

June 1, 2020

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

EXECUTIVE SUMMARY

**LETTER TO ALL COUNTY WELFARE DIRECTORS AND FEDERALLY
RECOGNIZED TRIBAL GOVERNMENTS**

This letter provides information and guidance regarding the Project Roomkey initiative. It outlines the program's purpose, goals, recommended priority populations, and resources that can be used to operationalize emergency non-congregate shelter (e.g., hotels/motels and trailers) for people experiencing homelessness during the statewide outbreak of COVID-19. This letter also outlines guidance related to FEMA reimbursement and tracking as well as program reporting requirements.



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GAVIN NEWSOM
GOVERNOR

June 1, 2020

LETTER TO ALL COUNTY WELFARE DIRECTORS AND FEDERALLY RECOGNIZED TRIBAL GOVERNMENTS

TO: ALL COUNTY WELFARE DIRECTORS AND ALL TRIBAL ADMINISTRATORS

FROM: JENNIFER HERNANDEZ, DEPUTY DIRECTOR
FAMILY ENGAGEMENT AND EMPOWERMENT DIVISION

SUBJECT: **PROJECT ROOMKEY INITIATIVE**

REFERENCE: [ALL COUNTY WELFARE DIRECTORS LETTER \(ACWDL\) DATED MARCH 13, 2020; ACWDL DATED MARCH 19, 2020; AND ACWDL DATED MARCH 31, 2020; SENATE BILL \(SB\) 89; EXECUTIVE ORDER N-32-20; WELFARE AND INSTITUTIONS CODE \(WIC\) SECTION 8255](#)

The purpose of this Letter to All County Welfare Directors and Federally Recognized Tribal Governments is to provide information and guidance regarding the Project Roomkey initiative. This letter outlines the program's purpose and goals, recommended priority populations, and the resources that can be used to operationalize emergency non-congregate shelter (e.g., hotel/motels and trailers) as part of a community's emergency response to COVID-19. This letter also outlines the California Department of Social Services' (CDSS) understanding of Federal Emergency Management Agency (FEMA) reimbursement and tracking as well as program reporting requirements.

The information outlined in this letter is consistent with the most recent and updated information and guidance from the Centers for Disease Control (CDC) and California Department of Public Health (CDPH) at the time of the letter release. Homeless assistance providers should continue to check for updated and emerging guidance as public health, emergency response, and homeless response systems continue to learn about this virus.

Background/Summary

After proclaiming a state of emergency on March 4, 2020, Governor Newsom signed Executive Order N-25-20 on March 12, 2020. Identifying the immediate need to secure numerous facilities in order to isolate and treat individuals exposed to COVID-19, and the increased demands and strain on existing homeless shelters and resources, the Governor ordered the California Health and Human Services Agency and Office of Emergency Services to identify and make available hotels and other similar facilities to be used as temporary residences for quarantining and treating individuals who have tested positive for or have a high-risk exposure to COVID-19.

[Senate Bill \(SB\) 89](#) (Chapter 2, Statutes of 2020), [Section 36](#), augmented the 2019 Budget Act, making \$150 million in state general fund available to support state and local governments (including counties and tribes), and protect the health and safety of people experiencing homelessness in response to COVID 19. This was followed on March 18, 2020 by [Executive Order N-32-20](#), which provided local governments with additional flexibilities to expand emergency shelter and isolation capacity for people experiencing homelessness in California during the COVID-19 epidemic.

[Actions](#) of the state's COVID-19 emergency response effort aimed specifically at addressing the needs of people experiencing homelessness include: emergency funding to local governments and tribes, flexibility in the use of existing homeless response funding, public health guidance for homeless assistance providers, and hotel/motel occupancy agreements and trailers that provide immediate isolation housing for the most vulnerable.

Purpose and Goal of Project Roomkey

People experiencing homelessness who are living on the streets and those living in large congregate shelter settings are particularly susceptible to COVID-19. Lack of access to sanitation, isolation and quarantine, and health care is compounded by increased risk of exposure and subsequent severe health impacts due the prevalence of comorbidities amongst people experiencing homelessness. According to the [CDC](#), people age 65 and older and those with underlying health conditions are particularly susceptible to serious health impacts as a result of the virus, including death. Additionally, people who lack stable housing are more likely to use the emergency department of a hospital. Patients who are experiencing homelessness are admitted to inpatient units five times more often and on average, stay longer than people not experiencing homelessness.

The purpose of Project Roomkey is to provide non-congregate shelter options for people experiencing homelessness, protect human life, and minimize strain on health care system capacity. Project Roomkey gives people who are experiencing homelessness and are recovering from COVID-19 or have been exposed to COVID-19 a place to recuperate and properly quarantine outside of a hospital. It also provides a

safe place for isolation for people who are experiencing homelessness and at high risk for medical complications were they to become infected. The goal of Project Roomkey is to quickly identify prioritized populations and immediately move people into non-congregate shelter placements, such as hotels, motels, or self-contained trailers.

CDSS is working in partnership with the California State Department of General Services (DGS), the California Business, Consumer Services, and Housing (BCSH) Agency, and the California Office of Emergency Services (Cal OES) in supporting communities' implementation of local Project Roomkey initiatives.

One critical component of Project Roomkey is FEMA's reimbursement of costs related to hotel/motel occupancy agreements, trailers, and various support service costs associated with this emergency non-congregate sheltering. This means communities have an opportunity to leverage a significant amount of federal funding in their work to provide emergency non-congregate shelter through this emergency response.

State Investments to Support Project Roomkey

The State of California has made significant investments to support a community-wide response to end homelessness in recent years. As outlined above, an additional \$150 million was invested to support emergency response efforts for individuals experiencing homelessness. This includes [\\$100 million](#) administered by the Housing, Coordinating and Financing Council to provide funding to local governments including large cities, counties, and Continuums of Care (CoC), and [\\$50 million](#) administered by CDSS to support the use of hotel/motel occupancy agreements, trailers, and core operating support services associated with emergency non-congregate shelter placements.

CDSS provided funding to counties and tribes that identified a need for funds in order to meet the goals of Project Roomkey. The funds awarded by CDSS must be used to support people experiencing homelessness in this emergency response effort and in a manner consistent with Housing First, as specified in Welfare and Institutions Code section [8255](#). These monies may be used to support costs associated with hotel/motel occupancy agreements and core operating services including general non-congregate shelter oversight staff and management, food, security, janitorial, laundry, and other items needed to support non-congregate shelter operations for the eligible populations. Refer to the attachment for additional information on how to request funds from CDSS and the funding methodology.

Eligibility and Prioritized Populations

Consistent with [CDPH](#) and [CDC](#) guidance and FEMA non-congregate shelter reimbursement eligibility criteria, it is recommended that people experiencing homelessness who are COVID positive, have been exposed or are symptomatic or who are asymptomatic but at [high-risk](#) be prioritized for emergency non-congregate shelter as a social distancing measure. Specifically, individual living arrangements

such as private rooms at hotels and motels, with bathrooms that are private and not shared with other people, are recommended for these populations. Refer to the attachment for additional information on eligibility and prioritization.

Congregate care is not recommended at this time for these vulnerable populations. Communities should reference the Housing Coordinating and Financing Council [risk reduction guidelines and recommended practices](#) for recommendations on how to serve individuals in shelters who do not fall into the prioritized categories outlined above. Refer to instruction provided by [CDC](#) for additional guidance on appropriate prevention measures for those remaining unsheltered.

Trailers

California distributed 1,305 trailers throughout the state as one [component](#) of the emergency response efforts to protect people experiencing homelessness, as outlined above. Communities that received trailers are expected to use the trailers in coordination with local Project Roomkey initiatives, specifically, housing people experiencing homelessness within the priority populations outlined above. Refer to the attachment for additional information on the expected use and tracking of FEMA reimbursement associated with the trailers provided by the state.

FEMA Reimbursement

The majority of Project Roomkey expenditures are expected to be federally reimbursable under FEMA, for hotel/motel room occupancy agreements, trailers and necessary core operating services for FEMA-prioritized eligible populations, at a 75 percent federal share of cost. Costs associated with providing non-congregate shelter and wrap around supports for individuals who have tested positive, are exposed or who are asymptomatic but high risk for severe health impact are eligible for FEMA reimbursement. Some individuals may not qualify for FEMA reimbursement based on the eligibility criteria established by local program design and locally established eligibility criteria. The state funds authorized by the CDSS may be used to support individuals experiencing homelessness, regardless of the individuals FEMA reimbursement eligibility; however, programs are encouraged to maximize FEMA reimbursement to the maximum extent possible. Further, the non-congregate shelter FEMA reimbursement approval is not limited to individuals experiencing homelessness.

Refer to the [FEMA approval letters](#) and attachment for additional information regarding eligible FEMA reimbursable uses, including eligible populations.

Tracking and Reporting

As a component of the state emergency response to COVID 19, counties and tribes are asked to report Project Roomkey data regularly to CDSS through an on-line data portal. Please see the attachment for specifics regarding reporting requirements.

Collaboration and Coordination

Local governments are strongly encouraged to work with their fiscal counterparts and applicable partners, including cities, housing and public health agencies, homeless CoCs, behavioral health, and emergency response, to identify and understand how best to use all available local, state, and federal funding to secure hotel/motel rooms and provide the necessary core operating services needed for immediate non-congregate shelter protection. CDSS is available to provide regular and intensive technical assistance, in coordination with applicable state and local partners, to support the local implementation efforts. Refer to the attachment for more information about Project Roomkey recommended strategies.

If you have any questions or need additional guidance regarding the information in this letter, please contact the CDSS Housing and Homelessness Branch at housing@dss.ca.gov.

Project Roomkey Recommended Planning, Implementation, and Operation Strategies

The purpose of Project Roomkey is to provide non-congregate shelter options such as hotels, motels or self-contained trailers for people experiencing homelessness, with the goal of protecting human life and minimizing the strain on health care system capacity during the COVID-19 pandemic.

Funding

CDSS provided funding to counties and tribes to support the use of hotel/motel occupancy agreements, trailers, and core operating support services associated with emergency non-congregate shelter placements.

Funding was awarded to communities based on their identified funding gaps and need, as established by the 2019 annual Point in Time (PIT) count. Communities were also eligible for funds on a competitive basis if they demonstrated the following: full utilization of other state and local funding streams available for emergency response efforts, the ability to implement a program quickly and effectively, and an approach that is consistent with state recommended practices and guidance. Note: tribes and smaller, rural counties were considered for a base allocation starting at \$50,000.

Eligibility and Prioritization

CDSS recommends Project Roomkey emergency non-congregate shelter sites be available for people experiencing homelessness and in need of space to isolate, quarantine or practice safe social distancing. CDSS acknowledges that rooms provided through local Project Roomkey initiatives may be limited depending on local capacity. CDSS recommends prioritizing this extremely scarce resource in a manner consistent with state and federal public health guidance, and FEMA reimbursement eligibility criteria, for people experiencing homelessness as follows:

- 1) Individuals who test positive for COVID-19 that do not require hospitalization, but need isolation or quarantine (including those exiting from hospitals);
- 2) Individuals who have been exposed to COVID-19 (as documented by a state or local public health official, or medical health professional) that do not require hospitalization, but need isolation or quarantine; and
- 3) Individuals who are asymptomatic, but are at “high-risk,” such as people over 65 or who have certain underlying health conditions (such as respiratory issues, compromised immunities, chronic disease, etc.), as defined by the CDC.

The CDC defines people of all ages with underlying medical conditions, particularly if not well controlled, as [high-risk](#). These conditions include, but are not limited to, people with chronic lung disease or moderate to severe asthma, people who have serious heart conditions, are immunocompromised, severely obese, have diabetes, or are being treated for cancer.

CDSS Technical Assistance

CDSS is available to support local communities to operationalize local Project Roomkey sites. CDSS is available to provide regular and intensive technical assistance, in coordination with applicable state and local partners, to support the local implementation efforts. This includes support in the establishment of occupancy agreements with hotels and motels, provision of core operating services, and wrap around support and case management services, such as health and behavioral health through local county or tribal health agencies. Examples of available CDSS technical assistance include:

- providing regular updates on emerging guidance and trainings for operation of non-congregate shelter;
- providing template occupancy agreements developed by the DGS, which incorporate language required to seek FEMA requirements, and facilitating DGS support for local contracting;
- providing state negotiated master service agreements that local communities can leverage for security, food, and medical staffing options;
- offering guidance on available behavioral and medical sources via the DHCS;
- offering statewide weekly office hours calls and facilitating statewide peer sharing, including examples, emerging state and federal resources, and local practices;
- providing template documents to support program enrollment and record-keeping;
- facilitation between community partners and other state agencies such as CalOES, BCSH, and DGS;
- coordination of local agencies within each community, including cities, counties, tribes, CoCs, emergency offices, etc.;
- strategizing on the use of available funding sources for both emergency response efforts and long-term permanent housing transition planning; and
- consultation regarding onsite operations, resource requests, and fiscal matters.

Please see the [CDSS Housing and Homelessness Program website](#) for additional resource tools and trainings.

Coordination and Strategic Approaches

Close coordination with local partners, including cities, housing, health and public health agencies, homeless CoCs, behavioral health departments, emergency response, nonprofit or community-based organizations, and other county and tribal departments is critical to the success of this emergency response effort. In coordination with local agencies, Project Roomkey providers should address the following:

- 1) **Anticipate the number of people in need of emergency non-congregate shelter protection within the priority populations above and [determine how best](#)**

to triage individuals with consideration of non-congregate shelter availability and the larger homelessness response system.

The evaluation of need will differ based on each community's current system design and response. Communities should identify the need for non-congregate shelter by evaluating the potential community-wide population of people experiencing homelessness who are high-risk based on available and incoming homeless response data. This may include: the PIT count, data available within the Homeless Management Information System (HMIS), Coordinated Entry System, hotline referrals, outreach worker referrals, shelters, health clinics, and hospitals. For example, communities may estimate the number of hotel/motel rooms that may be necessary for high-risk people by evaluating the number of people in their local HMIS who are over 65 or have a chronic health condition.

2) Identify appropriate locations and properties to meet non-congregate shelter needs and execute occupancy agreements with property owners.

Occupancy agreements with hotel/motel property owners will be negotiated locally and can be customized to local needs and preferences of the property owner. These agreements may include entire properties, room blocks, or rooms as needed and as determined by local need and flexibility of property owners. Occupancy agreements may allow owners to continue to provide all, some, or none of the on-site operations, such as food, laundry, security, etc., as determined by local need and flexibility and ability of property owners.

CDSS can connect local leads to the DGS to assist with the execution of occupancy agreements as requested and needed by local communities. In addition, CDSS can provide occupancy agreement templates created by DGS and can help local governments identify properties and negotiate the terms of these agreements.

3) Identify and operationalize core operating services.

CDSS strongly recommends that local communities ensure adequate wraparound supports are in place to ensure safe and efficient shelter operations at Project Roomkey sites. For programs utilizing state-funded housing program funds, these core operating services and supports shall be provided in a manner consistent with a [Housing First approach](#). Programs should ensure access and functional needs are accommodated as people are provided emergency housing in non-congregate shelter, including providing accessible rooms and other reasonable accommodations for people with disabilities, providing appropriate translation and interpretation services for people with limited English proficiency, and supporting other needs that can be provided onsite.

CDSS strongly encourages that shelter oversight management staff be experienced or receive training on evidence-based practices consistent with existing homelessness response and service delivery models in other shelters or housing programs, including harm reduction and trauma informed care. The American Red Cross also developed

this [Non-Congregate Shelter Training](#) for Project Roomkey, which details how to effectively open, operate, and close non-congregate shelters for those who are experiencing homelessness during COVID-19. Additionally, the American Indian Commission of Washington State and Makah and Quinault Nation created a webinar for [Setting up a Community isolation Facility on Tribal Lands](#). Core operating services may include, but are not limited to, the following:

- onsite oversight of shelter operations,
- security,
- nutritious food (at least 3 meals a day),
- laundry, cleaning and sanitation, and
- other critical supportive services (e.g., linkages to medical and behavioral health inclusive of telehealth).

The procurement and contracting of appropriate services and service providers will be executed locally. CDSS can support communities procuring core operating services by providing statewide contracts that may be leveraged by local Project Roomkey initiatives. These include state-contracted options for security, food, and medical staffing, which are available upon request.

Local strategies may also include utilizing economically displaced workers to provide onsite services (e.g., laid off homeless shelter/response staff for non-congregate shelter operations oversight and training, and closed restaurants/staff for food support). For the contact information for your local Employment Development Department and/or workforce development board, contact CDSS as Housing@dss.ca.gov.

Trailers

Communities in receipt of trailers through the state are expected to use the trailers consistent with serving the priority populations outlined in the letter. CDSS will be seeking eligible reimbursements related to the cost of the purchase and delivery of trailers. CDSS will require that communities in receipt of trailers screen, track, and document eligibility and use of trailers as non-congregate shelter, consistent with FEMA reimbursement tracking requirements. The required documentation includes, but may not be limited to, the determination of eligibility for each individual (including medical or other supporting documentation of COVID status/high risk), as well as documentation on total time enrolled in Project Roomkey program, in the unit, services provided and their costs. This information will need to be provided to CDSS upon request in coordination with CalOES and FEMA reimbursement activities.

Separately, local communities in receipt of trailers are strongly encouraged to seek reimbursement for eligible wrap around support necessary for operating the trailers. In this case, local communities will be responsible for tracking and requesting reimbursement of the wrap around costs associated with providing non-congregate shelter via these trailers, such as space rental fees and other core operating support service costs, such as food and security, etc.

CDSS expects these trailers to be used in coordination with the local homeless response system and used for temporary or permanent housing, consistent with the needs identified by the local government throughout the emergency response efforts and beyond the conclusion of the emergency response effort, as appropriate. Once communities are no longer needing to use trailers for emergency response, they may be used as temporary/interim shelter options for people and families served through other CDSS-funded programs or as other emergency housing options for people served through the homeless response system. The trailers could also be used to increase the permanent housing solutions available in that community and placed at permanent sites, such as mobile home parks with permanent utility hooks up available, or to support permanent housing options. The CDSS Housing and Homelessness Branch will be working with communities to strategize on the recommended use for trailers at the conclusion of this emergency response and in support of local communities' needs and preferences.

Tracking and Reporting to CDSS

CDSS has created a web-based data portal for Project Roomkey. This system is mobile-friendly, retains historic data, and allows for day-to-day review. Counties, cities, or tribes who are participating in Project Roomkey are asked to complete daily reports in this portal, with updates due at 1 p.m. every day. Each county or tribe must assign a primary and secondary data administrator to be granted access to the portal and reporting capability. The daily reports must include updates on both hotel/motels and trailers if applicable.

For hotels/motels the portal collects:

- 1) information on all hotels and motels available to-date with occupancy agreements or alternative arrangements with the county or tribe for purposes of Project Roomkey;
- 2) the population being sheltered (i.e., COVID-19 positive, exposed to COVID-19, asymptomatic but "high risk");
- 3) the number of rooms committed or reserved at the hotel/motel;
- 4) the number of rooms occupied by Project Roomkey clients; and
- 5) whether or not there is a formal agreement executed with the hotel/motel.

For trailers, the portal collects:

- 1) information on trailer sites hosting Project Roomkey trailers;
- 2) total number of trailers available at the site;
- 3) total number of trailers reserved for target populations;
- 4) total number of trailers with occupants;
- 5) determination of move-in ready status; and
- 6) certification of adequate data tracking for purposes of FEMA reimbursement of trailer use.

CDSS requests daily updates to identify the total point-in-time count of rooms or trailers committed and occupied for that day.

CDSS continues to update the capabilities of the Project Roomkey portal including additional reporting features allowing communities to assess change and occupancy trends over time. This resource is used to further inform technical assistance and track statewide progress. Questions regarding data tracking should be directed to the CDSS Housing and Homelessness Branch at housing@dss.ca.gov.

Other Funding Sources

A broad range of local, state, and federal funds should be considered for supporting the entry into, participation in, and transitions beyond, Project Roomkey. To further maximize the continued stability and long-term housing of people in Project Roomkey, communities should consider additional program and services, including: Youth Homelessness Demonstration Program, CARES Act funding including Emergency Services Grants and Community Development Block Grants, HOME Tenant Based Rental Assistance, Housing Opportunities for Persons with AIDs (HOPWA), Public Housing, Housing Choice Vouchers, HUD-Veterans Affairs Supportive Housing (VASH), Supportive Services for Veterans Families (SSVF), funds administered through HUD's Office of Native American Programs for Tribal Areas, California's Homeless Housing, Assistance and Prevention funding, Housing Support Program, Housing and Disability Advocacy Program, Bringing Families Home and more. For more information, see the "[Funding Considerations](#)" area of the Project Roomkey Webpage.

Federal Emergency Management Agency (FEMA) Reimbursement for Non-Congregate Shelter

On March 27, 2020, FEMA [approved](#) the state's request for federal reimbursement for non-congregate sheltering in response to COVID-19. In a follow-up letter dated April 2, 2020, FEMA clarified that [local governments](#) were approved as part of the approval to the state, consistent with the eligibilities and tracking requirements. The approval letter describes eligible FEMA reimbursable uses, including eligible populations, and should further equip communities in evaluating local funds available for this response. Refer to the [CDSS FEMA Guidance webpage](#) for more information on FEMA non-congregate shelter and Project Roomkey including the approved extension provided on April 29, 2020.

Local governments are strongly encouraged to follow [FEMA guidance](#) for procurement, documentation, expenditures, and requests for federal reimbursement related to this effort. It is key that agencies operating Project Roomkey programs closely track FEMA-eligible expenses related to the non-congregate sheltering of each individual (separate from congregate sheltering) to ensure eligible reimbursement.

Tracking for Reimbursement

Uniform tracking of eligibility and use of non-congregate shelter and service provisions are critical components of the FEMA reimbursement process. Local communities, in partnership with their local emergency response system, will be responsible for maintaining adequate documentation to confirm eligibility for FEMA reimbursable costs associated with Project Roomkey non-congregate shelter hotel/motel or trailer options. Counties and tribes must also track subsequent enrollment and program data for FEMA-eligible participants once enrolled. Local governments will be required to seek reimbursement from FEMA through the existing emergency response system.

Eligibility

As outlined in the FEMA approval letter, FEMA will reimburse for costs incurred for individuals who:

- 1) test positive for COVID-19 that do not require hospitalization, but need isolation or quarantine (including those exiting from hospitals);
- 2) have been exposed to COVID-19 (as documented by a state or local public health official, or medical health professional) that do not require hospitalization, but need isolation or quarantine; and
- 3) are asymptomatic, but are at "high-risk," such as people over 65 or who have certain underlying health conditions (such as respiratory issues, compromised immunities, chronic disease, etc.) as defined by the CDC.

While FEMA does not have a written policy on documenting the high-risk category for FEMA reimbursement, a medical record may serve as documentation, should it be available. If a client identifies as over 65 years old or is [high risk](#), and medical

verification is not available, it is recommended that the individual completes a self-certification. In order to determine if an individual has an underlying health condition, it is recommended that an intake worker share the list of conditions identified as increasing risk for complications and if the individual asserts that they have one or more of the conditions, the intake worker should collect a self-certification. Any collection or handling of information with regard to the health status of individuals should seek to protect individual's vulnerable information and must comply with applicable privacy laws. Counties and tribes are not encouraged to make enrollment contingent on medical documentation at the time of intake due to the urgency of isolation.

Resource Tools

CDSS has created training and sample resources that may be used by local communities to [screen, document and track eligibility for non-congregate shelter reimbursement](#). Refer to the [Housing Webpage](#) under "Project Roomkey Key Guidance and Funding Considerations" for more information. Refer to the attachment for additional eligibility, tracking and documentation requirements.

To support tracking and data collection, the state, in partnership with HUD, also developed a recommended list of elements to be included in the Homeless Management Information System (HMIS) for tracking of non-congregate shelter. When available, CDSS recommends using HMIS as the engine for collecting critical data that will be necessary for requesting FEMA reimbursement of non-congregate shelter costs related to Project Roomkey, as specified in the [approval letter](#). The required documentation includes, but may not be limited to, the determination of eligibility for each individual (including medical or other supporting documentation of COVID-19 or high-risk status) as well as documentation on total time enrolled in Project Roomkey program, total number of days in the unit (hotel/motel/trailer), services provided and all costs. For additional information on suggested structure and fields for the HMIS Non Congregate Shelter workflow, refer to the [Working HMIS NCS Project Information](#) and [Working HMIS NCS Recommended Workflow](#) resources provided by HUD and state entities jointly.

Questions regarding FEMA eligible expenses for emergency non-congregate shelter reimbursement and questions related to recovery of public assistance should be directed to DisasterRecovery@CalOES.ca.gov. Questions regarding FEMA reimbursement and CalOES recovery regarding procurements and contracting should be addressed to PAProcurement@CalOES.ca.gov.