

May 7, 2020
Regular City Council Meeting

Discussion of Establishing an Association of Alaska Cruise Ports to Establish the Criteria to Resume Cruise Operations in the 2021 Season – Councilmember Bergeron



TRANSMITTAL MEMORANDUM

TO: The Honorable Mayor and City Council

FROM: Karl R. Amylon, City Manager

DATE: April 30, 2020

RE: **Discussion of Establishing an Association of Alaska Cruise Ports to Establish the Criteria to Resume Cruise Operations in the 2021 Season**

Councilmember Bergeron has requested a City Council discussion of establishing an association of Alaska cruise ports to establish the criteria to resume cruise operations for the 2021 season. By separate report, my office is seeking City Council direction regarding the Port accommodating the smaller class of American flagged cruise vessels with 250 passengers or less, which under certain conditions may begin calling on the Port as soon as June (see agenda statement 7a(8)).

At my direction, Assistant City Manager Lacey Simpson has reached out to the Juneau Borough Manager Rorie Watt and Skagway Borough Manager Brad Ryan to determine whether there is any interest in discussing the formation of such an association and its intended purpose. While both managers indicated their respective communities were open to having such a discussion, they believe that any collaboration should assume a resumption of cruise itineraries in 2020 as opposed to 2021.

As the City Council is aware, in mid-March the CDC extended the no sail order an additional 100 days until approximately July 24th. The order prohibits cruise vessels with 250 or more persons on board (passengers and crew) from operating in U.S. ports. It also requires cruise ship operators to prepare and submit adequate response plans to prevent, mitigate and respond to the spread of COVID-19. The attached letter from CLIA confirms that the industry has been working to develop and submit the required response plans to the CDC for review.

The Port and Harbors Director has confirmed with CLIA that these plans are being submitted by each cruise operator rather than by CLIA since the plans have to address the specifics of each vessel in the operator's fleet. The Canadian Government has also prohibited cruise ships carrying more than 500 passengers from operating in Canadian ports until at least July 1st. In response to the CDC order, the major lines have cancelled all port calls in Alaska through at least June 30th.

If the City Council elects to advance Councilmember Bergeron's proposal, I would suggest that following steps be considered:

1. Reach out to the Ketchikan Gateway Borough and the Ward Cove Dock Group to ascertain their interest in participating in such an association relative to the facilities under construction at Ward Cove.
2. Ketchikan initiates discussion with Juneau and Skagway to identify areas of common interest and to determine whether there is sufficient consensus on issues that warrant expanding participation by other southeast Alaska port communities.
3. If a consensus is reached among the Port communities, or alternatively should the City Council proceed independently to restrict cruise traffic until 2021, notify the Governor's Office of the policy as requested by Health and Social Services Commissioner Adam Crum.

I concur with the Juneau and Skagway Borough Managers that the port communities of southeast Alaska will likely have to address cruise itineraries in southeast Alaska resuming in 2020. This issue is currently under consideration by the federal and state governments. As previously alluded to, industry is actively working to respond to the Centers for Disease Control (CDC) no sail order, which went into effect April 15, 2020. Norwegian Cruise Line Senior Vice President Steve Moeller recently advised my office that CLIA has already proposed a newly enhanced Medical Protocol to the CDC on behalf of its member lines. Department of Health and Social Services representatives are meeting with CLIA on Thursday, April 30, 2020 to discuss the issue of small cruise vessels resuming itineraries within the state. Depending on the outcomes of such discussions and the decisions that may be made by federal and state authorities, the port communities of southeast Alaska may have to consider whether criteria for resuming cruise itineraries should be established for 2020 in lieu of targeting 2021.

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)**

**ORDER UNDER SECTIONS 361 & 365
OF THE PUBLIC HEALTH SERVICE ACT (42 U.S.C. 264, 268) AND
42 CODE OF FEDERAL REGULATIONS
PART 70 (INTERSTATE) AND PART 71 (FOREIGN):**

**MODIFICATION AND EXTENSION OF NO SAIL ORDER
AND OTHER MEASURES RELATED TO OPERATIONS**

Previous Order and Incorporation by Reference

This Order renews the No Sail Order and Other Measures Related to Operations signed by the CDC Director on March 14, 2020—subject to the modifications and additional stipulated conditions as set forth in this Order. This Order shall continue in operation until the earliest of (1) the expiration of the Secretary of Health and Human Services’ declaration that COVID-19 constitutes a public health emergency; (2) the CDC Director rescinds or modifies the order based on specific public health or other considerations; or (3) 100 days from the date of publication in the Federal Register. The findings and other evidence relied upon in issuing the March 14, 2020 Order are incorporated herein by reference. Any ambiguity between the March 14, 2020 Order, as modified by the current Order, shall be resolved in favor of the current Order.

Statement of Intent

This Order shall be interpreted and implemented in a manner as to achieve the following paramount objectives:

- Preservation of human life;
- Preventing the further introduction, transmission, and spread of COVID-19 into and throughout the United States;
- Preserving the public health and other critical resources of Federal, State, and local governments;
- Preserving hospital, healthcare, and emergency response resources within the United States; and
- Maintaining the safety of shipping and harbor conditions, including safety of personnel.

Applicability

This Modification and Extension of No Sail Order and Other Measures Related to Operations shall apply only to the subset of carriers¹ described below and hereinafter referred to as “cruise ships:”

¹ Carrier is defined by 42 CFR § 71.1 to mean, “a ship, aircraft, train, road vehicle, or other means of transport, including military.”

All commercial, non-cargo,² passenger-carrying vessels operating in international, interstate, or intrastate waterways and subject to the jurisdiction of the United States with the capacity to carry 250³ or more individuals (passengers and crew) with an itinerary anticipating an overnight stay onboard or a twenty-four (24) hour stay onboard for either passengers or crew.⁴

This Order shall additionally apply to any cruise ship that was previously excluded from the March 14, 2020 Order, by virtue of having voluntarily suspended operations.

“Operations” for purposes of this Order means any action by a cruise ship operator to bring or cause a cruise ship to be brought into or transit in or between any international, interstate, or intrastate waterways (e.g., shifting berths, moving to anchor, discharging waste, making port, or embarking or disembarking passengers or crew) subject to the jurisdiction of the United States.

“Operator” for purposes of this Order means the Master of the vessel (cruise ship) and any other crew member responsible for cruise ship operations and navigation, as well as any person or entity (including a corporate entity) that authorizes or directs the use of a cruise ship (e.g., as owner, lessee, or otherwise). A cruise ship operator may be either the cruise ship captain or the cruise line to which the cruise ship belongs, or both. The term “Operator” as used in this Order further incorporates the terms “company,” “designated person,” and “responsible person” as defined in 33 CFR. § 96.120.

Events Since the Issuance of March 14, 2020 Order

On March 14, 2020, the CDC Director issued a No Sail Order and Other Measures Related to Operations directing cruise ships not voluntarily suspending operations to comply with measures outlined by the CDC and U.S. Coast Guard. This followed a March 13, 2020, announcement by Cruise Lines International Association (CLIA), the leading industry trade group, that its members would voluntarily suspend cruise ship operations. On March 17, 2020, CDC issued a Level 3 Travel Warning that all travelers defer cruise travel worldwide based on widespread ongoing transmission of COVID-19.⁵ The suspension of a global tourism industry, such as the

² Given the substantial risk of person-to-person transmission of COVID-19, as opposed to transmission via indirect contact, this Order is currently limited to passenger, non-cargo vessels.

³ Based on substantial epidemiological evidence related to congregate settings and mass gatherings, this Order suspends operation of vessels with the capacity to carry 250 individuals or more. Evidence shows that settings as small as nursing homes or movie theaters can proliferate the spread of a communicable disease. As the numbers of passengers and crew onboard a ship increases, certain recommended mitigation efforts such as social distancing become more difficult to implement. In light of the demonstrated rapid spread of this communicable disease in current cruise ship settings, application of this Order to vessels carrying 250 or more individuals is a prudent and warranted public health measure. Moreover, the management of current coronavirus cases in addition to existing seasonal care needs (e.g., influenza) has placed an extreme burden on the public health and healthcare systems and this Order will help avoid further stressing those systems.

⁴ This order shall not apply to vessels operated by a U.S. Federal or State government agency. Nor shall it apply to vessels being operated solely for purposes of the provision of essential services, such as the provision of medical care, emergency response, activities related to public health and welfare, or government services, such as food, water, and electricity.

⁵ CDC, Traveler’s Health, *COVID-19 and Cruise Ship Travel*, at: <https://wwwnc.cdc.gov/travel/notices/warning/coronavirus-cruise-ship> (originally posted, March 17, 2020).

cruise line industry, does not happen instantaneously or easily. During the suspense of operations, the cruise line operators worked with both Federal, State, and local governments to disembark of over 250,000 passengers from more than 120 vessels. The cruise line operators continue discussions with Federal, State and local governments regarding the 114 vessels with over 93,000 crew either in or near U.S. ports. However, COVID-19 clusters and outbreaks continue to occur on and in connection with cruise ships.

There are a number of recent incidences of reported COVID-19 spread onboard cruise ships including the *Costa Magica*, *Costa Favolosa*, *Celebrity Eclipse*, *Disney Wonder*, *Holland America Zaandam*, and *Celebrity Coral Princess*. The *Costa Magica* and the *Costa Favolosa*, reported at least 88 ill crew members on board with respiratory symptoms of COVID-19. On March 26, 2020, in coordination with U.S. Coast Guard and public health personnel, four infected crew members were evacuated off the *Magica* and seven from the *Favolosa* for life-critical care at Jackson Memorial Hospital in Miami, Florida. The *Zaandam* cruise ship reported illness consistent with COVID-19 in at least 250 persons onboard – guests and crew members; 76 of these persons remain symptomatic. Four passengers onboard the *Zaandam* have died (one for non-COVID-19 related reasons).⁶ As of April 1, 2020, four crew members onboard the *Eclipse* have tested positive for COVID-19, three of whom remain on the ship. One passenger onboard the *Eclipse* required emergency medical evacuation and is currently hospitalized in San Diego, California after having tested positive for COVID-19. The *Wonder* reported four crew members who have tested positive for COVID-19. Two of the four are now hospitalized, the two others are isolated on the ship; an additional three former passengers (from the last voyage who disembarked) are also positive. Most recently, the *Coral Princess* reported 12 persons (seven passengers and five crew members) onboard who are confirmed positive for COVID-19 and an additional 43 suspected cases in persons with influenza-like illness. As of April 3, 2020, there are four patients on oxygen in the ship’s medical center.

There are approximately 50 cruise ships that remain at sea off the East Coast of the United States and in the Bahamas with an estimated 47,800 crew onboard; off the West Coast and Gulf Coast there are approximately 45 cruise ships with an estimated 32,000 crew onboard. Some of these crew are not critical to maintain the seaworthiness or basic safe operation of the cruise ships; many are part of the hotel and hospitality crew. CDC is currently aware of 15 cruise ships at port or anchorage in the United States with known or suspected COVID-19 infection among the crew who remain onboard. CDC is currently tracking two cruise ships with passengers that are expected to make port in the United States.

There are several public health concerns when crew members become ill while onboard these ships and the cruise lines seek the aid of the United States in disembarking them, as has already occurred on numerous occasions. The intensive care requirements for infected crew in need of life-critical care greatly stresses an already overburdened healthcare system facing shortages of masks, test kits, beds, and ventilators needed to respond to COVID-19. The addition of further COVID-19 cases from cruise ships places healthcare workers at substantial increased risk. Moreover, safely evacuating, triaging, and repatriating cruise ship crew involves complex

⁶ “President of Holland America cruise line pleads for compassion while Florida debates allowing ships to dock,” Fox News, March 31, 2020, available at: <https://www.foxnews.com/travel/zaandam-holland-america-cruise-president-florida-debate>.

logistics, incurs financial costs at all levels of government, and diverts resources away from larger efforts to suppress or mitigate COVID-19.

Critical Need for Further Cooperation and Response Planning

CDC and other Federal agencies engaged with CLIA representatives in early March. On March 13, 2020, CLIA and their associated members announced that all member cruise lines would voluntarily suspend cruise ship operations from U.S. ports of call for 30 days as public health officials and the Federal government continue to address COVID-19. Several cruise lines followed CLIA's example and similarly voluntarily suspended operations.

CLIA also drafted a response plan, "On Course: Cruise Industry COVID-19 Response and Protocols" (hereinafter, "On Course"). The plan proposed "industry management of suspected or confirmed cases of COVID-19 without burden on the U.S. government."⁷ CLIA stated that it could implement this plan within 7 days.⁸ In response to a suspected or confirmed case of COVID-19, "industry would be responsible for transporting the [exposed or infected] individuals in appropriate buses, cars, or ambulances."⁹ Furthermore, CLIA averred that, "contracts for predesignated facilities though Global Rescue [a firm with purported experience and expertise in mass medical incidents] [would] receive COVID-19 patients, including arrangements [that] will be executed following plan approval."¹⁰ CLIA further stated that it had planned for "multiple redundancies" in its response efforts. Specifically, "CLIA commits to making five ships available for temporary housing purposes. They would be tasked with sailing to any affected ship and taking affected guests and crew aboard for the self-isolation period."¹¹

On April 3, 2020, CLIA drafted a new response plan, "Framework: For Cruise Industry Care of Crew and other Persons on Board while Ships Remain Idle during the Global COVID-19 Pandemic" (hereinafter, "Framework"). The Framework plan must go further to reduce industry reliance on government and shoreside hospital resources. For example, while the Framework states that a ship will maintain its medical staff, it must provide further details of how the industry will provide for the acute care needs of the critically ill. The Framework must also address industry assistance to COVID-19 affected cruise ships by deploying additional ships for cohort separation of those who are exposed, infected, and in need of hospitalization. Furthermore, laboratory sampling and testing, onboard mitigation and prevention strategies, disinfection protocols, personal protective equipment, repatriation of foreign nationals, and onshore transportation, including through contract medivac helicopter, must be addressed in further detail, including how the industry proposes to acquire, staff, and operationalize this plan, with minimal burden on Federal, State, or local government entities or the healthcare system.

Findings and Immediate Action

⁷ (On Course, pages 1, 10).

⁸ *Id.* at 2.

⁹ *Id.* at 1-2.

¹⁰ *Id.* at 7.

¹¹ *Id.* at 13.

Accordingly, and consistent with 42 CFR §§ 70.2, 71.31(b) and 71.32(b), the Director of CDC (“Director”) finds that cruise ship travel exacerbates the global spread of COVID-19 and that the scope of this pandemic is inherently and necessarily a problem that is international and interstate in nature and has not been controlled sufficiently by the cruise ship industry or individual State or local health authorities. As described in the March 14, 2020 Order, cruise ship travel markedly increases the risk and impact of the COVID-19 disease outbreak within the United States. If unrestricted cruise ship passenger operations were permitted to resume, infected and exposed cruise ship cases would place healthcare workers at substantial increased risk. Specifically, these cases would divert medical resources away from persons with other medical problems and other COVID-19 cases, consuming precious diagnostics, therapeutics, and protective equipment. Ongoing concerns with cruise ship transmission would further draw valuable resources away from the immense Federal, State, and local effort to contain and mitigate the spread of COVID-19. Further, the current ongoing non-passenger operation of cruise ships has not sufficiently abated the public health concern, as ship crew become sick and require medical care drawing on otherwise engaged Federal, State, and local resources. As operators of non-U.S. flagged vessels sailing in international waters, it is imperative that the cruise ship industry and cruise lines themselves take responsibility for the care of their crew and do not further tax limited U.S. resources during a public health emergency.

The Director also finds evidence to support a reasonable belief that cruise ships are or may be infected or contaminated with a quarantinable communicable disease.¹² This reasonable belief is based on information from epidemiologic and other data regarding the nature and transmission of COVID-19 on cruise ships, including the information described in the March 14, 2020 Order and evidence from the *Costa Magica*, *Costa Favolosa*, *Eclipse*, *Wonder*, *Zaandam*, *Coral Princess*, and other cruise ships. As a result, persons onboard cruise ships may be infected with or exposed to COVID-19 by virtue of being onboard at a time when cases of COVID-19 are being reported in increasingly significant numbers globally¹³ and specifically on cruise ships, when testing is available.

Accordingly, under 42 CFR § 70.2, the Director determines that measures taken by State and local health authorities regarding COVID-19 onboard cruise ships are inadequate to prevent the further interstate spread of the disease.

This Order is not a rule within the meaning of the Administrative Procedure Act (“APA”), but rather an emergency action taken under the existing authority of 42 CFR §§ 70.2, 71.31(b) and 71.32(b). In the event that this Order qualifies as a rule under the APA, notice and comment and a delay in effective date are not required because there is good cause to dispense with prior public notice and comment and the opportunity to comment on this Order and the delay in effective date.¹⁴ Considering the public health emergency caused by COVID-19 based, among other things, on its continued spread on board cruise ships, it would be impracticable and

¹² COVID-19 is a communicable disease for which quarantine is authorized under Section 361 of the Public Health Service Act (42 U.S.C. § 264) and 42 CFR §§ 70.1, 71.1, as listed in Executive Order 13295, as amended by Executive Orders 13375 and 13674.

¹³ Since the March 14, 2020 Order, the number of global cases of COVID-19 reported by the World Health Organization (WHO) has risen from 142,534 to 1,051,635 as of April 4, 2020, with 56,985 deaths. *See* Situation Reports, WHO, <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>.

¹⁴ *See* 5 U.S.C. §§ 553(b)(B), (d)(3).

contrary to the public health, and by extension the public interest, to delay the issuance and effective date of this Order. Similarly, if this Order qualifies as a rule per the definition in the APA, the Office of Information and Regulatory Affairs has determined that it would be a major rule, but there would not be a delay in its effectiveness as the agency has invoked the good cause provision of the APA.

If any provision in this Order, or the application of any provision to any carriers, persons, or circumstances, shall be held invalid, the remainder of the provisions, or the application of such provisions to any carriers, persons or circumstances other than those to which it is held invalid, shall remain valid and in effect.

In accordance with 42 U.S.C. § 264(e), this Order shall supersede any provision under State law (including regulations and provisions established by political subdivisions of States), that conflict with an exercise of Federal authority, including instructions by U.S. Coast Guard (USCG) or HHS/CDC personnel permitting ships to make port or disembark persons under stipulated conditions, under this Order.

This Order shall be enforceable through the provisions of 18 U.S.C. §§ 3559, 3571; 42 U.S.C. §§ 243, 268, 271; and 42 CFR §§ 70.18, 71.2.

Therefore, in accordance with Sections 361 and 365 of the Public Health Service Act (42 U.S.C. §§ 264, 268) and 42 CFR §§ 70.2, 71.31(b), 71.32(b), for all cruise ships for the period described below, it is **ORDERED**:

1. As a condition of obtaining controlled free pratique to continue to engage in any cruise ship operations in any international, interstate, or intrastate waterways subject to the jurisdiction of the United States, cruise ship operators shall immediately develop, implement, and within **seven (7) days** of the signing of this Order operationalize, an appropriate, actionable, and robust plan to prevent, mitigate, and respond to the spread of COVID-19 on board cruise ships.
2. As a condition of obtaining controlled free pratique to continue to engage in any cruise ship operations in any international, interstate, or intrastate waterways subject to the jurisdiction of the United States, the cruise ship operator shall make the plan described in paragraph 1, above, available to HHS/CDC and USCG personnel within **seven (7) days** of the signing of this Order.
3. An appropriate plan is one that adequately prevents, mitigates, and responds to the spread of COVID-19 on board cruise ships and that, at a minimum, must address the following elements:
 - a. Onboard surveillance of passengers and crew with acute respiratory illnesses, influenza-like illnesses, pneumonia, and COVID-19, including reporting to HHS/CDC on a weekly basis on overall case counts, methods of testing, and number of persons requiring hospitalization or medical evacuation;
 - b. Reports on the number of persons onboard the cruise ship and any increase in the numbers of persons with COVID-19 made to HHS/CDC and USCG on a daily

basis for as long as the cruise ship is within waters subject to the jurisdiction of the United States.

- c. Onboard monitoring of passengers and crew through temperature checks and medical screening, including addressing frequency of monitoring and screening;
- d. Training of all crew on COVID-19 prevention, mitigation, and response activities;
- e. Protocols for any COVID-19 testing, including details relating to the shore-side transport, administration, and operationalization of laboratory work if onboard laboratory work is not feasible;
- f. Onboard isolation, quarantine, and social distancing protocols to minimize the risk of transmission and spread of COVID-19;
- g. Onboard medical staffing, including number and type of staff, and equipment in sufficient quantity to provide a hospital level of care (e.g., ventilators, facemasks, personal protective equipment) for the infected without the need for hospitalization onshore;
- h. An outbreak management and response plan to provision and assist an affected cruise ship that relies on industry resources, e.g., mobilization of additional cruise ships or other vessels to act as “hospital” ship for the infected, “quarantine” ship for the exposed, and “residential” ship for those providing care and treatment, including the ability to transport individuals between ships as needed;
- i. Categorization of affected individuals into risk categories with clear stepwise approaches for care and management of each category;
- j. A medical care plan addressing onboard care versus evacuation to on-shore hospitals for critically ill individuals, specifying how availability of beds for critically ill at local hospitals will be determined in advance and how the cruise ship operator will ensure acceptance at local medical facilities to treat the critically ill in a manner that limits the burden on Federal, State, and local resources and avoids, to the greatest extent possible, medivac situations. If medical evacuation is necessary arrangements for evacuation must be made with commercial resources (e.g., ship tender, chartered standby vessel, chartered airlift) and arrangements made with a designated medical facility that has agreed to accept such evacuees. All medical evacuation plans must be coordinated with the U.S. Coast Guard;
- k. Detailed logistical planning for evacuating and repatriating, both U.S. citizens and foreign nationals, to their respective communities and home countries via foreign government or industry-chartered private transport and flights, including the steps the cruise ship operator will take to ensure those involved in the transport are not exposed; (the use of commercial flights to evacuate or repatriate individuals, both within or from the United States, is prohibited);
- l. The projected logistical and resource impact on State and local government and public health authorities and steps taken to minimize the impact and engage with these authorities; all plans must provide for industry/cruise line management of suspected or confirmed cases of COVID-19 without resource burden on Federal, State, or local governments;
- m. Plan execution in all U.S. geographical areas – all plans must be capable of being executed anywhere in international, interstate, or intrastate waterways subject to the jurisdiction of the United States; and

- n. Cleaning and disinfection protocols for affected cruise ships.
4. An appropriate plan shall be designed to minimize, to the greatest extent possible, any impact on U.S. government operations or the operations of any State or local government, or the U.S. healthcare system.
5. The cruise ship operator shall further ensure that the plan is consistent with the most current CDC recommendations and guidance for any public health actions related to COVID-19. Where appropriate, a cruise ship operator may coordinate the development, implementation, and operationalization of a plan with other cruise ship operators, including an industry trade group.

The terms and conditions of the No Sail Order and Other Measures Related to Operations signed on March 14, 2020, as modified and extended by this ORDER, **SHALL REMAIN IN EFFECT**. Consequently, it remains **ORDERED**:

1. Cruise ship operators shall not be allowed to disembark passengers and crew members at ports or stations, except as directed by the USCG, in consultation with HHS/CDC personnel and, as appropriate, as coordinated with Federal, State, and local authorities.
2. Cruise ship operators shall not reembark any crew member, except as approved by USCG, in consultation with HHS/CDC personnel, until further notice.
3. Cruise ship operators shall not embark any new passengers or crew, except as approved by USCG, or other Federal authorities as appropriate, in consultation with HHS/CDC personnel.
4. Cruise ship operators shall not commence or continue operations (e.g., shifting berths, moving to anchor, or discharging waste), except as approved by USCG, in consultation with HHS/CDC personnel, until further notice.
5. While in port, the cruise ship operator shall observe health precautions as directed by HHS/CDC personnel.
6. The cruise ship operator shall comply with all HHS/CDC, USCG, and other Federal agency instructions to follow CDC recommendations and guidance for any public health actions relating to passengers, crew, ship, or any article or thing on board the ship, as needed, including by making ship's manifests and logs available and collecting any specimens for COVID-19 testing.
7. This order does not prevent the periodic reboarding of the ship by HHS/CDC personnel and/or USCG and/or other Federal, State, or local agencies or the taking on of ships' stores and provisions under the supervision of HHS/CDC personnel and/or USCG.

8. This order does not prevent the ship from taking actions necessary to maintain the seaworthiness or safety of the ship, or the safety of harbor conditions, such as movement to establish safe anchorage, or as otherwise directed by USCG personnel.

This Order is effective upon publication in the Federal Register and shall continue in operation until the earliest of (1) the expiration of the Secretary of Health and Human Services' declaration that COVID-19 constitutes a public health emergency; (2) the CDC Director rescinds or modifies the order based on specific public health or other considerations; or (3) 100 days from the date of publication in the Federal Register.

In testimony whereof, the Director, Centers for Disease Control and Prevention, U.S. Department of Health and Human Services, has hereunto set his hand at Washington, D.C., this 9th day of April, 2020.

A handwritten signature in black ink that reads "Robert R. Redfield MD". The signature is written in a cursive, flowing style.

Robert R. Redfield, MD
Director
Centers for Disease Control and Prevention



April 29, 2020

Mayor Robert Sivertsen
City of Ketchikan
334 Front Street
Ketchikan, Alaska 99901

Dear Mayor Sivertsen:

Although cruises remain suspended at this time, I wanted you and the residents of Ketchikan to know the industry is working very diligently on plans for a safe return to service. While it is still unclear when that will be, we recognize that communities will want assurances that measures are in place to protect the health of the public before various modes of travel start again.

For cruises, as much as we look forward to resuming operations, our number one priority is – at all times – the health and safety of people. That is why we are taking this time during the temporary suspension of operations to work with governments and prevailing health authorities to strengthen our protocols and go even further in our efforts to protect our passengers, crew, and the communities we visit. We are working with external medical experts to guide our approach and assist in these efforts.

Currently, there are two separate planning processes taking place. First, the industry has been working to develop and submit plans to the Centers for Disease Control and Prevention (CDC) as part of the No Sail Order, effective April 15, 2020. The other and longer-term planning process is working with the White House to develop a more comprehensive and enhanced plan for a safe return to service. This process is focusing on more stringent boarding procedures, additional onboard public health and sanitation protocols, monitoring capabilities, quarantine arrangements and shoreside care for guests and crew. Preparing to sail will require a lot of work and potentially significant investments in new technologies.

We hope you and the residents of Ketchikan recognize the value of these efforts, as we believe they will allow us to emerge from this crisis even stronger. We expect to have more to share in the coming weeks and please be assured, community input is very important, and that we will keep an ongoing dialogue to discuss local issues.

In addition to working on new protocols, I would point out that the industry has also been very engaged in advocacy efforts in Congress to support small and medium size businesses in the



travel trade. We understand the impacts of COVID-19, and the cancellation of cruise voyages are severe, especially for the many Alaskans, local businesses, and communities that depend upon visitor industry spending. This is an unprecedented time and we know this is extremely difficult on our partners. All of them are crucial for the guest experience and their amazing work is evident by the extremely high satisfaction rates in all our Alaskan ports.

I appreciate the opportunity to update you on current cruise industry efforts and will keep you informed as we move forward. Please do not hesitate to call anytime.

Sincerely,

A handwritten signature in blue ink that reads "Mike Tibbles". The signature is written in a cursive style and is enclosed within a light blue rectangular box.

Mike Tibbles
CLIA Alaska

CC: Karl Amylon, City Manager
Steve Corporon, Ports & Harbors Director



THE STATE
of **ALASKA**
GOVERNOR MIKE DUNLEAVY

Department of Health
and Social Services

OFFICE OF THE COMMISSIONER

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April 24, 2020

Mr. Nils Andreassen
Executive Director
Alaska Municipal League
One Sealaska Plaza, Suite 200
Juneau, AK 99801

Re: Reopening Alaska Responsibly

Dear Mr. Andreassen:

Governor Dunleavy is committed to taking a deliberate, measured approach to Reopen Alaska Responsibly. The plan establishes four basic metrics that will be tracked by Alaska Department of Health and Social Services (DHSS) to determine if restrictions should be eased, continued, or rolled back to a more restrictive phase in order to protect public health.

- **Epidemiology:** Tracking disease trends and trend forecasting.
- **Testing:** Monitoring overall testing volume and changes in the percentage of positive tests at the community, regional, and statewide levels. Ensuring fast turnaround of tests and reporting of results. The goal is to maintain COVID-19 positive tests at less than one per one-thousand.
- **Public health capacity:** Monitoring cases and conducting necessary contact investigations for positive cases.
- **Health care capacity:** Ensuring hospitals have adequate capacity and supplies (such as PPE and ventilators) to care for COVID-19 patients and other patients needing urgent care.

A color-coded status – red, yellow or green – will be used to indicate whether it's safe to move forward to a less restrictive phase or if a roll-back is needed.



GO: If we're seeing downward trends and all is going well, we'll methodically move to **lift restrictions**.



PROCEED WITH CAUTION: If the situation is stable or we are seeing a slow increase in cases, we may ask for **voluntary measures to flatten the curve**.



STOP: If we are seeing a consistent or rapid increase in cases or if we think we are running out of capacity to care for people with COVID-19 (regardless of the trend in cases), then we will need to **reinstate some restrictions**.

Governor Dunleavy understands that Alaska is a unique place, with diverse geography. We all recognize the COVID-19 situation is evolving daily and heavily impacting local governments. We know that local municipalities will likely have valuable input into what reopening looks like in each of their communities as they work with their local emergency operations center, health care provider partners, and the State of Alaska Section of Epidemiology.

Governor Dunleavy and I are committed to listening to and working with local governments as we address this response together. If you have any questions and concerns, or even ideas for future phases, please send an email to me at adam.crum@alaska.gov and the COVID question email address: covidquestions@alaska.gov. Phone calls can be arranged when necessary to discuss the reopening process between AML, a municipality member, myself and Governor Dunleavy.

Some small communities may already have the ability under Attachment B to restrict travel or add mitigation measures based on actions taken by their council or assembly. Still, we hope you will reach out to us if you have questions or would like to do something different so that you might be able to reopen more quickly.

Thank you for your partnership through this crisis. I ask that you please share this letter with your member municipalities.

Stay safe,

A handwritten signature in dark ink, appearing to read 'Adam Crum'.

Adam Crum
Commissioner

Enclosure: Attachment B – Small Community Emergency Travel Order

Diane Bixby

From: Moeller, Steven <SMoeller@nclcorp.com>
Sent: Sunday, April 26, 2020 3:35 PM
To: Moeller, Steven
Subject: NCLH MEDICAL PROTOCOLS

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Good day,

First of all, I hope that this e-mail finds you, your family and colleagues well during these trying and challenging times. As you are all aware, CDC has issued a "100 day No Sail Order" which is scheduled to expire during the 3rd week of July and Transport Canada has closed their ports until July 1st. We all understand these are not written in stone as the timeline could be changed. With this said, NCLH has recently announced that we have ceased our operations at this time until June 30th.

As I have mentioned to many of you, the Cruise Industry has been required to submit a proposed newly enhanced Medical Protocol to the CDC. This has been submitted by CLIA on behalf of the industry and is currently under review. In addition, I have also mentioned that NCLH is proposing a Medical Protocol which will exceed CDC minimum requirements. As discussed, it is critical that our Protocol is shared ahead with our Destination partners. We want for you to review the Protocol and address any concerns or questions you may have. It is important that we are all aligned prior to cruises sailing again. Our Operations Team have been working closely with the Medical experts and have finished our first draft which is ready for review. I am reaching out to you to let you know that I have been requested to submit one name per Destination to our Operations Department. They in turn will be creating a Zoom meeting to share the document with you. This meeting request will be established in the next week or two, as several meetings will be occurring depending on the region. Once you receive the meeting request, please feel free to invite other members of your team. We are looking at making this the first of several meetings, and it will be an introduction to our Protocols, and is expected to be at a high level.

I will continue to be the conduit between yourself and our Operations team to ensure we are all aligned and understand each one's needs. Please feel free to reach out to me with any questions you may have.

Please stay safe and I look forward to resuming cruise operations and having further open dialogues with all.

Warm Regards,

Steve

Steve Moeller | Senior Vice President – Commercial Development

P: +1 305.514.3974

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Norwegian Cruise Line Holdings Ltd.

Office Address: 7300 Corporate Center Drive | Miami FL 33126

Mailing Address: 7665 Corporate Center Drive | Miami FL 33126



Karl Amylon

From: Crum, Adam R (HSS) <adam.crum@alaska.gov>
Sent: Monday, April 27, 2020 4:08 PM
To: Abner Hoage
Cc: nils@akml.org; Shilling, Jordan K (GOV); Russell, Laura O (HSS); Karl Amylon; Lacey Simpson
Subject: Re: Question Regarding Cruise Industry

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Thanks for the info on the dates.

Absolutely, we will be talking with southeast communities. We have a meeting with CLIA because they reached out to discuss it and give the state background on the vessels, because no one on my team knew there was a group of ships that fell outside the July 1 date until we received a question on it last week at the press conference.

ADAM CRUM | Commissioner
Alaska Department of Health and Social Services
[3601 C Street, Suite 902 | Anchorage, AK 99503](#)
[907.269.7800](#) (office)
Adam.Crum@alaska.gov

On Apr 27, 2020, at 4:00 PM, Abner Hoage <AbnerH@city.ketchikan.ak.us> wrote:

Good Afternoon,

Thank you for the quick response. Speaking with our Port Director he advised that we have four cruise lines Alaska Dream Cruises, American Cruise Lines, Unc1ruise Adventures, and Lindblad Expeditions that operate smaller vessels and visit Ketchikan. All four of these have advised that they do not plan to begin operating until June 1 or later. In addition, we received the attached letter on April 13th from American Cruise Lines which also mentions plans for June and July.

I have cc'd the Ketchikan City and Assistant City Manager on this email as they may have additional insight that I am not aware of. If I may make a suggestion, I would highly recommend that rather than simply consulting industry you include several of the SE communities that receive these vessels in any discussion on this topic e.g. Juneau, Ketchikan, Skagway, Sitka, Petersburg, Wrangell and Haines. This will help develop buy in from the communities, and many of them will likely step up and help develop solutions and recommendations relieving workload from your staff.

Abner L Hoage

Incident Commander

Ketchikan Emergency Operations Center/Unified Command
KTN 2020 COVID-19
Phone: 907-228-2361

From: Crum, Adam R (HSS) <adam.crum@alaska.gov>
Sent: Monday, April 27, 2020 2:37 PM
To: Abner Hoage <AbnerH@City.Ketchikan.Ak.Us>
Cc: nils@akml.org; Shilling, Jordan K (GOV) <Jordan.Shilling@alaska.gov>; Russell, Laura O (HSS) <laura.russell@alaska.gov>
Subject: RE: Question Regarding Cruise Industry

CAUTION: External Email

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Good Afternoon Abner,

We have a meeting on Thursday with CLIA to discuss the small ships.

Do you know when they would be expected to arrive in Ketchikan?

ADAM CRUM | Commissioner
Alaska Department of Health and Social Services
3601 C Street, Suite 902 | Anchorage, AK 99503
907.269.7800 (office)
Adam.Crum@alaska.gov

From: Abner Hoage [<mailto:AbnerH@City.Ketchikan.Ak.Us>]
Sent: Monday, April 27, 2020 1:26 PM
To: Crum, Adam R (HSS) <adam.crum@alaska.gov>
Cc: nils@akml.org
Subject: Question Regarding Cruise Industry

Good Afternoon Commissioner Crum,

I have a daily Policy Group Meeting with our local Mayors, City and Borough Managers, and Attorneys to discuss response and recovery activity. I have been asked to find out if there is any kind of effort underway at the State level to provide guidance regarding resumption of the Cruise Industry? Is there a workgroup, task force, or planning effort underway to provide a consistent plan for this that applies statewide? While we understand that the CDC currently has a no sail order that covers all of the large and foreign flagged vessels there is a small subgroup of US flagged vessels that carry 250 or less passengers that are not covered by that no sail order.

Elected officials are getting very anxious about this and will begin a patchwork of actions that differ from community to community if this is not considered and addressed very soon. In fact the Ketchikan City Council has this as a topic for discussion the Thursday 4/30/2020.

Thank You,

Abner L Hoage
Incident Commander

Ketchikan Emergency Operations Center/Unified Command
KTN 2020 COVID-19
Phone: 907-228-2361

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