



FILED
INDEX DEPARTMENT

MAR 21 2020

IN THE OFFICE OF
SECRETARY OF STATE

SPRINGFIELD, ILLINOIS

Gubernatorial Disaster Proclamation

WHEREAS, since early March 2020, Illinois has faced a pandemic that has caused extraordinary sickness and loss of life, infecting over 215,000 and growing, and taking the lives of thousands of residents; and,

WHEREAS, at all times but especially during a public health crisis, protecting the health and safety of Illinoisans is among the most important functions of State government; and,

WHEREAS, it is critical that Illinoisans who become sick are able to be treated by medical professionals, including when a hospital bed, emergency room bed, or ventilator is needed; and,

WHEREAS, it is also critical that the State's health care and first responder workforce has adequate personal protective equipment (PPE) to safely treat patients, respond to public health disasters, and prevent the spread of communicable diseases; and,

WHEREAS, as Illinois adapts and responds to the public health disaster caused by Coronavirus Disease 2019 (COVID-19), a novel severe acute respiratory illness that spreads rapidly through respiratory transmissions and that continues to be without an effective treatment or vaccine, the burden on residents, healthcare providers, first responders, and governments throughout the State is unprecedented; and,

WHEREAS, the World Health Organization declared COVID-19 a Public Health Emergency of International Concern on January 30, 2020, and the United States Secretary of Health and Human Services declared that COVID-19 presents a public health emergency on January 27, 2020; and,

WHEREAS, on March 11, 2020, the World Health Organization characterized the COVID-19 outbreak as a pandemic, and has now reported more than 22.5 million confirmed cases of COVID-19 and 785,000 deaths attributable to COVID-19 globally; and,

WHEREAS, despite efforts to contain COVID-19, the World Health Organization and the federal Centers for Disease Control and Prevention (CDC) indicated that the virus was expected to continue spreading and it has, in fact, continued to spread rapidly, resulting in the need for federal and State governments to take significant steps; and,

WHEREAS, on March 9, 2020, I, JB Pritzker, Governor of Illinois, declared all counties in the State of Illinois as a disaster area in response to the outbreak of COVID-19; and,

WHEREAS, on March 13, 2020, the President declared a nationwide emergency pursuant to Section 501(b) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121-5207 (the "Stafford Act"), covering all states and territories, including Illinois; and,

WHEREAS, on March 26, 2020, the President declared a major disaster in Illinois pursuant to Section 401 of the Stafford Act; and,

WHEREAS, on April 1, 2020, due to the exponential spread of COVID-19 in Illinois, I declared all counties in the State of Illinois as a disaster area; and,

WHEREAS, on April 30, 2020, due to the continued spread of COVID-19 in Illinois, the threatened shortages of hospital beds, ER beds, and ventilators, and the inadequate testing capacity, I declared all counties in the State of Illinois as a disaster area; and,

WHEREAS, on May 29, 2020, due to the continued spread of COVID-19 in Illinois, and the resulting health and economic impacts of the virus, and the need to increase testing capacity, I declared all counties in the State of Illinois as a disaster area; and,

WHEREAS, on June 26, 2020, due to the further spread of COVID-19 in Illinois, the continuing health and economic impacts of the virus, and the need to continue to increase testing capacity and preserve our progress against the disease, I declared all counties in the State of Illinois as a disaster area; and,

WHEREAS, on July 24, 2020, due to the resurgence of COVID-19 in Illinois, the continuing health and economic impacts of the virus, and the need to continue to increase testing capacity and preserve our progress against the disease, I declared all counties in the State of Illinois as a disaster area; and,

WHEREAS, as circumstances surrounding COVID-19 rapidly evolve and new evidence emerges, there have been frequent changes in information and public health guidance; and,

WHEREAS, the unprecedented nature of COVID-19, including the health consequences it has on not just the respiratory system but the heart, brain, kidneys, and the body's immune response, has made the virus's effects and its path difficult to predict; and,

WHEREAS, from the outset, data suggested that older adults and those with serious underlying health conditions are more likely to experience severe and sometimes fatal complications from COVID-19; and,

WHEREAS, emerging evidence has shown that young people, including infants and toddlers, are also at risk of such complications; and,

WHEREAS, young and middle-aged people have comprised a significant proportion of new COVID-19 cases and hospitalized COVID-19 patients, and there is evidence that COVID-19 causes blood clots and strokes, and has caused deadly strokes in young and middle-aged people who exhibited few symptoms; and,

WHEREAS, the understanding of spread from infected individuals who have not shown symptoms has changed and, on April 12, 2020, the CDC changed the period of exposure risk from "onset of symptoms" to "48 hours before symptom onset"; and,

WHEREAS, some people infected by the virus remain asymptomatic but nonetheless may spread it to others; and,

WHEREAS, although the CDC initially recommended against wearing cloth face coverings or masks as protection, as a result of research on asymptomatic and pre-symptomatic transmission, the CDC revised its conclusions and recommends wearing cloth face coverings in public settings where social distancing measures are difficult to maintain; and,

WHEREAS, public health research and guidance now indicates the necessity and efficacy of wearing cloth face coverings in public settings where social distancing measures are difficult to maintain, and indicates that the risk of transmission outdoors is less than the risk of transmission indoors; and,

WHEREAS, as COVID-19 has spread in Illinois over the course of the Gubernatorial Disaster Proclamations, the circumstances causing a disaster throughout the State have changed and

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continue to change, making definitive predictions of the course the virus will take over the coming months extremely difficult; and,

WHEREAS, at the time I issued the first Gubernatorial Disaster Proclamation, there were 11 confirmed cases of COVID-19 in one Illinois county; and,

WHEREAS, as of today, August 21, 2020, there have been over 215,000 confirmed cases of COVID-19 in all 102 Illinois counties; and,

WHEREAS, the first death attributed to COVID-19 in Illinois was announced on March 17, 2020; and,

WHEREAS, as of today, July 24, 2020, more than 7,850 residents of Illinois have died due to COVID-19; and,

WHEREAS, from the outset, studies have suggested that for every confirmed case there are many more unknown cases, some of which are asymptomatic individuals who can pass the virus to others without knowing; and,

WHEREAS, the CDC estimates that total cases of COVID-19 may be up to 13 times higher than currently reported for certain regions; and,

WHEREAS, while the number of new COVID-19 cases in the State is below its earlier peak, the number has been gradually rising over the past several weeks, and the virus continues to infect thousands of individuals and claim the lives of too many Illinoisans each day; and,

WHEREAS, the COVID-19 pandemic is not limited to the most populous counties, and as of today the twenty counties that the Illinois Department of Public Health has identified as exhibiting warning signs of increased COVID-19 risk (Bureau, Cass, Clay, Clinton, Franklin, Greene, Grundy, Hancock, Henderson, Jefferson, Logan, Madison, Monroe, Moultrie, Randolph, St. Clair, Union, Whiteside, Will, and Williamson) are located in all parts of the State; and,

WHEREAS, without precautions COVID-19 can spread exponentially, even in less populous areas; for example, in Jasper County, a single infected first responder visited a nursing home and instigated series of infections that resulted in one of highest infection rates in the State; and similarly, in Randolph County, a single infected person attended an event in mid-March that caused that county likewise to suffer one of the State's highest infection rates; and,

WHEREAS, numerous counties all around the State have reported more than 75 cases per 100,000 people over the past 7 days; and,

WHEREAS, the State and the Illinois Department of Public Health have developed a mitigation plan to trigger additional precautions when regions meet certain risk levels; and,

WHEREAS, while the precautions taken by Illinoisans led to a decline in the number of COVID-19 cases and deaths in the State, other states that have resisted taking public health precautions or that lifted those precautions earlier experienced exponential growth and record high numbers of cases; and,

WHEREAS, the U.S. has surpassed 5.5 million total cases and nearly 175,000 deaths; and,

WHEREAS, public health experts have warned of a "second wave" of COVID-19 cases; and,

WHEREAS, COVID-19 has claimed the lives of and continues to impact the health of Black and Hispanic Illinoisans at a disproportionately high rate – magnifying significant health disparities and inequities; and,

WHEREAS, the Illinois Department of Public Health activated its Illinois Emergency Operations Plan and its Emergency Support Function 8 Plan to coordinate emergency response efforts by hospitals, local health departments, and emergency management systems in order to avoid a surge in the use of hospital resources and capacity; and,

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WHEREAS, as the virus has progressed through Illinois, the crisis facing the State continues to develop and requires an evolving response to ensure hospitals, health care professionals and first responders are able to meet the health care needs of all Illinoisans and in a manner consistent with CDC guidance that continues to be updated; and,

WHEREAS, in order to ensure that health care professionals, first responders, hospitals and other facilities are able to meet the health care needs of all residents of Illinois, the State must have critical supplies, including PPE, such as masks, face shields, gowns, and gloves; and,

WHEREAS, the State of Illinois maintains a stockpile that supports the existing PPE supply chains and stocks at various healthcare facilities; and,

WHEREAS, while the State continues to make every effort to procure PPE, if those procurement efforts are disrupted or Illinois experiences a surge in COVID-19 cases, the State faces a life-threatening shortage of respirators, masks, protective eyewear, face shields, gloves, gowns, and other protective equipment for health care workers and first responders; and,

WHEREAS, while hospitalizations declined from the peak and have stabilized, Illinois is using a significant percentage of hospital beds and ICU beds, and, if COVID-19 cases were to surge, the State could face a shortage of critical health care resources; and,

WHEREAS, over the course of the COVID-19 crisis, the State has been constrained in the number of COVID-19 tests that can be taken and processed due to a limited number of testing sites and labs, as well as a shortage of necessary supplies, including the swabs needed to take samples; and,

WHEREAS, at the time I issued the first Gubernatorial Disaster Proclamation, Illinois had capacity to test no more than a few hundred people per day for COVID-19 at a small number of testing sites; and,

WHEREAS, the State has developed testing sites throughout Illinois and has exceeded 50,000 tests per day for the past three days, and the State continues to focus efforts on increasing testing capacity; and,

WHEREAS, Illinois now has tested nearly 3.6 million total specimens for COVID-19; and,

WHEREAS, national projections adjusted for Illinois' population suggest the State must continue to increase the number of tests processed per day as part of an effective effort to permanently slow and reduce the spread of COVID-19; and,

WHEREAS, in addition to causing the tragic loss of more than 7,850 Illinoisans and wreaking havoc on the physical health of tens of thousands more, COVID-19 has caused extensive economic loss and continues to threaten the financial welfare of a significant number of individuals and businesses across the nation and the State; and,

WHEREAS, nationwide, more than 55 million people have filed unemployment claims since the start of the pandemic – representing more than one in four U.S. workers; and,

WHEREAS, the Illinois Department of Employment Security announced that the State's unemployment rate continues to be extremely high at 11.3% in August; and,

WHEREAS, the Illinois Department of Employment Security is responding to the economic crisis in a number of ways, including through the Pandemic Unemployment Assistance program; and,

WHEREAS, the Department of Commerce and Economic Opportunity is working to address the economic crisis, including through assistance programs such as the Business Interruption Grants Program for businesses that experienced a limited ability to operate due to COVID-19 related closures; and,

WHEREAS, the economic loss and insecurity caused by COVID-19 threatens the viability of business and the access to housing, medical care, food, and other critical resources that directly impact the health and safety of residents; and,

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WHEREAS, COVID-19 also has been extraordinarily disruptive to schools, and it is among the highest priorities of the State to ensure as the new school year approaches that students are able to obtain a quality education and that schools are able to provide an environment that is safe for students, teachers, and the community; and,

WHEREAS, based on the foregoing facts, and considering the expected continuing spread of COVID-19 and the ongoing health and economic impacts that will be felt over the coming month by people across the State, the current circumstances in Illinois surrounding the spread of COVID-19 constitute an epidemic emergency and a public health emergency under Section 4 of the Illinois Emergency Management Agency Act; and,

WHEREAS, based on the foregoing, the continuing burden on hospital resources, the potential shortages of these resources in the event of a surge in infections, and the critical need to increase the purchase and distribution of PPE as well as to expand COVID-19 testing capacity constitute a public health emergency under Section 4 of the Illinois Emergency Management Agency Act; and,

WHEREAS, it is the policy of the State of Illinois to be prepared to address any disasters and, therefore, it is necessary and appropriate to make additional State resources available to ensure that that our healthcare delivery system is capable of serving those who are sick and that Illinoisans remain safe and secure and able to obtain medical care; and,

WHEREAS, this proclamation will assist the State in facilitating economic recovery for individuals and businesses in an effort to prevent further devastating consequences from the economic instability COVID-19 has caused; and,

WHEREAS, this proclamation will assist Illinois agencies in coordinating State and Federal resources, including materials needed to test for COVID-19, personal protective equipment, and medicines, in an effort to support the State responses as well as the responses of local governments to the present public health emergency; and,

WHEREAS, these conditions provide legal justification under Section 7 of the Illinois Emergency Management Agency Act for the new issuance of a proclamation of disaster; and,

WHEREAS, the Illinois Constitution, in Article V, Section 8, provides that “the Governor shall have the supreme executive power, and shall be responsible for the faithful execution of the laws,” and states, in the Preamble, that a central purpose of the Illinois Constitution is “provide for the health, safety, and welfare of the people”;

NOW, THEREFORE, in the interest of aiding the people of Illinois and the local governments responsible for ensuring public health and safety, I, JB Pritzker, Governor of the State of Illinois, hereby proclaim as follows:

Section 1. Pursuant to the provisions of Section 7 of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7, I find that a disaster exists within the State of Illinois and specifically declare all counties in the State of Illinois as a disaster area. The proclamation authorizes the exercise of all of the emergency powers provided in Section 7 of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7, including but not limited to those specific emergency powers set forth below.

Section 2. The Illinois Department of Public Health and the Illinois Emergency Management Agency are directed to coordinate with each other with respect to planning for and responding to the present public health emergency.

Section 3. The Illinois Department of Public Health is further directed to cooperate with the Governor, other State agencies and local authorities, including local public health authorities, in the development and implementation of strategies and plans to protect the public health in connection with the present public health emergency.

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Section 4. The Illinois Emergency Management Agency is directed to implement the State Emergency Operations Plan to coordinate State resources to support local governments in disaster response and recovery operations.

Section 5. To aid with emergency purchases necessary for response and other emergency powers as authorized by the Illinois Emergency Management Agency Act, the provisions of the Illinois Procurement Code that would in any way prevent, hinder or delay necessary action in coping with the disaster are suspended to the extent they are not required by federal law. If necessary, and in accordance with Section 7(1) of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7(1), the Governor may take appropriate executive action to suspend additional statutes, orders, rules, and regulations.

Section 6. Pursuant to Section 7(3) of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7(3), this proclamation activates the Governor's authority, as necessary, to transfer the direction, personnel or functions of State departments and agencies or units thereof for the purpose of performing or facilitating emergency response programs.

Section 7. The Illinois Department of Public Health, Illinois Department of Insurance and the Illinois Department of Healthcare and Family Services are directed to recommend, and, as appropriate, take necessary actions to ensure expanded access to testing for COVID-19 and that consumers do not face financial barriers in accessing diagnostic testing and treatment services for COVID-19.

Section 8. The Illinois State Board of Education is directed to recommend, and, as appropriate, take necessary actions to address any impact to learning associated with the present public health emergency and to alleviate any barriers to the use of remote learning during the effect of this proclamation that exist in the Illinois School Code, 105 ILCS 5/1-1 et. seq.

Section 9. All State agencies are directed to cooperate with the Governor, other State agencies and local authorities in the development and implementation of strategies and plans to cope with and recover from the economic impact of the present public health emergency.

Section 10. Pursuant to Section 7(14) of the Illinois Emergency Management Agency Act, 20 ILCS 3305/7(14), increases in the selling price of goods or services, including medical supplies, protective equipment, medications and other commodities intended to assist in the prevention of or treatment and recovery of COVID-19, shall be prohibited in the State of Illinois while this proclamation is in effect.

Section 11. This proclamation can facilitate requests for federal emergency and/or disaster assistance if a complete and comprehensive assessment of damage indicates that effective recovery is beyond the capabilities of the State and affected local governments.

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Section 12. For purposes of Senate Bill 2135 (101st General Assembly), Article 15, section 15-5, amending the Open Meetings Act, new section 5 ILCS 120/7(e)(4), I find that the public health concerns at issue in this proclamation render in-person attendance of more than fifty people at the regular meeting location not feasible.

Section 13. This proclamation shall be effective immediately and remain in effect for 30 days.

In Witness Whereof, I have hereunto set my hand and caused the Great Seal of the State of Illinois to be affixed.

Done at the Capitol in the City of Springfield this 21st day of August in the Year of Our Lord two thousand and twenty and of the State of Illinois two hundred and second.

Deese White
SECRETARY OF STATE

RBH
GOVERNOR



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August 31, 2020

Julie Mikkelson
SNAP Director
USDA Food & Nutrition Services
77 W. Jackson, 20th Floor
Chicago, IL 60604-3591

Dear Ms. Mikkelson:

Illinois is requesting a waiver extension for Supplemental Nutrition Assistance (SNAP) regulations at 7 CFR 273.10(f)(3)(i) require a minimum certification period of 6 months for most households. Regulations at 7 CFR 273.10(f)(5) allow states to extend certification periods up to 12 months or 24 months for those households that are all elderly or disabled. Regulations at 7 CFR 273.12(a)(5)(iii) require an interim periodic report in the sixth month for households assigned to simplified reporting (SR), if the certification period exceeds 6 months.

Illinois is seeking to adjust the expiration for certification periods expiring in September and will extend the certification period of these households for 6 months until March 2021. The state will also adjust the periodic reporting requirement for households with a period report due in September and for households whose certification period is extended under this waiver. Extending active SNAP certification periods by six (6) months will be beneficial to administrative staff as well as customers by continuing to reduce the spread of the Coronavirus disease (COVID-19) and avoid putting customer's health at risk by eliminating customers from completing SNAP redetermination applications, office visits, and scheduling interviews.

Without this waiver, Illinois anticipates SNAP redeterminations for September will exceed the state's ability to process timely, due to the increased volume resulting from the previous months' extensions, putting families and individuals at risk of not receiving timely benefits in the Fall going into the holidays. The state experiences around a 40% churn rate, putting additional pressures on customers and the state to prevent lengthy gaps in nutritional benefits. Additionally, the State is currently experiencing a rise in COVID-19 cases as supported by the following numbers;

- A 3-day positivity rate of 8% or higher (8/14-16/2020)
- An average of 1,702 new cases per day reported in August 2020 which is 550 new cases per day compared to July 2020.

We look forward to hearing from you. If you have additional questions, please feel free to contact me, Leslie K. Cully at leslie.k.cully@illinois.gov

Sincerely,

Leslie K. Cully
Illinois SNAP Director
Illinois Department of Human Services

Cc: Leslie K. Cully, Terri Vaniter



STATE WAIVER REQUEST

1. **Waiver Serial Number (if applicable):**
2. **Type of request:** Initial
3. **Regulatory citation:** 273.10(f)(3)
4. **State:** Illinois
5. **Region:** MWRO
6. **Regulatory requirements:** Supplemental Nutrition Assistance (SNAP) regulations at 7 CFR 273.10(f)(3)(i) require a minimum certification period of 6 months for most households. Regulations at 7 CFR 273.10(f)(5) allow states to extend certification periods up to 12 months or 24 months for those households that are all elderly or disabled. Regulations at 7 CFR 273.12(a)(5)(iii) require an interim periodic report in the sixth month for households assigned to simplified reporting (SR), if the certification period exceeds 6 months.

SNAP regulations at 7 CFR 273.14 state that no household may participate beyond the expiration of the certification period assigned in accordance with § 273.10(f) without a determination of eligibility for a new period. The State agency must establish procedures for notifying households of expiration dates, providing application forms, scheduling interviews, and recertifying eligible households prior to the expiration of certification periods. Households must apply for recertification and comply with interview and verification requirements.

7. **Description of alternative procedures:**

The State agency will adjust the expiration for certification periods expiring in September 2020 and will extend the certification period of these households for 6 months until March 2021. The state will also adjust the periodic reporting requirement for households with a period report due in September and for households whose certification period is extended under this waiver. By extending September 2020 certifications six months, it will prevent the increase in redeterminations/period reports coming due each year in September.
8. **Justification for request:** Extending active SNAP certification periods by six (6) months will be beneficial to administrative staff as well as customers.

Approval of this waiver will continue to reduce the spread of the Coronavirus disease (COVID-19) and avoid putting customer's health at risk by eliminating customers from completing SNAP redetermination applications, office visits, and scheduling interviews. Containing and reducing the transmission of COVID-19 continues to be a priority in Illinois and the United States.

In addition, administrative staff will be able to concentrate on initial SNAP applications as well as SNAP Redeterminations that were extended six (6) months from 3/2020 through 6/2020 and for cases that had periodic reports waived from 3/2020 through 6/2020 (numbers below). SNAP households in simplified reporting will continue to adhere to reporting requirements and change reporting households will continue to be required to report changes within ten (10) calendar days.

Category 1: SNAP MPR & Rede

Description	Count
How many cases were triggered for closure due to failure to return the MPR due 3/2/2020?	24,728
How many cases were triggered for closure due to rede not completed in March 2020?	35,655
How many cases have the MPR due on 4/2/2020?	49,789
How many cases have the redetermination due in April 2020?	57,287
How many cases have the MPR due on 5/2/2020?	47,139
How many cases have the redetermination due in May 2020?	70,925
How many cases have the MPR due on 6/2/2020?	32,702
How many cases have the redetermination due in June 2020?	67,694

Without this waiver, Illinois anticipates SNAP redeterminations for September will exceed the state’s ability to process timely, due to the increased volume resulting from the previous months’ extensions, putting families and individuals at risk of not receiving timely benefits in the Fall going into the holidays. In addition, the state experiences around a 40% church rate, putting additional pressures on customers and the state to prevent lengthy gaps in nutritional benefits. The State is currently experiencing a rise in COVID-19 cases as supported by the following numbers:

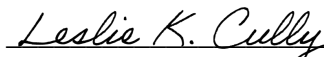
- A 3-day positivity rate of 8% or higher (8/14-16/2020)
- An average of 1,702 new cases per day reported in August 2020 which is 550 new cases per day compared to July 2020.

- 9. Anticipated impact on households and State agency operations:** Customers will continue receiving SNAP benefits without interruptions. Administratively, the certification extension will assist in timely application processing of initial applications.
- 10. Caseload information, including percent, characteristics, and quality control error rate for affection portion (if applicable):** This waiver will apply to all SNAP applicants and recipient households. Illinois’s federal fiscal year (FFY) 2020 quality control error rate as of February 2020 sample month was 12.32%. The number of SNAP recipients as of July 2020 was 1,061,701 households (5th ranking in the nation).
- 11. Anticipated implementation date and time period for which waiver is needed:** Immediately upon approval.

12. Proposed quality control review procedures: No special Quality Control (QC) procedures are required for cases subject to the provisions of this waiver. Cases should be reviewed using standard review procedures contained in the Food and Nutrition Service (FNS) Handbook 310.

13. State agency submitting waiver request and State contact person:
Terri Vaniter

14. Signature and title of requesting official:



Name: Leslie K. Cully

Title: SNAP Director, Illinois Department of Human Services

Email for transmission of response:

15. Date of request: 08/31/2020

16. State agency staff contact (name/email/telephone): Leslie K. Cully, Illinois SNAP Director, leslie.k.cully@illinois.gov 217/785-3294 Terri Vaniter, Bureau of Policy Development, terri.vaniter@illinois.gov 217/782-1239

17. Regional office contact person (to be completed by FNS regional office):