口 滓垚動 丩 麓稠刊伯添垚動 丩 麓漣禮义 弄剔哟噉[則問口 校甜觚輒 ㊟ 廔跡叫口 乃 劍齡偉羣呖口 乃 膺 ㄣ 祉 紆伏蔣佐 簾恰垚騰站答 ㄣ 秬口 但 窈窕刺藹S <Ford-Barnes, Arwenithia (OS/ASPR/IO)>; /o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar <숏난驕碧邗 ㄣ 峽>; <d>; <d>; <d>; <d>; <q>
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

	Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; <??>; ; ; ; ; ; ; ; d < >; <d>; <d>; </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bff69d52880932-Apple, Matt>; ; ; ; ; ; ; ?? <蜚藜口 纒醢閑 ㄣ 杭>; conradpa@niaid.nih.gov; 垚口 滓垚動 丩 麓稠刊伯添垚動 丩 麓漣禮义 弄剔哟噉[則問口 校甜觚輒 ㊟ 廔跡叫口 乃 劍齡偉羣呖口 乃 終垚些 箭伏 ㄣ 多 襖梁琴 膺蔣捷 恛恣案口 丩 軫乏口 軫U <Fauci, Anthony (NIH/NIAID) [E]>; 垚口 滓垚動 丩 麓稠刊伯添垚動 丩 麓漣禮义 弄剔哟噉[則問口 校甜觚輒 ㊟ 廔跡叫口 乃 劍齡偉羣呖口 乃 恃簪 佢 佢 ㄣ 煩仔 籍柏 佢 佢 廔棲桂 轉 ㄣ 快 蓬 ㄣ 刮 勝F <Redfield, Robert R. (CDC/OD)>; 垚口 滓垚動 丩 麓稠刊伯添垚動 丩 麓漣禮义 弄剔哟噉[則問口 校甜觚輒 ㊟ 廔跡叫口 乃 劍齡偉羣呖口 乃 膺 佢 補 秘穀口 働膽簪補些格垚航 纒口 鐵鯨極出T <Williams, Teresa (CDC/OD/OCS)>; 垚口 滓垚動 丩 麓稠刊伯添垚動 丩 麓漣禮义 弄剔哟噉[則問口 校甜觚輒 ㊟ 廔跡叫口 乃 劍齡偉羣呖口 乃 栖翼登 秘慍膽佢 膺令 佢 格垚襖襖和 甌口 稅觚齡俠B <Kadlec, Robert (OS/ASPR/IO)>; 垚口 滓垚動 丩 麓稠刊伯添垚動 丩 麓漣禮义 弄剔哟噉[則問口 校甜觚輒 ㊟ 廔跡叫口 乃 劍齡偉羣呖口 乃 膺 ㄣ 祉 紆伏蔣佐 簾恰垚騰站答 ㄣ 秬口 但 窈窕刺藹S <Ford-Barnes, Arwenithia (OS/ASPR/IO)>; /o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar <숏난驕碧邗 ㄣ 峽>;
Recipient:	

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From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites <ScheduleInvites@HHSgov.onmicrosoft.com>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS) (b)(6); Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>
Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;

	Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenhitha (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenhitha (OS/ASPR/IO) <Arwenhitha.FordBarnes@hhs.gov>;
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Williams, Teresa (CDC/OD/OCS) (b)(6)
 Redfield, Robert R. (CDC/OD) (b)(6)
 Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
 Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
 Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
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 Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>;
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Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
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Pending notice from NSC with details

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 Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
 (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>;
 Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group
 (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>;
 Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
 (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6) Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenhithia (OS/ASPR/IO) <Arwenhithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Subject:	AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	TBC-
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenhithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6)

	Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In (b)(6)
Participant Code (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>;
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(FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

To:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shelloue with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;

Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Wednesday, February 5, 2020, from 4:00 – 4:45 p.m. The requested participation is Task Force Member ONLY. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Pusan, Cesar (HHS/OS/IOS) <Cesar.Pusan@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>;
Recipient:	Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Pusan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Pusan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group

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Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
 Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
 Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
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 Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
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 Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
 Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>;
 Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>;
 Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>;
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 Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>;
 Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>;
 Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>;

To: Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>;
 AMA2 (OS/IOS) <AMA2@HHS.GOV>;
 Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>;
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Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
 Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
 Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
 Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
 Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
 Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
 Williams, Teresa (CDC/OD/OCS) (b)(6)
 Redfield, Robert R. (CDC/OD) (b)(6)
 Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
 Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
 Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
 Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>;
 Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>;
 Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>;
 Pusan, Cesar (HHS/OS/IOS) <Cesar.Pusan@hhs.gov>;
 Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>;
 Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>;
 Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>;

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 AMA2 (OS/IOS) <AMA2@HHS.GOV>;
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Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>;
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Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
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穢穀口飡膺簪插些格埕垲?繼口鐵鯁種卅T <Williams, Teresa (CDC/OD/OCS)>;
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穢邈膺仵膺令(垲)格埕襍裨柘匳口稅魴鈴佚B <Kadlec, Robert (OS/ASPR/IO)>;
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Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;

	Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, GI>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
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Williams, Teresa (CDC/OD/OCS) (b)(6)
 Redfield, Robert R. (CDC/OD) (b)(6)
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6) Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>
Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6) Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
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Subject:	AMA WH Task Force Meeting
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Pending notice from NSC with details

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 (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>;
 Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group
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From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS) (b)(6); Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>
Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenhitha (OS/ASPR/IO) <Arwenhitha.FordBarnes@hhs.gov>;
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Pending notice from NSC with details

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebbley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebbley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, GI>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Recipient:	
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;

	Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6) Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenhithia (OS/ASPR/IO) <Arwenhithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Subject:	AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	TBC-
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenhithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)
Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
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Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>;
Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>;
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(FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>;
Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group
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Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group
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Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
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Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
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Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>;
Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

To:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shelloue with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>;
Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>

From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS) (b)(6); Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenhithia (OS/ASPR/IO) <Arwenhithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Subject:	AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	TBC-
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenhithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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	Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)
Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

To:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
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Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>;
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	Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	TBC-
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenhithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6)

	Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)
Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>;
Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>;
Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>;
Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>;
Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group
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Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;
Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>;
Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>;
Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>;
Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>;
Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>;
Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

To:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
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Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
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Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
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	Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;

Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>; Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group

To:

	(FYDIBOHF23SPDLT)/cn=Recipients/cn=464729cc8a584516addbbc50d76a94a8-Tignor, Bet>; Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>;
Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>;
Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>;
Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>;
Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>;
Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>

Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>;
Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)

To: Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>;
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From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS) (b)(6); Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenhithia (OS/ASPR/IO) <Arwenhithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Subject:	AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	TBC-
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenhithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6)

	Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)
Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>;
Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

To:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
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	Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shelllooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;

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Subject: AMA WH Task Force Meeting

Type: OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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To: Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;

Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
 Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
 Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
 Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
 Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
 Williams, Teresa (CDC/OD/OCS) (b)(6)
 Redfield, Robert R. (CDC/OD) (b)(6)
 Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
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 Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
 Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>;
 Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>;
 Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>;
 Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>;
 Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>;
 Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>;
 Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>;
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Subject: AMA WH Task Force Meeting

Type: OLE.CLASS.{00061055-0000-0000-C000-000000000046}

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>; Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=464729cc8a584516adddbbc50d76a94a8-Tignor, Bet>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>
Recipient:	
To:	Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>;

From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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	Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, GI>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
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Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
 Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
 Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
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Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
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Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Recipient:

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
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 Redfield, Robert R. (CDC/OD) (b)(6)
 Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
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Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;

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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

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From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
To:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bffc69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>; Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=464729cc8a584516addbbc50d76a94a8-Tignor, Bet>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyle>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>
Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>; Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=464729cc8a584516adbbbc50d76a94a8-Tignor, Bet>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>
Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group

	(FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffa7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group
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	(FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code (b)(6)

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Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

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Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
 Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
 Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
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 Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
 Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
 Williams, Teresa (CDC/OD/OCS) (b)(6)
 Redfield, Robert R. (CDC/OD) (b)(6)
 Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>;
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
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Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	Schedule Invites; Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;

	Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
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Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebbley, Kyle (HHS/OS/OGA) <Kyle.Zebbley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebbley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebbley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
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Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

Recipient:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
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From:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
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Subject:	HOLD: AMA WH Task Force Meeting
Date:	2020/01/31 10:23:43
Start Date:	2020/02/03 16:00:00
End Date:	2020/02/03 17:00:00
Priority:	Normal
Type:	Appointment
Location:	WH Situation Room
Attendees:	AMA2 (OS/IOS); Apple, Matthew (HHS/IOS); Callaghan-Arguelles, Christine (HHS/IOS); Harrison, Brian (HHS/IOS); Mango, Paul (HHS/IOS); Puesan, Cesar (HHS/OS/IOS); Stecker, Judy (OS/IOS); Tignor, Beth (HHS/IOS); Conrad, Patricia (NIH/NIAID) [E]; Fauci, Anthony (NIH/NIAID) [E]; Robert R. Redfield (CDC/OD) (b)(6); Williams, Teresa (CDC/OD/OCS); Kadlec, Robert (OS/ASPR/IO) (Robert.Kadlec@hhs.gov); Ford-Barnes, Arwenhithia (OS/ASPR/IO); Cetron, Marty (CDC/DDID/NCEZID/DGMQ); Garrett Grigsby (HHS/OS/OGA) (Garrett.Grigsby@hhs.gov); Kyle Zebley (HHS/OS/OGA) (Kyle.Zebley@hhs.gov); Schmoyer, Michael (OS/ONS); Brian Stimson (HHS/OGC) (Brian.Stimson@hhs.gov); Kerr, Lawrence (HHS/OS/OGA)

Pending confirmation on time

Sender:	Secretary Scheduler (OS/IOS) </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=6801B3307D554C04B245714132602E16-SECRETARY S>
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; AMA2 (OS/IOS) <AMA2@HHS.GOV>; Apple, Matthew (HHS/IOS) <Matthew.Apple@hhs.gov>; Callaghan-Arguelles, Christine (HHS/IOS) <Christine.Callaghan-arguelles@hhs.gov>; Harrison, Brian (HHS/IOS) <Brian.Harrison@hhs.gov>; Mango, Paul (HHS/IOS) <Paul.Mango@hhs.gov>; Puesan, Cesar (HHS/OS/IOS) <Cesar.Puesan@hhs.gov>; Stecker, Judy (OS/IOS) <Judy.Stecker@hhs.gov>; Tignor, Beth (HHS/IOS) <Beth.Tignor@hhs.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Redfield, Robert R. (CDC/OD) (b)(6)

	Williams, Teresa (CDC/OD/OCS) (b)(6) Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Kerr, Lawrence (HHS/OS/OGA) <Lawrence.Kerr@hhs.gov>
Sent Date:	2020/01/31 10:23:43
To:	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Monday, February 3, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)
Participant Code: (b)(6)

Best,
Ryan Shellooe

(b)(6)

Recipient:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>;
Williams, Teresa (CDC/OD/OCS) (b)(6)
Redfield, Robert R. (CDC/OD) (b)(6)
Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>;
Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>;
Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>;
Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>;
Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>;
Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;
Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>;
Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>;
Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>;
Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>;
Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>;
Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group
(FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

To:

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>;
Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>;
Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>;
Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>;
Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6)
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Williams, Teresa (CDC/OD/OCS) (b)(6)
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Fauci, Anthony (NIH/NIAID) [E] <aafauci@niaid.nih.gov>;
Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>;
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	Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, G>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, K>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

(U//FOUO) There will be a **White House Task Force on Coronavirus UNCLASSIFIED CONFERENCE CALL TODAY, Tuesday, February 4, 2020, from 4:00 – 4:30 p.m.** The requested participation is **Task Force Member ONLY**. Please confirm receipt and contact Ryan Shellooe with any additional questions at (b)(6)

(b)(6)

In order to access the conference as a participant, dial the number below and enter the Participant Code:

Participant Dial-In: (b)(6)

Participant Code: (b)(6)

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>;
Recipient:	Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>;

Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>

Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6); Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6); Redfield, Robert R. (CDC/OD) (b)(6); Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>; Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group

	(FYDIBOHF23SPDLT)/cn=Recipients/cn=464729cc8a584516addbbc50d76a94a8-Tignor, Bet>; Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>
Subject:	AMA WH Task Force Meeting
Type:	OLE.CLASS.{00061055-0000-0000-C000-000000000046}

	Stimson, Brian (HHS/OGC) <Brian.Stimson@hhs.gov>; Schmoyer, Michael (OS/ONS) <Michael.Schmoyer@hhs.gov>; Zebley, Kyle (HHS/OS/OGA) <Kyle.Zebley@hhs.gov>; Grigsby, Garrett (HHS/OS/OGA) <Garrett.Grigsby@hhs.gov>; Cetron, Marty (CDC/DDID/NCEZID/DGMQ) (b)(6) Ford-Barnes, Arwenithia (OS/ASPR/IO) <Arwenithia.FordBarnes@hhs.gov>; Williams, Teresa (CDC/OD/OCS) (b)(6) Redfield, Robert R. (CDC/OD) (b)(6) Fauci, Anthony (NIH/NIAID) [E] <afauci@niaid.nih.gov>; Conrad, Patricia (NIH/NIAID) [E] <conradpa@niaid.nih.gov>; Schedule Invites <ScheduleInvites@HHS.GOV.onmicrosoft.com>; Secretary Scheduler (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=6801b3307d554c04b245714132602e16-Secretary S>; Schedule Invites </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4b504b1fa9a54e23a6715f12527df953-2c6c55e0-e4>; Conrad, Patricia (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=3793ae43a1744d8f8aa56b600c0c975b-patricia.co>; Fauci, Anthony (NIH/NIAID) [E] </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=826965b24a314ffca7eddc6e8229aa7-anthony.fau>; Redfield, Robert R. (CDC/OD) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=9ab74a26317547b8a754285d9eaa847c-robert.redf>; Williams, Teresa (CDC/OD/OCS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d75dfdae7a1c43dabdf96bad6f8b33cf-Williams, T>; Kadlec, Robert (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=a182eda693d040d3832bae6efcf7a255-Kadlec, Rob>; Ford-Barnes, Arwenithia (OS/ASPR/IO) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d533abc24cbe44b79f6fddc6b08737a6-Ford-Barnes>; Recipient: Cetron, Marty (CDC/DDID/NCEZID/DGMQ) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=5422d8cda52140b7bda64b67419f9bd2-Cetron, Mar>; Grigsby, Garrett (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=7cd78b4810d44b17b8711aaede9a9023-Grigsby, Gl>; Zebley, Kyle (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b81a0e4749994f969ff1063b9a3a0b1f-Zebley, Kyl>; Schmoyer, Michael (OS/ONS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=user57698e56>; Stimson, Brian (HHS/OGC) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=338aa495176d4c92bb314f8f3f51d118-Stimson, Br>; AMA2 (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=c145629cc8ac4858bf1f0ce5dd0461dc-AMA2!>; Apple, Matthew (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=b2d31099399446eab9bfff69d52880932-Apple, Matt>; Callaghan-Arguelles, Christine (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=4bbf06e781f3484298bb58527900feac-Callaghan-A>; Harrison, Brian (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=d145efc9c35c4865aca6e9d47786b204-Harrison, B>; Mango, Paul (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1d8863b643654b1aad9a38c952af613e-Mango, Paul>; Puesan, Cesar (HHS/OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=1704b662180d4631b7b64cb17de301cd-Puesan Juar>; Stecker, Judy (OS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0280b227911b40b6b30a81b8574ede6b-Stecker, Ju>; Tignor, Beth (HHS/IOS) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=464729cc8a584516addbbc50d76a94a8-Tignor, Bet>; Kerr, Lawrence (HHS/OS/OGA) </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=8ce9de2e7497472bb758f8fd6e262c86-Kerr, Lawre>
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