

REMARKS

Remarks by President Trump, Vice President Pence, and Members of the Coronavirus Task Force in Press Briefing

— HEALTHCARE

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James S. Brady Press Briefing Room

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THE PRESIDENT: Okay. Thank you very much. Good to be with you all. We're in a very critical phase of our war against the coronavirus. It's vital that every American follows our guidelines on the "30 Days to Slow the Spread." The sacrifices we make over the next four weeks will have countless American lives saved. We're going to save a lot of American lives. And we're in control of our own fate very much so. Maintaining social distance, practicing vigorous hygiene, and staying at home are your most effective ways to win the war and to escape danger.

While you're fighting this battle from home, we're working with the best scientists, doctors, and researchers anywhere in the world. We're racing to develop new ways to protect against the virus,

as well as therapies, treatments, and ultimately a vaccine. And we're making a lot of progress. I think, medically, a lot of progress.

At the same time, we're also racing to get relief to American workers and small businesses, as you know. I want to remind small-business owners across America that the Paycheck Protection Program is launching tomorrow. Nearly \$350 billion in loans will be available to small businesses, including sole proprietors. These loans are up to 100 percent forgivable as long as employers keep paying their workers. Got to take care of your workers.

Furthermore, we want Social Security beneficiaries to know that if they are typically not required to file a tax return, they don't have to file one in order to receive the direct cash payments that will soon be distributed to American citizens. The Treasury will deposit the money directly into the bank accounts. And don't forget, I will always protect your Social Security, your Medicare, and your Medicaid. We're protecting Social Security, Medicare and Medicaid, and I always will.

I'd like now to invite SBA Administrator Jovita Carranza, who's doing a fantastic job — she's going to be very busy in the next little while — and Secretary Steve Mnuchin to say a few words about these vital initiatives. And then we'll get on to the attack of the virus itself.

And please, if I might, Steve and Jovita.

ADMINISTRATOR CARRANZA: Thank you. Thank you, Mr. President and Mr. Vice President, Secretary Mnuchin, Ivanka Trump, and all who I have been working closely with in this effort. Small Business is the backbone of the American economy, and the President has put the nation's 30 million small businesses front and center in the response effort, and we are working hard to get money to them quickly.

This is an unprecedented effort by this administration to support small businesses, and we know that there will be challenges in the process. Secretary Mnuchin and I are working in tandem to ensure that feedback from our partners is being heard and implemented.

The private and public sector must work closely together to ensure that small businesses and their workers across the country are put first. This administration believes wholeheartedly that if you are a small business, you are a critical part of the economic fabric of this country. And your viability is critical to the economic wellbeing of your employees.

At SBA, we are working around the clock to support small businesses, ensuring that we are prioritizing emergency capital for small businesses that are suffering economic harm as a result of this unprecedented situation.

This relief will help stabilize a small business sector by providing businesses with the financial resources they need to keep their workers employed and keep up with their day-to-day operating expenses.

Today I want to ensure that small businesses all over the country know about the Paycheck Protection Program and how they can benefit from this. Simply put, the Paycheck Protection Program is to help keep employees on payroll and small businesses open. SBA will forgive the portion of the loan that is used toward job retention and certain other expenses. We are working closely with lenders so that businesses can go directly to their local lenders.

The Paycheck Protection Program is in addition to substantial work that the SBA has and will continue to do to help small businesses, including providing advances on SBA disaster loans and forgiving existing SBA loan payments over the next six months.

Additional details on these critically important programs can be found at [SBA.gov](https://www.sba.gov). And we will be updating these resources regularly.

Our hearts go out to those affected by this terrible virus. Our communities around the country are stepping up, and we will get through this together.

At SBA, we know that every phone call, email, or application submitted has a small-business owner, their employees, and the communities they support around the other side. Our most important objective is to allow small businesses to keep their employees onboard and keep their businesses viable through this unprecedented disruption.

I want to reiterate the importance of patience in this process as we work together to ensure that businesses are able to access needed credit. We will continue working around the clock, as we've done, with our federal and private sector partners, expanding capacity and working to make our systems as robust as possible to meet the needs.

Thank you, Mr. President.

THE PRESIDENT: Thank you, Jovita. Very good. Thank you.

SECRETARY MNUCHIN: Thank you, Mr. President, thank you, Mr. Vice President, and thank you, Jovita. Mr. President, you've made it clear to us we now need to execute. We need to get money to small business and American workers, and that's what we're doing.

The SBA and Treasury committed to get this program up and running tomorrow. And when Jovita says people are working around the clock, they literally — we had both teams working until 4 o'clock in the morning and start working again today.

We've heard feedback from lenders, community banks, regional banks, and we spent the last 24 hours making this system even easier.

So this will be up and running tomorrow. I encourage all small businesses that have 500 or fewer people, please contact your lenders. Any FDIC institution will be able to do this; any credit union, existing SBA lenders, and fintech lenders.

You get the money. You'll get it the same day. You use this to pay your workers. Please bring your workers back to work. If you've let them go, you have eight weeks, plus overhead. This is a very important program.

I'm pleased to announce we are going to raise the interest rate on these loans — and again, the interest rate is paid for as part of the program; the borrower doesn't have to pay this — to 1 percent. We had announced it was going to be 50 basis points. We've heard from some smaller community banks that their deposit costs — even though the government is borrowing at three or four basis points — this is, on average, a 90-day loan. To make this attractive for community banks, we've agreed to raise the interest rate.

Again, I encourage everybody: Take out the Paycheck Protection Program.

I'm also pleased to report the economic impact payments. I had previously said this would take us three weeks. I'm pleased to report that, within two weeks, the first payments will be direct deposit into taxpayers' account.

And as the President said last night, the President authorized me to say that anybody that has Social Security recipients won't need to file a new tax return, and we'll have that. If we don't have your direct deposit information, we'll be putting up a web portal so that you can put that up. It is a very large priority. The President has made clear we want to get this money quickly into your hands.

I'm also pleased to report that we continue to work closely with the Federal Reserve. We're in the process of designing a new facility that we call the "Main Street" lending facility. We're also looking at facilities for state governments as well.

And I'm also pleased to report the employee retention credit — it's up and running. The first \$10,000 of wages, you get a 50 percent credit; that's \$5,000 per person. For everyone who's kept someone, you can immediately get that money; you can deduct it from what you owe the IRS immediately. If you don't owe us money, you'll get a refundable tax credit. So that is up and running.

I'm also pleased to report we have the program up and running. We're taking applications from the airlines, from the cargo companies, and from national security companies.

So thank you very much, Mr. President.

THE PRESIDENT: Thank you, Steve. For Jovita or Steve, any questions, please?

Q Mr. Secretary, Chase Bank sent a letter to its business clients today saying that they don't have the necessary guidance from the SBA, from the Treasury Department, to be able to accept loan applications starting tomorrow. The need is clearly enormous. But at least one major bank says they're not fully empowered yet to be able to help their customers.

SECRETARY MNUCHIN: Well, as I spoke to all the CEOs yesterday — I had a conference call with them — we got very good input from them on what they needed. As I said, people were working until 4 o'clock.

I believe we just put up the Federal Register with the new guidelines for lenders. I've been assured that the banks will be in the process starting tomorrow.

Now, again, it's going to take a little bit of time but we committed that this will be available tomorrow, and I encourage all companies go to ~~SBA.com~~ [SBA.gov], go to Treasury.gov. You can see the information you need immediately.

Q Just to follow up with the small-business owners. A number of them are saying that they were on that conference call and that there's a tremendous power struggle going on between the Treasury and SBA, and that it's over process and forms is what they tell me; that lenders are actually opting out because they can't make enough money to even service the loans. So how are you going to make sure these small-business owners get the capital they need to survive right now?

SECRETARY MNUCHIN: Well, first of all, I can assure you — Jovita is here. Jovita used to work for me as the Treasurer. There is no power struggle.

ADMINISTRATOR CARRANZA: No.

SECRETARY MNUCHIN: Jovita and our team, as I said, worked together until 4 o'clock in the morning and started working at 7 o'clock again. We've made the form simpler.

And I can assure you, at five points — I've told these bankers they should take all their traders and put them in the branches. There'll never be another opportunity to earn five points on a 90-day government — fully government-guaranteed loan.

Q And those checks right into direct deposit, the IRS now saying it would take four to five months; you're saying two weeks. Can you give us a solid —

SECRETARY MNUCHIN: Well, let me be — let me be clear. I don't know where you're hearing these things. I told you this would be three weeks. I'm not committing to two weeks. We're delivering on our commitments. The IRS, which I oversee, within two weeks, the first money will be in people's accounts.

Q Just to follow up on that: I think the question is not about the first checks. For folks who have direct deposit, it sounds like those will go out pretty quickly. The question is then for folks who don't have direct deposit.

SECRETARY MNUCHIN: Sure.

Q And there was a staff memo that was released by the House Ways and Means Committee today saying that that process could take up to five weeks [sic]. That takes you to mid-August. Is that how long it's going to take?

SECRETARY MNUCHIN: That is not going to take five —

Q Or five months, I'm sorry.

SECRETARY MNUCHIN: Again, let me just say, when Obama sent out these checks, it took months and months and months. I am assuring the American public. They need the money now. What we're going to do is — again, if we have your information, you'll get it in two — in — within two weeks. Social Security, you'll get it very quickly after that. If we don't have your information, you'll have a simple web portal; you'll upload it. If we don't have that, we'll send you checks in the mail.

Q How many checks can you process in a week, though? How many checks can you —

SECRETARY MNUCHIN: Again, we can process a lot of checks, but we don't want to send checks. In this environment, we don't want people to get checks. We want to put money directly into their account.

Q Thank you, Mr. Secretary. This is for, I guess, both you and the Administrator. There have been some anecdotal reports that business people are trying to get access to the online site to submit the applications. The website has been crashing. I've heard of webinars going offline because there's just too many people on them. So how are you guys going to be ready, you know, tomorrow to get these loans out?

SECRETARY MNUCHIN: We've brought in a lot of external resources at SBA and us to make sure there's additional capacity. As I said, we heard a lot of good feedback yesterday to simplify this process. It's going to be up and running.

Now, let me just be clear: That doesn't mean everybody is going to get their loan tomorrow. But the system will be up and running. We encourage people over the next week, sign up. You can go on right now. You can go on the web, see what information you need. Very simple process.

Q Mr. Secretary, on a separate subject, have you been in touch with Leader McConnell and Speaker Pelosi about their differences right now about another stimulus package?

SECRETARY MNUCHIN: I spoke to — I've spoken to the Leader, I've spoken to the Speaker. I've spoken to the President constantly. When the President is ready and thinks we should do the next stage, we're ready. The President has talked about the issue of infrastructure since the campaign. I think you know that's a big priority for him.

And again, if we run out of money on the small-business program, we'll be back right away to Congress to get this increased.

Q Does the unemployment numbers today increase the urgency of doing a phase four?

SECRETARY MNUCHIN: Well, let me just say, you know, we're going through something that we've never done before, where the government has shut down big parts of the economy because of health reasons. Our economy was in great shape; our companies were in great shape.

There are three ways that Americans are going to be protected. For small business, they'll get paid by their business through this program. The direct deposit. There's also enhanced unemployment.

So we realized, unfortunately, there are a lot of companies that, because they aren't in business over a short period of time — again, we're working with the states on enhanced unemployment.

And as soon as the medical professionals and the President give the all clear, we're going to have a ton of liquidity. We have about \$6 trillion — this has never been done between us and the Fed — to put into the economy to support American workers and American business.

Q Mr. Secretary, in addition to the jobless numbers we saw today, phase three was signed before the social distancing guidelines were extended for another month. So what additional relief are you going to give to Americans as they stay out of work for all these extra weeks? I mean, what are you waiting for?

SECRETARY MNUCHIN: Well, we — in designing this program, we thought that we had liquidity for about 10 weeks. And that's what we've designed.

And again, I think the President's been very clear, if we need to go back to Congress to support the American economy and American workers, we will be doing that.

Q Secretary Mnuchin, House Speaker Nancy Pelosi has formed a Select Committee to oversee the distribution of recovery funds. And she says she wants to make sure that those funds are wisely and efficiently spent. Do you think that Select Committee is something that's necessary?

SECRETARY MNUCHIN: I don't. I mean, you know, the — both parties wanted us to have oversight, wanted us to have transparency. We have full transparency. We have a oversight committee that the Speaker gets to pick someone, the Leader gets to pick someone. I believe there's five people on it. And again, that committee will review the money that we're spending. And again, we support full transparency. Taxpayers should understand how we're going to support this economy and jobs.

Q Mr. Secretary, Senator Murkowski has asked you to consider providing loans to energy companies under the CARES Act, the phase three bill. What are your thoughts on that? Would you consider providing those loans to energy companies?

SECRETARY MNUCHIN: So, thank you, and let me clarify. I have very limited ability to do direct loans out of the Treasury. I can do them for passenger airlines, cargo airlines, contractors, and national security companies. Outside of that, we work with the Federal Reserve to create broad-based lending facilities, which we will do so.

So our expectation is, the energy companies, like all our other companies, will be able to participate in broad-based facilities, whether it's the corporate facility or whether it's the "Main Street" facility, but not direct lending out of the Treasury.

Q A question for clarity about the direct payments to Americans. For those folks who don't have bank accounts, who don't have direct deposit information on file with the IRS, how long would they have to wait for their check?

SECRETARY MNUCHIN: Well, for people who don't have direct deposit — again, we'll have an easy way they put it up. We can, on a rolling basis — I think, you know, within a couple of days when they give it to us, we'll send the money out. We do realize there are people who are underbanked.

And again, we're working with all the digital companies, prepaid debit cards. We're working with all of them to make sure we have a process that every American gets their money quickly. This money does people no good if it shows up in four months. And we will deliver on that promise.

Q So, "quickly" is a matter of weeks then, perhaps, not months?

SECRETARY MNUCHIN: "Quickly" is a matter of weeks and not months. That's correct.

Q Mr. Secretary, would you consider a moratorium —

SECRETARY MNUCHIN: In the back. Go ahead.

Q Mr. Secretary, one area where you can make direct loans is to the airlines. How much do you expect that the Treasury Department and the federal government will be involved in overseeing the operations of airlines as it pertains to which routes get cut back, how much they operate, what they do about their employees and the like?

SECRETARY MNUCHIN: So there are — there are very strict requirements that's built into the bill. Again, this was a bipartisan requirement. One, anything we do with the airlines, they have to maintain substantially all of their employees. So again, any money that we provide them will go to pay their employees. We're going to be working with the Secretary of Transportation. There are requirements to maintain certain routes.

So again, we have a very clear process. We've hired three outside advisors who will be financial advisors, and three law firms. We'll be releasing that information shortly. And I want to thank them. They're all working for basically very, very little money. They couldn't work for free, so they've agreed to basically work for what they would sign up to work for charitable organizations.

So again, no big fees to bankers. We've got a great team of three lawyers and three financial advisors that will assist us.

Q Mr. Secretary, just to follow up on that, will you give us a list of the names of those people who are advising you when you release the information?

SECRETARY MNUCHIN: Of course, we will. We'll give you the names as well as the contracts. So again —

Q Do you have any names right now other than BlackRock?

SECRETARY MNUCHIN: So, again, I'm happy to announce we have — the PJT Partners — okay? — is going to do the passenger airlines; Moelis & Company is going to do the cargo and contractors; and Perella Weinberg will handle the national security. And there'll be three law firms, which we'll announce shortly, that will be working in each one of those sectors.

And, again, let me just be clear: We need to get this done quickly. The airlines need money. We're going to work very closely with the Department of Transportation and get this done quickly. We've actually already received contracts from a lot of the people. Again, there's guidance up on the web. Full transparency. We've asked for applications.

Q Mr. Secretary, on the airline issue again, you know, Speaker Pelosi and others have said that the government taking stakes in those airlines should not be a condition for the federal government to provide payroll support specifically. What's your response to that?

SECRETARY MNUCHIN: I spoke to the Speaker last night about that. This was something that was highly negotiated between the Republicans and the Democrats. The President was personally involved in this. He was on the phone with us many times. Mitch McConnell, Mark Meadows, senators on both sides.

There is a specific line in the bill that says that the Secretary, meaning me, will determine proper compensation. So this is not a bailout for the airlines. And I will be working — once we get our advice from our financial advisors, we get the applications from the airlines, I'll be working very closely with the President, and we'll make sure that we strike the right balance, not a bailout. Taxpayers get compensated. But these airlines — these are national security issues. We want to keep our airlines intact.

Q Mr. Secretary, just more broadly for — perhaps for the Administrator, if not for you as well. Some small businesses, restaurant owners, for example, are finding that laying off their employees so that they can start collecting unemployment is better both for them as business owners and for

their workers. What incentives do they have right now to keep their employees on the payroll if no one is coming into their restaurant?

SECRETARY MNUCHIN: Well, the incentive that you have — and we want American business to be kept intact. The incentive is: These are loans that turn into grants. So if you're a business owner, and you're a restaurant, you can hire your people back, you get money for their medical. You keep them on the medical plan. You get money for your rent. You get money for your electricity. So you're motivated. We want you to have a business that you can reopen quickly when it's appropriate. So this doesn't cost the business owners anything.

You know, when people talk about — I can't imagine any American worker who had a job, has offered to keep their job, isn't going to want to have it. And let me just be clear — we've also talked about this unemployment issue. You can only get unemployment if you don't have a job. So unemployment is intended for those people that are some of the mid-size or larger businesses — and we're very sympathetic to this — that these companies can't afford. And for those people, the enhanced unemployment will be a significant benefit.

But we want to make sure — 50 percent of the American workforce is small businesses under 500 people. The President, the Vice President, the Administrator and I want to make sure this part of the economy is ready and intact when we're ready to reopen.

Q A question for the Administrator, if I may. Is there a certain category of small businesses that you're most concerned about? Restaurants, hair salons, things like that?

ADMINISTRATOR CARRANZA: That's a great question. We're concerned about every small business. There's 30 million small businesses that we're really focused on. And we're working feverishly to make sure that we can provide the available funds to them as quickly as possible.

So it's 30 million small businesses and the other businesses are being dealt with, with the PPP, with the Paycheck Protection. There was also the disaster — what we call it the injury — or economic injury disaster loan. And then there was an advance associated with that particular program as well.

So, to answer your question, we're concerned about all businesses. And as the Secretary indicated, we're looking at employees being ready, not lost in this process. We want businesses to stay intact

because they represent half the — half the GDP. So if we spend a trillion to support 10 trillion or 11 trillion, I think that's a significant investment, and that's what we're focused on.

Q Is there a certain segment that's particularly vulnerable?

SECRETARY MNUCHIN: Let me — I just want to — hang on. I just want to make one comment for explanation, because I want to make sure everybody out there understands this. If you're an independent contractor, if you're a sole proprietor, you're eligible for this as well. Now, that program won't be up and running until next week.

But again, this is a very broad definition of small business. So if you're an independent plumber, if you're an independent contractor, you're covered under this program. It's slightly more complicated; you have to come in to your bank and give them more information. But starting next week, that part of the program will be up and running.

Also, charities. Charities, as well. Very important. The Vice President and President made sure that we covered small charities in this.

Q And does that include churches and religious nonprofits?

SECRETARY MNUCHIN: It does, although there are some technical issues. But, yes, it does include faith organizations.

Q Is that under the under the — that's under the SBA program?

SECRETARY MNUCHIN: This is under the PPP. Yes, the new SBA program, they are covered.

THE PRESIDENT: Okay? Thank you all very much.

SECRETARY MNUCHIN: Okay. Thank you, everybody.

THE PRESIDENT: Thank you, Jovita. Thank you, Steve. Great job. Thank you.

Okay, so that begins right away and they start handing out checks. And a lot of people are going to have their businesses built back up quickly, I hope. And we'll see. It's complicated, big. Small

business is actually big business. So I thank them both.

And please — good. We have some great gentlemen. Let me see. Great gentlemen. That's correct. Thank you very much.

Today, my administration is also issuing new guidelines to protect elderly Americans who remain the most vulnerable. By now, nursing homes should have suspended the entry of all medically unnecessary personnel.

Today, we're further recommending that all nursing home facilities assign the same staff to care for the same group of residents consistently to minimize any potential spread. And we're also urging facilities to designate separate areas for healthy and sick residents. And this is a practice that we probably will be recommending into the future, long after the enemy is gone — this particular enemy is gone.

We're also making every effort to provide relief to our great veterans. We take very good care of our veterans. At my direction, Secretary Wilkie will use any authority at his disposal to extend deadlines for benefits and to postpone debt collections.

We're now conducting well over 100,000 coronavirus tests per day. It's over a thou- — a hundred thousand test a day — and these are accurate tests and they're moving rapidly — which is more than any other country in the world, both in terms of the raw number and also on a per capita basis. The most.

The FDA has also authorized the first coronavirus antibody test developed by Cellex, a key step that will help identify people who have recovered and to understand their immune response and their immune system.

Moments ago, I directed Secretary Azar and Acting Secretary Wolf to use any and all available authority under the Defense Production Act to ensure that domestic manufacturers have the supplies they need to produce ventilators for patients with severe cases of C-O-V-I-D 19. You know what that is, right? Become a very famous term: C-O-V-I-D — COVID.

This action will help General Electric, Hill-Rom, Medtronic, ResMed, Royal Philips, and Vyaire Medical overcome obstacles in the supply chain that threaten the rapid production of ventilators.

We have over 100,000 being built right now, or soon to be started. We anticipate issuing more orders under the Defense Production Act in the very near future.

In addition to the one that I've just signed against 3M for facemasks — we just signed an element of the Act against 3M. And hopefully they'll be able to do what they are supposed to do. I just spoke to Mary Barra of General Motors and she said they're very soon going to be ready to start production of the ventilators. They have a lot of ventilators that they've committed to build, and they'll be starting very, very quickly.

FEMA continues to deliver resources to areas most affected by the virus, including New York. On top of the 3,000 beds we're already providing to the Javits Center, the Department of Defense is adding another 48 ICU beds.

Governor Cuomo has asked that this facility go — and it's a big, beautiful facility — it be converted to a COVID hospital. And we hadn't done that yet. We hadn't thought in terms of doing that. But their use is — their real demand is for that. And we had meetings on it with the task force. We had meetings with the military. And I've decided to say, "Yes, I'm going to do that," that I will be signing and agreeing to a "yes" answer.

So that — we will be doing that, and also, we will be staffing it. So the federal government is doing a lot of things that wasn't anticipated that it do.

This is a 2,500 — and/or 2,900 can easily be set up — hospital built in Javits Center. And so we're going to be converting that to a COVID-19 hospital. And it's going to be staffed by the military and by the federal government.

And based on the fact that I agreed to that, we had two other facilities that were likewise asking for it, and that would be in Louisiana and also in Dallas. And we'll be doing those. We spoke to the governor of Louisiana, spoke to the governor of Texas. And we've told them that we will be staffing those hospitals, again, above and beyond, but that's okay. We have to do that.

In addition, the USNS Comfort is docked in New York to accept patients. That is a non-COVID.

To date, FEMA has delivered more than 4 million N95 mask respirators. And it's — think of that: 4 million. Four million.

Don't forget, we're a secondary source. The states are doing it and we're backing them up. But we've gotten 4 million N95 respirators, 1.8 million surgical masks, 460,000 face shields, 1.4 million gloves, and 4,400 ventilators just to the city and to the state of New York. And some of them now are being sent. I spoke with both Governor Cuomo and Mayor de Blasio a little while ago, and some of them are being sent to the city.

All of America stands with the people of New York in this time of need. It's definitely a hotspot, but we have other hotspots also. And we're taking them — taking care of them very, very strongly, very powerfully. We have the finest people in the world in those locations. And I think the federal government has not only acted early but acted quickly, professionally. There's no people like this.

Doctors, nurses, first responders, and other healthcare providers who want to help New York at this critical time should visit website [NYC.gov/HelpNow](https://www.nyc.gov/HelpNow). [NYC.gov/HelpNow](https://www.nyc.gov/HelpNow). They need help now. They need people to help them.

We have great facilities, and we've built some brand-new facilities, big ones, but we need help. We need help for professional people. So if you're in an area that isn't so affected and you're a doctor, a nurse, a healthcare worker, please get to that website. And we would really appreciate your help. New York City needs it. Louisiana, by the way, needs it. Michigan needs it. Whatever you can do. Those are very strong hotspots; they need help.

In recent weeks, as the virus has spread and economic hardship has followed, we have seen Americans unite with incredible selflessness and compassion. I want to remind everyone here in our nation's capital, especially in Congress, that this is not the time for politics, endless partisan investigations.

Here we go again. Have already done extraordinary damage to our country in recent years. You see what happens. It's witch hunt after witch hunt after witch hunt. And in the end, the people doing the witch hunt have been losing, and they've been losing by a lot. And it's not any time for witch hunts. It's time to get this enemy defeated.

Conducting these partisan investigations in the middle of a pandemic is a really big waste of vital resources, time, attention. And we want to fight for American lives, not waste time and build up my poll numbers, because that's all they're doing because everyone knows it's ridiculous.

So we want to focus on the people of this country, even the people of the world — we're going to be able to help them — because, right now, as an example, we're building so many ventilators — very, very hard to build — but we're building thousands. Thousands of them. And a lot of them will be coming at a time when we won't need them as badly, because it takes time. Very complex, very expensive. And we'll be able to help outside of our country. We think we'll be able to help. That's something that you cannot easily produce.

As citizens, we're linked together by the shared bonds of national love, loyalty, and affection. There's no earthly force more powerful than the patriotic pride that stirs in our hearts. And that is so true. It's incredible the job that everybody has been doing. Everybody. They don't sleep. They don't go to bed. Sometimes they get nothing.

I said to somebody recently on the task force, "How many hours' sleep have you gotten over the last couple of days?" The answer was "none." None.

In one Massachusetts neighborhood, citizens come out of their homes each night at 8 o'clock from their porches and they sing "God Bless America." Others have joined in spreading from house to house, down one street, up to the next, until their little town with a spirit of patriotism, and reminding all Americans that we're all in this together. We'll fight together and we will win together. We're going to win this.

Now, what I'd like to do is — I'm going to step out. We have a meeting on this subject. And I'm going to step out just for a few moments. I'll be right back. We'll answer some questions.

But you have some very hardworking people who have done an incredible job, led by Vice President Mike Pence, head of the task force. And then Jared Kushner is going to say a few words. And Admiral Polowczyk, Peter Navarro, Dr. Birx, and myself. I'll be right back.

So I'll see you in a little while.

I did take a test; it just came out. This is from the White House physician. You may have it. It just came out. I just took it this morning. And I took it. It took me literally a minute to take it. And it took me, I guess it was 14 or 15 minutes. I went to work. I didn't wait for it, but he said it took 14 minutes, or something, to come up with a conclusion. And it said, "The President tested negative for CVOID-19." So that's the second one.

I think I took it, really, out of curiosity to see how quickly it worked and fast it worked, and it's a lot easier. I've done them both. And the second one is much more pleasant, Jeff, I can tell you that. Much more pleasant.

So I'll be back in a little while. And, Mike, please take over. Thank you. Thank you all very much. I'll be right back.

THE VICE PRESIDENT: Thank you, Mr. President. The White House Coronavirus Task Force met today, but earlier in the day, the President convened all the key elements of our supply chain team in the Oval Office for an update on the progress that we have been making, working literally around the clock to make sure that our healthcare workers, the people on the frontlines, have the personal protective equipment and also the ventilators to be able to meet this moment.

And today, you're going to hear from the people that are literally working — working each and every day to make that happen. Dr. Deborah Birx is also with us. She'll reflect in a few moments on the progress that we're making analyzing the data. Each and every day, we're looking county by county, state by state, consulting with governors and local health officials.

At the present moment, more than 1.3 million tests have been performed. And, as you all are aware, some 236,000 Americans have tested positive for the coronavirus, with now the losses over 5,000 Americans. And our hearts are with their families.

Beyond that, we have been focusing not just on ensuring the testing is occurring but that the supplies are flowing. As the President just announced, he made a decision today to deploy thousands of N95 masks directly to New York City's public hospitals. And our team will speak about that in just a moment.

And also, the President took the unprecedented step to direct the Department of Defense to use military healthcare personnel to operate all COVID facilities at the Javits Center in New York, at the Convention Center in New Orleans, and at the Convention Center in Dallas. And we informed each of the governors of those states today that, at their request, we were making those military medical personnel available to operate in an all-COVID facility.

But we would emphasize to people in that community who believe you've been impacted or have contracted the coronavirus: Contact your local healthcare provider. We anticipate, in the New York

area, that your local healthcare provider will make the decision whether you are transferred to the Javits Center. And in all cases, simply look to the guidance of your local governors about how best to receive the care that every American — every American is entitled to have.

Beyond that, let me say that we have been working through FEMA's acquisition process not only to deploy, but to gather up personal protective equipment.

And, in just a few moments, you will hear from Admiral John Polowczyk about the extraordinary progress that we have made in deploying not just the Strategic National Stockpile, but also in identifying on the commercial marketplace around America and around the world, literally millions of N95 masks, surgical gowns, gloves, protective equipment. And at this point, we've distributed some 7,600 ventilators. And you'll hear today specifically about the states that have received those ventilators.

We're just — this team has truly acted in an inspiring way and literally is working with dozens and dozens of people at the FEMA Stabilization Task Force to make sure that we are leaving no stone unturned to find the supplies we need.

Let me also say, today you're going to hear from Jared Kushner, Senior Advisor to the President of the United States, but someone that the White House Coronavirus Task Force directed to work with FEMA on supply chain issues. And in recent weeks, he's been leading a working group, in conjunction with FEMA, that literally has identified millions of medical supplies around the nation and around the world. And we're grateful for his efforts and his leadership.

Finally, you'll hear from Peter Navarro, who will explain the action the President took today, using the Defense Production Act.

But as you hear details today about medical supplies that have been distributed, those that have been purchased, those that we're making available, the ventilators distributed to hospitals, and those that are available, let me just remind every American that you can make a difference in ensuring that every patient has the treatment that they deserve. Every healthcare provider, every doctor and nurse and nurse's assistant has the protective gear to provide the care that you would want your family to have by putting into practice the President's "30 Days to Slow the Spread."

I mean, we want you to take to heart the President's Coronavirus Guidelines for America, first, to protect your own health, to protect the health of your family, to protect the health of your community. We know so many people are asymptomatic, and people that literally don't know they have the coronavirus but have the ability to infect others. We want you to put these guidelines into practice: social distancing, using a drive-through at a restaurant, washing your hands on a regular basis.

But as we focus today on supplies, make no mistake about it: Every American can make sure that our healthcare workers and, more importantly, Americans that are struggling with coronavirus have the equipment to support their treatment by putting these principles into practice, because the fewer Americans that contract the coronavirus, the fewer Americans will have to enter our healthcare system. And that'll continue to preserve the capacity in our healthcare economy.

So we thank the millions of Americans who have responded in the first two days of "30 Days to Slow the Spread." And I'm just absolutely confident that, in the days ahead, every American is going to do their part — for your health, your family's health, the health of your community — and to ensure the strength and vitality of the greatest healthcare system in the world.

With that, let me introduce Jared Kushner to speak about the work that he's been doing, working with FEMA on ensuring a strong supply chain to meet this moment.

Jared?

MR. KUSHNER: Thank you, Mr. Vice President. And thank you for your great leadership on the task force, and thank you to Dr. Birx and Dr. Fauci as well. It's been an honor working with you these past few weeks.

When the Vice President first asked me to help on the task force with different tasks, I asked the President what he expected from the task force and how I can best serve him and the task force.

What the President asked is that all of the recommendations that we make be based on data. He wanted us to be very rigorous, to make sure that we were studying the data, collecting data. A lot of things in this country were happening very quickly, and we wanted to make sure that we were trying to keep updating our models and making sure that we were making informed decisions and informed recommendations to him based on the data that we were able to collect and put together.

The President wanted to make sure that we had the people doing the best jobs, and making sure that we had the right people focused on all the things that needed to happen to make sure that we can deliver in these unusual times for the American people.

The President also instructed me to make sure that I break down every barrier needed to make sure that the teams can succeed. This is an effort where the government is doing things that the government doesn't normally do, where we are stretching, we're acting very quickly. And the President wants to make sure that the White House is fully behind the different people running the different lines of effort to make sure that we get everything done in a speed that the President demands.

The President also wanted us to make sure we think outside the box, make sure we're finding all the best thinkers in the country, making sure we're getting all the best ideas, and that we're doing everything possible to make sure that we can keep Americans safe, and make sure we bring a quick end to this in the best way possible, and balance all the different aspects that need to be thought of while we do this.

This truly is a historic challenge. We have not seen something like this in a very, very long time. But I am very confident that, by bringing innovative solutions to these hard problems, we will make progress.

Today, we were briefing the President earlier. He asked me to come out and talk a little bit about what we've doing on the Supply Chain Task Force, which Admiral Polowczyk has been leading. And what he's been very impressed by is the way that we've been resourceful to find product all over the world, all over the country. And we are finding ways to solve the different problems.

The President has been very, very hands on in this. He's really instructed us to leave no stone unturned. Just this morning — very early this morning — I got a call from the President. He told me he was hearing from friends of his in New York that the New York public hospital system was running low on critical supply. He instructed me this morning. I called Dr. Katz, who runs the system, asked him which supply was the most supply he was nervous about. He told me it was the N95 masks. I asked what his daily burn was. And I basically got that number, called up Admiral Polowczyk, made sure we had the inventory.

We went to the President today, and earlier today, the President called Mayor de Blasio to inform him that we were going to send a month of supply to the New York public hospital system, to make sure that the workers on the frontline can rest assured that they have the N95 masks that they need to get through the next month.

We'll be doing similar things with all the different public hospitals that are in the hotspot zones and making sure that we're constantly in communications with the local communities.

One thing I will say, just based on data, is that we've been getting a lot of data from different governors and from different mayors and from different cities. One thing I've seen FEMA do very, very well, over the last week or so, is now we're getting real-time data from a lot of cities. People who have requests for different products and supplies, a lot of them are doing it based on projections, which are not the realistic projections. The projections change every day as we see the cases, as we see the impacts of the "stop the spread" effort that this task force recommended and the President has been pushing forward.

So I do think that we'll see that. Hopefully, there'll be impact of that. And the task force has been working very hard, through the FEMA group, with Admiral Polowczyk to make sure that we're getting the supplies to people before they run out, and making sure that we're doing it in a proper way.

I'd like to just introduce Admiral Polowczyk, who before coming to this — I guess still is — he's the vice director for logistics for the Joint Staff. I got a call from one of the senators saying, "Well, why don't you put a great military person in charge of the logistics and the supply chain and the Defense Production Act?" And I said, "Well, the President already did that." This is the best man that we have in the country for supplies and logistics. He joined the task force 13 days ago over at FEMA, and he's built a team — really, at the direction of the Vice President — that includes people from FEMA, OMB, the FDA, HHS, the White House, and from everywhere else.

And what they've done over the last 13 days has been really extraordinary. We've done things that the government has never done before, quicker than they've ever done it before. And what we're seeing now is we found a lot of supplies in the country. We've been distributing them where we anticipate there will be needs, and also trying to make sure that we're hitting places where there are needs.

So I can tell you the people on the — in the task force, they're working day and night. You've got a lot of people in the government. We recognize the challenge that America faces right now. We know what a lot of the people on the frontlines are facing, the fear that they have that they won't have the supplies they need. And our goal is to work as hard as we can to make sure that we don't let them down.

So I just want to thank everybody. And, with that, I want to introduce Admiral Polowczyk, who's doing an amazing job.

REAR ADMIRAL POLOWCZYK: Thank you, Mr. Kushner, Mr. Vice President.

So today I'm going to cover a couple items — a couple of — five things.

The first thing I'm going to talk about is resources pushed out from the federal government. And then I'm going to talk about this air bridge, which you may have heard about. I'm going to talk about data. As you said, we're — Mr. Kushner is absolutely right; we're trying to be data driven. And, with that, I'm going to talk a little bit about how we're trying to expand the industrial base here to meet this challenge.

So the first thing I want to talk about is surgical masks. So we've all — we've quickly stated numbers here. So these — I'm about to go through several different slides to give you just scale and magnitude of federal resources that have been applied at the problem.

So, 27.1 million surgical masks pushed out to state governments. For N95 masks, 19.5 million N95 masks. And so, if I was — if I was in a local hospital that was running short, I would — I would look upward because the federal government has pushed out resources.

So for protective gloves, 22.4 million. 22.4 million pairs of protective gloves. For face shields, 5.2 million face shields. For ventilators, we have pushed to the states more than 7,600 ventilators. And I think, as I was coming over here, that number has changed slightly. I think it's now 7,640 given to these states — to the predominantly of these states.

So we wanted you to have some numbers.

Now, as we've indicated, we have ventilators in the National Stockpile. We pushed ventilators out. We're holding ventilators to put to the point of need. But we're also buying ventilators, asking the industrial base who produces approximately — prior to COVID, approximately 30,000 ventilators a year. We are going to, over the next several months, by the end of June, work to acquire 100,000.

And so, one of the — one of the tools that we're going to — I can anticipate needing — we've already executed — is all of those vendors that we're buying them from will need — potentially will need help in their supply chains with their suppliers. We might rate orders. We might help them get ahead of others in that endeavor. So I think Mr. Navarro is going to talk a little bit more on that later.

So let me talk about the air bridge. So it normally takes approximately 37 days to get from overseas, the product — load it, get it to the United States, and distribute it. That's about 37 days.

So, to prime the pump, so to speak, we have lined on an air bridge to get product here faster, working with our major suppliers, as they have — as they work to fill orders to get more to healthcare workers now. We are working to align transportation to product.

Now, one of the things we're also doing is the team that works for me are scouring the globe and finding pockets of personal protective equipment that might not otherwise be in the U.S. hospital supply chain. That is also going on these flights. Six completed and a number scheduled. Twenty-eight flights scheduled here in the near future.

We're — we are working towards — some days, we'll have one flight, some days there might be two flights, multiple flights over the next coming days. These 28 or — as far as I can see, out to a couple of weeks. Then, again, matching product to flights to create volume in the supply chain here faster than the 37 days.

I'm just going to leave that up as I talk about a few other items. So let's talk about New York City and the public health hospitals. I believe they're called New York City Health and Hospitals.

The President directed — as I speak, there are pallets being formed, truck being loaded. I gave an address in New York City here an hour or two ago. And one of our distributors is making that happen, and that delivery will happen tomorrow.

On the data front, this is almost unprecedented. This is a commercial supply chain with six to seven major distributors of health equipment. We brought them all in, and we said we need to make informed decisions, and we are going to help make informed allocation decisions.

So within a matter of days, feeding from their business systems — their enterprise resource-like systems — I brought onboard a tool — a supply chain tower — that the DOD was using to manage a supply chain for a very complex weapon system. Their data goes into a data lake. We have a tool to be able to use their data and see it. I can tell what product is coming in, what their orders are, what they're filling, what they're not filling, and see the volume in the supply chain, and understand what they're doing down to the county level. We're working to get it potentially down to the hospital level.

So this 200-and-some-odd N95 respirators, we took a look in there, in the supply chain, and we said we can't — we have the volume to go do that. I called the distributor, and they're making — they're making that happen.

We anticipate, as the hotspots around the country — we anticipate these vendors, at our direction, helping them allocate product to the right place at the right time.

So if I can talk finally about expanding the industrial base. So the Vice President was at Walmart the other day, who told him, "I want to get in this game. How do I do that?" So I got the call. We provided them specifications. And now Walmart is going to have — use their suppliers to cut fabric, make gowns, sew product. But that's not always the case. We have lots of folks that want to help.

I believe you will see, in the coming days, the use of the Defense Production Act in creative ways to help people that are not doing this today to do it.

We have, essentially, leads — well, the number yesterday was 210 — I believe it probably grew today — that we are working with to find how each one of those might need help to get in the game, that's not in the game, to increase the throughput through the healthcare market.

Again, the President gave me one task: Get more to our healthcare workers now. And I took that to heart because I have — not that I don't need that from the President, that direction to move out — but I have family in New York. My sister is a nurse practitioner in a Westchester hospital, and my

niece is a nurse on a Long Island hospital. And I have other healthcare professionals in the family. So I have skin in this game.

The President asked me to get more to the healthcare workers. I'm going to get more to healthcare workers.

I'd like to hand it over to Mr. Navarro.

THE VICE PRESIDENT: (Inaudible) the 200,000 going out tomorrow —

REAR ADMIRAL POLOWCZYK: The 200,000 is going out as we speak.

THE VICE PRESIDENT: You might want to be very specific about that.

REAR ADMIRAL POLOWCZYK: It'll be — it'll be delivered tomorrow.

Q Can I ask a question?

THE VICE PRESIDENT: Let me — let me be clear on that, if I can. What Jared announced, what the Admiral just unpacked is that pallets are being loaded right now to send 200,000 N95 masks —

REAR ADMIRAL POLOWCZYK: N95 respirators.

THE VICE PRESIDENT: — to New York City to the public health hospitals.

REAR ADMIRAL POLOWCZYK: To the public health warehouse in New York City.

THE VICE PRESIDENT: To all the healthcare workers: Help is on the way.

Q Based on the tools and the data you have available to you, where is the logjam? Where has it been? How have you identified that?

REAR ADMIRAL POLOWCZYK: I think —

Q Because as you say all this — when we have millions more PPEs going out the door, as you well know, the frontline medical workers are not getting it.

REAR ADMIRAL POLOWCYZK: So I would answer you — I would answer you this way: We put up a lot of numbers. I said that if you're not a — you're in a hospital and you're not seeing PPE, I would look up to the state level first.

Q But we aren't —

Q We've hearing from governors, sir, saying they can't get the medical equipment that they need.

Q And the reason for that is because, according to governors and also by the fact that we haven't seen any numbers up there about what is going to the private sector, can you tell us what percentage of the supplies on these large cargo planes are going to private companies versus FEMA, versus the states? Is it 80 percent?

REAR ADMIRAL POLOWCYZK: So FEMA is — so this product that we're moving is primarily commercial product that would enter the commercial system and be distributed through financial business transactions between hospitals and these distributors.

Q So, just to clarify that, that explains why states say they're bidding like they're on eBay, because the supplies are going to the private sector and then they have to go there to get the supplies.

REAR ADMIRAL POLOWCYZK: That's normally how things — that's normally how things work, right? So I'm not here to disrupt a supply chain and say — look, these six distributors — six, seven — they have six to seven hundred warehouses. They have trucks to go to the hospital door every day. We're bringing product in. They're filling orders for hospitals, nursing homes, like normal. I'm putting volume into that system.

I would say that we have the data now at last — so we put together this data element over the last, you know, what? Thirteen days? Get the people in, look at the problem, build this. I am now seeing truth about what's in the supply chain. And I would say that there's been some abnormal behavior.

Okay?

Q Yes. Thank you, Admiral. House Oversight Committee Democrats say that FEMA officials told them that the ventilators that the government has ordered won't be ready until June, which is well after the expected peak. Will the Defense Production Act memo signed today do anything to speed that up?

REAR ADMIRAL POLOWCZYK: Yes, it will. Mr. Navarro will talk about that. We're on line to receive several thousand ventilators in the month of April and several thousand more ventilators in the month of May, ramping up to a big number in June.

Again, going from, you know, an industry that produces about 30 annum — 30,000 annum to a — to a very big number.

Q Admiral, are you confident that this system means the states with the greatest need are getting the supplies?

REAR ADMIRAL POLOWCZYK: Yeah, so —

Q Because a lot of governors are saying that they can't get what they need and different states have more pressing urgency, obviously, depending on the caseload.

REAR ADMIRAL POLOWCZYK: So we marry up — we're marrying up where CDC — where the demand for COVID is to what's in the commercial system. We're providing that to these — to the commercial system. And we are making allocations to those of most pressing need.

Thirteen days — we now have the data. We now can make informed decisions. And so all of the "I need, I need, I need," I now know the volume that has been happening and needs to be happening.

Q So, Admiral, with that — and, Mr. President, I'd love for you to weigh on —

THE PRESIDENT: Sure.

Q — weigh in on this as well. You talk about — well, you alluded to the fact there is possibly some shady business going on, that the product is here in the United States and —

REAR ADMIRAL POLOWCZYK: And coming here.

Q Yes, and it is coming here. It's coming from China. It's in warehouses. It's being made here in the United States. It's in warehouses. But it's going to the highest bidder. So what can be done to keep those products here in the United States, not go overseas where companies are making a lot of money, and —

REAR ADMIRAL POLOWCZYK: Yeah. I'm going to let Mr. Navarro talk about that.

Q — and get it distributed to the most critical places here in the U.S.

THE PRESIDENT: Yeah. Sure. Peter, go ahead.

Q I would love to hear — how is that being done? Because doctors — I've talked to surgeons —

MR. NAVRRRO: That's great. Great — great question.

Q — on a regular basis.

MR. NAVRRRO: Let me — let me give you the — the bigger view of the DPA, and we'll directly address that.

What we have, essentially, is a nation at war. We have a wartime President standing behind me. The Defense Production Act is one of the most powerful weapons this administration can use to fight the invisible enemy of the virus.

When I spoke with you last week, I explained the three points of the compass DPA can be used to hit. The first one is mobilization of the industrial base. This can involve things like repurposing from, say, a distiller, like Pernod Ricard — from liquor to hand sanitizer. It can also involve expansion of production, which is having Honeywell — which makes N95 masks — opened a new factory in Smithfield, Rhode Island.

With respect to the second point in the compass — allocation of resources — we have two issues there. If you look at the manufacturer itself, what you want to make sure is that the supply chain, which can go seven-tiers deep, has enough components in that supply chain so we can actually make what we need. And then once it's made, you also want to make sure that it goes to the right — right people.

And then the third point of the compass, which — which addresses what you're talking about, is basically — “bust ‘em,” I call it — hoarding of critical or threatened material.

So let me walk through what — what the President did today in terms of a strong action and what we've done with the DPA across those three points.

The first order that President Trump signed was vigorous, swift. It was the GM order, which directed GM to make ventilators in Kokomo, Indiana, in Trump time — which is to say “as fast as possible.”

As the President mentioned, he'd spoke to Mary Barra today, the CEO of GM. That is moving forward at the same time as the Ford project is moving forward in Rawsonville, Michigan.

And I've issued a challenge to those two companies à la “Ford v Ferrari” — this is Ford versus GM. Let's see who gets those ventilators out first.

Now, the second point of the compass, which these two orders address today, is this allocation of resource issues. The ventilator companies themselves expressed concern that in this rush to build ventilators, there would be pressure on that supply chain. So what they requested that we do and the President do is to use the DPA to give this gentleman here — who's one of the strongest gentlemen in the world, in terms of applying things — is to give him the ability to prioritize that supply chain for those ventilator manufacturers. And he will do things like give them what's called a “DO rating” in the defense procurement, which will allow them to get what they need.

Now, the second order, which the President signed today, has to do with the other part of the equation, which is once they make the stuff, okay, does it go to the right folks? And this is a 3M order. And, to be frank, over the last several days, we've had some issues making sure that all of the production that 3M does around the world — enough of it is coming back here to the right places.

So what's going to happen with the signing of that order, in Trump time, is we're going to resolve that issue with 3M probably by tomorrow, at close of business, because we can't afford to lose days or hours or even minutes in this crisis.

Now, the third part of the compass — this third point there — this gets to the hoarding issue. The President stood up here with — he's the Commander-in-Chief, but we have a sheriff in town too,

Attorney General Barr. And he stood up here with Attorney General Barr, and Bill Barr said, “I’m going to go out and bust them.” And guess what? Three days ago, DOJ went into a warehouse in Jersey, grabbed PPE. And the beauty of that — the beauty of that: It wasn’t only seized, but within hours it was turned around and given to healthcare professionals in New York and New Jersey. That’s a beautiful thing. That’s a beautiful case of using the DPA.

Now, what’s going to happen tomorrow is the President is going to sign another order which is in the works. This is interesting: There is a black market springing up, which you have described, where we’re having people bid against each other. Brokers come in; they’re bidding and bidding on all this different PPE. It’s driving the price up. And guess what? You know where it’s going? The domestic sources here are being exported.

When President Trump heard about that, he said, “That’s not going to happen anymore under my watch.” So tomorrow, we’re bringing that order. And what it’s going to do is it’s going to empower Customs and Border Protection, with the help of people like the Post Office and express mail consigners like UPS, to basically deal with that issue.

So we are going to crack down unmercifully. And I would say to the hoarders out there and the brokers that are trying to make money off of the misery of people in this country, around the world: That’s got to stop. And if you’ve got inventory, what you need to do is pick up a phone and not call somebody out in — around the world. You call FEMA and say, “We got some stuff. We’ll give it to you at a fair price,” and be done with that, because that stuff has absolutely got to stop.

Q (Inaudible.)

MR. NAVARRO: So that’s — that’s — hang on. Hang on. So that’s — that’s what we’re going to be looking for. And when we hear cases like this, we’re going to aggressively issue order after order to crack down on it.

Now, before — this is not my role to take a bunch of questions, but let me tell you one other thing before I leave the podium. It’s a story, which I’d love to share with you today because this again illustrates the key principles of this President and this Vice President, which is to wed the full force of the federal government with the full power of private enterprise.

And just two days ago, we at the White House got an urgent SOS from the chief of police of the New York Police Department. And they are in a situation now because of the strain on their resources where personnel, such as their homicide detectives, were having to go on into houses and deal with COVID issues without protective gear.

Now the beauty of this President is because of his leadership, we were able to solve that problem in two phone calls. Two phone calls. The first one went to Phebe Novakovic at the General Dynamics. “Phebe, can you call Tom Kennedy at Raytheon? I need you guys to basically scoop up all the Tyvek suits you can and find any gloves you can.”

This President, under his leadership and the voluntary efforts, and the pride and patriotism you talked about it earlier, that — we had 4,000 Tyvek suits delivered to the New York PD within 16 hours. That’s — that’s a new record in Trump time.

At the same time, a second phone call was made the Tara Engel at Pernod Ricard and Laura Lane at UPS. They were on the same phone call. And I said, “Tara, Laura, we got this issue: They need hand sanitizer.” Literally, within two hours, we had 50-gallon drums: 6,000 gallons of hand sanitizer on a UPS truck heading up to the NYPD. And it probably arrived today with a promise from Pernod that they will continue to supply the NYPD throughout the course of this crisis.

So this is a beautiful thing that America is rallying to. We are becoming a stronger, more united nation. And I couldn’t be more proud of this President, this administration, these guys up here, who are doing a heck of a job organizing the supply chain.

And my promise to you is that the President is going to use that DPA to make sure that the American people, particularly our healthcare professionals, get the PPE, the medicines, everything we need.

So let me — let me stop there. I don’t think it’s my place here to field a bunch of questions.

THE PRESIDENT: No, you’re doing a good job. Thank you.

MR. NAVARRO: Thank you.

Q Mr. Navarro, what’s the status of the “Buy American” executive order?

THE PRESIDENT: Go ahead. Go ahead. Answer —

MR. NAVARRO: Sure.

THE PRESIDENT: You go ahead.

MR. NAVARRO: Okay —

THE PRESIDENT: Come here. Come here. Come.

MR. NAVARRO: One of the — one of the things that this crisis has taught us, sir, is that we are dangerously over-dependent on a global supply chain for our medicines, like penicillin; our medical supplies, like masks; and our medical equipment, like ventilators.

We have — right now as we speak, over 50 countries have already imposed some forms of export restrictions in their country against the rest of the world. And what we've — what we're learning from that is that no matter how many treaties you have, no matter how many alliances, no matter how many phone calls, when push comes to shove you run the risk, as a nation, of not having what you need.

And if there's any vindication of the President's "Buy American, secure borders, and a strong manufacturing base" philosophy, strategy, and belief, it is this crisis — because it underscores everything that we see there.

So the "Buy American" order, which — which is going through process, would do a couple things. It would simply say, — not during this crisis, because we don't want to disrupt anything. I want to be really clear about that. But going forward, after this is over, the VA, DOD, HHS, and this government buys American for essential medicines, our medical countermeasures, and the medical supplies and equipment we need.

At the same time, it will deregulate so we can get the FDA and EPA to facilitate domestic manufacturing. And then, innovate. Because the key here — the key here is having advanced manufacturing on U.S. soil that can leapfrog other countries so we don't have to worry about competing against cheap sweatshop labor, lax environmental regulations, different tax regimes,

and the massive subsidies of foreign governments who are actually directly attacking our industrial base.

So be patient with that, sir. It's — the other priorities we have right now are to DPA and what the task force is doing. But if we learn anything from this crisis, it should be never again. Never again should we have to depend on the rest of the world for our essential medicines and countermeasures.

THE PRESIDENT: And, by the way, we've cut them out also, to be honest. We've stopped orders going from certain places. And in a couple of places — like, we had a big order going to Italy on important outfits and some ventilators, and it was going to Italy. They made the order a long time ago. And I said, "You got to let it go." They had an order. And I could have cut it, under the Act. I could have cut it. I said, "Nope, you can't do that. You got to let it go." You know, they have big problems.

We had an order going to Spain, and I said, "Let it go." I could have stopped it. I said, "Let it go." We're going to be fine. I said, "Let it go." So it works that way also.

One other thing, as to your question: Oftentimes — and we've told this to the governors — Mike, we've been very strong on this — have — if you think there's bidding between federal government and state, let us know and we'll drop out immediately, or you drop out and we lower the price.

Q But states are bidding against each other.

THE PRESIDENT: No, no. If we're bidding against each other, I said find out who it is. And usually, they know. Everyone knows. And we're notified and we get notified, and we'll either drop out or they'll drop out. But we have another problem: There are 151 countries out there, beyond the states. There are 151 countries that have this problem. And they're ordering too. It's really a mess.

Now, in a little while, the hardest thing to get are the ventilators because they're — you know, it takes a while to build them. And we have a lot. We have thousands of them being built right now. In a little while, they'll be worth about five dollars. But right now, they're very valuable. And we're going to have a lot of them being shipped.

And, in fact, that's why General Motors called up before — Mary. That's why others called up two days ago. They called up that they're all in production. And they'll start — they're starting to arrive in a week and a half. But there'll be a time when we're going to build stockpiles.

By the way, the states should have been building their stockpile. We have almost 10,000 in our stockpile. And we've been building it, and we've been supplying it. But the states should be building.

We're a backup. We're not an ordering clerk. We're a backup. And we've done an unbelievable job. Like, for instance, who ever heard of a governor calling up, "Sir, can you build us a hospital of 2,500 rooms?" And we built it. "Can you build us four medical centers?" We built it. "Can you deliver a ship — a hospital ship — with 1,000 rooms?" And we did it. And we did it in Los Angeles, too.

We've been an unbelievable — we've done an unbelievable job — these people. And so — and thousands of people behind them. But we're a backup. Ideally, those hospitals would have had all this equipment. Ideally, those states should have had all this equipment, and I think they will the next time.

You know, you heard the case where thousands of ventilators could have been had at a very inexpensive price three years ago. And a certain state decided not to exercise that right because they wanted to build a road or they wanted to build something else because it's big money. You're talking about — I think it was a billion dollars.

But you're talking about a lot of money for something that may never happen. Because normally, on a ventilator — other than a pandemic or an epidemic — you wouldn't — you wouldn't need anything like this. Hospitals have three ventilators — big hospitals — and they get by with it. And now they want thousands. I mean, they want thousands of ventilators. You call up a governor and he'll say, "Sir, could you send us 40,000 ventilators?" Nobody has ever heard of a thing like this.

So, they've done some job. Let me just tell you, when Secretary Mnuchin spoke, they want you to call not ".com" but SBA.gov — okay? — for the application and for information. Okay? So it's SBA — small business — SBA.gov, okay? If you don't mind.

Yeah, let's go. Please.

Q Thank you, sir. Thank you, Mr. President. I want to follow up from a question yesterday regarding, I think, your administration's denial of the expansion of Obamacare special enrollment period in the wake of this pandemic.

In your own words — VP Pence gave a five-minute non-answer — but people facing this pandemic — illness and even worse — most experts say that having healthcare is critical to our nation's health and financial wellbeing.

THE PRESIDENT: Right.

Q Can you assure Americans tonight that you will reopen Obamacare marketplace so that they can be covered in this time of combined health —

THE PRESIDENT: Well, we're — we're doing better than that.

Q — and financial crisis?

THE PRESIDENT: Yeah. No, I understand the question. And we're doing better than that. We're going to try and get a cash payment to the people. And we're working out the mechanics of that with legislature.

So we're going to try and get them a cash payment because just opening it up doesn't help as much. So we're going to work it out. So we're going to try and get for that certain group of people — it's a certain group of people — a cash payment.

Go ahead.

Q I really want to ask you about masks, but I also just wanted to follow up on a couple of hanging threads there. On just the question earlier about the bidding, what happens though when states are bidding against each other on those markets?

THE PRESIDENT: Well, they have that, and they have to work that out. What they should do is they should have — long before this pandemic arrived, they should have been on the open market just buying. There was no competition. You could have made a great price.

The states have to stock up. It's like one of those things. They waited. They didn't want to spend the money because they thought this would never happen. And their shelves, in some cases, were bare. And, by the way, in some cases they weren't. They were beautifully serviced. They did a good job. But in some cases, their shelves were bare.

So the best thing they can do is when times become normalized — and they will, hopefully soon — and actually, you're going to have a lot of excess material because so much is being done right now in terms of protective gear, protective outfits. A lot is being done. It's going to be — within six months, it's going to be sold for the right price. They got to stack up for the next time.

But we are doing that. And the Admiral has done a fantastic job. Senator Schumer wrote a letter today and he says, "You should put a military man in charge." I said, "Well, Chuck, if you knew a little bit more, we have one of the most highly respected people in the military: the Admiral." This is what he does too, very professionally. And he's in charge. But Chuck didn't know that.

Okay. Jeff, please.

Q Mr. President, you tweeted this morning about your call with Saudi Arabia's MBS.

THE PRESIDENT: Yeah.

Q We've had some people say that the figures that you cited — between 10 million and 15 million barrels per day — is not what they're agreeing to. Can you be more specific about what exactly they told us?

THE PRESIDENT: I don't know what they're agreeing to. I think they might agree to more than that.

Look, Russia — Russia —

Q Did he tell you that, sir?

THE PRESIDENT: Yeah. He did say that actually. Russia talked about 10 million barrels. Russia and Saudi Arabia are fighting over this. And as everybody knows, it's, you know, really killing an industry; hurting Russia badly, hurting Saudi Arabia badly.

I said, “This is an easy one.” It should be an easy one. And it may be 10 and it may be more than that. I was actually told it may be 10. As I told somebody before, it may be 10, and it may be more than that. Maybe it’s 15. Maybe it goes up to 15. Could be as high as 15.

And, you know, there’s a tremendous oversupply right now. That industry was — it was over-supplied before the virus. And when the virus came along, they lost 35, 40 percent of the world. And there’s an unbelievable — you can’t get a ship now. Every ship is loaded to the gills, sitting out someplace in the ocean. They’re storage tanks. They’re not even ships; they’re storage tanks.

So it would be great for Russia, it would be great for Saudi Arabia. I hope they make that deal, but that’s what they told me they said —

Q (Inaudible) 15 million be —

THE PRESIDENT: — they said it’s —

Q — enough to address the oversupply issues?

THE PRESIDENT: Well, I think it will be hopefully soon. I think hopefully they’ll announce something soon. Now, can a deal be broken? Can something happen where it doesn’t happen? I guess. In which case there’s another alternative. But I’d rather not see that other alternative. I hope they can make a deal.

Q What do you mean when you say the “alternative”?

THE PRESIDENT: They both want — I think they both want to make a deal. And they’re both smart. They love their countries. They want to make a deal. It’s good, but it’s also good for the world if they do because you save an industry.

Q Mr. President —

THE PRESIDENT: Yeah, please. Go ahead. Go ahead, in the back, please.

Q What do you by “cash payments”?

THE PRESIDENT: I'm going to let Mike, because we went over this very specifically. And I'll let you talk about it, Mike, because you responded last time.

THE VICE PRESIDENT: Right. Thank you, Mr. President. As I said yesterday, the President has put a priority on ensuring that no American has to worry about the cost of coronavirus testing. And we've been working every day to make sure that Americans don't have to worry about the cost of treatment.

And at this point, the White House Coronavirus Task Force is working on a proposal for the President to use some of the \$100 billion that we're making available to hospitals to compensate the hospitals directly for any coronavirus treatment that they provide to uninsured Americans. We're working out the details of that. The President will make a final decision. Tomorrow we expect an announcement.

But the President has made it very clear: We don't want American to worry about the cost of getting a test or the cost of getting treatment. And we've expanded coverage through Medicaid. We've expanded coverage through Medicare. Health insurance companies around the country, including Blue Cross, just today announced that all of their members will be waiving all copayments on coronavirus treatment. But for those some 30-odd million uninsured Americans, the President has directed the Coronavirus Task Force to find a way to make sure that they know, we will find a way to pay for your coronavirus treatment. And the President will be addressing that and announcing that tomorrow.

Q Mr. President —

THE PRESIDENT: Go ahead.

Q — a point of clarification and then a follow-up question. Yesterday, you said that you spoke to Florida Governor Ron DeSantis before he issued his stay-at-home order. Did you advise him to issue that order?

THE PRESIDENT: No, but I talked to him about it. And he wants to do what's right for the people of Florida. He's been a great governor. You could see that just by his popularity, which is extraordinary. We're proud of him. He's done a fantastic job and he made the decision.

But we spoke before he made the decision, yes.

Q And he had also said that he is considering putting people who are suspected of having coronavirus, or who have tested for positive for it, in isolation centers, and that he would potentially use —

THE PRESIDENT: That I haven't heard. No, that I haven't heard.

Q So he hasn't consulted with you?

THE PRESIDENT: I haven't heard that.

Yes, please.

Q Thank you, Mr. President. Ebony Bowden from the New York Post. A few hours ago, Mayor de Blasio, the mayor of New York, said that New Yorkers leaving their homes should wear masks. They should also wear masks when they're with other people. Are you considering that kind of recommendation on a federal level? And if you are, how would you prevent a rush on N95 masks?

THE PRESIDENT: Well, I think they're going to be coming out with regulations on that. And if people want to abide by them, frankly, I don't think you — I don't think there'll be mandatory, because some people don't want to do that. But if people wanted — as an example, on the masks, if people wanted to wear them, they can. If people wanted to use scarves, which they have — many people have them — they can. In many cases, the scarf is better; it's thicker. I mean you can — if you — depending on the material, it's thicker. But they can do that if they want.

Now, a recommendation is coming out. We'll see what that recommendation is, but —

Q Is that a CDC recommendation, sir?

THE PRESIDENT: But I will say this, they can pretty much decide for themselves right now.

Q Would that be nationwide? And can I also just ask—

THE PRESIDENT: Nationwide.

Q Nationwide —

THE PRESIDENT: Yeah.

Q — not just for hotspots.

And then, I think this is best for Dr. Birx, but we've heard some differing guidance here. The WHO and even the Surgeon General have talked about various studies that show that masks, in addition to maybe not even being helpful to protecting people, may actually increase the rates of illness because people touch the masks then they touch themselves.

THE PRESIDENT: Sure.

Q Can you talk a little bit about, just the evolution of —

THE PRESIDENT: All right, maybe I will ask —

Q — your thinking on this?

THE PRESIDENT: — Dr. Birx. And you might mention that other point also.

Yeah, thanks.

DR. BIRX: No, no, thank you. So I hope you got from the conference today that we're triangulating data that we know from the case numbers, the testing numbers, the supply-chain numbers to create an integrated picture so that we can really support hospitals in their needs. And I think that level of granularity is really critical.

Secondly, I just want to make the point that we really applaud the governors that are looking at a whole-of-state or a whole-of-metro approach. And what do I mean by that? The United States, going into this, had about 160,000 ventilators across the United States and another 60- to 70,000 anesthesia machines. That's about five times what most of the European countries have.

But it's a matter of distribution to need. And I really applaud the governors that are bringing together their public hospitals with their more private hospitals and their visibility across their

state. Because what we tried to talk about yesterday is every state, every county is different. And that's why we're looking at it at that level of granularity.

And as we move through this epidemic, the needs need to be very tailored to those counties and, frankly, those hospitals. I mean, there's a reason why the President and Mr. Kushner have been very much involved in finding out what the public hospitals need. Why is that? Because the public hospital sometimes have the weakest supply chain because they're often sometimes not as attractive to private sector distributors or they may be too busy caring for the needs of patients to be really on top of their order forms and their supply chains.

So really listening to the community that's at the front of this fight and getting feedback from those specific communities, no matter where they are, and listening to the frontline healthcare workers, because it's their reality that is important to all of us, whether you're the mayor or the governor or the federal government. And if they're saying they need something, we have to work together to supply that.

And so that's what you're seeing with this triangulation. Every county will move through this differently, and that allows us to move around these vital issues that protect the frontline healthcare workers and protect the patients, through the ventilators, to make sure that the supply chain is aligned with the need as it happens.

Now, you have to have very good data in order to be willing to work in that level of granularity. And that's what we've been working on to really develop that level of granularity to ensure that.

So I just wanted to say one other thing about testing, just to give you the bottom-line data of what we're seeing. We appreciate the groups who are reporting; not everyone is reporting yet. And this is part of us trying to understand at a very granular level.

We do have two states that do have 35 percent positives, and that's New York and New Jersey. So that confirms very clearly that that's a very clear and important hot zone.

Louisiana, though, has 26 percent of their tests are positive. Michigan, Connecticut, Indiana, Georgia, Illinois — so that should tell you where the next hotspots are coming — are at 15 percent test positive. And then Colorado, D.C., Rhode Island, and Massachusetts are at 13 percent.

There's a significant number of states still under 10 percent: everyone that I didn't discuss. California and Washington remain steady at an 8 percent rate.

So what we're seeing finally is testing improving — more testing being done; still a high level of negatives — in states without hotspots, allowing them to do more of the surveillance and containment.

And then prioritizing this new rapid test kit to those areas that may not have the same amount of access — to the Indian Health Services, and to the public health institutions, and the public health and state labs so that they can use that and start forward leaning into surveillance.

Now, we know there are people waiting for tests, and they're waiting for tests because when these areas became very — when they got onto the logarithmic curve, we prioritized people whose decisions — where the test decision would make it critical for their care. And so we prioritized hospitals and we prioritized nurses and doctors and frontline workers.

THE PRESIDENT: Good.

DR. BIRX: So that means if you went through a drive-through or you went through your doctor, you could have that delay.

So, the masks. So what I tried to give you is how we're using data in a very granular way. And so there are — there is experiential data. When you look at communities that have oftentimes utilized masks — in general, for personal protection — from when they particularly are themselves sick and have used their mask in public. And we've looked at the rate of this COVID-19 in those populations. And then we're looking at the scientific evidence to bring those two pieces together.

Let me just say one thing though: The most important thing is the social distancing and washing your hands. And we don't want people to get an artificial sense of protection, because they're behind a mask. Because if they're touching things — remember, your eyes are not in the masks. So if you're touching things and then touching your eyes, you're exposing yourself in the same way.

So we don't want people to feel like, "Oh, I'm wearing a mask. I'm protected and I'm protecting others." You may be protecting others, but don't get a false sense of security that that mask is

protecting you exclusively from getting infected, because there are other ways that you can get infected because of the number of asymptomatic and mild cases that are out there.

And so this worries us and that's why the debate is continuing about the mask. Because we don't want — when we're trying to send a signal that every single person in this country needs to stay six feet away from everybody, that needs to be washing their hands constantly and know where their hands are — to send a signal that we think a mask is equivalent to those pieces.

So in the — when the advisory comes out, it will be an additive piece if it comes out, rather than saying, "This is a substitute for..." And we want to make sure everybody understands, it is not a substitute for the presidential guidelines that have already gone out, and to be absolutely clear about that.

Q Dr. Birx, can I ask a follow up about the testing please?

THE PRESIDENT: Go ahead.

Q Dr. Birx, there's a lot of evidence we're seeing — that the experts are saying that a high number of these tests could be producing false — false negatives. So —

DR. BIRX: Of the Roche and Abbott tests?

Q That as many as one in three tests might be providing false negatives. And I was wondering — maybe you could explain or —

DR. BIRX: That would be almost be impossible with —

Q — tell a little about the science.

DR. BIRX: — having 35 percent positives. You — if that was true, you would have 100 percent positive —

Q Are you concerned about the underlying data —

DR. BIRX: — or 66 percent positive.

So, what I can tell you is the number of positive tests is tracking very closely with the number of cases diagnosed. So, I don't — I will look into that.

I look at the Roche and Abbott numbers every night. They're trending exactly in the same way. And that's important when you're validating data to really validate, "Does this same site" — in other words, I'm looking between testing sites to see, are there consistencies? Is there an anomaly? To make sure for what you just very specifically asked. So I will go back and look at it more carefully. I haven't seen that kind of anomaly.

This is — this same platform is being used across the country, and that's a range from what I reported: 3 percent positivity up to 35 percent positivity. And that range reflects also what we're seeing with the hotspots and the number of cases. And, frankly -- I mean, we hate to talk about it, but it also tracks with the hospitalizations independent of diagnosis and the mortality that we're seeing. So all of those pieces validate together.

Q There's no concern that there might -- people might be getting a false sense of security or that we might not be seeing all of the data here on -- and who has it?

DR. BIRX: Well, I'm telling you I'm still missing 50 percent of the data from reporting. I have 660 tests reported in; we've done 1.3 million. So there is — and it could be those sites, so we do need to see all — the bill said you need to report. We're still not receiving 100 percent of the test.

Q Dr. Birx, with regard to the test, the President's sample collection took one minute, results reported back in 15 minutes. I realize you're the President of the United States, but when will everyone get to take a test that works that quickly and you get results that quickly?

DR. BIRX: So, these are new tests and we have prioritized the groups that we think have the least access to testing now. And who do we mean by that? We mean the Indian Health Service — they're often in remote areas; rural areas; the governors of the northwestern states that may not have the advantage of these high-throughput machines that are often across the East Coast and in high metro areas — Colorado — and then across the West Coast.

So we've prioritized the presidential 15-minute test to the Indian Health Services and public health labs so that they can support nursing home testing and other areas where we think surveillance is absolutely key. So at this moment they're prioritized in that way.

THE VICE PRESIDENT: It's thirteen to twelve hundred.

DR. BIRX: Yes, 1,200 of them are going out that way.

Q So do more of those tests need to be made in order for more people —

THE PRESIDENT: They are being made.

DR. BIRX: Yeah.

Q Okay. So in a matter of --

THE PRESIDENT: They're moving very quickly — it's happening — in this case.

DR. BIRX: So I'm glad you asked that because, today, there's 18,000 of these machines already out there. We're trying to find out exactly where everyone is because you can see that gives you amazing flexibility. Because if people would allow it to be loaned to a state that's in a hotspot or a state where you want to do additional surveillance, 18,000 tests, 18,000 machines, is a huge amount. And it really gets to your very question about how we can prioritize what we have at the same time we're moving out what is new.

And so really figuring out who should those go to, how — who can we ask communities — because these will be in the community — to share those machines into the community who need the testing now. And I think that's really an incredible question that really needs to be answered over the next 24 hours.

Q Dr. Birx, a point of clarity about the face-covering guidance. You said it's still a point of debate. You said — you used the phrase, “the guidance, if it comes out.” Is the guidance coming out, and when?

THE VICE PRESIDENT: Yes. Yes.

Q And — and when, sir?

THE VICE PRESIDENT: In the — in the days ahead. We're currently working through the task force, taking the consultation advice of CDC, our top health experts, and we'll be bringing forward the guidance from the CDC in the next several days.

DR. BIRX: Just remember it's not a substitute for everything that we're asking people to do. And just to — to everybody out there across the country: When we say no gatherings of 10, we're looking at — we want it to be clear. If you have a family of 10, we don't want you to be split up. But we don't expect people to be having dinner parties, cocktail parties.

I mean, I know you've seen the slope in the United States versus the slope in Italy. And we have to change that slope. We have to change the logarithmic curve that we're on. We see country after country having done that. What it means in the United States is not everyone is doing it.

So we're only as strong as every community, every county, every state, every American following the guidelines to a T. And I can tell by the curve and as it is today, that not every American is following it. And so this is really a call to action. We see Spain, we see Italy, we see France, we see Germany, when we see others beginning to bend their curves. We can bend ours, but it means everybody has to take that same responsibility as Americans.

Q Mr. President?

Q Dr. Birx, does that mean —

Q Mr. President, can I have a quick follow-up on oil, please? In your conversations with Russia and Saudi Arabia, did you have to make any concessions to get them to agree to cut their production?

THE PRESIDENT: No.

Q Like, did you agree to cut U.S. production of oil?

THE PRESIDENT: No, No. We didn't discuss that. They want to do that, that's good for their countries, and we did not discuss that now.

Q Mr. President, NBC News has learned that the Navy is set to fire the Captain of the USS Theodore Roosevelt after he raised red flags about the COVID-19 outbreak on his ship. It appears as if he's

being punished for trying to save the lives of the sailors in his command. What's your assessment?

THE PRESIDENT: Oh, I don't think so at all. But we're going to wait a little while because I understand there's a news conference by the Secretary of Defense about that. But, you know, I don't — I don't agree with that at all. Not at all. Not even a little bit.

Yeah.

Q Mr. President, thank you. This morning you said, once again, that New York got off to a late start and they should have pushed harder. But governors and other state leaders say they rely on the federal government to assess the situation and how risky it is. And they want to know, how would they have known to start sooner without your guidance?

THE PRESIDENT: Well, they have experts. And, frankly, long after, we came out and talked about it — look, how would I have known to cut off China? I cut off China very early. And if I didn't, we would have a chart that you wouldn't believe. So how would I know to do that? How would I know to cut off Europe? I cut off Europe very early. I mean, you have to make a decision. People knew that some bad things were going on, and they got off to a late start. And some others got off to a late start also. But we cut off China. If we didn't cut off China, we would have been in some big trouble. And we cut it off.

Q But do —

THE PRESIDENT: And you know what? We cut it off way early.

Go ahead.

Q Mr. President, to follow up on the insurance point, and a separate question that came in from a colleague who can't be in the room —

THE PRESIDENT: Too bad.

Q On the insurance point, is there going to —

THE PRESIDENT: Who are you with? Who are you with?

Q Roll Call. Is there going to be an opportunity for insurance companies — if in fact hospitals are compensated for uncompensated care --

THE PRESIDENT: Right. Right.

Q — are the insurance companies going to also get compensated for extraordinary expenses that they may have? Or are they assuming that cost?

THE PRESIDENT: So, we haven't discussed it, but we're talking to them. You know, getting them not to pay copays, in the case of the big ones, was a tremendous thing. That's a lot of money they gave up. But we're discussing that with the insurance companies.

Q Okay.

THE PRESIDENT: We'll let you know. It'll be pretty quickly.

Yeah, go ahead.

Q On — I have a question on Japan, sir. They are expanding their entry ban to include the United States. Are you planning to take any similar action to ban Japanese nationals from coming to the U.S. as a result of this crisis?

THE PRESIDENT: Well, we're looking at a lot of things and a lot of different bans. We have more bans than anybody. We had bans when bans weren't fashionable if you remember, right at the beginning of this administration; it was for different reasons. But we've had bans long before people thought of bans.

When I did China, it had never been done before. I was the first one to do it. Remember that. It had never — according to what I read in all the papers, this had never been done. This is a terrible thing to do. And four weeks later, they were all saying, "We're lucky we did it." So we're looking at it. No, we heard that. And I think it's fine that they do that. They're trying to protect their country and we have to protect our country.

Yeah, please.

Q Mr. President --

Q Mr. President, I asked you yesterday about stay-at-home orders --

THE PRESIDENT: Yeah.

Q — and if that, you know, decision should be left in the hands of governors or if you're considering telling the entire nation, "Stay at home."

THE PRESIDENT: Yeah.

Q So, just today, the — Georgia's governor finally issued a stay-at-home order --

THE PRESIDENT: Yeah.

Q — saying that individuals could have been infecting people before they ever felt bad, but we didn't know that until the last 24 hours. Is that ignorance, gross incompetence?

THE PRESIDENT: He's a good governor, Brian Kemp. He's a very good --

Q You've been having calls with these governors.

THE PRESIDENT: He's a good governor and he has to make his own decision on that. I let the states — I think we're about 85 percent positive on that, if you look. I think it's about 85 percent of the states have got the stay-at-home. Brian is a great governor. We'll — it's his decision. He made that decision. Ultimately, he decided to go along with it.

Q Do you think it was smart decision to wait?

THE PRESIDENT: And they're doing — and they're doing well. And the state is doing well, in many respects.

Yeah, go ahead, please.

Q This is another question from a colleague who couldn't make it in today. From Emily Goodin at the Daily Mail. I had a question in regards to the Russian plane that landed at JFK with medical supplies. Did the United States ask Russia for this aid or is it just accepting it?

THE PRESIDENT: We're accepting it. It was a very nice offer from President Putin. I spoke to him the other night, as I told you. And they had excess medical equipment, things. And I'll take it. I'll take it.

Q He just offered you —

THE PRESIDENT: I think it's very nice. We've had some from China. We also help other countries. We like doing that. Like I said before, if we have excess stuff, we let it go out. We let some go out where, frankly, they had orders for it and I didn't want to stop orders. It was a very nice gesture on behalf of President Putin. And I could've said, "No, thank you," or I could have said, "Thank you." And it was a large plane of very high-quality medical supplies. And I said, "I'll take it."

Q Is he offering any further aid in your conversation?

THE PRESIDENT: I think he would, if we asked for it. But he was very nice. It was part of the call. He suggested — he said, "We have it. It's additional." They have very big difficulties with this virus also, as you know — Russia. I thought it was a very nice gesture on behalf of President Putin. I could have said, "No, I don't want it," or I could have said, "I'll take it." And you know what I said? "I'll take it."

Q And would you accept further aid?

THE PRESIDENT: I think so, yeah. If they sent things that we need, I'd take it. Sure. Nice gesture.

Q Are there concerns about Russians using it as propaganda?

THE PRESIDENT: I'm not concerned about Russian propaganda, not even a little bit. He offered a lot of medical high-quality stuff that I accepted. And that may save a lot of lives. I'll take it every day.

Please, in the back.

Q Mr. President, you said — in January, you tweeted that you stand with the people of Iran since the beginning of your presidency and you'll continue to stand with the people of Iran.

Given the fact that they're so hard hit with the coronavirus —

THE PRESIDENT: Oh, they're very hard hit. They're very hard hit.

Q But would you consider —

THE PRESIDENT: In a lot of ways, they're hard hit. They're hit in — with their economy, with their military, and with, obviously, the virus. They're very hard hit.

Q Would you consider easing sanctions to allow medical supplies to get in?

THE PRESIDENT: Well, they haven't even asked us to do that, okay?

Q But we know that sanctions hit the people, not the government.

THE PRESIDENT: You know what? They haven't even asked us to do that.

Q But how does a person —

THE PRESIDENT: If they want to meet, we'd love to meet and we'd love to settle the whole thing out. But I doubt they'll be —

Q But how does a — realistically, how does a person in Tehran pick up the phone and call you? I mean —

THE PRESIDENT: I think they love America. I think the Iranians love America. I think they'd love to be free. I think they'd love to have just some of the things that we have.

You know, I remember Iran, many years ago — friends of mine were always in Iran. They were doing real estate deals in Iran. They were building beautiful buildings all over Iran. Apartment houses. It was — they were very successful. And then, one day, that came to an end.

But you know what? The people of Iran, they remember that. It was a long time ago, but not so long ago. And they remember it. And I'll tell you, they love America. They love what we stand for. And we're not looking for cha- — we're not looking for government takeover, government change. You know, this country has been through that many times. That doesn't work.

Q So (inaudible) health of the people, would you encourage other countries to — who are maybe concerned about running afoul —

THE PRESIDENT: Well, what I did — yeah. What I did, as you know —

Q — of sanctions to —

THE PRESIDENT: — I put it out very publicly, with respect to Iran. I said if they need help with respect to the virus, we'd love to send — we have the greatest medical professionals in the world. We'd love to send them over.

Q So what countries are you encouraging, perhaps, to — to lend their support? Because there are many countries that feel —

THE PRESIDENT: I'm not encouraging or discouraging. They've been a very hostile country. They made a deal that President Obama should have never made. It was a short-term deal giving them \$150 billion, giving them \$1.8 billion in cash. Green. Fill up this room five times. Look —

Q But your administration — do you have a moral responsibility to —

THE PRESIDENT: No. Not at all. Nobody has even asked me about it. I have a moral responsibility to help them if they ask. If they — if they needed help, I would certainly consider different things.

Q Well, the United Nations says they need help.

THE PRESIDENT: Well, that's up to the United Nations. I'm talking about us. And what happens is, if they wanted help — because they have a very big case of virus. A very, very big case. It — one of the worst on Earth, if you believe what you're reading. And I happen to believe what I see and what I know. And if they wanted help, we'd give them help.

Yeah. You had one, in the back, please.

Q Yes, Mr. President, and a question for Jared too. The — you talk about a granular approach to receiving data from these different states and regions to try and figure out what they need. The President — you just enacted the DPA on ventilators and masks. Are there are signals from across the country that might indicate there are other things besides masks and ventilators that are slowly, kind of, rising in terms of need — like hand sanitizer, for instance?

THE PRESIDENT: Go ahead.

MR. KUSHNER: Sure. So the first — the first issue that we've been dealing with was really the ventilators. That was the number one, number two, and number three from all the states.

What we've been finding is that people have a lot of these requests based on the models. And what we've been trying to do over at FEMA is say to the states, "Well, if you would like ventilators, we need to see — first, look in your states." Right? So, for example, in northern Jersey, they're going down to southern Jersey and they're finding ventilators and trying to relocate them to where they have their hotspots.

The second thing that we've done asked them to survey for alternative ventilators. Dr. Birx spoke before about the anesthesia machines and the ability to — to convert them to be ventilators. So we're asking people to be resourceful inside their states before they come to the federal government.

The third thing we've been asking states to do is to provide what their daily utilization rates are. So everyone is asking for everything. One congressman got a call from his local hospital saying, "I need 250 ventilators." And he said, "Well, you don't have a COVID patient within four counties, why do you want 250 ventilators?" And he says, "Well, we just want to be safe. We're very nervous right now."

So what you have all over the country is a lot of people are asking for things that they don't necessarily need at the moment. And the job of FEMA and Admiral Polowczyk has been to try to make sure that we're getting the real data from the cities, from the states, so that we can make real-time allocation decisions based on the data.

And right now, what's happening is a lot of the different cities and states are providing FEMA that — that information. We're talking to them daily. They're updating that information daily. And that's enabling the federal government to make much more informed decisions on where they position ventilators.

You also have a situation where, in some states, FEMA allocated ventilators to the states. And you have instances where, in cities, they're running out, but the state still has a stockpile. And the notion of the federal stockpile was it's supposed to be our stockpile; it's not supposed to be state stockpiles that they then use. So we're encouraging the states to make sure that they're assessing the needs, they're getting the data from their local — local situations, and then trying to fill it with the supplies that we've given them.

The same thing with the masks. So the N95 mask is actually an item that wasn't used as frequently in the medical profession before this. It was used mostly for diseases. So speaking to a lot of the doctors and hospital administrators, they would say they used actually a very low percentage of the N95 masks.

What the President and the Vice President were able to do with Congress was to get the waiver so that you could expand the pool because a lot of the masks were used to — for the construction industries. Now there's a much bigger pool of masks in the country. There was a stockpile. They distributed that based on where they anticipated a lot of the need would go. But a lot of that still is stuck with the states and it hasn't trickled down to the right places within the states.

So I would just encourage you, when you have governors saying that the federal government haven't — hasn't given them what they need, I would just urge you to ask them, "Well, have you looked within your state to make sure that you haven't been able to find the resources?"

Unlike other countries, a lot of the medical system in America is a private — it's not a — it's not a public, government-controlled. So you have to get the data from what's in their state, look at it in that way, and then make sure that they're being resourceful in a way to do that. And also ask them what their utilization percentage is because if one governor is asking for more ventilators and if the federal government sends them more than they need, the goal here is not to have ventilators sitting in a warehouse where you have another state or you have people who need them.

So what we're trying to do is make informed data-driven decisions, both on ventilators, masks, any other supply we can get to make sure it's going to the people who need them.

Q I wonder if you could weigh in on the reports, of which I'm sure you're aware, where unnamed White House officials have described your role as being something of running a shadow task force. How do you describe your role? How do you describe the qualifications you bring to your role?

MR. KUSHNER: Yeah. I would just say very simply — look, the President asked the Vice President to run the task force. The Vice President asked me to assist. I've been serving really at the direction of Vice President and he's asked me to get involved in different projects.

The Vice President and I speak probably sometimes 5, 10 times a day. But everything that I'm doing is at the direction of the Vice President. If some people are talking to you, that means they're probably not informed as to what's going on. But I can assure you that I'm speaking with Dr. Birx, Dr. Fauci, the Vice President, and the President multiple times a day to make sure that I'm accomplishing and focusing on the objectives that the Vice President deems a priority.

Q Jared, a follow-up on the ventilators —

THE PRESIDENT: Or they don't exist.

Q — and the National Stockpile.

THE PRESIDENT: Or the sources don't exist. They're fake persons, okay? A lot of fake sources out there. They don't exist. I read about it — for a long time, I've been reading. A lot of them — fakes sources. They don't exist.

Go ahead. Please.

Q Thank you, Mr. President. Jared, what triggers sending a ventilator from the National Stockpile to a state? In other words, how sick does somebody have to be to get one of these national ventilators?

MR. KUSHNER: Well, that's not the issue that we're — that's not the criteria. You have the states basically putting in the requests, and they're giving us their utilization — their utilization

percentages. So it's a very simple formula. The states should know how many ventilators they have in their states. And, by the way, some governors you speak to or senators, they don't know what's in their state. You know, some governors I'll speak to, and they'll know, to the number, how many ventilators they have in their state because that's the first thing a good manager will do.

What a lot of the voters are seeing now is that when you elect somebody to be a mayor or a governor or a president, you're trying to think about who will be a competent manager during the time of crisis. This is a time of crisis, and you're seeing certain people are better managers than others.

So, what I would say is that, the way that the federal government is trying to allocate is they're trying to make sure, A, you have your data, right? Don't ask us for things when you know that — when you don't know what you have in your own state just because you're scared, you asked your medical professionals and they don't know. You have to take inventory of what you have in your own state and then you have to be able to show that there's a real need.

And so we pre-positioned a lot of things because most governors, off the bat, didn't know what they needed. But FEMA has a joint command with Admiral Polowczyk, Admiral Giroir, and Pete Gaynor, where every couple hours, when their requests come in, they evaluate the request, they all vote on the request. And then if there is something that they want to elevate to the taskforce, they bring it to the Vice President to make a recommendation.

THE VICE PRESIDENT: And, Jared, if I may, you might ask Deborah to — we're literally tracking hospitalization cases on a daily basis, interacting with governors and health systems, and that informs our supply chain decisions.

DR. BIRX: Yeah, I really — I want to thank the health commissioners and all of them that have been sending hospital data. And I think it's really critical and important to all of us.

New York City has been providing information, New Jersey, Connecticut, Rhode Island, and certainly Louisiana, in these hotspots. And that allows us — we can see where they are with the rising number of cases, where they are in their curve, what can be predicted, and really ensuring that people get what they need as they need it.

And so I think many of the governors now and the health commissioners have been: “I had to use 20” — “I’m intubating 20 people a day now. I have enough for the next three days. If that doubles... We’re seeing our hospitalization rates stabilizing, but we still think there will be this many more in the next days.” That’s the information that they then translate into providing the ventilators.

So when you see the ventilator numbers going out, they’re going out in 150s and 200s. Because I think, early on, we sent a big bolus out, and then not all of them, even today, have been fully utilized.

And so we want to make sure every state and every hotspot can be reassured that ventilators are there for them as they move through the curve. And I think, to date, we’ve been able to do that. And I think that’s what’s important to me, is that people have what they need when they need it. And, to date, people who have needed ventilators have been able to get on ventilators. And I think that’s our goal with governors and with the mayor to make sure that that continues to happen.

But that means all of us have to work together. And I think that’s what’s been really important over the last few weeks, is people are not making generic requests anymore. They’re making data-driven requests because they know precisely what’s happening in their hospitals.

Q Dr. Birx, when you are up here a little bit ago, you talked about the curve and what you’re seeing, and you’re concerned that people are not abiding by the social distancing guidelines. I mean, you seemed, in your voice, to be quite concerned about that. Has the curve changed enough at this point, where that 100,000 to 240,000 people are likely to die? Has that shifted upwards at all?

DR. BIRX: No. It’s just when I look at what — so we’re in week 2.2 in our guidelines. And I guess what I expected when the President put out guidelines that said, “Don’t go to bars. Don’t be in groups more than 10 people,” when we said that, now over 16 days ago, that was serious. And then you could see what happened subsequently and you can see the number of individuals have been infected since then. Because the people we’re seeing infected today and in hospitals today were infected after the guidelines went out.

So that’s what we’re worried about, and we’re worried about that we’re not — we’re still in this. And that’s why the President extended it for 30 days. But we have to get out of this. We have to start seeing this.

THE PRESIDENT: But, Deborah, aren't you referring to just a few states? Because many of those states are dead flat. I mean, so —

DR. BIRX: Yes.

THE PRESIDENT: So, it's hard to get — it's hard to be —

DR. BIRX: Yes. There are states that are dead flat. But, you know, every — what changes the curve is a new Detroit, a new Chicago, a new New Orleans, a new Colorado. Those change the curves because it all of a sudden spikes with the number of new cases. Because you have a certain projection of new cases and then a whole other city comes on top, where they're in their logarithmic phase.

So those ones that I talked about that had test results greater than 13 percent positive, all of those — all of those states or all of those counties are in logarithmic phase. That means there are a lot of counties that aren't, and we are really — we're excited about those counties that have been testing and still finding quite flat. And hopefully, maybe Sunday or so, or sometime this weekend, we can go through all the states and the curves again so you can see where, you know, that California and Washington are still steady.

But we're watching very carefully because we see that you can go from this to this very quickly. And what — this should not be happening any longer in new places if people are doing the social distancing, washing their hands, not getting together in large groups more than 10.

THE PRESIDENT: Again, so I look at the graphs all the time.

DR. BIRX: Yes, you do.

THE PRESIDENT: And you have many, many —

DR. BIRX: Yes.

THE PRESIDENT: — flatliners. I call them "flatliners." I'm amazed at them. And you have a couple that are up.

It's hard to blame the flatliners for not doing a good job.

DR. BIRX: No, no. I don't want to say that. No. I don't — no. Thank you, sir. I don't want — in fact, I want to praise the states that — and I think I want to be able to call them out and show you their graphs so you can see. They've had steady, small cases. They're testing and they're doing a lot of testing. And their percent of test-positives are under 5 percent. I mean, we have a whole group of states who are testing and their positivity rate is under 5 percent.

We know what it looks like on the logarithmic curve. You're in the 13 percent, then 15 percent, then 26 percent, and then 35 percent. That's what we're trying to prevent. And it's the metro areas that are absolutely crucial in this. And so, if you're in a metro area or you're in a small city, please make sure all of your friends and family are following the guidelines. That's the best thing we can do.

THE PRESIDENT: No, because I saw those pens going five minutes ago. They were so — they were thrilled. And the fact is — yes, we compare them to Italy. One place.

But we have many places that are —

DR. BIRX: Yes.

THE PRESIDENT: — really doing great. And I think that's what Deborah meant. She didn't mean all of them. So when you write your story tomorrow, maybe you'll write it correctly. She was talking about one state. And another state is, you know, having a hard time. It's — and they're closely associated.

And, by the way, the people are doing a very good job, including the people that live there. But when Deborah was talking about Italy, she was talking about the one, and then the other was lower. And then you have mostly states that have been unbelievable.

So she wasn't talking about the average of everything; she was talking about an individual state, which is, I think, still better than Italy. Italy is having a hard time. By the way, Spain is having a hard time. France is having a hard time.

But our states, generally speaking, it's like lots of different countries all over. We have — many of those countries are doing a phenomenal job. They're really flat. And I think that's what you meant.

DR. BIRX: Thank you, sir.

THE PRESIDENT: I don't know. I don't want to — I don't want to speak for — but I thought — that's what I understood she meant.

Yeah, please.

Q Can I ask a question about that though? Because coronavirus is present in all 50 states. You said before that you — when you implored mayors and governors to be serious about this, you said, "Once it shows up, mitigation efforts are too late."

So how do you then square that with this notion that some states are doing well? I mean, the virus doesn't abide by state law.

THE PRESIDENT: Because some states, they stay in better. They're not touching. They're not — whatever it is. They're not going out. They're not in groups. And some states are not probably as good, or for whatever reason. Or they also live a lot closer. You know, New York is very dense.

And, you know, California is pretty dense too. And they've got a very good record going so far. We hope it doesn't spike up, but it's very flat. We have states that are doing incredibly well. I mean, when I looked at some of them, I looked at some states that I would have thought maybe wouldn't have done as well, and they're really flatlined. Hope they stay that way. I hope they stay that way.

Q Isn't that the point, Mr. President?

THE PRESIDENT: Say it, Jeff.

Q Sir, isn't that the point, that you want those states to stay flatlined?

THE PRESIDENT: I want them — yeah, that's what I'm saying.

Q I mean, it seems like you're —

THE PRESIDENT: No, no, no. But when Deborah mentioned about Italy and our country, she wasn't referring to our country; she was referring to one state.

Q But she's encouraging people to do a better job of following these social distancing measures. That's what I'm understanding it.

THE PRESIDENT: Okay. So my understanding — I'm going to let her say it. But I think that everybody would have to be thrilled with the way most states are doing. Thrilled.

Q I don't think she — is that what you meant?

THE PRESIDENT: The flat-line — the flat-line states — states that have almost no bump. I mean, I would think. Now, then you have others where, for whatever reason, they're higher. That's different. But you can't condemn people living in a flatliner with people living in something where there's the big bump or the bigger bump or more akin to Italy, where they have some very unique problems. In all fairness to Italy, they have some very unique problems.

But if you'd like to come up and —

Q So how many flat-line do we have?

THE PRESIDENT: A lot of them.

Q And how many do we have — how many? How many do we have?

DR. BIRX: So, why don't I bring you the whole deck again and we'll divide out the states so you can see them.

THE VICE PRESIDENT: We'll do it tomorrow.

DR. BIRX: Because you really have to see each state separately. That's why I started with there are states where you've heard me talk about how concerned I was. These are states that before the guidelines went out or right after the guidelines went out — I mean, you can look at — it's on the website if you go to the Healthdata.org about when governors made clarity about closing their states, as far as the social distancing, the washing of the hands, the bars, the taking — doing takeout. And you can line that up with the presidential guidelines.

And not all states, when the presidential guidelines came out, immediately followed the presidential guidelines. Not all states did. There are states that also may have gotten many more seeds from outside communities. That certainly is one of the issues that New York and New Jersey, Connecticut and Rhode Island are facing. The virus came in from multiple places into those states. It was undetected early on, and they have a very logarithmic curve.

What I am saying is: Even one of those curves in one county, in one city, is one curve too many. So I am passionate about everyone following the guidelines because of the outlier curves. Maybe that was a better way of putting it.

THE PRESIDENT: Yeah. That's exactly —

DR. BIRX: The outlier curves —

THE PRESIDENT: I think that's perfect.

DR. BIRX: — in specific counties, is to make sure that doesn't happen anywhere else.

Q So would you feel better if every state did a stay-at-home order? Would you feel better?

DR. BIRX: Well, I think most of the states have done that. I think if you — one death from this is one death too many. I mean, I come out of epidemics and pandemics. We know what to do. I know we don't have a vaccine. And I know we don't have a therapeutic. But we know what can be done, and others are doing it, and most of the people in the United States are doing it. It's our communities — it's every American that has to make these changes, and I know they're really hard.

And I know it's hard to remember. I mean, I have to say to myself every day, because I'm around very important people, to like never touch anything. And I'm just like paranoid now about touching things. I'm sure you all are too.

I mean, we've gotten to the place where we don't go to your places on Pebble Beach, we go to the one that's open aired because, I mean, you're trying to protect your reporters. I mean, I understand that. We're all trying to protect each other, and we all have to adapt to this new reality that we're in right now.

And I believe everybody is trying really hard, and I'm just asking them to try really, really hard for these next 28 days because they will make a tremendous difference. We see that evidence. And so it's like having a vaccine or a therapeutic because we know what works, and we're asking everybody to apply what works. And I know it takes amazing attention to detail because you know the minute you forget or do something, you're like, "Oh, my gosh, I should have never done that." And that's the level of attention it takes.

Q If covering our faces could help us do that and guidelines are coming out —

THE PRESIDENT: So I just want to say — look, many states have started low and slow, and then they stayed at a good level. Some really stayed at a great level. Some — Louisiana, as an example: It was low and slow and they were looking great. I was watching it because, you know, it's kind of a place people go to with Mardi Gras — which, sort of, is an interesting point, because after Mardi Gras, it was low, and then all of a sudden it went up very rapidly. And now it's one of our true hotspots, right?

Certain areas of Michigan — Detroit was — it looked like it was doing pretty good, and then all of a sudden it went up. So you have that too.

But I'll tell you what: We have states that have been really incredible in the fact that they have kept so — so low. They have not — you haven't seen the bump, and I hope you don't. I hope you don't. And you have a couple that, for a lot of different reasons — and that's not to blame anybody, but they are at a higher level. But very few.

I think, Deborah — I mean, I may say: I think most people have actually followed the presidential — you can call them whatever you want. I would never use the word "dictates" because if I used that word, I would be in such trouble. In fact, you'll put me in trouble just that I even mentioned the thought of it. Okay? But we make a recommendation. And I think they've done a good job, and maybe they started a little later, but maybe they're also more difficult states.

But we've done, I think, on average, really phenomenally as a country. I think we've done phenomenally. Because when you looked at that graph the other day — I don't know if you saw it; I assume you saw it. Everybody in the world saw it. But you look at all those lines on the bottom — one color after another, all different, representing different states — it's all crowded at the bottom.

And then you had two that were up. But you had — I don't know, almost every one of them was down low. Very low. So there were a lot of people listening.

And I just did — I want to be clear because I don't need headlines tomorrow, and neither does the country, because I don't want this country working so hard and then have press that is, in this case, maybe misinterpret something. Because I might have — I might have — when I heard it, I was surprised at first too, but I understood what Deborah meant.

Q Mr. President —

Q Can you clear something else up again?

THE PRESIDENT: But I think it's very important — because I think it's very important for you to be accurate.

One other thing. Just a quick thing. So, what I found is when governors call me — I mean, I think in every case, they've always been so nice. So nice. And I've seen them and heard them say, "Thank you very much. You have done a great job."

"A fantastic job," in one case. "Thank you. Thank you. Thank you." Then I'll see the governor, usually of the opposite party. In almost all cases, except maybe one — but in almost all cases, they're very generous, they're very nice. They thank me. Everything is great. We're doing a great job.

And then I'll see them on television, and just like a different person. And I realized there are some people, because of politics, that if they say, "We want 1,000 ventilators," and I'll say, "No, Jim, I want to give you 5,000 ventilators," they'll say, "Thank you. You are the greatest President that's ever lived." And then, I'll see them quoted in a paper or see them on a show, and they'll say, "The President didn't come through for me. I'm very disappointed in the President."

And we have a lot of that. They're very happy when they talk to me, and then I see them. But there are some people, if they asked for 500 of something, and if I gave them 5,000, they will say — you'll say, "How's the President doing?" "Well, we don't like the job." To my face, they're very nice, but then sometimes — I guess, they assume I don't watch them or something, but I watch very closely.

Yeah, please.

Q Mr. President, one especially vulnerable population is the prison population, and that's — especially with Jared here, I wondered if you could address what the federal government is doing to protect inmates.

THE PRESIDENT: Well, it's vulnerable in that it's close together, really. I — I can't tell you about age, but a lot of young people in prison.

Some people — some states — I have not done that at all, but some states are letting people out of prison. Some people are getting out that are very serious criminals, in some states. And I don't like that. I don't like it. But it's a city or state thing in certain cases, as you know. I think maybe Philadelphia comes to mind. So we'll see. You have to see what what's going on. And we don't like it. The people don't like it. And we're looking in to see if I have the right to stop it in some cases, okay?

Q Mr. President, 6.6 million Americans filed for unemployment last week. We haven't heard you talk a lot today about what they're going through. So what's —

THE PRESIDENT: Oh, I think it's —

Q — your message to them? And —

THE PRESIDENT: I think they're going through — I think it's terrible.

So, look, four weeks ago, we had the greatest economy in the history of the world. The greatest in the world — greatest in the history of the world. We had the most jobs ever in the history of the United States. Almost 160 million jobs, right?

And then, one day, I get a call from Deborah, who's fantastic, and from Dr. Fauci. And he said and she said, "We have a problem." I said, "What's the problem?" And they said, "We may have to close it up." I said, "Close what up?" They said, "Close up the country." And I said, "What's that all about?" And we discussed today — and probably not since 1917; we came to that conclusion — and she is a fantastic person, a brilliant person, and this is what she knows. I said, "Has it ever been this bad?" And I think I can represent that you said "no." And part of it — it's a contagion. It's so contagious.

It's like, if you sneeze, I probably get it. Whoever heard of a thing like that? Okay? And this very talented reporter is bailing out. Okay? He's out of here. I don't blame you.

But it's a very contagious thing, and — probably the likes of which we've never seen in terms of that.

But 1917 — so that's over 100 years ago, but that was — you know, it's been written about many, many times. That was a horrible — whether it was 75 or 100 million people — I've heard from 50 to 75, I've heard 75 to 100 — but it was tens of millions of people.

Now, we have the advantage of communication. This could have been just as bad. I mean, here we can read on the Internet. We can see what to do. We can have these meetings; they can watch on television, which they do. A lot of people are watching. A lot of people are watching. And they say, "Gee, social distancing."

But in 1917, they didn't have that option. You know, they didn't know what to do. They just noticed people were dying all over the place. Think of it: 75- to 100 million people died. A lot of people in this country died.

I always — to me, it's a great — it's a great question: How come more people didn't die in this country? And they say it actually started in this country and went to Europe. I mean, we lost a lot of people, but relatively, we lost very few compared to Europe. So this is a terrible thing that happened.

And what's happening now, with people and jobs — so think of the position I'm in. We have built all together, everybody — not me, everybody — the greatest economy in history. And all of a sudden, people come in that we respect and we know. And here's the thing: They were right. Everybody questioned it for a while. Not everybody, but a good portion questioned it. They said, "Let's keep it open. Let's ride it." If we did that — you saw the other graph. And whether it's true or almost true or maybe not true enough — the number was 2.2 million people would have died. 2.2 million people would have died in a short period of time. In fact, the graph could have been even shorter. I always noticed that that horrible one — where it goes high — it actually comes down a little bit faster. It might have been over faster and you would have lost 2.2 million people.

So they come in and they say, “We have to close up the country.” And I say, “You know what that does to this — to the fabric of this country, to people that had great jobs, great family, no problems with money?” Their 401(k) — everything is perfect, then all of a sudden, they go from that to having no job in one day. They never even thought of it. And then you see 6 million people unemployed. Unemployment numbers get released and you see 6 million people.

And it’s an artificial closing. It’s not like we have a massive recession or worse. It’s artificial because we turned it off. Think of all we’re doing. We’re saying, “Don’t go to work and we’ll pay you.” Everything is the opposite. It was always, “Go to work and make a lot of money and do well, and — the American Dream.” Because of a hidden enemy, we’re saying, “Don’t go to work and we’re going to pay you.”

Look at the money: \$2 trillion. And we will probably do more. I think infrastructure would be a fantastic thing to do.

You want to get the restaurants back? You give deductibility. You understand what that is. You give deductibility for businesses where they go and they use the restaurants. The restaurants will be bigger and better than they were before. You know, people don’t know: A lot of restaurants closed when they ended deductibility. And then they started doing well, but they had fewer restaurants. But the boom of the restaurants is when they had deductibility, where corporations could use them. So — and entertainment. That was a great thing.

But they closed it, and then they closed it again. And it wasn’t the same. But if you want to get them back, you do that.

But infrastructure: We borrow our money now at zero. You know, if we were paying 5 percent, 4 percent, 3 percent, it’s a different ballgame. We’re borrowing — we can borrow long term for zero — literally zero; you know that — because we’re considered the safe investment. All over the world, they want money in the United States. That’s where they want the money.

So I know better than anybody. I just — I know what they’re going through, and it’s horrible. But you know what I want to do? I want to be able to get them back fast. When this is over, it’s going to be a day we’re going to celebrate, because everyone is going to go to work and I think we’re going to have boom times. I think it’s going to be great.

And we've learned a lot. We've learned about borders. We've learned about reliance on other countries. We've learned so much — so much that I think we really have a chance to be bigger and better and stronger. And I think it's going to come back very quickly, but first we have to defeat this enemy.

So we will see you tomorrow. Thank you very much. Thank you.

END

7:38 P.M. EDT