

Governor Gary R. Herbert



UTAH LEADS TOGETHER III

Utah's plan for a health and
economic recovery

Prepared by the Economic Response Task Force

This economic response aims to protect lives and livelihoods. It provides a dynamic plan for a dynamic situation. The data and measures that inform this plan will be monitored daily and the recommendations will be updated as required.

May 20, 2020

UPDATED

Utah leaders remain confident that as the COVID-19 pandemic ends, Utah will emerge even stronger. This plan provides clarity, confidence, and context for that recovery.

Versions 1 and 2 of the *Utah Leads Together* plan presented economic phases, color-coded health guidance, and valuable data tools to help in Utah’s health and economic recovery.

This version of the *Utah Leads Together* plan presents critical instructions for high risk populations, addresses impacts to Utah’s multi-cultural community, and plants seeds for Utah’s ultimate recovery.

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MESSAGE FROM THE GOVERNOR

May 2020

My fellow Utahns,

From the earliest days of the COVID-19 crisis in our state, *Utah Leads Together* has offered a roadmap to help overcome the ravages of this virus. *Utah Leads Together* has helped to unite Utahns in following vital public health guidelines and staying engaged with the economy, all while assisting those in greatest need.

In the months since Utahns first mobilized to fight COVID-19, we have made significant progress. Embracing Version 1 of *Utah Leads Together*, we moved from economic urgency to economic stabilization in five weeks (well ahead of our goal of eight to 12 weeks). Using the data-informed judgment encouraged by Version 2 of *Utah Leads Together*, most of Utah's cities and counties have moved from high health risk to low health risk in under nine weeks.

Unprecedented collaborations between government, health care, private enterprise, education and civil society have helped to slow the spread of COVID-19. By flattening the curve of infection, we have saved lives, protected precious health care resources, and built significant institutional capacity to help prevent and manage any potential resurgence of infection.

We are pleased with these results, but we know that far too many have lost loved ones to COVID-19. The entire state of Utah mourns with you. Along with the loss of life, we know that far too many Utahns now fear for their livelihoods. We understand those fears, and hope that thoughtful, well-executed data-informed plans will help provide the support needed at this time.

Version 3 of *Utah Leads Together* builds upon Versions 1 and 2 to plant the seeds for statewide recovery. It lays out comprehensive plans to assist Utah populations that have been disproportionately impacted by COVID-19 -- those with high health risks, and those in Utah's multi-cultural community.

Utah Leads Together 3.0 does not mince words about the massive economic challenges facing our state. But it also provides a smart framework for how to build upon Utah's strong fiscal and economic foundations. And it offers a bold vision for how to match recovery efforts with powerful economic trends that will drive future economic growth, improve our quality of life, and leave Utah economically and socially stronger than before.

As we launch *Utah Leads Together 3.0*, I assure you that we will continue to be smart and safe as we reactivate the economy. Be proud, Utah. Thanks to your efforts, we have come far in battling this virus and I am confident that we will prevail as we work together. It is working, Utah. Stay Strong!

- Governor Gary R. Herbert

UTAH LEADS TOGETHER OVERVIEW

Every Utahn plays a role in Utah's recovery. We lead together. This leadership requires Utahns to continue to take three major actions:

1. Follow public health guidelines
2. Stay engaged with the economy
3. Assist those in need

Version 3 of the *Utah Leads Together* plan builds upon Version 1, released March 24, 2020, and Version 2, released April 17, 2020, by sharing critical instructions for high risk populations, addressing impacts to Utah's multi-cultural community, and planning for Utah's economic recovery. We anticipate there will be additional versions of this plan as we manage the new risk of COVID-19.



UTAH'S APPROACH AND SUCCESS IN COMBATING COVID-19

Gov. Herbert, the Utah Legislature, and local government leaders approach COVID-19 with a spirit of collaboration, information sharing, and personal responsibility.

The governor's Stay Home, Stay Safe directive successfully built on Utahns' sense of community, personal responsibility, and local control to protect us through the urgent phase. State and local governments have collaborated extensively. Decisions regarding color-coded health guidance and designations occur in consultation with local health departments and elected leaders.

The state's web portal – coronavirus.utah.gov – shares detailed information with residents, including an online chat function and COVID-19 hotline. By providing helpful information, Utahns have the information they need to make informed decisions.

The results have been positive. According to the Governor's Office of Management and Budget, as of May 7, 2020, Utah achieved the following successes:

- **Mortality** – Utah ranks 5th lowest in the nation for the number of deaths per million persons. Utah also has the lowest number of deaths per total confirmed cases. Utah's death rate of 1.0% compares to the U.S. average of 5.9%.
- **Testing** – Utah has the 5th highest number of tests administered as a proportion of population. Utah has administered 41,500 tests per million people, compared to the U.S. average of only 23,500 tests per million people.

- **Community transmission** – Approximately 79% of known positive cases have been exposed through identifiable contacts, with a majority being household contacts. Exposure through travel, health care, and community transmission remains low.
- **Economic** – Cumulative unemployment claims as a percent of the workforce are half the rate in Utah compared to the nation. From March 16, 2020 to May 10, 2020, Utah's claims represent 9.6% of the workforce, compared to 21.5% in the nation.

Utah Enters Stabilization Phase

After nearly five weeks in an urgent economic phase, Utah entered the stabilization phase ahead of schedule on May 1, 2020. Gov. Herbert, with input from the legislatively created Public Health and Economic Emergency Commission, moved Utah from high risk (red) to moderate risk (orange). Utahns began reactivating the state's economy gradually, similar to turning a dial. While exercising extreme caution (including recommended face coverings in public), many Utahns began returning to work, dine-in services opened, hair salons and barbershops opened, and gatherings of 20 or less people commenced.

On May 16, 2020, after evaluating key metrics, the governor and Commission moved all areas of the state, except Grand, Summit, and Wasatch counties and Magna, Salt Lake City, and West Valley City, to low risk (yellow). In most places in Utah,

social gatherings of up to 50 people are allowed, people can leave home as needed, and team sports resume with frequent symptom checking. Utah schools remain closed and high-risk populations remain in a state of highly elevated risk.

Process Measures

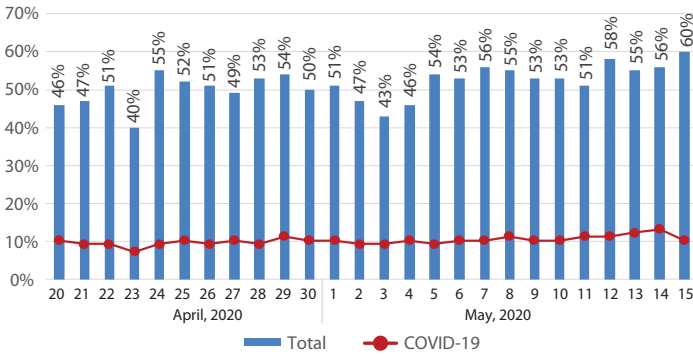
The groundwork for making progress from red, to orange, to yellow, and ultimately green levels of risk are informed by the

operational process measures maintained by the Governor’s Office of Management and Budget. Utah maintains a rigorous and fast testing and contact tracing system to protect public health. Local health departments are key to the success. Process measures (which are described in more detail in Appendix E) include cycle time measures for tests, interviews, notifications, and more are critical to state and local decisions.

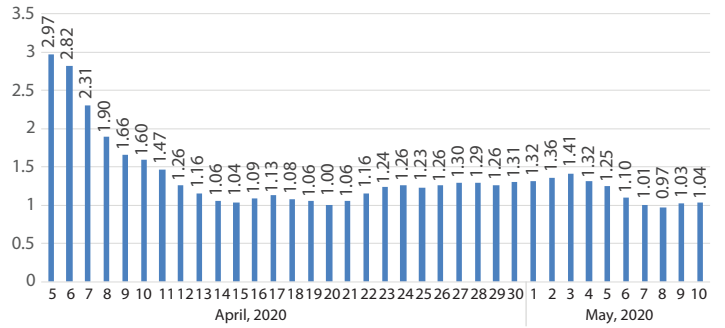
Four Core Metrics Guiding Decisions

Gov. Herbert and the Public Health and Economic Emergency Commission utilize four core metrics to guide the safe reactivation of the Utah economy. These measures, along with a variety of supporting data points, guide state and local government decisions about the appropriate level of public health guidance (red, orange, yellow or green). These measures and data as of May 16, 2020 include the following:

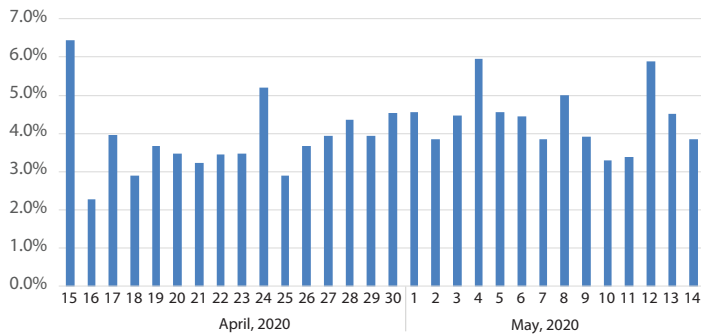
Hospital Capacity – This is a measure of Intensive Care Unit (ICU) utilization so that COVID-19 patients do not overwhelm hospital capacity. The state’s goal in moving from moderate level of risk to a low level of risk is to be below 60% ICU capacity for 14 consecutive days. Utah’s ICU capacity has been at or below 60% for more than 21 consecutive days.



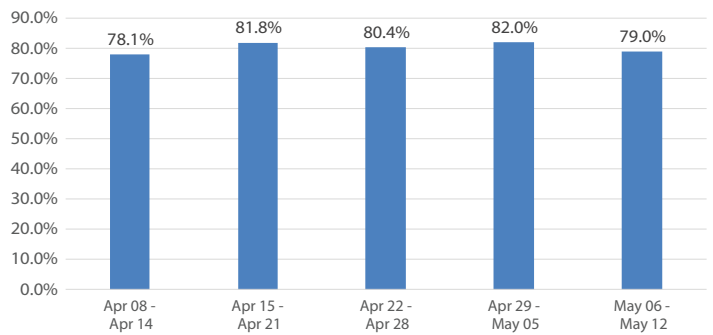
Transmission Rate – This is a measure of how many people contract the virus from each person who has the virus. The measure divides new hospital admissions by one reproductive cycle of the virus. The state’s goal in moving from a moderate level of risk to a low level of risk is a transmission rate of around 1.0 for 14 consecutive days. Utah’s transmission rate has been at 1.0 to 1.5 for over 21 consecutive days.



Detect the Undetected – This is a measure of testing and tracing and is monitored by tracking and positivity rate. The state’s positivity rate goal depends on risk level (3.0%-10.0% orange and yellow, and approximately 3.0% moving forward). Utah’s has remained at approximately 4.0% for more than 21 days.



Exposure Source – This is an indicator of the points of exposure. The state’s goal in moving from a moderate level of risk to a low level of risk is to achieve at or above 80% known contacts for 14 consecutive days. Utah has been at or above 78% for the past 28 days.



Utahns are encouraged to become familiar with the online guidelines at coronavirus.utah.gov. or call Utah’s COVID-19 hotline at 1-800-456-7707.

Far-Reaching Impacts of COVID-19

The Economic Response Task Force recognizes that the impact of COVID-19 on Utahns stretches far, deep, and wide. As a leading physician put it, "COVID-19 is acute for the individual and a chronic condition for the community."

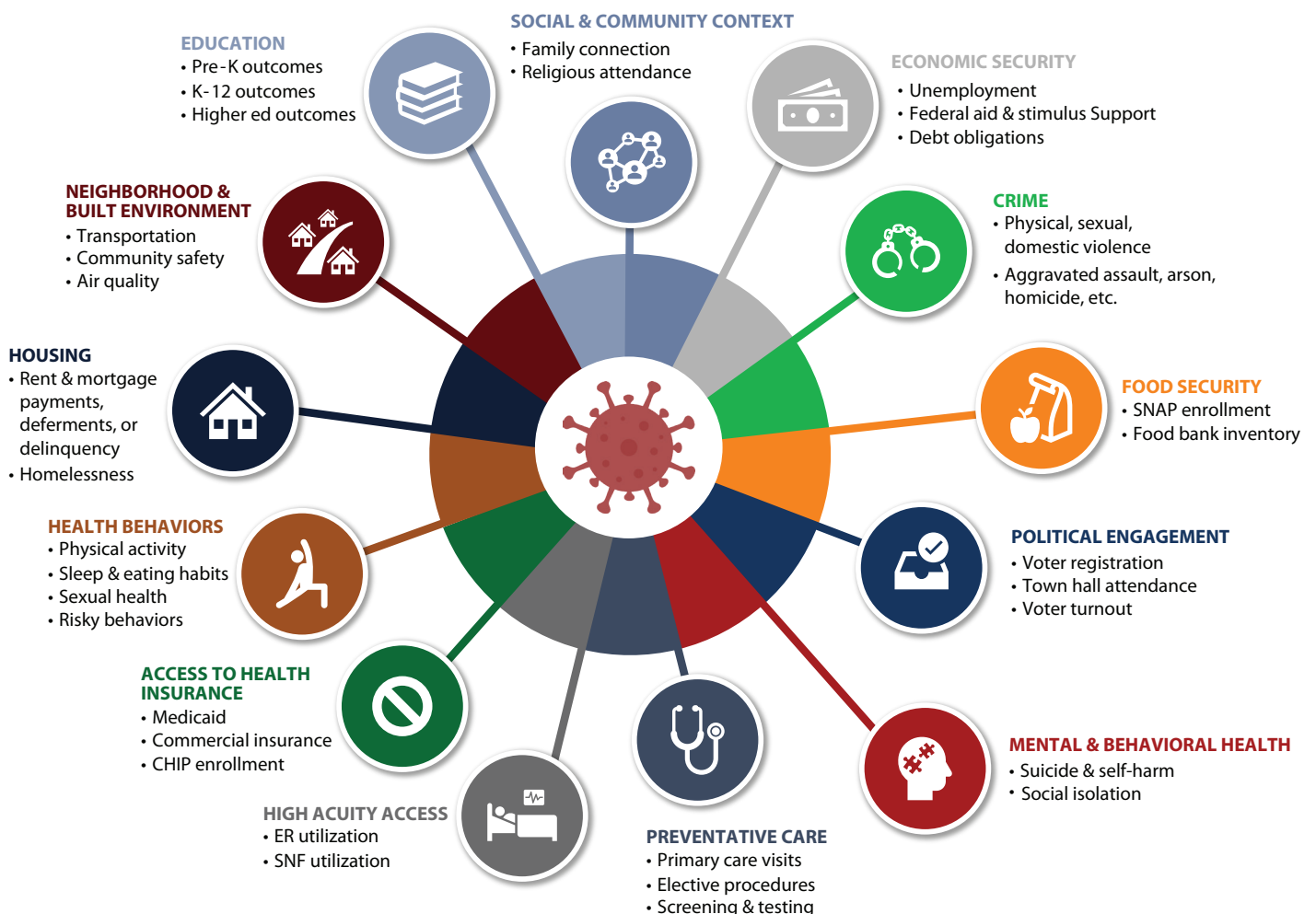
Acute conditions are severe, sudden, and limited in duration. Chronic conditions are long-developing and can worsen over time. The Economic Response Task Force feels an urgent need to recognize the potentially chronic impact of COVID-19 on the "whole person" and "whole community." This impact stretches beyond the immediate virus case count and into the broader academic, social/emotional, economic, and medical impacts of the virus.

The Task Force sees considerable evidence that COVID-19 impacts, or has the potential to impact, all aspects of wellbeing in Utah.

Major categories of impacts include the following:

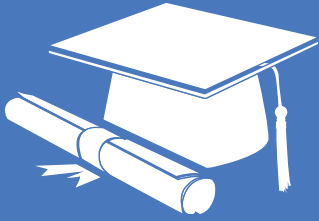
- **Housing**, including homelessness and the ability to make rent/mortgage payments
- **Food security**, including food availability and food bank demand
- **Health behaviors**, such as drug and alcohol abuse, physical activity, and sleep and eating habits
- **Economic**, including unemployment and income
- **Social and community connections** within a family, a religious faith, and faith community
- **Crime**, including physical, sexual, and domestic violence
- **Transportation**, such as public transit access
- **Education**, including pre-kindergarten, kindergarten through 12th grade (K-12), and post-secondary educational outcomes
- **Mental and behavioral health**, including social isolation, anxiety, depression, self-harm, and suicide
- **Other health**, including primary care visits, elective procedures, screening and testing, and emergency room utilization

The Impact of COVID-19 on Wellbeing



Source: Governor's Office of Management and Budget, Leavitt Partners

EDUCATION – TIME TO RETURN TO SCHOOL



The Economic Response Task Force recognizes that the ultimate solution to the far-reaching impacts of COVID-19 is to safely restore a sense of normalcy to economic and social life in Utah. This is Utah’s plan and it begins with public and higher education where hundreds of thousands of students develop life-sustaining knowledge and skills. The state has plans to physically bring students in kindergarten through post-secondary education safely back to school in fall 2020.

Public Education

To ensure student and educator safety, Utah’s schools transitioned to remote learning in March. Now as the state transitions to a low-risk level, public education leaders are eager to prepare educators and schools to welcome students back in the 2020-21 academic year.

To be ready for the new academic year, public education leaders and governing boards are working with state and local public health departments to develop plans on physically reopening schools following the state’s color-coded health guidance system. Depending on the evolving situation regarding the pandemic, there may be waves of stopping

and starting, partial or staggered openings, other scheduling adjustments such as earlier or later start dates and times, or other developments determined by local health departments, population vulnerability, and more. Planning for various scenarios now will assist schools in being nimble to adapt to changing circumstances. Guidance, which will be provided by the Utah State Board of Education in collaboration with local education leaders and state and local health departments, will steer and support schools in developing individualized plans to address health and safety as well as educational needs.

Higher Education

Utah’s higher education institutions transitioned to online instruction in March to ensure student and faculty safety. Now as the state transitions to a low-risk level, all institutions look forward to welcoming students back to campus in fall 2020 and some even earlier.

To be ready for this reopening, the Utah System of Higher Education (USHE) formed a task force with representatives from the higher education institutions in the state including the University of Utah, Utah State University, Weber State University, Salt Lake Community College, Utah Valley University, Snow College, Southern Utah University, Dixie State University, and Utah Technical Colleges. Their objective was to recommend guidelines, aligned with the phased approach introduced in Utah Leads Together 2.0, that would allow all institutions to safely bring students back to campus. While campus life will have many alterations and additional safety precautions due to the COVID-19 pandemic, public campuses will have onsite classes, residential housing, and student activities to ensure the value of preserving an in-person education experience.

The guidelines developed by the task force include a requirement for institutions to develop individualized plans to make their specific campuses safe as they prepare to reopen. Each institution is committed to develop concrete plans to make their campuses safe. The key elements of the plan include the following:

- Repopulating campus
- Monitoring for incidences
- Containing potential outbreaks
- Temporarily reclosing, if necessary

In order to safely repopulate campus and monitor for incidences, individualized plans will include expanded measures to contact trace and conduct proactive testing, implemented in partnership with state and local government. Institutions will explore opportunities to use an allocated number of tests from the state for monitoring campus populations to prevent and contain the spread of COVID-19 on campuses. Institutions will also prepare for temporary shutdowns in the case there is an outbreak among the campus population or in the community. Institutions will also recommend legislative actions that would support institutions in their efforts to operate effectively.

PROTECTING UTAH'S HIGH-RISK POPULATION

“Coronavirus is a bully. It finds and attacks at-risk individuals. It finds and attacks older members of our community. It finds and attacks those who have other medical conditions.”

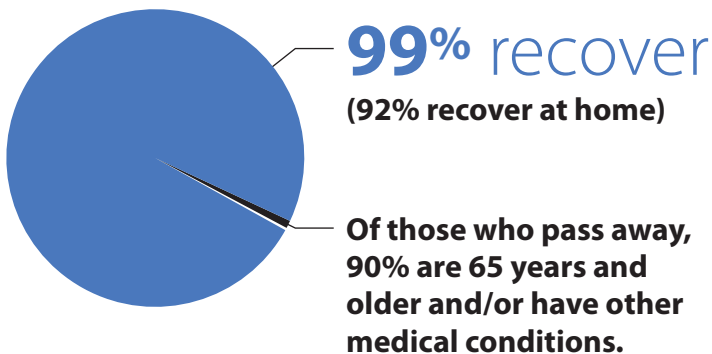
– Dr. Michael Good, University of Utah Health

The medical evidence is clear: COVID-19 creates far greater adverse health impacts on people over 65 years of age and people with other medical conditions. When you combine age with comorbidity the outcomes are even more serious. Protecting Utah’s high-risk population is the front line of the daily battle to protect Utah’s health and economy.

The Economic Response Task Force recommends a triaged approach to protecting human health and restoring economic and societal health. A stratified approach – where Utah applies guidance based on risk – allows the state to minimize the total harm of COVID-19 on all Utahns. By sorting risk, we “shrink the curve,” reduce suffering and death, and achieve greater societal and economic health. Importantly, low risk groups must continue to follow color-coded health guidance not only for themselves, but to prevent exposure among higher-risk individuals.

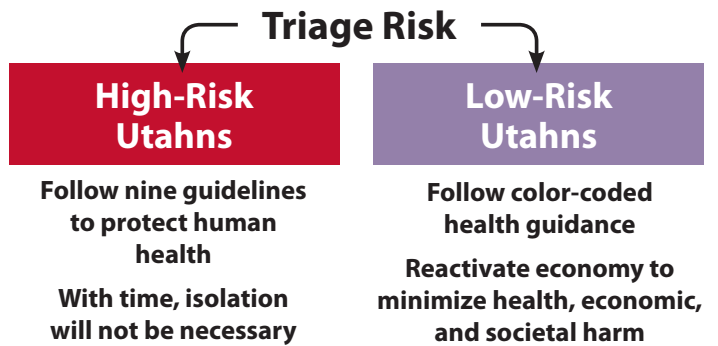
The Governor’s Office of Management and Budget has worked with the Public Health and Economic Emergency Commission to create a detailed plan to protect Utah’s high-risk populations. The Economic Response Task Force endorses this plan.

COVID-19 Reality

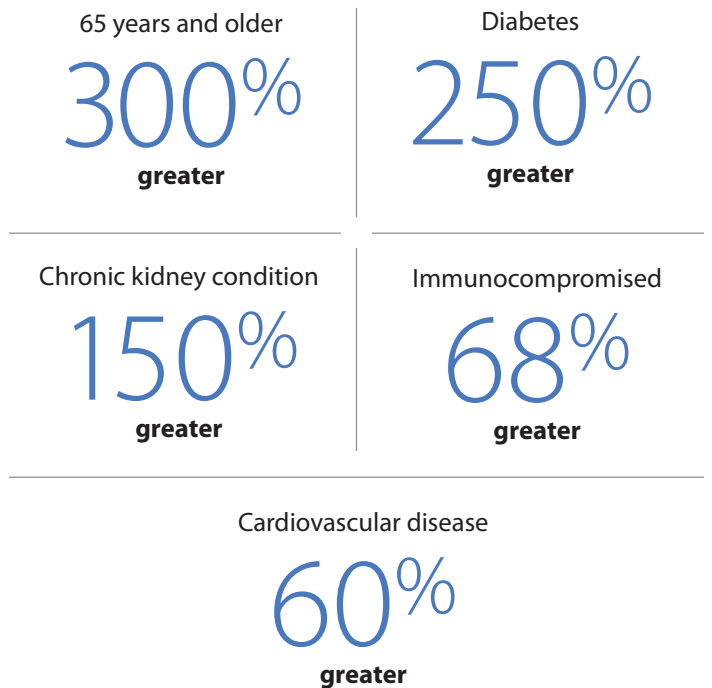


Utah Health and Economic Protection Strategy

Sort risk to minimize health, economic, and societal harm



Utah Odds of Hospitalization if Contracting COVID-19*



* These characteristics do not represent or encompass all factors that contribute to increased risk.

Source: EpiTrax data and preliminary analysis obtained May 2020 from the Utah Department of Health, Division of Disease Control and Prevention and Governor’s Office of Management and Budget

UTAH CARES ABOUT OLDER ADULTS

In Utah, we stand together in defeating COVID-19.

Approximately one in every 10 Utahns is 65 years and older. These approximately 350,000 Utahns possess a rich heritage of experience, training, insight, and grace. In Utah, we honor our older adults.

In too many instances, ageist rhetoric around the country has offended and hurt America's older adults who bear the brunt of this awful virus. Let's not ever let this happen in Utah.

The Economic Response Task Force encourages Utahns to care for our older adults by taking three actions:

- 1) Follow all public health guidelines to keep them safe,
- 2) Safely serve them, and
- 3) Refrain from ageist comments that offend.

Utah's Plan to Protect High-Risk Individuals

Goal: Protect high-risk people from COVID-19

Ambitious target: Zero outbreaks in high-risk populations

Focus: The state will focus on protecting five categories of high-risk populations:

1. High-risk people in state custody

- a. Improve communication and regulatory oversight in accordance with CDC and public health guidelines

2. High-risk people in nursing homes and long-term care facilities

- a. Begin proactive testing of asymptomatic individuals to screen and mitigate the spread of virus
- b. Report metrics on testing, visitors, staff movements, personal protection equipment (PPE) availability, hospitalization, and deaths
- c. Ensure protection and infection control through the following:
 - i. Primary prevention – Strict visitation policies, screening of staff and visitors, staff must wear PPE for every contact and strive to work at one facility only, and reduced movement of high-risk residents – Implement the state's comprehensive approach that focuses on high priority facilities, establishes an infection control point person, and conducts serial staff testing.
 - ii. Secondary prevention – Department of Health (DOH) mobile team to address infections. Dedicate 500 tests a day to these facilities. Strict testing, quarantining, and contact tracing will be followed.
 - iii. Mitigation and recovery – DOH will provide support if infection occurs, including staffing, PPE, and training. DOH will help with recovery activities so the facility can begin to admit new patients again. A quarantine facility in Salt Lake City will be provided where patients can be isolated.
 - iv. State veterans skilled nursing facilities - implement CMS, VA, and CDC guidance.

3. High-risk people at work

- a. Follow guidance from the Utah Labor Commission to protect high-risk individuals in the workplace from COVID-19. This guidance can be located at coronavirus.utah.gov. It includes general recommendations for all workplaces and suggested PPE, as well as specific recommendations for these industries:
 - i. Restaurants
 - ii. Retail
 - iii. Hospitality
 - iv. Events and entertainment
 - v. Home repair
 - vi. Personal services (hair, tattoo, nail salons)
 - vii. Gym
 - viii. Construction
 - ix. Manufacturing
 - x. Child care

4. Those working with high-risk people

- a. Follow above guidance

5. High-risk people living at home who may need help

- a. State to provide broad and targeted communication to ensure they and those around them know their risk status, how to protect themselves, and how to access help.
- b. This approach will be led by the Department of Human Services (DHS), in partnership with the 12 Area Agencies on Aging (commonly referred to as the Triple As.)
- c. The Triple As will increase their scope, capacity, and resources so they can help all high-risk adults (not just those over 65 years of age). The Triple A approach includes the following benefits:
 - i. Relationship and familiarity with many from the high-risk population
 - ii. Close connection with local health departments and mental health authorities
 - iii. Foundational infrastructure and trust in place with local non-profits, businesses, and stakeholders
 - iv. Ability to scale up financial mechanisms, Meals on Wheels, transportation assistance, current employees and volunteers, and a state system to track clients and measure performance
- d. Communicate and provide guidance via TV and radio, letter from governor, utilization of faith-based organizations, and other community partners

WHO IS HIGH-RISK AND WHAT GUIDELINES SHOULD THEY FOLLOW?

The Medical Advisory Team to the Public Health and Economic Emergency Commission defines high-risk individuals as those likely to require a hospital bed. Utah-specific data and CDC guidelines identify the following as high-risk individuals:

- **Age** – People aged 65 years and older
- **Group quarters** – People who live in a nursing home or long-term care facility
- **Lung disease** – People with chronic lung disease or moderate to severe asthma
- **Heart conditions** – People who have serious heart conditions
- **Immunocompromised** – People under cancer treatment, who have bone marrow or organ transplants, who have immune deficiencies and HIV or AIDS, and who have prolonged use of corticosteroids and other immune weakening medications
- **Obesity** – People of any age with severe obesity (body mass index > 40)
- **Underlying medical conditions** – People with diabetes, kidney disease, and liver disease

Source: Utah Department of Health

The Utah Department of Health has issued nine guidelines for high-risk individuals:

- 1 Wear face masks at all times in public settings
- 2 Stay home as much as possible. If you must go into public settings stay at least 6 feet from others.
- 3 Wash hands often
- 4 Limit travel to only essential travel. If telework is not possible, limit travel to work-related travel only.
- 5 Continue to seek emergency care, routine doctor visits, and medication pickups
- 6 Limit visiting friends or family without urgent need
- 7 Limit physical interactions with other high-risk individuals, except for members of your household or residence
- 8 Limit attending gatherings of any number of people outside your household or residence
- 9 Do not visit others in hospitals, nursing homes, or other residential care facilities

Further guidance will include high, moderate, and low-risk instructions for Utah's high-risk population

Protect the Hive: A Mask For Every Utahn

When you're in public places, wear a mask. Doing so will help protect you and others, including high-risk individuals, as we work to keep Utah healthy and safe.

"A Mask for Every Utahn" is a state initiative, in partnership with the Utah Manufacturers Association, to help Utahns who do not have a face mask to obtain one.

The state will provide one mask to each resident who needs one, and will mail — upon request, once, and free of charge — up to six masks to each Utah mailing address. Residents can request a mask at <https://coronavirus.utah.gov/mask/>.

The Utah Department of Health recommends people in close contact with high-risk individuals should wear face masks when around high-risk individuals and take other precautions.

SAFEGUARDING UTAH'S MULTI-CULTURAL COMMUNITY

The coronavirus pandemic is not impacting all Utahns equally. An increasing body of research at the national, state, and county levels suggests a disproportionate burden of illness, death, and economic impact from COVID-19 among racial/ethnic minority groups and low-income individuals.

Racial/Ethnic Disparities

Hispanic/Latino population	14.2% of population	38.0% of total cases
Native Hawaiians and Pacific Islanders	1.6% of population	3.5% of total cases
Black and African American	2.1% of population	3.2% of total cases

Source: Governor's Office of Management and Budget and Utah Department of Health

Utah's Multi-Cultural Subcommittee

To address the disparities and increase equity in the state's response to this crisis, Gov. Herbert convened a Multi-cultural Subcommittee to Utah's COVID-19 Task Force. The appointed members represent a racially and ethnically diverse cross section of community advocates, nonprofits, state agencies, faith-based organizations, health care partners, and business leaders.

The members represent Utah's diverse population and possess expertise working with marginalized populations

including children, people with disabilities, low-income households, communities of color, Limited English Proficient (LEP) individuals, immigrant and refugee populations, LGBTQIA+ organizations, tribal communities, and populations with intersectional resource and access needs such as our incarcerated population.

Data Resources

The Subcommittee utilizes the information found in the "Needs Among Utah's Multi-cultural Communities During COVID-19" report, prepared by the Utah Division of Multi-cultural Affairs in collaboration with the Multi-cultural and Martin Luther King Jr. Human Rights Commissions, to guide its priorities

The report includes findings from a survey conducted by the Utah Division of Multicultural Affairs for service providers and first responders working directly with vulnerable and systematically marginalized communities. The survey provides a baseline of immediate needs and unique barriers faced by disenfranchised populations during the outbreak and provides valuable information for state leaders about the growing needs of Utah's multi-cultural population.

The qualitative data collected highlight the complex and intersectional barriers of underserved and vulnerable populations caused by pre-existing conditions. The severity of this crisis has exacerbated the impact of social determinants of health and the inequities have been compounded, creating greater social, cultural, and economic implications for already overtaxed communities.

Utah's COVID-19 Multi-Cultural Subcommittee

- Nubia Peña, Director
- Byron Russell, Co-chair
- Ze Min Xiao, Co-chair
- Jess Anderson, Utah Department of Public Safety
- Dr. Marc Babitz, Utah Department of Health
- Aden Batar, Catholic Community Services
- Juan Becerra, The Church of Jesus Christ of Latter-day Saints
- Silvia Castro, Suazo Business Center
- Neelam Chand, Zions Bank
- Rebecca Chavez-Houck, Utah Multi-cultural Commission
- Dulce Diez, Utah Office of Health Disparities
- Jake Fitisemanu Jr., Utah Pacific Islander Health Coalition
- Mike Haddon, Utah Department of Corrections
- Emma E. Houston, MLK Jr. Human Rights Commission
- Dustin Jansen, Utah Division of Indian Affairs
- Deneiva Knight, Comcast
- Celina Milner, Salt Lake City Mayor's Office
- Mikelle Moore, Intermountain Healthcare
- Dr. Len Novilla, Brigham Young University
- Yehemy Zavala Orozco, Comunidades Unidas
- Asha Parekh, Utah Department of Workforce Services, Refugee Services
- Tami Pyfer, Utah Governor's Office
- Ming Wang, Utah Department of Human Services

Subcommittee Priorities

As we continue to navigate the various phases of this pandemic, the subcommittee recommends equity in distribution of resources, including medical response, economic relief efforts and language and literacy accessibility as an inclusive priority for Utah's recovery. The subcommittee's short- and long-term priorities include the following:

- **Increase language accessible information** – Through translation, interpretation, and literacy skills considerations.
- **Assist in the coordination of disseminating information** – Through non-traditional channels for mass access.
- **Increase service engagement in underserved communities** – To address essential needs (food and social services).
- **Increase efforts for economic sustainability among diverse businesses** – Through training and capacity development.
- **Elevate and raise awareness of the strategic community testing sites in neighborhoods with high-risk populations** – Partnering with trusted community organizations including state agencies, nonprofits, faith-based organizations, city and county governments, and community health workers.
- **Amplify and elevate efforts community advocates are already engaged in** – Including community health workers and grassroots initiatives.

- **Collaborate with health care organizations** – To ensure immigrants have safe access to testing sites.
- **Encourage the collection and reporting of equity data** – Including race, ethnicity and disability status.
- **Assist in the creation of an equity and inclusion fund** – Collaborate with the philanthropic community to address pre-existing inequities in high-risk populations.
- **Influence policy initiatives for inclusive practices** – Prioritize equitable distribution of state and local resources.
- **Establish a practice of transparency in subcommittee efforts** – To increase trust within underrepresented communities.

To begin to address these issues, the Department of Health is hiring community health workers, doing targeted testing, and increasing multi-lingual services.

Success in economic recovery will require immediate and continuous investments in these efforts to ensure success.

The Multi-Cultural Subcommittee will seek to lift up, collaborate with, and support the leadership of other coalitions, subcommittees, state, city, and county governments, and community partners leading the way on related and intersectional issues.

Specific findings in the report include the following:

- **Digital divide** – Low-income households lack access to computers, internet, and technology. This limits education and work opportunities from home and creates a gap for many to remain informed about important COVID-19 updates and directives. Tribal communities have also felt the strain of inadequate access to technology including lack or minimal access to cell phone signal and broadband Internet connection.
- **Food insecurity** – Seventy-four percent (74%) of participants noted food insecurity as a concern as households navigate social panic buying, limited inventories, and increased demands at food pantries and unaffordable food options. Unlike some Utahns, stockpiling food items before and in the midst of the pandemic presents financial challenges for communities with restricted resources as they purchase only what they can afford.
- **Misinformation** – Sixty-seven percent (67%) of respondents noted misinformation as a significant barrier faced by those they serve. Lack of access to language and literacy accessible information fuels greater inaccuracies and causes additional fear within communities. Of particular concern is misinformation regarding immigration enforcement, deportation, access to medical and social services, and instructions about social distancing and “stay at home” directives.
- **English proficiency** – Limited English proficiency and non-English speaking populations struggle to stay up to date with the news and resources helpful to mitigating the pandemic's impact.
- **Other challenges** – Respondents also mentioned limited access to health care services, lack of culturally inclusive messaging, concern regarding increased incidents of domestic abuse and intrafamilial violence, access to social services, testing, and obtaining essential needs for people who are homebound and people with disabilities, housing insecurity and fear of eviction, and heightened fear of deportation as additional challenges.

PLANNING FOR ECONOMIC RECOVERY

Among the many wise observations made by American television personality Fred Rogers (Mister Rogers' Neighborhood) is this one: "Often when you think you're at the end of something, you're at the beginning of something else."

The Economic Response Task Force recognizes that the COVID-19 health and economic crisis represents not only the end of Utah's record-setting economic expansion, but the beginning of an economic rebirth. We advise state leaders to start now to prepare for a return to growth. In this spirit, the Task Force encourages state leaders to plan for a "return to better."

Current Status of Utah Economy

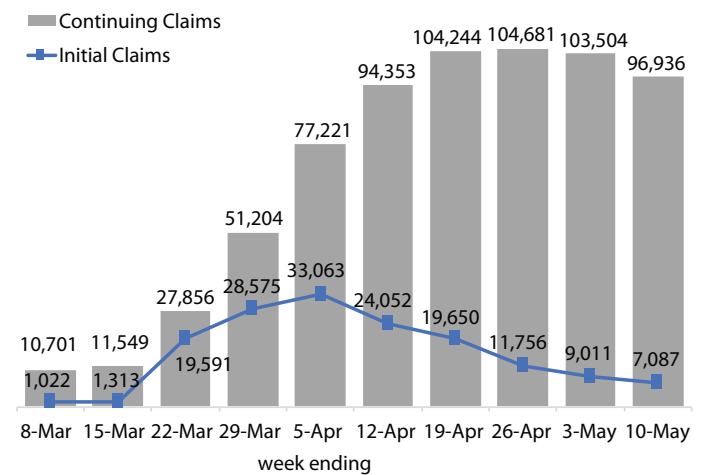
Utah acted promptly to address the COVID-19 pandemic. The economic impact, while devastating, has been less than other parts of the country. Cumulative jobless claims in Utah through May 10 as a percent of the workforce tally 9.6%, tying with South Dakota for the lowest in the U.S. and measure less than half the U.S. percentage of 21.5%.

No single indicator provides a complete picture of the economic impact. Data lags also impair economists' ability to assess the full economic harm caused by the virus. What we do know is that the economic impact has been sudden, severe, and uneven. We also believe that employment losses have peaked. Labor market activity, job postings, traffic counts, and taxable sales data illuminate these findings.

Labor Market Activity

In nine weeks, initial unemployment claims tallied approximately 150,000, wiping out more than a full three years of Utah job growth. Utah economists expect April 2020 to be the peak month for job losses in Utah. Initial jobless claims have now declined in Utah for five consecutive weeks, dropping from 33,063 the week of April 5, 2020 to 7,087 the week of May 10, 2020; continuing jobless claims have also begun to decline. These declines signal a return to job growth, likely in the next 30 to 90 days.

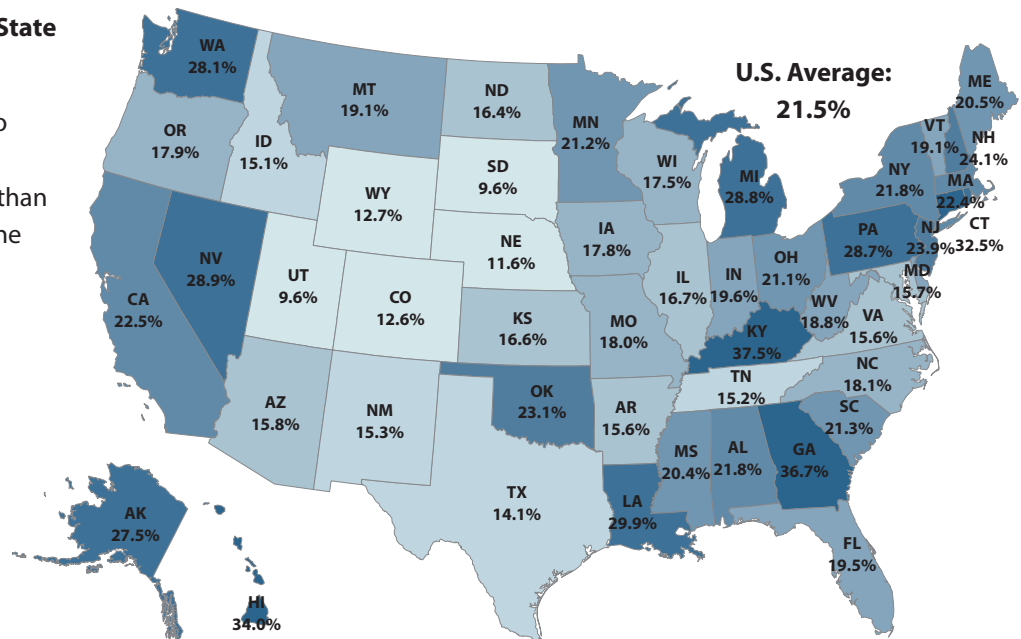
Unemployment Insurance Claims in Utah, 2020



Source: Utah Department of Workforce Services

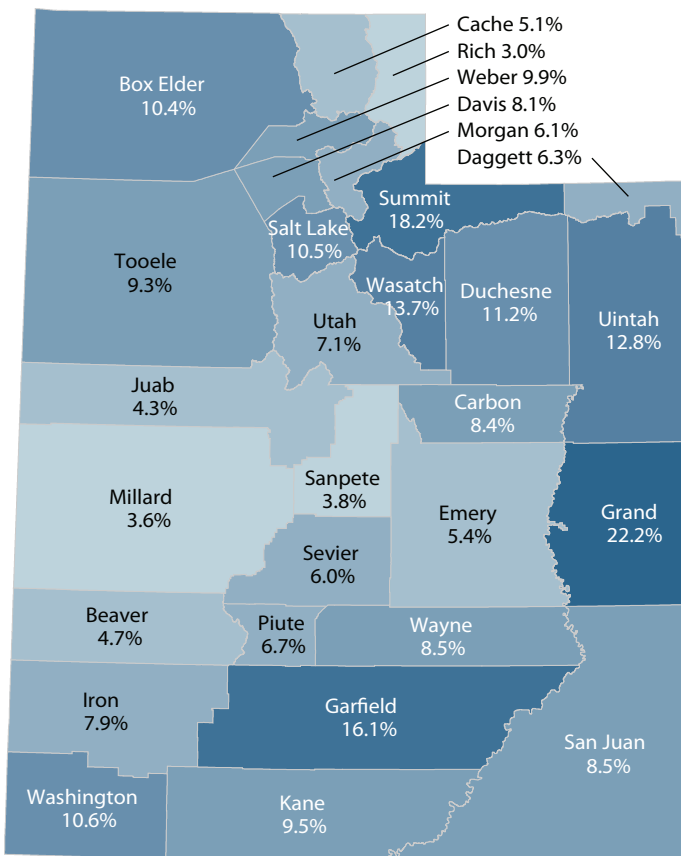
COVID-19 Economic Impact by State

Cumulative initial unemployment insurance claims from March 16 to May 10, 2020 as a percent of the February 2020 workforce are less than half in Utah (9.6%) compared to the U.S. (21.5%)



Sources: Utah Department of Workforce Services and U.S. Bureau of Labor Statistics

COVID-19 Initial Claims as a Percent of County Workforce



Note: COVID-19 initial claims are initial unemployment insurance claims between March 16 and May 10, 2020 (the most recent data available at the time of this publication).

COVID-19 Economic Impact in Utah by Industry

	Continuing Unemployment Claims*	Claims % of Feb. Jobs	Avg. 2018 Weekly Wage
Accommodations and food services	18,118	13.4%	\$355
Retail trade	11,981	7.0%	\$644
Health care and social assistance	7,258	4.5%	\$846
Administrative and waste services	9,440	11.1%	\$698
Manufacturing	8,780	6.5%	\$1,115
Transportation and Warehousing	5,369	8.2%	\$968
Professional and technical services	4,895	4.4%	\$1,424
Other Services	4,153	9.6%	\$686
Construction	4,619	4.3%	\$982
Educational services	3,149	5.9%	\$840
Arts; entertainment; and recreation	3,508	12.1%	\$543
Wholesale trade	2,829	5.4%	\$1,325
Information	1,975	4.8%	\$1,507
Real estate and rental and leasing	1,870	8.5%	\$971
Government	1,308	0.5%	\$927
Finance and insurance	1,376	2.0%	\$1,306
Management of companies and enterprises	720	3.5%	\$1,832
Natural resources and mining	876	9.8%	\$1,177
Utilities	58	1.6%	\$1,966
Unknown Industry	3,496	-	-
Out of State Employer	1,158	-	-
TOTAL	96,936	6.1%	\$933

*Continuing unemployment claims for week ending May 10, 2020

Sources: Utah Department of Workforce Services and U.S. Bureau of Labor Statistics

The economic impact has also been uneven in Utah, affecting tourism and some energy counties most significantly. Grand, Summit, Garfield, Wasatch, and Uintah counties have been the most severely impacted as a percent of total economic activity. The central area of Utah, including Millard, Sanpete, Juab, and Emery counties, have been some of the least economically impacted. This varying impact signals the need for targeted interventions to help places with greatest economic need.

In a similar fashion, the COVID-19 economic impact by sector varies, with over a third of all continuing jobless claims in the Accommodations and Food Services, Retail Trade, and Health Care and Social Assistance sectors. Every sector except Government has experienced a contraction. The impacts have been most severe in industries with below-average wages, providing another reason for targeted interventions.

Among the most positive pieces of economic news is that approximately 70% of claimants for unemployment insurance filed as "job attached." This suggests significant opportunity for rapid economic re-engagement, particularly if the state acts quickly to provide aid. The Utah Department of Workforce Services also reports 20,000 jobs remain available in Utah.

These data make the case for swift economic policy actions that reactivate the economy and minimize permanent job losses.

Traffic Counts

Real-time traffic counts provide another indication of economic activity. Since Utah started the reactivation of the Utah economy traffic counts have increased in most areas of the state, but as of May 13, traffic counts remain about 20% below 2019 levels.

Taxable Sales

Taxable sales provide an indication of the impacts of COVID-19 by taxable industry. The impacts have varied, with some experiencing major decreases and others experiencing major increases. March 2020 taxable sales (the most recent available) show Accommodations and Arts, Entertainment, and Recreation have been the hardest hit industries in the state with a 51% and 49% respective decline from March 2019 to March 2020. By contrast, Food and Beverage Stores, Home Improvement and Garden Stores, and General Merchandise Stores experienced 37%, 21%, and 21% respective increases over the same period. These data provide another reason for interventions that target hardest hit industries.

UTAH'S NEXT ECONOMY

The Economic Response Task Force approaches Utah's economic recovery with applied optimism. We recognize the massive economic challenge facing our state – upwards of 100,000 to 200,000 unemployed Utahns and thousands of devastated businesses. Utah must address this economic body blow, while also adjusting to a new economic reality. The economy has changed and Utah's business and the economic strategy must change with it.

Because Utah entered the COVID-19 recession with a strong economic and fiscal foundation – including historically low unemployment, a well-diversified economy, strong balance

sheets, and robust state budget reserve accounts – the state has the opportunity to recover more quickly than other states. Utah also has the potential to, as the Economic Response Task Force calls it, “recover to better.” This includes a flourishing economy that provides expansive opportunities for all Utahns.

We recommend a framework for state decisionmakers that includes guiding principles, a strategic approach that segments the challenge and capitalizes on major opportunities. We also encourage the state to re-imagine its use of economic development incentives.

RECOMMENDED RECOVERY FRAMEWORK

Guiding Principles

The Economic Response Task Force recommends state leaders follow five guiding principles to return Utahns to work and adjust to a rapidly changing economy.

- 1. Speed** – Act with pace to return job-attached workers to their jobs. This is the quickest way to restore economic order and growth.
- 2. Targeted** – Focus economic development support towards industries, locations, and people that have suffered the greatest displacement, and prepare for enhanced opportunities in the post-COVID economy.
- 3. Flexibility amidst uncertainty** – Prepare for a range of scenarios over the next six to 24 months and be ready to adjust quickly. Significant uncertainty remains. Prepare to be flexible.
- 4. Permanent benefit** – Favor policy solutions that solve an existing problem and create an enduring benefit. This “twofer” helps us recover to better.
- 5. Innovative** – Find better ways to create and serve. Recover to better.

Strategic Approach

In addition to adherence to guiding principles, the Economic Response Task Force recommends state leaders segment the economic recovery challenge by category (furloughed, laid off, and macro-economic trends) and time (short, medium, and long).

Furloughed (short-term)

Furloughed employees are those who remain job attached. Approximately 70% of Utah's initial unemployment insurance claims are workers who remain connected to an employer. These inactive employees provide the quickest path to economic order and growth.

Several strategies can help move furloughed workers back into their jobs.

- **Progress on risk levels** – As the core health indicators show it is appropriate, moving to a green “new normal” risk level will further accelerate more employers bringing more workers back onto their payroll.
- **Confidence** – Businesses can help instill consumer confidence by visibly showing that they follow applicable public health protocols and adopting the Utah Leads Together Pledge.
- **Assistance** – The state may consider making one-time CARES Act allocations for the most heavily impacted businesses.

Laid Off (short- and medium-term)

Laid off Utahns represent approximately 30% of the initial unemployment insurance claims. These workers need to find new jobs in an uncertain economic environment. Utah can accelerate recovery by providing rapid training opportunities and new investment in needed Utah infrastructure.

In keeping with the guiding principles of speed, targeted, permanent benefit, and innovative, we recommend the state invest in this population by providing training-ready education programs and construction-ready infrastructure projects.

RECOMMENDED RECOVERY FRAMEWORK (continued)

Macroeconomic Trends (medium- and long-term)

Prior to the COVID-19 pandemic, there were a number of major economic shifts on the horizon. Many of these transformations will be accelerated by the pandemic; it will also catalyze additional economic changes.

Existing economic opportunities

Utah must capitalize on several existing economic trends including the following:

- Artificial Intelligence, machine learning, and cybersecurity
- Automation, including autonomous vehicles
- Advanced and additive manufacturing
- Augmented and virtual reality
- E-commerce and other contactless consumption

New economic shifts

In addition to the economic shifts underway prior to the pandemic, we also expect to see new trends as a result of this experience.

- **Supply chain** – Fortifying U.S. manufacturing and supply chains, particularly in life science, logistics, and advanced manufacturing as they move from “Just in Time” to “Just in Case.”
- **Remote work and learning** - Telemedicine, online education, and remote work will play a larger role in our lives and the economy going forward. But, for these virtual solutions to be successful we must have adequate communications infrastructure throughout the state.
- **Mobility solutions** - Alternative, clean transportation and mobility solutions will be front of mind for Utahns after enjoying cleaner air during the pandemic.
- **Food security** – We expect a focus on local agricultural and food production to increase our community’s resiliency.

The New Supply Chain Strategy



Strategic Investment Options

The Economic Response Task Force highlights ten strategic investment options:

1

Outdoor recreation – Invest and develop in infrastructure such as trails, bike paths, and other amenities that make Utah’s unique vistas and landscapes more accessible to and enjoyable for Utah families and out-of-state visitors.

2

Headquarters strategy – Make Utah the *de facto* economic headquarters of the intermountain west in key growth sectors of the 4th industrial revolution.

3

Advanced manufacturing and logistics network – Create an environmentally sustainable and premier advanced manufacturing and logistics network through the Utah Inland Port Authority system that capitalizes on the Utah 4-3-2-1 opportunity.

4

Agriculture and food – Promote local agriculture and food production by doubling down on the Utah’s Own promise.

5

Broadband – Deliver high-speed reliable telecommunications access for all Utahns, in both unserved areas and underserved areas.

6

Point of the Mountain – Invest in a moonshot at the Point of the Mountain by anchoring it with a research institution that can solve the state’s unique challenges (such as air quality) and build capacity and strategic advantages in emerging sectors.

“The only regret I have about moving our business to Utah is that I didn’t do it sooner.”

– Eric Snyder, CEO, Armada Skis

7

Crossroads of the world – Deliver on Utah’s brand as the “Crossroads of the World” through welcoming a global audience to Utah through large-scale events like the Olympic Winter Games.

The 2002 Olympic Winter Games had 2.1 billion television viewers in 160 nations. 1.5 million tickets were sold and Salt Lake City hosted an average of 70,000 visitors each day of the games.

Source: Kem C. Gardner Policy Institute

8

Air quality – Research, invest, incentivize, and empower innovations in alternative vehicle technology development and infrastructure — along with transportation, transit, and other mobility solutions — to improve air quality.

The quality of Utah’s air improved dramatically during the state’s Stay Safe, Stay Home period. Research by the Utah Clean Air Partnership (UCAIR) shows the three largest barriers to telework are attitudes, perceived productivity, and infrastructure. If Utahns can learn from the COVID-19 experience and reduce mobile emissions during winter inversion and summer ozone seasons by driving in a similar way, Utah could experience dramatic improvements in health and quality of life. It’s one way Utah can “return to better.”

9

Affordable housing – Invest in affordable housing options for single individuals, families, and the elderly throughout the state.

Utah’s Housing Shortage Continues

	April 2020 - 2019 Change
Price	6.30%
Number of Homes Sold	-24.10%
New Homes Built	-43.46%

Source: Kem C. Gardner Policy Institute, UtahRealEstate.com.

10

Rural Utah – Develop new products by increasing broadband connectivity for tele-solutions, preparing rural Utah real estate and workforce for re-shoring opportunities, strengthening rural Utah’s ability to export through enhancing its infrastructure, and ensuring rural Utahns have access to affordable housing, educational opportunities, and economic mobility.

Re-Imagined Incentives

Utah has long used post-performance tax rebates to incentivize capital investment and high-quality job growth in the state. This pandemic gives us the opportunity to re-imagine those incentive programs and other public investments to align them with expected trends and to capitalize on Utah’s unique competitive advantages. Workforce and education programs, infrastructure, and incentives should support Utah’s transition into new industry sectors and align with our economic inclusivity goals.

The Utah 4-3-2-1 Opportunity

4

\$ billion airport reconstruction

3

major rail lines leaving the west coast ports

2

major interstates

1

incomparable location where they all converge

RETURN UTAHNS TO WORK

Utah will benefit from investment in training-ready and construction-ready projects and programs

EDUCATION

Training-Ready Investments

Rapid reskilling and upskilling of in-demand skills

Proposal: Make a strategic investment in rapid reskilling and upskilling of training-ready programs. These short-term, job-focused investments will enable Utahns to work and compete in a changing economy.

Considerations:

- Funds should be spent in the next 24 months (FY 2021 and FY 2022)
- Funds should be spent in three categories:
 - **Certificates** – Non-degree certificate programs ranging from six to 30 weeks that build knowledge and skill in areas such as data analytics and applications, systems operations, cybersecurity, technology tools for education and business, project management, and health care fields.
 - **One-year graduate programs** – Degrees that support Utah industries such as software development, information systems, finance, security operations, and educational technology.
 - **Technical Education** – Short-term credentials in high demand technical areas, such as skilled trades (welding, electrician, and others), allied health (certified nursing assistants, medical technology, and others), and information technology (web, mobile development and others)
- Incentivize completion
- Consider public-private partnerships
- Spread investment throughout the state
- Consider allocating \$30 million to \$50 million in CARES Act or other funding to vouchers for students, scholarships, income-share programs, and other support

TRANSPORTATION, WATER, AND LIFE QUALITY

Construction-Ready Investments

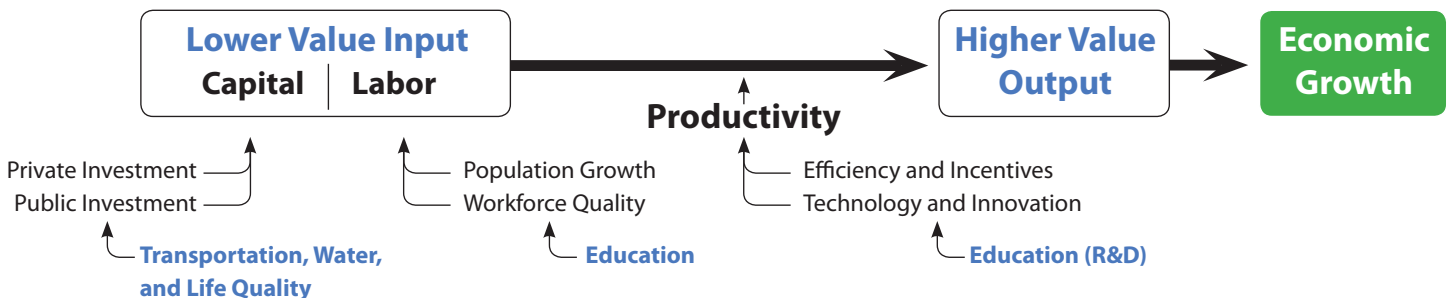
Bonding for new highways, transit, active transportation, outdoor recreation, water infrastructure, and broadband

Proposal: Explore various bonding scenarios for accelerating construction of valued transportation and life quality infrastructure to boost the Utah economy.

Considerations:

- Funds should be spent in the next 24 months (FY 2021 and FY 2022)
- Projects should be for improvements needed in the next 10 years.
- In the case of roads and water, this program does not result in new money; it front loads the cash flow.
- Life quality investment could include hiking and biking trails that make our communities more liveable
- Tailor the size and rollout of the program to what the Utah construction industry can handle so that taxpayer investment benefits Utah residents and businesses.
- Consider partnerships between state government, local government, federal agencies, and private land owners
- Consider totals up to \$2 billion
- Spread projects throughout the state
- Consider projects of various sizes

How Government Investment in Education, Transportation, Water, and Life Quality Help the Economy Grow



Source: David Eccles School of Business, University of Utah

Utah Fiscal and Economic Preparedness

Between 2009 and 2020, Utah and the nation experienced the longest, sustained economic expansion in history. Utah created over 400,000 jobs, and unemployment dropped to a historic low. Utah used this time to build up significant reserves that can help to support the economy and mitigate impacts to critical public services like education, public safety, transportation, and public health and social safety-net programs.

The fiscal toolkit diagram at the right shows state budget experts' recommended sequencing of resource use in an economic downturn. The temporal budget balance (matching ongoing expectations with more reliable revenue sources and using onetime windfalls for spending of limited scope) is the first resource that should be tapped; formal rainy-day funds are the last.

Utah's official rainy-day funds (budget reserve and disaster recovery accounts), "working" rainy day funds (cash appropriated for buildings and roads that can be replaced with borrowing), and unemployment insurance trust fund balance were at record levels at the beginning of 2020. These reserves are in addition to immediately available options like reprioritizing current budget allocations and drawing on operating reserves. Portions of the balances presented at the right are encumbered; details will be provided in future reports.

The "Big Three" credit rating agencies – Fitch, Moody's, and S&P – affirmed Utah's fiscal stability and preparedness with AAA credit ratings on May 8, 2020.

"The state is well-positioned to address an economic downturn, given its broad control over expenditures, revenue raising capacity, and maintenance of sound reserves."

- Fitch

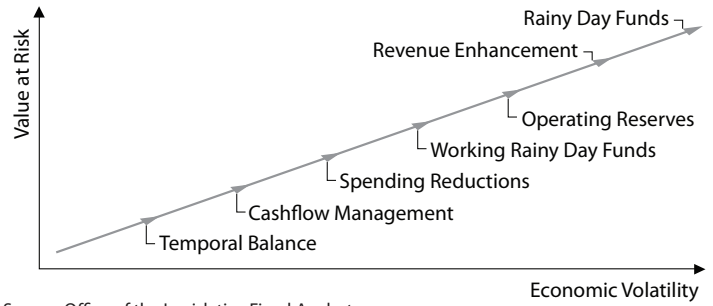
"Utah's Aaa rating reflects the state's tradition of strong conservative fiscal governance that is expressed in frequent revenue forecast adjustments, structurally balanced budgets, a willingness to make both spending and revenue adjustments when necessary, and accumulation of ample reserves."

- Moody's

"S&P Global Ratings believes Utah's strong credit fundamentals will allow the state to navigate through the economic uncertainty and challenges brought about by the COVID-19 pandemic."

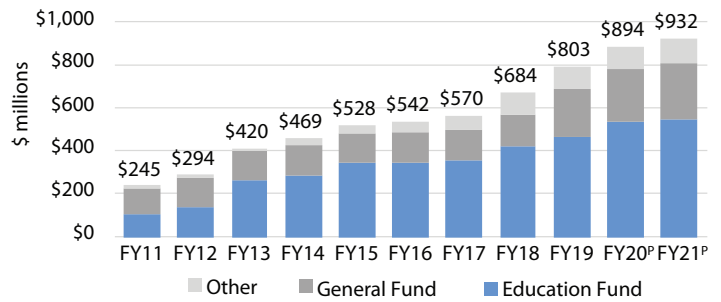
- S & P

Utah's Fiscal Toolkit



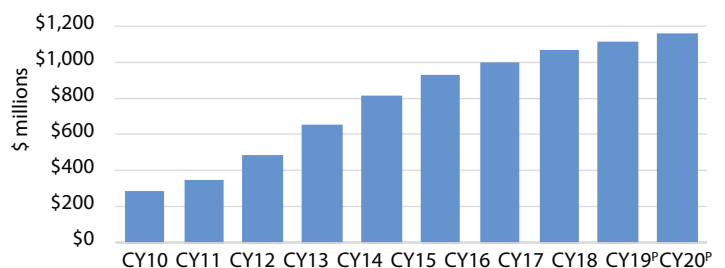
Source: Office of the Legislative Fiscal Analyst

Rainy Day Funds



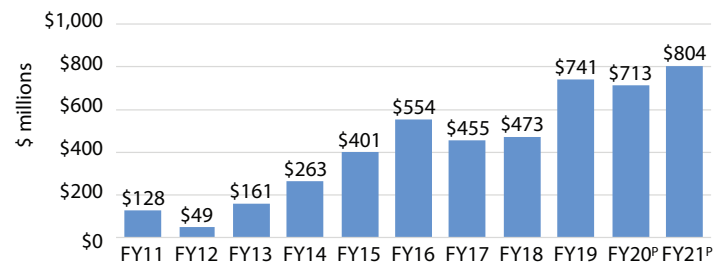
Source: Utah Governor's Office of Management and Budget and Utah Office of the Legislative Fiscal Analyst

Unemployment Insurance Trust Fund February Balance



Source: U.S. Department of the Treasury

Cash-funded Buildings and Roads



Source: Utah Governor's Office of Management and Budget and Utah Office of the Legislative Fiscal Analyst

Utah's COVID-19 Response Work Groups and Initiatives

COVID-19 poses new and unique challenges that require new and unique responses. During the Urgent Phase, decision makers stood up the requisite groups to address these new challenges quickly, with right expertise, and to drive the right policies. Outlined below are the teams that have been formed to-date to include the group's core responsibility (the list is not exhaustive).

Individuals have come together, both formally and informally, to find solutions by working across government, the private sector, not for profits, healthcare, faith-based organizations, universities, and private citizens. No one entity or individual can adequately respond to the crisis alone. Utah's success hinges on broad-based collaboration and a willingness to be proactive.

Unified Incident Command

Governor Herbert established the Unified Incident Command to provide a command structure for aligning all working components of the COVID-19 emergency response. Public Safety Commissioner Jess Anderson serves as incident commander with Ret. Major General Jefferson Burton serving as deputy incident commander. A working group of first responders from the Department of Public Safety (including the Division of Emergency Management), the Utah Department of Health and several other state agencies make up the Unified Incident Command. The group utilizes datasets and regular communication channels with state and local agencies to direct decisions and situations related to COVID-19. The group also serves as the federal government liaison to include the coordination of emergency federal funding.

Utah COVID-19 Community Task Force

This group, led by Lt. Governor Spencer Cox, oversees Utah's comprehensive response to the coronavirus and includes the executive director of the Department of Health, the state epidemiologist, and other public safety, health, and community officials.

Utah Economic Response Task Force

This 33-member group was established by Governor Herbert to help prevent and mitigate the economic impacts of the coronavirus. Derek Miller, president, and CEO of the Salt Lake Chamber, serves as chair of the task force which includes a wide array of state, county, and city government representation along with business leaders from across the state.

Public Health and Economic Emergency Commission

The legislature and governor created the 10-member commission to advise and make recommendations to the governor regarding the state's response to the COVID-19 emergency. The commission's responsibilities include creating a balanced response that protects both public health and the state's economy. The commission is co-chaired by Senator Daniel Hemmert and Ret. Major General Jefferson Burton and is staffed by the Governor's Office of Management and Budget.

Public Health and Economic Emergency Commission Medical Advisory Group

This small, informal team of health and epidemiological experts was formed to assist the Commission in making sound decisions and recommendations by deepening the Commission's understanding of the public health and epidemiological impacts of the coronavirus. Membership includes representatives from state and local health departments, Utah's medical associations, workers compensation, and is chaired by Dr. Michael Good, CEO, University of Utah Health.

Utah COVID-19 Multi-Cultural Subcommittee

Gov. Herbert convened a Multi-cultural Subcommittee to Utah's COVID-19 Task Force to address disparities and increase equity in the state's response to the crisis. The committee is directed by Nubia Pena and co-chaired by Byron Russell and Ze Min Xiao.

Protecting High-Risk Populations Project Team

The State of Utah values preserving the health of vulnerable Utahns who are at a higher risk of severe illness and death from COVID-19. The team's objective is to develop and implement a plan to protect high-risk populations from COVID-19, to include protecting the state's ICU bed capacity, while reactivating the economy. The team is co-chaired by Ann Williamson, Jackson Maughn and Ret. Major General Jefferson Burton and includes representatives from local health departments, state government agencies, workers compensation, and the private sector.

Testing Criteria

Testing guidelines and priorities are set in collaboration with state and local healthcare professionals and systems. Testing remains central to Utah's overall strategy as we move to reduced risk levels within the color-coded health guidance system. The highest priority is to ensure that symptomatic individuals and close contacts of positive individuals have immediate access to testing. However, as Utah's testing capacity exceeds this high-priority demand, the state will conduct targeted testing of asymptomatic individuals. Asymptomatic testing will be provided based on testing capacity and prioritized among targeted groups to include staff at long-term care facilities, individuals having surgery or beginning a hospital stay, and employees working in critical infrastructure industries.

Color-Coded Guidance Review Team

Representatives from the Utah Department of Health, the Governor's Office of Management and Budget, and the private sector are responsible for reviewing public health and economic data to inform recommendations to the governor for changing risk levels within the health guidance system. Public health data includes hospital utilization, positive test trends, transmission rate, exposure source, and how individuals of high risk are being affected by the virus. Economic data includes unemployment claims (new initial claims and continued claims), taxable sales by sector, income tax withholding, the unemployment rate, and job growth rate.

Decision Support and Data Analytics Team

This group of data analytics and subject-matter experts was assembled to advise decision makers on the use of data and other tools to strengthen Utah's response to the pandemic. The team is broad-based with expertise drawn from statistical modeling, epidemiology, healthcare, and the public and private sectors. The team has identified and developed many of the metrics on the Utah Leads Together operational dashboard, which is used regularly to make key decisions and recommendations.

Research Team

This small team in the Utah Governor's Office of Management and Budget reviews research, trends, and policies on COVID-19 from across the United States and the world. In partnership with the Utah Department of Health, the team analyzes Utah's data to make comparative findings in support of developing policy recommendations for the State of Utah.

Housing Subgroup

This group is a subgroup of the Economic Response Task Force and includes representation from real estate and property development industries, landlords, advocacy and policy groups, as well as state and local government. Utah has set aside \$20 million of its Coronavirus Relief Fund allocation from the CARES Act for rental assistance programs. Additionally, the Department of Workforce Services is using \$4 million from other housing assistance funding, including a housing-specific CARES Act grant, to provide rental assistance to individuals who are not eligible for, or have not yet received, an unemployment insurance eligibility decision and face eviction.

A Mask for Every Utahn

The focus of this initiative is to provide face masks for Utahns in support of the criteria set forth in the state's color-coded health guidance system. With funding provided by the federal CARES Act, up to two million face masks are being distributed upon request and free of charge. Masks will also be available to underserved populations through local emergency management centers, nonprofits serving the homeless, and grocery stores willing to distribute masks to customers. The initiative was executed by a working group with representation from the Governor's Office of Economic Development and the Department of Health in partnership with private industry partners such as Cotopaxi and the Utah Manufacturers Association.

U.S. Monetary and Fiscal Response

At the national level, the Federal Reserve has taken immediate and aggressive monetary policy actions to encourage economic activity, preserve liquidity, and protect the financial system. The U.S. government has enacted significant fiscal policies to assist individuals, businesses, and state and local governments.

Federal Reserve Monetary Response

February 28: Chairman Powell reassured markets that the Fed “will use its tools and act as appropriate to support the economy”

March 3: FOMC cut FFR 50 bps to 1.00-1.25%; unanimous decision

March 9: NY Fed increased overnight repo offering from \$100B to \$150B and increased two-week term repo operation from \$20B to \$45B

March 11: NY Fed increased overnight repo offering from \$150B to \$175B and added three one-month term repo operations at \$50B

March 12: NY Fed switched reserve management purchases from T-bills to all Treasury securities, introduced weekly one-month and three-month term repo operations at \$500B each

March 15: FOMC meeting

- Cut FFR 100 bps to zero lower bound (0.00-0.25%); Mester dissented
- Restarted Quantitative Easing (QE); increased Treasury and mortgage-backed securities (MBS) holdings by at least \$500B and \$200B
- Cut primary credit rate (discount window) 150 bps to 0.25%
- Depository institutions may borrow from discount window for 90 days, repayable & renewable by the borrower on a daily basis
- Reduced reserve requirement ratios to 0.00%
- Reduced rate on standing U.S. dollar liquidity swaps from OIS+50 bps to OIS+25 bps (BoC, BoE, BoJ, ECB, SNB)

March 16: Regulatory agencies encouraged banks to use discount window

March 17: Regulatory agencies encouraged banking organizations to use capital & liquidity buffers

March 17: FRB established Commercial Paper Funding Facility (CPFF)

March 17: FRB established Primary Dealer Credit Facility (PDCF)

March 18: FRB established Money Market Mutual Fund Liquidity Facility (MMLF)

March 19: Fed expanded U.S. dollar liquidity swap arrangements to nine additional central banks

March 20: Fed, BoC, BoE, BoJ & ECB further enhance swap lines by increasing frequency of 7-day maturity operations from weekly to daily

March 20: FRB expanded MMLF

March 22: Regulatory agencies encouraged financial institutions to work with borrowers and provided information regarding loan modifications

March 23:

- FOMC announced open-ended purchase of Treasuries and MBS and expanded purchases to include agency commercial MBS
- Established Primary Market Corporate Credit Facility (PMCCF) and Secondary Market Corporate Credit Facility (SMCCF)
- Established Term Asset-Backed Securities Loan Facility (TALF)
- Expanded MMLF to wider range of securities
- Expanded the CPFF to more securities and reduced facility pricing

March 23: FRB announced technical change around a firm’s Total Loss Absorbing Capacity (TLAC) to facilitate the use of firms’ buffers

March 26: Regulatory agencies encourage banks, saving associations & credit unions to offer small-dollar loans to consumers & small businesses

March 26: Fed offers reporting relief to small financial institutions

March 27: Regulatory agencies permitted early adoption of standardized approach for measuring counterparty credit risk (SA-CCR) and allowed banks to mitigate effects of current expected credit loss (CECL)

March 31: Fed established temporary FIMA Repo Facility

April 1: FRB announced exclusion of U.S. Treasury securities and deposits at Fed Reserve Banks from the supplementary leverage ratio rule

April 6: Regulatory agencies changed community bank leverage ratio

April 9: Fed announced \$2.3T in loans to support the economy

- Established Main Street Loan Facility (MSELF & MSNLF)
- Bolstered Paycheck Protection Program Liquidity Facility (PPPLF)
- Expanded PMCCF, SMCCF and TALF
- Established Municipal Liquidity Facility (MLF)

April 14: Regulatory agencies issued interim final rule to temporarily defer real estate-related appraisals and evaluations

April 16: Fed announced its PPPLF is fully operational

April 17: FRB announced a rule change to bolster effectiveness of Small Business Administration’s (SBA) PPP

April 23: FRB announced it will make information regarding its programs publicly available on a monthly basis

April 23: FRB announced temporary actions aimed at increasing the availability of intraday credit extended by Federal Reserve Banks

April 23: Fed announced it is working to expand access to its PPPLF for additional SBA-qualified lenders as soon as possible

April 24: FRB announced an interim final rule to amend Regulation D to delete the six-per-month limit on convenient transfers from the “saving deposit” definition

April 27: FRB announced an expansion of the MLF to counties with a population of at least 500,000 residents (down from 2M) and cities with at least 250,000 residents (down from 1M)

April 30: FRB announced an expansion of the Main Street Lending Program by adding a third loan option, lowering the minimum loan size for certain loans to \$500,000 and expanding business eligibility

April 30: Fed expanded access to its PPPLF to additional lenders and expanded the collateral that can be pledged

Source: Wells Fargo Securities

Fiscal Response: \$2.8T + as of May 20, 2020

Phase 1: Coronavirus Preparedness and Response Supplemental Appropriations Act

\$8.3B | <0.1% of GDP

Status: **Passed.** Became Law on March 6, 2020.

Targeting: **Vaccines, R&D**

Phase 2: Families First Coronavirus Response Act

\$192B | ~0.9% of GDP

Status: **Passed.** Became Law on March 18, 2020.

Targeting: **Free testing, sick leave, unemployment insurance, Medicaid**

Phase 3: Coronavirus Aid, Relief & Economic Security Act (CARES)

\$2.2T | ~10% of GDP

Status: **Passed.** Became Law on March 27, 2020.

Targeting: **Individuals, highly impacted industries, state and local governments**

Phase 4: Paycheck Protection Program and Health Care Enhancement Act

\$484B | ~2% of GDP

Status: **Passed.** Became Law on April 24, 2020.

Targeting: **More money to small businesses & hospitals**

Source: Wells Fargo Securities

Utah COVID-19 Federal Aid Allocations as of May 12, 2020; \$ thousands

Treasury	Coronavirus Relief Fund - State of Utah	\$934,766
	Coronavirus Relief Fund - Salt Lake County	\$203,604
	Coronavirus Relief Fund - Utah County	\$111,630
Department of Education	Governor's Fund	\$29,190
	K-12 Fund	\$67,822
	Higher Education Fund	\$147,577
Administration for Children and Families	Child Care and Development Block Grant	\$40,415
	Community Services Block Grant	\$1,341
	Low Income Home Energy Assistance Program	\$6,279
	Family Violence Prevention	\$412
	Child Welfare Services	\$632
	Runaway and Homeless Youth	\$211
	Head Start	\$4,849
Administration for Community Living	Supportive Services	\$1,300
	Congregate and Home-Delivered Meals	\$4,681
	Family Caregivers	\$623
	Protection of Vulnerable Older Americans	\$130
	Aging and Disability Resource Centers*	\$450
	Centers for Independent Living	\$941
Centers for Disease Control and Prevention	CDC Grants*	\$13,599
Health Resources and Service Administration	Poison Control Centers	\$42
	Ryan White HIV/AIDS	\$286
	Community Health Centers	\$16,370
	Telehealth Resource Centers	\$829
	Small Rural Hospital Improvement Program	\$1,771
Substance Abuse and Mental Health Services Administration	Emergency Grants to Address Mental and Substance Use Disorder	\$2,000
	Certified Community Behavioral Health Clinics	\$0
Office of the Secretary	Provider Relief Funds - General Allocations*	\$268,154
	Hospital Preparedness*	\$672
U.S. Department of Agriculture	Emergency Food Assistance Program (TEFAP)	\$5,851
	Supplemental Nutrition Program for Women, Infants, and Children (WIC)	\$3,142

Labor	UI Administration (Base)	\$4,905
	UI Administration (Supplemental)	\$4,905
	Short-Term Compensation	\$979
	Dislocated Worker Grants*	\$0
Justice	Justice Assistance Grants - State	\$5,466
	Justice Assistance Grants - Local	\$2,649
Commerce	Manufacturing Extension Partnership (MEP)	\$575
	Awards to Fishery Participants	\$0
Homeland Security	Emergency Performance Management Grant	\$1,330
	Emergency Food and Shelter Program	\$1,422
Housing and Urban Development	Community Development Block Grant (CDBG), Round 1 Local	\$9,498
	CDBG - Round 1 State	\$3,266
	CDBG - Round 2	\$5,267
	Emergency Solutions Grants (ESG) - Local*	\$1,792
	ESG - State*	\$4,634
	Public Housing Operating Fund	\$633
	Tenant-Based Rental Assistance*	\$1,480
	Housing Opportunities for Persons with AIDS	\$124
Transportation	FTA Urbanized Formula	\$197,208
	FTA Nonurbanized Formula	\$22,313
	Grants-in-Aid for Airports	\$93,363
Independent Agencies	Election Security Grants	\$4,322
	Institute of Museum and Library Services	\$290
	National Endowment for the Arts	\$443
	National Endowment for the Humanities	\$443
Non-Grant Funding	SBA Paycheck Protection Program	\$5,466,410
	SBA Economic Injury Disaster Loans	\$184,366
	Municipal Liquidity Facility (max. eligible notes)	\$2,677,400
Individual Stimulus Aid	Economic Impact Payments as of May 8	\$2,091,335
All Federal Aid to Utah	Total (excluding Municipal Liquidity Facility)	\$9,978,985
	Percent of Utah GDP	5.30%

*Awards to date

Source: Federal Funds Information for States and Internal Revenue Service

Emergency Procurement

The Utah Leads Together Plan began with clarity on the phases Utah would move through (urgent, stabilization, recovery) to both secure public health and protect the economy as much as possible. The urgent phase required urgent action. The need to ramp up quickly to get ahead of the spread of the virus was key as the state was losing nearly \$25 million to \$35 million a day in GDP (gross domestic product) and nearly 3,000 jobs a day between March 15 and May 2.

In the interest of aiding the people and local governments of Utah, Governor Herbert issued a state of emergency on March 6, 2020 in response to the COVID-19 pandemic. Following the Governor's declaration and pursuant to Utah Administrative Code R33-8-501, the Division of Purchasing issued an emergency purchasing plan allowing state agencies to make emergency purchases to stop the spread of COVID-19 and mitigate the overall effects of the pandemic.

Utah Administrative Code R33-8-501 states that: *Upon a declaration of an "Official State of Emergency" by the authorized state official, the chief procurement officer shall implement the division's Continuity of Operations Plan, or COOP. When activated, the division shall follow the procedures outlined in the plan and take appropriate actions as directed by the procurement unit responsible for authorizing emergency acquisitions of procurement items.*

The Division of Purchasing's COOP plan provides that: *The Division Director or Designee can authorize essential purchases to preserve the safety of staff and to protect the threatened assets of the Division. However, judgment must be exercised to ensure that the long-term effects will not outweigh the short-term benefits.*

When emergency conditions justify, the normal bid process is not required and the most important criteria is "performance." However, to ensure that the costs are not excessive, the Continuity of Operations Team Leader or Designee must exercise caution and afterwards justify the award.

In accordance with the Utah Procurement Code and COOP plan, the Division of Purchasing issued several solicitations for PPE and other emergency response contracts, created a google form at coronavirus.utah.gov/help to allow for vendors to submit information regarding sourcing PPE, and accepted vendors submitted information using a "cold-call" method. Between March 21 and the present time, over 700 vendors have either responded to the posted solicitation, cold-called the state to provide/source PPE for the State of Utah and vendors have applied to assist the state through the coronavirus.utah.gov/help website. Many of those vendors

were sourcing PPE from China, but some local vendors also provided information on PPE they could provide to the State.

PPE needs were established by local hospitals, the Department of Health, local health departments, FEMA, USDA, cities, counties, and members of the Emergency Operation Committee (EOC). Vendors that submitted timely responses were reviewed and vetted by the Department of Health, the Division of Purchasing, the Department of Administrative Services, the Economic Development Corporation of Utah (EDC Utah), and Members of the EOC. In addition, the Division of Purchasing has worked with national cooperative organizations, local companies, existing statewide contract holders, and other states in order to mitigate this crisis. Reviews of vendors included pricing, history in sourcing from China, location, and potential performance based on conversations. Vendors that received purchase orders from the state committed to certain protocols including daily phone calls and emails to provide updates.

As of the date of this publication, Utah has spent \$109 million to respond to the COVID-19 public health crisis. The vast majority of these and future COVID-19 response costs are being funded by the federal Coronavirus Relief Fund, provided through the CARES Act. Utah's \$1.25 billion Coronavirus Relief Fund award includes \$935 million allocated at the state level and \$315 million allocated to Salt Lake and Utah counties. Other Utah counties and cities will receive a portion of the state-level allocation. This funding can only be used for various one-time COVID-related supports prior to December 30, 2020, including public health efforts, household assistance, and business assistance. In addition to the Coronavirus Relief Fund, over \$1 billion is being provided for the COVID-19 response efforts of Utah state and local governmental entities from the CARES Act, FEMA, and other federal programs.

While not all purchases have been delivered and paid for, the largest category of all purchases includes \$74 million for PPE orders. Utah anticipates that FEMA will reimburse the state for many of these expenditures pending a state match. Utah plans on using money appropriated by the legislature for COVID-19 related expenses along with volunteer hours that may also be eligible for match. Other major purchases include \$12 million to distribute high quality masks made by Utah companies to Utahns, \$9 million to expand access to testing with testutah.com and drive up testing, \$6 million to increase contract tracing and testing with the Healthy Together app, \$3 million for randomized testing, \$2 million to establish

the infrastructure to collect and track data, and nearly \$2 million for staging and alternative care facilities. All contracts are being reviewed and evaluated as the state moves into stabilization and normal procurement practices.

The urgent phase required urgent action. The need to ramp-up quickly to get ahead of the spread of the virus was key as the state was losing nearly \$25 million to \$35 million a day in GDP (gross domestic product) and nearly 3,000 jobs a day between March 15 and May 2.

Not all contracts issued during the urgent phase were established under emergency procurement rules. For example, two vendors already had statewide cooperative contracts in

place with the State of Utah and a third vendor was acquired under standard procurement rules for contracting with a governmental entity. Due to the state of emergency, many of the contracts were issued for short periods of time to fill an immediate need. These contracts will be re-evaluated on a monthly basis to determine if the contract should be extended.

With Utah’s move to the stabilization phase, procurements are now being made following traditional procurement practices while still allowing for the flexibility to consider an emergency procurement, to include sign-off from incident command, if a new emergency were to arise.

APPENDIX E

Process Measures

Utah must operate and maintain a strong and responsive testing and contact tracing system in order to protect public health as the state becomes more economically engaged. Because the incidents of positive coronavirus cases will continue as we transition through the color-coded health guidance system, testing and contact tracing must be viewed as the critical effort to stop the spread of COVID-19 hot spots.

Speed is an essential factor for determining the effectiveness of Utah’s testing and contact tracing effort. The longer it takes to test an individual with symptoms, process the lab results, investigate the case and notify the people they have had close contact with, the greater opportunity the virus has to spread. Conversely, the faster the process works, the less opportunity the virus has to spread.

In addition to measures that help direct decisions for determining how quickly to transition from one color-coded health guidance to another, process measures provide critical information for understanding the effectiveness of the testing and contact tracing effort. Process measures provide the key metrics for answering the basic question about how well the process is working and signals the need for a change in direction if needed.

A key process measure is cycle time, or the time it takes to complete one step or component of the overall system.

Cycle Time Measures

Measure Name	Target
Time to Process a Test	1.5 days
Time to Interview a Positive Case	1 day
Time to Notify a Contact	1 day

Time to Process a Test

The faster a positive individual is notified, the faster the person can self-isolate and reduce the chance of transmitting the virus to others. The target timeframe to determine the results of a test (from sample collection to lab results) is 1.5 days.

Time to Interview a Positive Case

Investigators interview a positive case to identify others they have been in close contact with and who may have been infected. Again, speed is important. The target timeframe to interview a positive case is one day (from the time the lab results are reported).

Time to Notify a Contact

Quickly notifying individuals who have been in close contact with a positive case allows them to take appropriate precautionary measures and to be tested if needed. The target timeframe to notify contacts is one day (from the time of the interview with the positive case).

These are just a few examples of important process measures that Utah is monitoring on a daily basis. Measures that reflect the speed of the overall contact and tracing effort are critical because they show the capability to quickly contain the spread of the virus when a positive case is identified. All measures can be viewed at the state level, or local health department level, so results can be monitored on both a global and individual level.

UDOH Asymptomatic Testing Plan

Utah's success to date and strategy hinges on the State's ability to both diagnose the individual and diagnose our communities. The former allows the state to contain the virus through quickly identifying people who are positive and helping them to isolate before they can spread it to others. The latter helps decision makers better understand the virus's prevalence and distribution across the State and across different populations.

Experts now understand that people who are asymptomatic can both carry the virus and spread it to others. Utah understood this reality early on and began ramping up testing capacity to identify as many positives as possible.

During the beginnings of the urgent phase, emphasis was placed on testing symptomatic individuals. For example, during the month of March, just over 20,000 tests were performed and focused on people who exhibited obvious symptoms. Because the State and key health care providers increased testing capacity during the urgent phase, enough testing is available to strategically test symptomatic individuals and prioritized asymptomatic individuals. During the month of April, nearly 100,000 tests were completed.

The goal of expanding diagnostic COVID-19 testing to asymptomatic individuals is to proactively protect vulnerable populations, actively identify cases who might not have otherwise sought testing, and contribute to employers' efforts to create a safe work environment. The following is a rank-ordered list of the state's priorities for asymptomatic testing. Thousands of tests are needed each day to cover the needs.

1. Protect Vulnerable Populations Testing is focused on long term care facilities, homeless resource centers, correction facilities, and other high-risk settings and high-risk individuals
2. Helping hospitals get back to work while keeping healthcare workers safe by testing individuals prior to surgery and testing healthcare workers after high risk encounters
3. Slow the spread with proactive contact tracing. Public health contract tracing staff are expanding who they reach out to and to whom they recommend testing
4. Understand the true spread of the disease through randomized testing. To date, the total number of individuals infected with COVID-19 have been estimated using limited data. Through large-scale randomized testing, estimates can more accurately represent the entire Utah population. With so much on the line, it is imperative that decision makers understand the prevalence and distribution of the virus. The University of Utah, in consultation with GOMB and UDOH, is conducting randomized community testing. Participants are tested for the presence of both the virus and antibodies. Phase 1 of the study randomizes testing primarily on geography. Phase 2 will target specific groups.
5. Support critical infrastructure. As part of a larger effort to ensure these industries can operate safely, the State will partner with the industries such as the following to ensure they have access to timely testing.
 - a. energy producers/deliverers (gas and electric) including power plants and coal mines
 - b. petroleum
 - c. meat production plants
 - d. food production plants (assembly line workers),
 - e. telecom
 - f. freight and logistics, and
 - g. public safety
6. Help businesses reopen safely. As businesses reopen, they need to do so in a safe way that includes screening, social distancing, increased hygiene, and supportive policies that may include health insurance, leave, etc. As part of this effort, some employers want to make testing available to their employees. The State, along with its testing partners, are working together in an effort to make this possible.

GLOSSARY OF TERMS

Community spread/ transmission: Community spread means people have been infected with a disease in an area, including some who are not sure how or where they became infected.

Comorbidity: The simultaneous presence of two chronic diseases or conditions in a patient.

Contact Tracing: Identifying and following up with individuals who may have come into contact with a person infected with covid-19.

Coronavirus: Coronaviruses are a group of viruses that are fairly common both in people and animals. Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes coronavirus disease 2019 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

COVID-19: The disease caused by the novel coronavirus SARS-CoV-2.

Droplet transmission/spread: Transmission or spread of an infectious disease through an infected person's cough or sneeze. It is usually spread between people who are in close contact with one another (within about 6 feet).

Epidemic: A disease can be declared an epidemic when it spreads over a wide area and many individuals are taken ill at the same time.

Pandemic: A pandemic is a type of epidemic with greater range and coverage than an epidemic, or an outbreak of a disease that occurs over a wide geographic area and affects an extremely high percentage of the population.

Flattening the curve: Slowing the spread of disease so that fewer people need to seek treatment at any given time. The curve represents the number of cases over time, and a slower infection rate means a less stressed healthcare system, fewer hospital visits on any given day and fewer sick people being turned away.

Flattening the dip: Reducing the economic impacts associated with the necessary public health response to flatten the curve.

High-risk: People or groups of people may be considered at high risk for getting an infection or disease and becoming seriously ill based on several factors, including their health status (i.e., heart, lung or kidney disease, diabetes, weakened immune system, pregnancy, obesity), age, and living environment (long-term care facility).

Isolation: Separating and restricting the movement of sick people who have an infectious disease from those who are healthy. Isolation restricts the movement of sick people to help reduce the spread of disease. This may occur at home or in healthcare facilities.

Quarantine: Separating and restricting the movement of well people who may have been exposed to an infectious disease to see if they become sick. These people may have been exposed to a disease and do not know it, or they may have the disease but do not show symptoms. This also helps reduce the spread of disease.

Mass gathering: Events attended by a number of people large enough to strain the response resources of the community or area where it is being held. These events usually do not allow for individuals participating in the events to keep a distance of at least six feet from one another.

Personal Protective Equipment: Equipment worn to minimize exposure to hazards that cause injuries and illnesses. With respect to Covid-19, for non-healthcare workers this may include a mask or face covering, glasses, and disposable gloves.

Serology Testing: Serology testing may be used to detect antibodies against SARS-COV-2 in the blood to provide evidence that an individual has been exposed to the virus. While experts are still learning much about this "novel" coronavirus, there is early hope that exposure to the virus and antibodies in the blood stream may lead to an immune response against the virus.

Shutdown order: A requirement from a government agency to close a business. The State of Utah has not issued a shutdown order.

Social distancing: Measures taken to reduce person-to-person contact in a given community, with a goal to stop or slow down the spread of an infectious disease. Measures include working from home, keeping a distance of six feet between individuals, closing offices and schools, canceling events, using telemedicine, and limiting mass gatherings.

State of emergency: A declaration by a local, state or federal government that allows for that government to take steps to respond to an emergency by using special powers to divert funding from one area to another and to get funding from the federal government. Utah proactively declared a state of emergency on March 6, 2020.

Stay Safe, Stay Home: An order or directive issued by a state or municipality directing its residents and businesses to engage only in essential travel or business. The State of Utah issued a "Stay Safe, Stay Home" directive on March 26, 2020, which will run through May 1, 2020. Various local municipalities have issued Stay Safe, Stay Home orders.

Transmission rate: The rate of how quickly a disease spreads. This is determined by how many people each individual with the virus is likely to infect and the time between one person developing the symptoms of a condition and a second person becoming infected and developing symptoms.

UTAH ECONOMIC RESPONSE TASK FORCE

Governor Gary Herbert, State of Utah
Lt. Governor Spencer Cox, State of Utah
Stuart Adams, President of Utah State Senate
Brad Wilson, Speaker of the House
Derek Miller, Salt Lake Chamber, Economic Task Force Chair
Scott Anderson, Zions Bank
Allyson Bell, Senator Lee's Office and federal delegation liaison
Lori Belnap Pehrson, Northrop Grumman Corporation
Silvia Castro, Suazo Business Center
Carine Clark, Silicon Slopes
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Ben Kolendar, Salt Lake City
Sarah Lehman, Utah Stem Action Center
Jill Remington Love, Utah Department of Heritage & Arts
Darin Mellott, CBRE
Scott Peterson, Utah Funds of Funds
Jon Pierpont, Department of Workforce Services
Steve Starks, Larry H. Miller Group of Companies
Steve Styler, Rural Partnership Board
Cydni Tetro, Forge DX and Women's Tech Council
Vicki Varela, Utah Office of Tourism
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UTAH INDUSTRY RESOURCE COMMITTEE

Association of General Contractors
Associations Solutions
AT&T
Ballard Spahr, LLP
BioUtah
Century Link
Clegg Automotive group
Comcast
Building Owners and Managers Association
Dental Tech Companies
Department of Workforce Services
Essential Oils Industry
Fidelity Investments
Fintech Utah
Funeral Directors Association
Holland and Hart
Impact Utah
Institute of Real Estate Management
Intermountain Healthcare
LHM Group of Companies
Merit Medical
Mountain West Brands
National Federation of Independent Businesses
New Car Dealers of Utah
Outdoor Recreation
Parson Behle & Latimer

Petzl North America
Price Realty Group
Real Estate Management Industry
Regence
RioTinto
Rocky Mountain Power
RV Dealers of Utah
Salt Lake Chamber
Salt Lake County Area Restaurant Association
Savage Industries
Scrap Metal Association
Ski Utah
The American Council of Engineering Companies of Utah
TravelPass Group
UCAIR
Union Pacific Railroad
University of Utah Health
Used Car Dealers of Utah
Utah Advance Materials and Manufacturing Initiative
Utah AFLCIO
Utah Apartment Association
Utah Arts
Utah Asphalt Pavement Association
Utah Association of Certified Public Accountants
Utah Association of Counties

Utah Association of Health Underwriters (UAHU)
Utah Bankers Association
Utah Beauty Schools Owners Association
Utah Beer Wholesalers
Utah Beverage Association
Utah Cable and Telephone Association
Utah Credit Unions
Utah Cultural Alliance
Utah Dental Association
Utah Event Industry
Utah Farm Bureau
Utah Food Industry Association
Utah Food/Retail Association
Utah Gas Station and Convenience Store Retailers (UMPRA)
Utah Home Builders Association
Utah Independent Agents
Utah Independent Agents
Utah League of Cities and Towns
Utah Manufacturers Association
Utah Manufacturing Extension Partnership
Utah Medical Association
Utah Medical Equipment Dealers
Utah Mining Association
Utah Nonprofits Association
Utah Outdoor Association

Utah Petroleum Association
Utah Pharmacy Association
Utah Podiatric medical Association
Utah Realtors Association
Utah Restaurant Association
Utah Retail Merchants Association
Utah Rural Electric Cooperatives
Utah State Bar
Utah State University, Utah Manufacturing Extension Service
Utah Taxpayers Association
Utah Tourism Association
Utah Trucking Association
Utah's Gas Station and Convenience Store Retailers (UPMRA)
Visit Salt Lake
WCF Insurance
Women's Tech Council
World Trade Center Utah