

**Connecticut Superior Court
Judicial District of Waterbury**

**Connecticut Criminal Defense Lawyers
Association,
Willie Breyette,
Daniel Rodriguez,
Anthony Johnson,
Marvin Jones,
Kerri Dirgo, and
Joshua Wilcox,**
Plaintiffs

No. UWY-CV20-6054309-S

April 7, 2020

v.

Ned Lamont and Rollin Cook,
Defendants.

Amended Complaint¹

The Coronavirus pandemic poses an imminent and grave threat to the thousands of men and women confined in Connecticut’s unified prison system, as well as their employees and surrounding communities. In this action, Plaintiffs—sentenced and unsentenced people, and an organization of criminal defense lawyers—seek intervention from the Court to force the governor and correction commissioner to discharge their statutory and constitutional duties to care for the health of people in their custody. For weeks, Defendants have known about the looming threat to incarcerated people. While Governor Lamont and Commissioner Cook have made attempts to mitigate the dangers posed by the virus, conditions of confinement in prisons prevent them from ensuring the safety and livelihood of thousands of those in their care. As public health experts indicate, the only feasible way to mitigate the disease within prison and jails is to take

¹ For the Court’s reference, a redlined version of this amended complaint against the original complaint is attached as Exhibit 26.

swift action—*before* the disease hits—to significantly decrease the population in custody so that social distancing may be practiced and at-risk groups are out of harm’s way.

We are now watching public health experts’ warnings play out in real-time. DOC announced that the **first** person in state custody had tested positive on March 30, 2020. As of April 2, when the complaint in this action was filed, **16** DOC staff members and **8** incarcerated people had tested positive for COVID-19. By April 6, both those numbers have more than doubled, to **32** DOC staff members and **21** incarcerated people. By April 7, these numbers had grown exponentially: **41** DOC staff members and **44** incarcerated people have tested positive, with **53** prisoner test results still pending.²

The steps taken by Defendants are insufficient in light of the grave risks presented by the present crisis, necessitating court intervention through the issuance of mandamus.

Parties

1. Plaintiff Connecticut Criminal Defense Lawyers Association (CCDLA) is a non-profit Connecticut organization comprising lawyers who represent people accused of crimes in the state.
2. CCDLA has approximately 300 members statewide.
3. Its members represent clients held in each of the facilities controlled by the Connecticut Department of Correction (DOC).

² See Connecticut Dep’t of Correction, *Covid-19 Tracker*, <https://portal.ct.gov/DOC/Common-Elements/Common-Elements/Health-Information-and-Advisories> (last visited Apr. 7, 2020).

4. CCDLA engages in education and advocacy for the fair treatment of those accused of crimes, and for positive changes in Connecticut's criminal and motor vehicle code. CCDLA also serves as an amicus curiae to Connecticut's appellate courts.
5. Plaintiff Willie Breyette is a person incarcerated at MacDougall-Walker Correctional Institution in Suffield. Mr. Breyette has Hashimoto's disease, an autoimmune condition in which a person's immune system attacks their thyroid gland. Mr. Breyette also has asthma.
6. Plaintiff Daniel Rodriguez is a person incarcerated at Osborn Correctional Institution in Somers. Mr. Rodriguez is eligible for halfway house placement in May, but has been told by DOC that no one will be released to a halfway house during the COVID-19 pandemic.
7. Plaintiff Anthony Johnson is a person incarcerated at Willard-Cybulski Correctional Institution in Enfield. Mr. Johnson is sixty-one years old.
8. Plaintiff Marvin Jones is a person being held at the New Haven Correctional Center because he cannot afford his \$5,000 bond. On account of a past injury, he has only one lung.
9. Plaintiff Kerri Dirgo is a person being held at the York Correctional Institution in Niantic because she cannot afford her \$22,000 bond. She has multiple sclerosis and takes immunosuppressive medication known to increase risk of viral infection.
10. Plaintiff Joshua Wilcox is a person incarcerated at Cheshire Correctional Institution. His maximum release date is less than eight weeks away, on May 27, 2020—meaning, he must be released from state custody by then.
11. Defendant Ned Lamont is the governor of Connecticut.

12. Defendant Rollin Cook is the commissioner of the Connecticut Department of Correction.

The Viral Pandemic, and the Governor's Emergency Declaration

13. Beginning in December 2019, cases of viral pneumonia caused by a novel pathogen occurred in China; the World Health Organization shortly thereafter named the virus COVID-19.
14. The pathogen “is both highly contagious and deadly,” spreading from person to person through “respiratory droplets, close personal contact, and from contact with contaminated surfaces and objects.” Affidavit of Dr. Jonathan Giftos (attached as Exhibit 19) ¶ 5.
15. There is no vaccine or cure for the virus; the focus on combatting it “is on preventing [its] spread.” *Id.* ¶ 6.
16. Although the virus is highly dangerous to all humans, the United States Centers for Disease Control and Prevention (CDC) has identified particular danger for “adults over 60 years old and people with chronic medical conditions,” which include “lung disease, cancer, heart failure, cerebrovascular disease, renal disease, liver disease, diabetes, immunocompromising conditions, and pregnancy.” *Id.* ¶ 7.
17. By early March 2020, the virus had spread to the New York City metro area, and Connecticut recorded its first diagnosed case.

18. On March 10, defendant Gov. Lamont declared a dual emergency of public health and civil preparedness until September 2020 on account of the virus.³
19. Since then, Governor Lamont has issued 23 Executive Orders intended to protect public health during the growing pandemic.

The Governor's Efforts to Dampen the Spread of the Virus

20. Governor Lamont's Executive Orders have found that COVID-19 "spreads easily from person to person and may result in serious illness or death," and that the "risk of severe illness and death . . . appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions." Gov. Lamont Exec. Order No. 7 at 1 (Mar. 12, 2020) (Exhibit 1).
21. The Executive Orders have also found that there is a dire need for people to keep a six-foot distance from others in order to staunch the airborne transmission of the disease. Most recently, the defendant forbade "social and recreational gatherings of . . . six (6) or more people." Lamont Exec. Order 7N at 4 (Mar. 28, 2020) (Exhibit 15).
22. The defendant has repeatedly highlighted the particular threat COVID-19 poses to institutional and congregant housing. His first order found that "there is an increased risk of rapid spread of COVID-19 among persons who are living in congregate settings, such as long-term care facilities." Lamont Exec. Order No. 7 at 1.

³ Gov. Lamont, Letter to the Secretary of the State (Mar. 10, 2020), *available at* <https://tinyurl.com/wptdlw6>.

23. He later reiterated his findings of the risk posed by congregate settings, adding that such settings include “inpatient or outpatient hospitals, clinics or other facilities for the diagnosis, observation or treatment of persons with psychiatric and intellectual disabilities.” Lamont Exec. Order No. 7C at 2 (Mar. 15, 2020) (Exhibit 4).
24. On March 28, the defendant again acknowledged public health guidance to reduce human density in closed spaces, recognizing that the “Centers for Disease Control has recommended that states, especially those with higher rates of growth in the number of infected people, take measures to reduce density within homeless shelters and other congregant housing situations.” Lamont Exec. Order No. 7P at 2 (Mar. 28, 2020) (Exhibit 17).
25. Governor Lamont has also spoken to the press about the dangers of close quarter living arrangements, in one instance referring to nursing homes as a “petri dish” for the spread of COVID-19.⁴
26. As a result of these conclusions, Governor Lamont has restricted entry into nursing homes and similar facilities; modified in-person open meetings requirements; closed public schools; prohibited bars and restaurants from serving sit-in customers and closed gyms, fitness centers, and movie theaters; closed malls; postponed the presidential primary; and limited the workplace operations of non-essential businesses and non-profits.
27. Governor Lamont has implemented similar measures targeted specifically at courts, including suspending certain court operations and authorizing remote

⁴ Patrick Skahill, *Connecticut Tracks COVID-19 Cases But Doesn't Keep Nursing Home Tally*, WNPR, Mar. 27, 2020, <https://www.wnpr.org/post/connecticut-tracks-covid-19-cases-doesnt-keep-nursing-home-tally>.

notarization. *See* Lamont Exec. Order No. 7G at 3-4 (Mar. 19, 2020), (Exhibit 8); Lamont Exec. Order No. 7Q at 2-3 (Mar. 30, 2020) (Exhibit 18).

The People in the Defendants' Custody

28. Although Governor Lamont has shown great concern for the general public and businesses of the state, the interventions he and Commissioner Cook have issued do not adequately protect the people in their custody: those sentenced to incarceration, and those being detained before trial or sentencing.
29. As of April 7, there were 3,173 unsentenced people and 8,489 sentenced people in Connecticut's unified prison system.
30. Those figures have not materially changed since the outbreak of the COVID-19 virus in Connecticut. On January 1, 2020, for example, there were 3,393 people detained prior to trial and 8,891 people serving sentences of incarceration in Connecticut's prison system.
31. The threat to the health and lives of Connecticut's incarcerated population falls disproportionately on Black and Latinx prisoners.
32. As of March 1, 2020, Black people comprised 5,349 of the 12,411 people in Connecticut's prisons, or 43.1% of the state's prison population.
33. The 2010 decennial census identified Black people as comprising 11% of Connecticut's population.
34. As of March 1, 2020, Latinx people comprised 3,307 of the 12,411 people in Connecticut's prisons, or 26.7% of the state's prison population.
35. The 2010 decennial census identified Latinx people as comprising 16.5% of Connecticut's population.

36. Many people in the defendants' custody are needlessly facing danger as the pandemic arrives in Connecticut prisons.
37. Approximately 200 people—like Mr. Jones—are being held on a bail of \$50,000 or less, that is, they are in a highly dangerous congregate living situation for lack of the \$5,000 or smaller ten percent cash bond.
38. Approximately 822 of the roughly 12,000 people in Connecticut prisons are within 90 days of their sentence end, by which time the pandemic is likely to be still raging. 1,416 are within six months of end of sentence.
39. 1,607 are incarcerated for technical violations of parole or probation.
40. Approximately 5,364 are parole-eligible, yet remain within the walls of Connecticut prisons as the pandemic bears down on them.
41. In addition, Connecticut's prison population is aging. 596 of the people in the state custody are age 60 or older like Mr. Johnson, a factor that the CDC has identified as a risk for severe complications from a COVID-19 infection. Affidavit of Brie M. Williams, M.D. (Exhibit 25) ¶ 7. These individuals pose the least risk to the public, yet are most at risk of serious illness or death. At the same time, the high risk presented to older people by COVID-19 is "of particular concern for inmate populations, since prisoners' physiological age *averages 10 to 15 years older* than their chronological age." *Id.* (emphasis in original). More than 2,000 people in state custody are age 50 or older.
42. Many prisoners have compromised immune systems or, like Mr. Breyette, have autoimmune disorders also identified by CDC as heightening the risk of a serious illness or death from COVID-19.

Routine Prison Conditions Lend Themselves to Rapid Spread of the Virus

43. In Connecticut prisons, as elsewhere, people are held in a congregate living situation at least as dense as is found in nursing homes and hospitals.
44. Similar communal living arrangements exist for halfway houses, whose residents remain in the custody of the DOC.
45. Some prisons have dormitory-style housing, like Willard-Cybulski, where Mr. Johnson is held. His dormitory has 100 men in it, and, in Mr. Johnson's words, "once the virus comes in, it's going to spread like wildfire." Eight prisoners at Willard-Cybulski have already tested positive for COVID-19.
46. In most other prisons, incarcerated people are held two to a cell in close quarters.⁵
47. In Connecticut prisons as elsewhere, detainees and prisoners do not have the ability to maintain personal hygiene to the same standards as free people do, because people in prison must in many cases live in a cell containing a toilet, are not allowed hand sanitizer, have limited access to cleaning supplies—even when provided, they are often diluted—and soap, and have no control over disinfecting common areas or commonly touched surfaces.
48. Connecticut prisoners, like their counterparts nationwide, are given almost all of their medical treatment in the same facility in which they are housed, rather than in a dedicated medical facility such as a clinic or hospital.
49. As a result, "correctional settings increase the risk" of contracting the virus, because in prison, "there are high numbers of people with chronic, often

⁵ See *Second Connecticut Prison Inmate Tests Positive for the COVID-19 Virus*, NBC Conn., Mar. 31, 2020, <https://www.nbcconnecticut.com/news/coronavirus/second-connecticut-prison-inmate-tests-positive-for-the-covid-19-virus/2247971/> (reporting that the second person to test positive at Corrigan-Radgowski "was in a two-person cell").

untreated, illnesses housed in a setting with minimal levels of sanitation, limited access to personal hygiene, limited access to medical care, and no possibility of staying at a distance from others,” Giftos Aff. ¶ 8, such that “there are more people susceptible to getting infected congregated together in a context in which fighting the spread of an infection *is nearly impossible*.” *Id.* ¶ 9 (emphasis added).

50. In addition: “Prisons and jails are not actually isolated from our communities: hundreds of thousands of correctional officers and correctional healthcare workers enter these facilities every day, returning to their families and to our communities at the end of their shifts, bringing back and forth to their families and neighbors and to incarcerated patients any exposures they have had during the day.” Williams Aff. ¶4.
51. COVID-19 public health experts have sounded the alarm that prisons are extremely high-risk settings for the spread of COVID-19 since the pandemic’s arrival in the United States. A recent letter from Connecticut doctors experienced in correctional health to Governor Lamont, for example, relayed “grave concern that, absent immediate action, COVID-19 will overrun Connecticut’s jails and prisons” and that “Connecticut has days, not weeks, to chart a different future.” Letter from Dr. Emily Wang et al. to Governor Lamont (attached as Exhibit 20). Infectious disease doctors who work in correctional health similarly warn that a virus like COVID-19 “create[s] a perfect storm for correctional settings” because of ease of transmission, lack of prevention opportunities, concentration of people with chronic health issues, and the fact that “despite being physically secure, jails

and prison are not isolated from the community.” Affidavit of Dr. Josiah Rich (Exhibit 24) ¶¶ 6, 8–12.⁶

52. These warnings have proven tragically accurate. On March 22, **one** staff member at Chicago’s Cook County Jail tested positive, followed by **two** COVID-19 diagnoses in those incarcerated there; a week later, **12** staff members and **101** incarcerated people had tested positive for the virus.⁷ As of April 5, those numbers stood at **70** staffers and **221** incarcerated people.⁸
53. In just two weeks, the New York City jail Rikers Island went from **one** confirmed case of COVID-19 to **231** cases.⁹ The most recent figures show **273** confirmed cases among detainees, **321** among corrections officers, and **53** among jail health

⁶ See also Dr. Lipi Roy, *Infections And Incarceration: Why Jails And Prisons Need To Prepare For COVID-19 Now*, Forbes, Mar. 11, 2020, <https://www.forbes.com/sites/lipiroy/2020/03/11/infections-and-incarceration-why-jails-and-prisons-need-to-prepare-for-covid-19-stat>; Brie Williams et al., *Correctional Facilities in the Shadow of COVID-19: Unique Challenges and Proposed Solutions*, Health Affairs, Mar. 26, 2020, <https://www.healthaffairs.org/doi/10.1377/hblog20200324.784502/full/> (cataloguing the significant differences between combatting the virus inside of prison versus outside of it); Timothy Williams, Benjamin Weiser, and William K. Rashbaum, ‘Jails Are Petri Dishes’: Inmates Freed as the Virus Spreads Behind Bars, N.Y. Times, Mar. 30, 2020, <https://www.nytimes.com/2020/03/30/us/coronavirus-prisons-jails.html> (reporting that, after the New York City corrections department’s physician warned the mayor that “a storm is coming,” the city “released at least 650 people”).

⁷ Compare Andy Grimm, *Two Cook County Jail Detainees Test Positive for Coronavirus*, Chicago Sun-Times, Mar. 23, 2020, <https://chicago.suntimes.com/2020/3/23/21191438/two-cook-county-jail-detainees-test-positive-covid-19-coronavirus> with Sam Kelly, *101 inmates at Cook County Jail Confirmed Positive for COVID-19*, Chicago Sun-Times, Mar. 30, 2020, <https://chicago.suntimes.com/coronavirus/2020/3/29/21199171/cook-county-jail-coronavirus-positive-101-cases-covid-19>.

⁸ Tyler Kendall, *“We’re at war with no weapons”: Coronavirus cases surge inside Chicago’s Cook County Jail*, <https://www.cbsnews.com/news/chicago-cook-county-jail-coronavirus-life-inside-covid-19-cases>, Apr. X 2020.

⁹ Compare Chelsia Rose Marcus, *Rikers Island Inmate Has Contracted Coronavirus: Officials*, N.Y. Daily News, Mar. 18, 2020, <https://www.nydailynews.com/coronavirus/ny-coronavirus-rikers-island-inmate-tests-positive-20200318-gf3r7q4cefaxzmqmrmuevzz3y-story.html> with The Legal Aid Society, *Covid-19 Tracking in NYC Jails*, Apr. 2, 2020, <https://www.legalaidnyc.org/covid-19-infection-tracking-in-nyc-jails>.

workers.¹⁰ The first New York City detainee to die from COVID-19 infection died Sunday; he was awaiting hearing on a technical parole violation.¹¹

54. As of March 29, 2020, Rikers Island had a COVID-19 infection rate surpassing every country in the world.
55. Here in Connecticut, DOC announced that the **first** person in state custody had tested positive on March 30, 2020. As of April 2, right before the complaint in this action was filed, **16** DOC staff members and **eight** incarcerated people had tested positive for COVID-19. By April 6, both those numbers have more than doubled: **32** DOC staff members and **21** incarcerated people have tested positive.¹² By April 7, these numbers had grown exponentially: **41** DOC staff members and **44** incarcerated people have tested positive, with **53** prisoner test results still pending.¹³
56. The trajectory of other correctional systems makes clear that Connecticut has limited time to act to prevent the virus from sickening exponential numbers of both incarcerated people and staff, and contributing to the statewide overload on hospital beds. See Rich Aff. ¶ 16 (“The abrupt onset of severe Covid-10 symptoms among incarcerated individuals will require mass transfers to local hospitals for medical and ventilator care,” and “[e]ach severely ill patient who occupies an ICU bed may mean others may die for inability to obtain care”); Giftos Aff. ¶ 15

¹⁰ Reuven Blau and Rosa Goldensohn, *First Rikers Virus-Positive Fatality Was Jailed on a Technicality*, The City, Apr. 6, 2020, <https://thecity.nyc/2020/04/first-rikers-covid-death-was-jailed-on-technicality.html>.

¹¹ *Id.*

¹² See Connecticut Dep’t of Correction, *Covid-19 Tracker*, <https://portal.ct.gov/DOC/Common-Elements/Common-Elements/Health-Information-and-Advisories> (last visited Apr. 6, 2020).

¹³ See Connecticut Dep’t of Correction, *Covid-19 Tracker*, <https://portal.ct.gov/DOC/Common-Elements/Common-Elements/Health-Information-and-Advisories> (last visited Apr. 7, 2020).

(“Specifically, a surge in COVID-19 infections in a correctional setting could mean that ICU beds in the community hospital would no longer be available to everyone who needed them.”). “For this reason, correctional health is public health.” Williams App. ¶ 17 (explaining that “The Entire Community is at Risk if Prison Populations Are Not Reduced”).

57. Other states have concluded that the only effective way to avoid a widespread outbreak in correctional settings and their communities is to take swift, comprehensive, and wide-scale action to significantly reduce the number of people in them. See Updated Appendix, Court Actions to Reduce Incarceration in Light of COVID-19 (Exhibit 22) (listing representative actions by state courts, as well as actions by federal courts in both the criminal and immigration detention contexts); Second Appendix, Gubernatorial and State Agency Actions to Reduce Incarceration in Light of COVID-19 (Exhibit 23) (listing representative actions by state government, departments of correction, and boards of parole). These include New Jersey, which created an immediate presumption of release for every person serving a county jail sentence¹⁴; Maine, which canceled warrants across the board for “failure to appear and pay other fees”¹⁵; and Kentucky, whose governor just announced plans to commute the sentences of nearly 1,000 state prisoners, including those more susceptible to COVID-19 and those within six

¹⁴ These include, e.g., Consent Order, *In re Request to Commute of Suspend County Jail Sentences*, No. 084230, slip op. at 2 (N.J. Mar. 22, 2020) (“[A]ny inmate currently serving a county jail sentence (1) as a condition of probation, or (2) as a result of a municipal court conviction, shall be ordered released.”), available at https://www.aclu-nj.org/files/5415/8496/4744/2020.03.22_-_Consent_Order_Filed_Stamped_Copy-1.pdf.

¹⁵ Emergency Order, slip op. at 1 (Me. Dist. and Super. Cts. Mar. 17, 2020) (joint order of trial courts immediately canceling “any outstanding warrants for unpaid fines, unpaid restitution, unpaid court-appointed counsel fees, failure to appear for unpaid fine hearings, and any other failure to appear and pay other fees”), available at <https://www.courts.maine.gov/covid19/emergency-order-vacating-warrants-fines-fees.pdf>.

months of end of sentence, within a matter of days.¹⁶ Here in Connecticut, at FCI Danbury—the federal prison located in the state— four prisoners tested positive for COVID-19 one week ago.¹⁷ As of today, 28 prisoners and 12 staff have tested positive. Against this background, on April 3, Attorney General William Barr both ordered the Board of Prisons to conduct a systematic review and immediately identify every person at FCI Danbury with COVID-19 risk factors, as well as substantially broadened the use of home confinement to encourage release.

The Defendants' Prison Medical Staff Will be Quickly Overwhelmed

58. Even prior to the COVID-19 outbreak, Connecticut has long struggled to provide sufficient medical services to the people it holds prisoner. Defendants' medical staff in prisons is now nearly certain to be overrun when the virus begins spreading inside the walls.
59. In July 2019, the Connecticut Mirror reported that DOC had 309 nurses on staff to serve 13,320 prisoners, or one nurse for every 43 prisoners. For medical providers, including doctors and physician assistants, the DOC employs only one for every 579 prisoners.¹⁸
60. Little has changed since that report. In early 2020, Cheshire Correctional Institution and Corrigan-Radgowski Correctional Center reported employing

¹⁶ Brian Panalp, *Nearly 1,000 Kentucky prison sentences to be commuted, Beshear says*, Fox61 News, Apr. 2, 2020, <https://www.fox19.com/2020/04/02/watch-live-gov-beshear-provides-update-covid-kentucky/>.

¹⁷ Kaitlyn Krasselt, *Coronavirus Outbreak Hits Danbury Federal Prison with 9 Cases*, Apr. 1, 2020, <https://www.ctpost.com/news/coronavirus/article/Coronavirus-outbreak-hits-Danbury-federal-prison-15172855.php>.

¹⁸ Jenna Carlesso and Kelan Lyons, *One Year after DOC Took Over Inmate Healthcare, Troubles Persist*, Conn. Mirror, July 2, 2019, <https://ctmirror.org/2019/07/02/one-year-after-doc-took-over-inmate-health-care-troubles-persist>.

twenty-nine and twenty-seven nurses, respectively, or thirty-nine prisoners per nurse at Cheshire and forty at Corrigan-Radgowski.

61. Accessing medical doctors at those prisons is difficult: at Cheshire, one psychiatrist and one principal physician are the only doctors serving a population of 1,131. Corrigan-Radgowski, with a population of 1,083, does not employ a single physician beyond a staff psychiatrist.
62. The woeful medical provisions at Cheshire and Corrigan-Radgowski are not unique to those prisons.
63. In February of this year, Commissioner Rollin Cook told members of the Black and Puerto Rican Legislative Caucus that there were 139 healthcare positions vacant out of 843 budgeted.¹⁹
64. This month, a DOC spokesperson suggested that facilities can manage shortages by scheduling medical employees for twelve hours at a time in an emergency.²⁰
65. However, the Connecticut Mirror reported that healthcare staff were already logging what would appear to be the maximum possible overtime *before* the pandemic, sometimes staying on shift for sixteen to twenty-four hours a day. Carlesso and Lyons, *supra* ¶ 54.
66. And, as of a month ago, head nurses, nurses, and licensed nurse practitioners were among the twenty top wage earners in the DOC based on their overtime pay; at least three nursing staff were making twice their annual pay in overtime. Backus, *supra* ¶ 58.

¹⁹ Lisa Backus, *Staffing Shortage Creates 'Dangerous' Situation in CT Prisons*, Conn. Post, Feb. 3, 2020, <https://www.ctpost.com/local/article/Staffing-shortage-creates-dangerous-15027264.php>.

²⁰ Kelan Lyons, *Elderly Prisoners in Connecticut Vulnerable to Potential Coronavirus Outbreak*, Hartford Courant, Mar. 11, 2020, <https://www.courant.com/coronavirus/hc-pol-coronavirus-connecticut-prisons-20200311-ote3jd6orje77ipl44qgi3bb6i-story.html>.

67. That the DOC is over 100 staff short to provide for ordinary healthcare needs at its facilities is alarming, because retirees and medical students are already being called to aid overwhelmed medical staff in regions where COVID-19 is rampant.²¹
68. DOC medical staff have sounded the alarm about possible systemic failure. Dr. Gerald Valletta, the primary physician at Garner and Manson Youth Institution in Cheshire, told the Courant that “[t]he more people get sick and call out, the more burdened staff will be. We were already facing a huge shortage.”²²
69. Debra Cruz, head nurse at Cheshire, expressed similar concerns, suggesting that even mandating 16-hour shifts, as permitted in the workers’ contract, would not guarantee adequate healthcare. “We’re all just holding our breaths and hoping this passes us by,” the Hartford Courant quotes Cruz as saying on March 11.
- Lyons, *supra* ¶ 59.

Despite Their Efforts to Mitigate the Pandemic’s Impact, Defendants Have Not Demonstrated Ability to Prevent and Treat the Virus in Prisons

70. The risk to incarcerated people is heightened by DOC’s inadequate response to COVID-19 and its facilities’ lack of capacity to safely house people at current densities.

²¹ Selena Simmons Duffin, *States Get Creative to Find and Deploy More Workers in COVID-19 Fight*, NPR, Mar. 25, 2020, <https://www.npr.org/sections/health-shots/2020/03/25/820706226/states-get-creative-to-find-and-deploy-more-health-workers-in-covid-19-fight>.

²² Eliza Fawcett, *With COVID-19 Threat Looming, State Prisons and Jails are on Edge*, Hartford Courant, Mar, 28, 2020, <https://www.courant.com/coronavirus/hc-news-coronavirus-connecticut-prisons-20200328-pvg57sfcafh5zck4wftabooxre-story.html>.

71. Initially, DOC's only plan to address COVID-19 was a repurposed 2007 policy for flu outbreaks²³, despite the fact that COVID-19 is understood to be transmitted more easily and in different ways than flu.²⁴
72. On March 11, spokesperson Karen Martucci doubled down on the outdated plan in a press interview. "This isn't new for us. We quarantine for the flu every year," she said. "We didn't have to create a pandemic plan. This was already created." Lyons, *supra* ¶ 59.
73. Though the 2007 plan has now been replaced online with one specific to the current pandemic, the DOC's preventative measures are insufficient to stop the virus once inside prison walls.
74. For example, the DOC's plan permits recreation and programming to take place in groups of up to fifty incarcerated people, ten times the number of people permitted by the Governor's executive order.²⁵
75. However, the sanitation practices inside prisons continues to be woefully insufficient in light of the danger posed by coronavirus. Prisoners in certain facilities do not have adequate access to soap. Corrections staff are not wearing masks or gloves. Certain prisoners are given very diluted cleaning agents with which to disinfect their cells only once a week, while others are given none.

²³ see Connecticut Dep't of Correction, *Pandemic Influenza Response Plan* (February 14, 2007), available at <https://portal.ct.gov/-/media/DOC/Pdf/Coronavirus-3-20/A-7-02a-Pandemic-Influenza-response-plan.pdf>.

²⁴ See, e.g., Johns Hopkins Hosp., *Coronavirus Disease 2019 vs. the Flu*, <https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/coronavirus-disease-2019-vs-the-flu> (accessed Mar. 30, 2020) (reporting that, unlike influenza, COVID-19 may "spread through the airborne route, meaning that tiny droplets remaining in the air could cause disease in others even after the ill person is no longer near").

²⁵ Compare Conn. Dep't of Correction, *COVID-19 Operational Response Plan 1* (Mar. 20, 2020), available at <https://portal.ct.gov/-/media/DOC/Pdf/Coronavirus-3-20/Covid-19-Operational-Response-Plan.pdf> with Lamont Exec. Order 7N at 4.

Common areas and showers are being cleaned only once a day. Some prisoners have been given one cloth mask per person, regardless of whether it tears, while others have not.

76. At York, where Ms. Dirgo is confined, prisoners working on cleaning details have run out of cleaning agents and rubber gloves, yet continued to work around the facility.
77. At Cheshire, where Mr. Wilcox is confined, corrections staff are not wearing masks. The roughly 100 people in his unit share a dozen phones and several tables in the common room, as well as bathrooms; he has not observed any special sanitation or cleaning practices.
78. In addition, though everyone entering a Connecticut correctional facility must have a wellness screening, including a temperature check, recent data suggests that around 60% of COVID-19 cases are asymptomatic.²⁶ As a result, fevers are not be a reliable indicator of whether someone is a carrier. Rich Aff. ¶ 9.
79. The prevalence of asymptomatic and pre-symptomatic COVID-19 carriers also belies the claim, made by both the defendant and his Department of Correction, that moving prisoners around inside the same sealed buildings will prevent the spread of infection. Asked about prisoner releases in response to COVID-19, a DOC spokeswoman claimed, “Overcrowding is not a concern for our agency. We have space to use.” Lyons, *supra* ¶ 59.
80. On March 24, Governor Lamont refused to consider releasing anyone in his custody but offered that “[w]e are going to do everything we can to make sure

²⁶ Jane Qiu, *Covert Coronavirus Infections Could Be Seeding New Outbreaks*, Nature, Mar. 20, 2020, available at <https://www.nature.com/articles/d41586-020-00822-x>.

that anybody who may be at risk of being a carrier is segregated or quarantined in a separate area.”²⁷ At a press conference held on April 6, 2020, he reversed course somewhat and acknowledged releases that had taken place in March , without explaining that nearly half—333 out of 782—were people due to be released anyway because they were at the end of their sentences.

81. At MacDougall-Walker, where Mr. Breyette is confined, staff have cleared a space for quarantine: “seg,” or the restrictive housing unit where prisoners are placed as punishment. But quarantining people in a non-medical restrictive housing unit, where cells “rarely have intercoms or other ways for sick inmates to contact officers in an emergency,” “is particularly dangerous for those with COVID-19 infection since many patients with COVID-19 descend suddenly and rapidly into respiratory distress.” Williams Aff. ¶ 14.
82. At Osborn, where Mr. Rodriguez is confined, some prisoners work in a factory making filter masks for healthcare providers, but are not given any additional cell disinfection time or materials.
83. At York, Ms. Dirgo’s cellmate has been running a low fever, feeling ill and fatigued, and exhibiting other possible symptoms of COVID-19. She was diagnosed with “allergies” and returned to her unit. Upon knowledge and belief, she has not been tested for COVID-19.
84. Even when carriers are successfully identified and quarantined, additional space within a prison does not address the threat of potentially airborne diseases within

²⁷ Kelan Lyons, *Lamont Says No Prison Releases Because of COVID-19 Despite Pressure From Advocates*, Conn. Mirror, Mar. 24, 2020, <https://ctmirror.org/2020/03/24/lamont-says-no-prison-releases-because-of-covid-19-despite-pressure-from-advocates>.

sealed buildings, *see* Rich Aff. ¶ 7, which is only exacerbated by the poor ventilation in DOC facilities.²⁸

85. It is therefore unrealistic to think that “screening, social distancing, and quarantining measures can be sufficiently employed within correctional settings to combat the spread of COVID-19,” Giftos Aff. ¶ 16, because “[t]here are too many structural limitations, and correctional health care can only do so much.” *Id.* ¶ 17.
86. “Decreasing the incarcerated population so that there is more ability to physically distance within the facility, fewer people who can contract the virus inside the facility, and more medical care for those who need it is the only way to prevent the complications from surging.” *Id.* ¶ 18.

The Defendants’ Unmet Obligations to the People in Their Custody

87. During a declared civil preparedness emergency like the current COVID-19 one, the governor is required to “take appropriate measures for protecting the health and safety of inmates of state institutions” Conn. Gen. Stat. § 28-9(b)(5).
88. At all times, the commissioner is required to “provide for the relief of any sick or infirm prisoner” Conn. Gen. Stat. § 18-7.
89. During the COVID-19 pandemic, and at all other times, the defendants bear the duty to refrain from depriving anyone of sanitation or medical care on the basis of their “race, color, ancestry, or national origin.” Conn. Const. art. 1, § 20.

²⁸ *See also* U.S. Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report, *Prevention and Control of Tuberculosis in Correctional and Detention Facilities: Recommendations from CDC* (July 7, 2006), available at <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5509a1.htm>.

90. During the COVID-19 pandemic, and at all other times, the defendants bear the duty to refrain from cruelly and unusually punishing sentenced prisoners of the State in contravention of the Connecticut and United States Constitutions by failing to provide adequate sanitation and medical care.
91. During the COVID-19 pandemic, and at all other times, the defendants bear the duty to refrain from punishing pre-trial detainees of the State through lack of sanitation or medical care, since by virtue of their presumed innocence any such deprivation contravenes the Fourteenth Amendment to the United States Constitution.
92. Defendants' interventions to date are commendable, but unfortunately insufficient to comply with their constitutional and statutory obligation to ensure the safety of those in their custody. In order to "lighte[n] the burden the correctional facilities and their surrounding communities will bear," Rich Aff. ¶13, "[i]t is imperative to scale up efforts to 'decarcerate,' or release, as many people as possible." *Id.* at 15. Because the conditions of confinement in Connecticut prisons leave prisoners in a highly dangerous congregate living situation certain to result in widespread COVID-19 infection, court action is necessary for defendants to execute their non-discretionary duties with respect to the sanitation and medical care of the prisoners and detainees in their custody.

Request for Relief

93. For such reasons stated above, the Court should issue a writ of mandamus compelling the defendants to:

- (a) immediately release all people having the CDC heightened risk factors for serious illness or death from COVID-19, to an appropriate medical facility where necessary;
- (b) immediately and meaningfully reduce the population density at each and every facility in which they confine people, including by:
 - (1) immediately releasing all pre-trial detainees facing misdemeanor charges, or detained subject to a bond of \$50,000 or less, except for charges comprising a crime of family violence;
 - (2) immediately releasing to transitional supervision all those eligible for such;
 - (3) immediately releasing to home confinement those eligible for such pursuant to Conn. Gen. Stat. § 18-100h;
 - (4) immediately releasing those currently incarcerated only for a technical violation of their parole or probation;
 - (5) immediately releasing on furlough all prisoners who are within six months of their end of sentence;
- (c) submit for the Court's review and ongoing monitoring a plan:
 - (1) to provide adequate sanitation and social distancing in prisons so as to prevent the spread of COVID-19, including by taking all measures for screening, cleaning, hygiene and social distancing that the CDC recommends for correctional facilities;

- (2) to diagnose and treat people showing symptoms of COVID-19 in accordance with contemporary standards of care,
 - (3) to approve, within seven days, community or private residences to those qualified for release to such via Conn. Gen. Stat. § 18-100,
 - (4) to approve, within seven days, residences for any prisoner or detainee who is now eligible for release but for the defendant's approval of a residence, and
 - (5) to sufficiently fund transitional housing for the duration of the pandemic; and
- (d) undertake any other task necessary to discharge their duties to those in their custody during the pandemic, including by working with other arms of state government to expedite their handling of requests for release, and ensuring consideration of relief for all incarcerated people who can safely return to their communities.

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Certificate of Service

I certify that a copy of the above, and any exhibits, was emailed on April 7, 2020 to all counsel of record, all of whom have filed written consent for electronic delivery:

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Exhibit 1

Lamont Executive Order No. 7

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7

RECEIVED
GOVERNMENT
OFFICE
MARCH 12 2020
10 31 AM

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID 19 PANDEMIC AND
RESPONSE**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, there is an increased risk of rapid spread of COVID-19 among persons who are living in congregate settings, such as long-term care facilities, and most residents of long-term care facilities are at increased risk for severe COVID-19; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow down the transmission of the virus, including cancellation of large gatherings and social distancing in smaller gatherings; and

WHEREAS, Sections 10-15 and 10-16 of the Connecticut General Statutes require that public schools be in session for at least 180 days during each year and for nine hundred hours of actual schoolwork for full-day kindergarten and grades one to twelve, inclusive, and four hundred and fifty hours for half-day kindergarten; and

WHEREAS, due to these unprecedented circumstances and because of the existence of this public health emergency and the anticipated temporary closure of schools due to COVID-19 risks where such local and regional boards of education deem it necessary to protect the safety and public health, multiple school districts may not be able to fulfill these requirements; and

WHEREAS, the Connecticut Department of Public Health and my administration continue to manage the public health aspects of this incident;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Prohibition of Large Gatherings.** Throughout the State, gatherings of 250 people or more for social and recreational activities including, but not limited to, community, civic, leisure, or sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities; are prohibited. Such prohibition shall remain in effect until midnight on April 30, 2020, unless modified by a future Executive Order. Nothing in this order shall prohibit any spiritual gathering or worship service. Violators of this order may be subject to criminal penalties pursuant to Section 28-22 of the Connecticut General Statutes.
2. **Limits on Nursing Home Visitors.** Section 19a-550(b)(12) of the Connecticut General Statutes, specifically providing that each patient in a nursing home facility, residential care home or chronic disease hospital "may associate ... privately with persons of the patient's choice, including other patients," is hereby modified to provide that the Commissioner of Public Health may issue restrictions on the number, category and frequency of outside visitors and the screening and protective measures as the Commissioner may deem necessary to assure the health and welfare of patients in a nursing home facility, residential care home or chronic disease hospital, provided that nothing in this order or any order by the Commissioner may prohibit a visit, where sufficient protective measures are able to be put in place, from 1) at least one family member, domestic partner, or other person designated by the patient, each day; 2) a patient's attorney, conservator, or any process server related to matters under the jurisdiction of the Probate Court; 3) persons necessary to conduct hearings under the jurisdiction of the Probate Court; or 4) a person authorized by law to oversee or investigate the provision of care and services (e.g. ombudsman). Except as provided herein regarding visitors, nothing in this order shall suspend or modify the provisions of Sec. 19a-550(b)(12) providing the right to communicate privately with persons of the patient's choice, send and receive the patient's personal mail unopened and make and receive telephone calls privately, unless medically contraindicated, as documented by the patient's physician or advanced practice registered nurse in the patient's medical record.
3. **Waiver of 180-Day School Year.** For the 2019-2020 school year, the mandates of Sections 10-15 and 10-16 of the Connecticut General Statutes, and any associated implementing regulations or policies, requiring 180 school day sessions and the associated requirements for a threshold number of hours of actual school work, are immediately suspended for all schools that are closed for any period of time due to COVID-19 risks and, upon the reopening of the schools, hold school sessions through June 30, 2020. Nothing in this order shall preclude schools from satisfying the existing mandates of Sections 10-15 and 10-16 sooner than June 30, 2020 through distance learning or other alternatives approved by the Commissioner of Education. The Commissioner shall approve any such alternatives if they are filed with the State Department of Education on or before June 1, 2020 and consist of an attestation by the Superintendent or school leadership official, and signed

by the Chair of the local or regional board of education, stating that the alternative methods comply with all legal and regulatory requirements.

4. **Extension of DMV Licensing Renewal Deadlines and Suspension of Other DMV Requirements.** Pursuant to Section 14-5c of the Connecticut General Statutes, the Commissioner of Motor Vehicles is authorized for the duration of the aforementioned public health and civil preparedness emergency to issue such orders pursuant to such section as she deems necessary.
5. **Modification of Police Academy Attendance Requirements.** Section 7-294e-15 of the Regulations of Connecticut State Agencies, which prohibits police training academy recruits from being absent from any basic training program for more than five days, is hereby suspended. The Commissioner of Emergency Services and Public Protection or his designee, subject to their discretion, may permit leave in excess of five days for any recruit if they determine such leave to be necessary as a result of the effects of or response to the COVID 19 pandemic; may permit a recruit on such leave to continue basic training via distance learning; and may permit a recruit who is unable, because of extended absence as a result of the COVID 19 pandemic, to complete the basic training in the next available or a future training class.

This order shall take effect immediately and shall remain in effect for the duration of the aforementioned state of emergency, unless earlier modified by me.

Dated at Hartford, Connecticut, this 12th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State

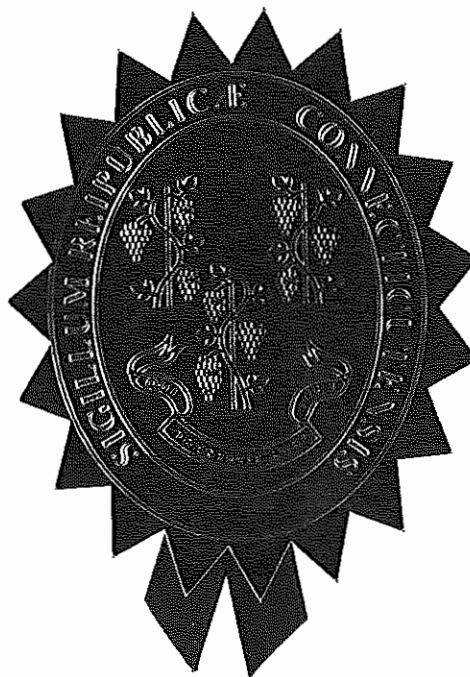


Exhibit 2

Lamont Executive Order No. 7A

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7A

**PROTECTION OF RESIDENTS OF NURSING HOME FACILITIES,
RESIDENTIAL CARE HOMES AND CHRONIC DISEASE HOSPITALS
DURING COVID-19 PANDEMIC**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 is higher for people who are 60 years old or older and for those who have chronic health conditions; and

WHEREAS, there is an increased risk of rapid spread of COVID-19 among persons who are living in congregate settings, such as long-term care facilities, and residents of long-term care facilities are at increased risk for severe COVID-19; and

WHEREAS, to reduce the spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow down the transmission of the virus, including cancellation of large gatherings and social distancing in smaller gatherings; and

WHEREAS, on March 12, 2020, I issued Executive Order No. 7, which, among other things, authorized the Commissioner of Public Health to restrict visitation in nursing home facilities, residential care homes and chronic disease hospitals, with certain exceptions; and

WHEREAS, nursing homes and related facilities throughout Connecticut are experiencing staffing shortages as a result of the closure of schools and other effects of the COVID-19 pandemic, increasing the risks to patients, residents, and staff; and

WHEREAS, there exists a compelling state interest in restricting visitation in nursing home facilities, residential care homes and chronic disease hospitals to protect the health and safety of their patients, residents, and staff;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. For the duration of the aforementioned public health and civil preparedness emergencies, or until such time as I repeal or modify this executive order, notwithstanding Section 19a-550(b)(12) of the Connecticut General Statutes or any other statute, regulation, local rule or ordinance or provision of law, the Commissioner of Public Health is authorized to issue any and all orders restricting entrance into nursing home facilities, residential care homes or chronic disease hospitals that she deems necessary to protect the health and welfare of patients, residents and staff.
2. This order supersedes paragraph 2 of Executive Order No. 7 ("Limits on Nursing Home Visitors"). All other provisions of Executive Order No. 7 remain in effect.

This order shall take effect immediately.

Dated at Hartford, Connecticut, this 13th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 3

Lamont Executive Order No. 7B

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7B

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – FURTHER SUSPENSION OR MODIFICATION OF STATUTES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, there is an increased risk of rapid spread of COVID-19 among persons living in congregate settings, such as long-term care facilities, and most residents of long-term care facilities are at increased risk for severe COVID-19; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of large gatherings and social distancing in smaller gatherings; and

WHEREAS, attendance at public meetings and proceedings is likely to increase the risk of transmission of COVID-19; and

WHEREAS, increased demand on the healthcare system resulting from the COVID-19 pandemic has created an imminent shortage of personal protective equipment (PPE); and

WHEREAS, the imminent shortage of personal protective equipment (PPE) will significantly impact pharmacies compounding sterile pharmaceuticals in the State of Connecticut due to their inability to comply with statutorily mandated garbing requirements;

WHEREAS, the Department of Consumer Protection has issued liquor permits to persons and organizations sponsoring public outings, picnics, social or charitable events that would draw crowds of people, but fees for such permits are currently non-refundable;

WHEREAS, the need to enact social distancing, limit large crowds, and other measures, combined with the closure of schools and workplaces to limit the transmission of COVID-19, has vastly expanded the need for childcare for families throughout the State; and

WHEREAS, Section 19a-420 (1) of the Connecticut General Statutes provides in relevant part that youth camps operate based on a summer instructional program schedule; and

WHEREAS, due to unprecedented circumstances and because of the existence of this public health emergency and the anticipated need for additional childcare for families faced with multiple school closures, it is deemed necessary to allow camps to open and provide care for a period longer than the summer season; and

WHEREAS, Section 10-16p (6) of the Connecticut General Statutes requires School Readiness programs to remain open for 50 weeks of the year; and

WHEREAS, due to the unprecedented circumstances and because of the existence of this public health emergency and the temporary closure of School Readiness programs due to COVID-19 risks, where such School Readiness programs deem it necessary to protect the safety and public health, multiple School Readiness programs may not be able to fulfill this requirement; and

WHEREAS, the Executive Director of the Office of Health Strategy directs and oversees the Health Systems Planning Unit established under section 19a-612 and all of its duties and responsibilities as set forth in Sections 19-610 through 19-689 of the Connecticut General Statutes; and

WHEREAS, the Health Systems Planning Unit oversees the Certificate of Need program, hospital financial reporting and other functions; and

WHEREAS, healthcare providers in the state of Connecticut may need the flexibility to establish temporary health care facilities to test, diagnose and treat patients exhibiting symptoms of COVID-19 in response to the anticipated surge in COVID-19 cases; and

WHEREAS, the current licensed bed capacity within the state of Connecticut may be insufficient to accommodate and facilitate the safe and effective treatment of individuals diagnosed with COVID-19; and

WHEREAS, the utilization of certain imaging equipment is required to diagnose, treat, and monitor the progression of COVID-19; and

WHEREAS, Section 19a-638(a) of the Connecticut General Statutes requires a certificate of need for the establishment of a new health care facility; the establishment of a freestanding emergency department; the acquisition of computed tomography scanners; and an increase in licensed bed capacity of a health care facility in the state of Connecticut; and

WHEREAS, Section 19a-639a through 19a-639f of the Connecticut General Statutes sets forth notice requirements and timelines related to the certificate of need analytic process, and sets forth a process to request public hearings;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Suspension of In-Person Open Meeting Requirements.** Sections 1-206, 1-225, and 1-226 of the Connecticut General Statutes, and any open meeting provision of any municipal charter, ordinance, or regulation that conflicts with this order, are suspended to the extent necessary to permit any public agency to meet and take such actions authorized by the law without permitting or requiring in-person, public access to such meetings, and to hold such meetings or proceedings remotely by conference call, videoconference or other technology, provided that: 1) the public has the ability to view or listen to each meeting or proceeding in real time, by telephone, video, or other technology; 2) any such meeting or proceeding is recorded or transcribed, and such recording or transcript shall be posted on the agency's website within seven (7) days of the meeting or proceeding, and made available within a reasonable time in the agency's office; 3) the required notice and agenda for each meeting or proceeding is posted on the agency's website and shall include information about how the meeting will be conducted and how the public can access it; 4) any materials relevant to matters on the agenda, including but not limited to materials related to specific applications, if applicable, shall be submitted to the agency a minimum of twenty four (24) hours prior and posted to the agency's website for public inspection prior to, during, and after the meeting, and any exhibits to be submitted by members of the public shall, to the extent feasible, also be submitted to the agency a minimum of twenty-four (24) hours prior to the meeting and posted to the agency's website for public inspection prior to, during, and after the meeting; and 5) all speakers taking part in any such meeting or proceeding shall clearly state their name and title, if applicable, before speaking on each occasion that they speak.
2. **Waiver of Manufacturer Registration Requirement for Hand Sanitizer:** The requirement for a manufacturer registration under 21a-70(b) of the Connecticut General

Statutes, and any associated implementing regulations or policies, is suspended to authorize the Commissioner of Consumer Protection to allow pharmacists licensed pursuant to chapter 400j to compound and sell finished hand sanitizer products over the counter to customers requesting this product, provided that the Commissioner shall issue an implementing order to prescribe the rules for such activity, and such activity shall be allowed only upon issuance of such order.

3. **Suspension of Garbing Requirements For Non-Hazardous Compounding of Sterile Pharmaceuticals.** The requirement in Section 20-633b of the Connecticut General Statutes that pharmacies compounding sterile pharmaceuticals, in community pharmacies and institutional pharmacies, meet the garbing requirements set forth in United States Pharmacopeia (USP) Chapter 797 is suspended for the purpose of allowing such pharmacies to continue compounding non-hazardous sterile pharmaceuticals. This suspension shall apply only to the garbing requirements for non-hazardous compounding of sterile pharmaceuticals and shall apply only for the duration of this imminent shortage of personal protective equipment (PPE), as determined by the Commissioner of Consumer Protection. Pharmacies compounding sterile pharmaceuticals shall follow all other relevant state and federal laws and shall comply with all other requirements set forth in United States Pharmacopeia (USP) Chapter 797. Additionally, all deviations from current Standard Operating Procedures (SOPs) for garbing shall be memorialized and dated. The Commissioner of Consumer Protection may issue any implementing orders that she deems necessary.
4. **Refunds of Certain Liquor License Application Fees Permissible.** Section 30-39(b)(2) of the Connecticut General Statutes, is modified to authorize the Commissioner of Consumer Protection to cancel and refund the application fee for a liquor permit to any person or organization who cancels public outings, picnics, social or charitable events, and no longer requires the liquor permit granted for use at the event. The Commissioner may issue any such implementing orders as she deems necessary.
5. **Waiver of Face-to-Face Interview Requirements for Temporary Family Assistance.** Section 17b-688c of the Connecticut General Statutes is suspended to authorize the Commissioner of Social Services to 1) waive prohibitions on temporary family assistance to applicants prior to an applicant's attendance at an employment services interview or participation in development of an employment services plan, 2) to consider the effects of or a pandemic or the response to it as good cause when assessing compliance with any provision of Section 17b-688c, and 3) issue any implementing orders that she deems necessary.
6. **Flexibility to Maintain Adequate Childcare Resources.** The provisions of Sections 10-16p (6), 10-530, 19a-420 through 19a-429, 19a-77, 19a-79 through 19a-87f and 10-530 of the Connecticut General Statutes and any associated regulations, rules, and policies regarding youth camps, family childcare homes, childcare centers, and group childcare homes, are modified to authorize the Commissioner of Early Childhood to temporarily waive any requirements, including licensing requirements, contained therein as she deems

necessary to maintain a sufficient capacity of childcare services or otherwise respond to the need for childcare during this public health and civil preparedness emergency. The Commissioner may issue any implementing orders that she deems necessary.

7. **Flexibility to Provide For Adequate Healthcare Resources and Facilities.** Sections 19a-610 through 19a-689 of the Connecticut General Statutes and any related regulations, rules, or policies are modified to authorize the Executive Director of the Office of Health Strategy to waive provisions of such sections as she deems necessary to ensure that adequate healthcare resources and facilities are available to respond to the COVID-19 pandemic, and to issue any implementing orders that she deems necessary.

Unless specified herein, each provision of this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 14th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 4

Lamont Executive Order No. 7C

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7C

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – FURTHER SUSPENSION OR MODIFICATION OF STATUTES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of

the virus, including cancellation of large gatherings and social distancing in smaller gatherings; and

WHEREAS, attendance at public meetings and proceedings is likely to increase the risk of transmission of COVID-19; and

WHEREAS, there is an increased risk of rapid spread of COVID-19 among persons residing in congregate settings, such as inpatient or outpatient hospitals, clinics or other facilities for the diagnosis, observation or treatment of persons with psychiatric and intellectual disabilities; and

WHEREAS, there exists a compelling state interest in collecting health information pertaining to COVID-19 and its spread throughout the state; and

WHEREAS, the Commissioner of the Department of Public Health has added COVID-19 to the list of reportable diseases under Section 19a-215 of the Connecticut General Statutes; and

WHEREAS, Section 17a-547 of the Connecticut General Statutes governs the rights of patients to receive visitors at regular visiting hours at inpatient or outpatient hospitals, clinics or other facilities for the diagnosis, observation or treatment of persons with psychiatric and intellectual disabilities; and

WHEREAS, Section 17a-238 of the Connecticut General Statutes governs the rights of persons under the supervision of the Commissioner of Developmental Services to communicate freely and privately with any person; and

WHEREAS, Section 52-146e of the Connecticut General Statutes limits the disclosure of information that identifies a patient to any person, corporation or governmental agency without the consent of the patient or the patient's authorized representative; and

WHEREAS, Section 52-146f of the Connecticut General Statutes provides exceptions to Section 52-146e of the Connecticut General Statutes;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Cancellation of School Classes.** To promote and secure the safety and protection of children in schools related to the risks of COVID-19, all public school classes will be cancelled for all students effective Tuesday, March 17, 2020 until March 31, 2020, unless extended beyond that date. Private schools and other non-public schools are encouraged to follow the same schedule. The Connecticut State Department of Education, the Connecticut Department of Public Health, the Department of Children and Families, and the Connecticut Office of Early Childhood, are directed to immediately work together to implement measures to provide for the health, nutrition, safety, educational needs and well-being of children during the class cancellation period.

2. **Flexibility of Graduation Requirements, and Prescribed Courses of Study.** The provisions of Sections 10-16b and 10-221a, and any associated regulations, rules, and policies regarding prescribed courses of study and graduation requirements are modified to authorize the Commissioner of Education to temporarily waive any requirements contained therein as he deems necessary to address the impact of COVID-19 and school class cancellations.
3. **Flexibility for Educator Prep Programs.** The provisions of Section 10-145a, and any associated regulations, rules, and policies regarding educator preparation programs are modified to authorize the Commissioner of Education to temporarily waive any requirements, contained therein as he deems necessary to address the repercussions of college, university, and school class cancellations on students pursuing secondary education programs. The Commissioner may issue any order that he deems necessary to implement this order.
4. **Flexibility for Educator Certification Timelines, Educator Evaluations, and School In-Services.** The provisions of Sections 10-145, 10-145b, 10-145d, 10-151b, 10-151 and 10-220a, and any associated regulations, rules, and policies regarding educator certification timelines, evaluations, and professional development requirements are modified to authorize the Commissioner of Education to temporarily waive any requirements contained therein as he deems necessary to address the impact the school class cancellations and COVID-19 risks when classes resume and students return. The Commissioner may issue any order that he deems necessary to implement this order.
5. **Extension of Municipal Budget Adoption Deadlines.** Notwithstanding any provision of the Connecticut General Statutes, including Title 7, or any special act, municipal charter or ordinance, that conflicts with this order, all municipal budget deadlines for the preparation of the municipal budget for the fiscal year ending June 30, 2021 that fall on any date prior to and including May 15, 2020 are extended by thirty (30) days. The legislative body of the municipality, or in a municipality where the legislative body is a town meeting, the board of selectmen, may alter or modify the schedules and deadlines pertaining to the preparation and submission of a proposed budget and the deliberation or actions on said budget by the legislative body or other fiscal authority, including any required public hearing(s), publication, referendum or final budget adoption. All submission dates may be postponed until such time as the legislative body approves said modified schedule and deadline, consistent with the thirty (30) day extension.
6. **Extension of Regional Board of Education Budget Adoption Deadlines.** Notwithstanding any provision of the Connecticut General Statutes, including Title 10, or any special act, municipal charter or ordinance, that conflicts with this order, all budget deadlines for the preparation of regional school district budgets for the fiscal year ending June 30, 2021 that fall on any date prior to and including May 15, 2020 may be extended by thirty (30) days. Any regional board of education may alter or modify the schedules and deadlines pertaining to the preparation and submission of a proposed budget and the

deliberation or actions on said budget by the legislative body or other fiscal authority, including any required public hearing(s), publication, referendum or final budget adoption.

7. **Remote Conduct of DMV Operations.** To protect public health and safety, particularly the risk of transmission of COVID-19, by reducing in-person interactions, Title 14 of the Connecticut General Statutes is hereby modified to authorize the Commissioner of Motor Vehicles to issue any and all orders she deems necessary to close any DMV branch to transaction of business by the public, facilitate the conduct of business remotely using online methods or any other feasible means, including provision of any notice or conduct of any hearing required pursuant to that Title, waive the suspension of licenses and other credentials as required, and waive, modify or suspend related requirements in Title 14 that result from closure of DMV branch offices to the public. The Commissioner may suspend any timeline or deadline for any notice or hearing required by this Title or by the Uniform Administrative Procedure Act for up to 90 days. The Department of Motor Vehicles shall post a plan on its website to instruct customers how to conduct business remotely and provide updated information on services conducted by its partners. The DMV shall implement its plan as soon as feasible, and shall review the plan weekly to determine whether any modifications are necessary.
8. **Limits on Visitors to Facilities That Treat Persons with Psychiatric Disabilities.** For the duration of the aforementioned public health and civil preparedness emergencies, or until such time as I repeal or modify this executive order, notwithstanding Section 17a-547 of the Connecticut General Statutes or any other statute, regulation, local rule or ordinance or provision of law, the Commissioners of the Department of Mental Health and Addiction Services and the Department of Public Health are authorized to issue any and all orders restricting entrance into facilities, as defined in Section 17a-540(1) of the Connecticut General Statutes, including Whiting Forensic Hospital, that the Commissioners deem necessary to protect the health and welfare of patients, residents and staff.
9. **Limits on Visitors to the Southbury Training School.** For the duration of the aforementioned public health and civil preparedness emergencies, or until such time as I repeal or modify this executive order, notwithstanding Section 17a-238 of the of the Connecticut General Statutes or any other statute, regulation, local rule or ordinance or provision of law, the Commissioners of the Department of Developmental Services and the Department of Public Health are authorized to issue any and all orders restricting entrance into facilities, as referenced in Section 17a-231(1), the Southbury Training School and any other facility operated by the Department of Developmental Services that the Commissioners deem necessary to protect the health and welfare of patients, residents and staff.
10. **COVID-19 Information Sharing Between Facilities That Treat Persons with Psychiatric Disabilities, DPH, and Local Health Directors.** For the duration of the aforementioned public health and civil preparedness emergencies, or until such time as I

repeal or modify this executive order, Section 52-146f of the Connecticut General Statutes is amended to permit the Commissioner of Public Health and Local Health Directors to disclose communications or records to report cases of COVID-19 as required under Section 19a-215 of the Connecticut General Statutes and as they may deem necessary to limit the further spread of COVID-19 or respond to this public health and civil preparedness emergency.

Unless specified herein, each provision of this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 15th day of March, 2020.

Ned Lamont

Ned Lamont
Governor



By His Excellency's Command

Denise W. Merrill

Denise W. Merrill
Secretary of the State

Exhibit 5

Lamont Executive Order No. 7D

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7D

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – CROWD REDUCTION AND SOCIAL DISTANCING**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, the Commissioner of the Department of Public Health has added COVID-19 to the list of reportable diseases under Section 19a-215 of the Connecticut General Statutes; and

WHEREAS, Connecticut is coordinating with other states to develop consistent strategies to mitigate the spread of COVID-19 infections throughout the state and region;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. Further Reduction of Large Crowds. Effective immediately, and through April 30, 2020, unless earlier modified, extended, or terminated by me, the prior order set forth in Executive Order No. 7 prohibiting social and recreational gatherings of 250 people or more is hereby amended and modified to require that all such gatherings of 50 or more people, including but not limited to, community, civic, leisure, or sporting events; parades; concerts; festivals; plays or live performances; conventions; and similar activities, as well as religious, spiritual or worship gatherings of such size, are prohibited throughout the State of Connecticut.
2. Limits on Restaurant, Bar and Private Club Operations. Effective at 8 p.m. on March 16, 2020 and through April 30, 2020, unless earlier modified, extended, or terminated by me, any restaurant or eating establishment and any location licensed for on-premise consumption of alcoholic liquor in the State of Connecticut, except for Class III and Class II Tribal Gaming enterprises, shall only serve food or non-alcoholic beverages for off-premises consumption. The Governor continues to work with the state's federally recognized tribes on the temporary closure of their casino operations and, if necessary, reserves the right to address on-premises consumption of alcoholic beverages on tribal lands in a future Executive Order.
3. Closure of Off-Track Betting Facility Operations. Effective at 8 p.m. on March 16, 2020 and through April 30, 2020, unless earlier modified, extended, or terminated by me, any facility authorized to conduct off-track betting shall cease on-site operations.

4. Restriction on Gym, Sports, Fitness and Recreation Facility and Movie Theater Operations. Effective at 8 p.m. on March 16, 2020 and through April 30, 2020, unless earlier modified, extended, or terminated by me, any indoor gym, fitness center, or similar facility or studio offering in-person fitness, sporting or recreational opportunities or instructions, and all movie theaters shall cease all operations.

Dated at Hartford, Connecticut, this 16th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 6

Lamont Executive Order No. 7E

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7E

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – FURTHER SUSPENSION OR MODIFICATION OF STATUTES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, Sections 10-15 and 10-16 of the Connecticut General Statutes require that public schools be in session for at least 180 days during each year and for nine hundred hours of actual schoolwork for full-day kindergarten and grades one to twelve, inclusive, and four hundred and fifty hours for half-day kindergarten; and

WHEREAS, due to these unprecedented circumstances and because of the existence of this public health emergency and the anticipated temporary closure of schools due to COVID-19 risks where such local and regional boards of education deem it necessary to protect the safety and public health, multiple school districts may not be able to fulfill these requirements; and

WHEREAS, the Department of Emergency Services and Public Protection and State Police are critical to the response to this public health and civil preparedness emergency, and must prioritize personnel and resources to critical public safety needs, as well as limit transmission of COVID-19; and

WHEREAS, to ensure that the pandemic does not cause undue hardship for the state's poorest residents, and to ensure that the Department of Social Services has the necessary flexibility to prioritize work during a period of diminished operational capacity; and

WHEREAS, in-person attendance at a fair hearing held by the Department of Social Services (DSS) is likely to increase the risk of transmission of COVID-19, and DSS must fulfill its statutory responsibilities concerning fair hearings in the event of the closure of buildings or staff reduction as a result of the COVID-19 pandemic by holding telephonic hearings;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Waiver of 180-Day School Year.** The provisions of Sections 10-15 and 10-16, and any associated regulations, rules, and policies regarding the requirement for 180 days of school per year and certain hours of schoolwork are modified to allow all public schools, upon reopening in the spring 2020, to close school on

their normally scheduled end-dates, so long as local and regional boards of education provide opportunities for continuity of education to all students, to the greatest extent possible, and consistent with federal and state guidance. This order modifies my previous Executive Order No. 7 issued on March 12, 2020, as a result of evolving circumstances, including my Executive Order No. 7C issued March 15, 2020, which cancelled classes in all Connecticut schools from March 17, 2020 until at least March 31, 2020, and the potential impact on schools that may be subject to longer-term cancellations of in-school classes.

2. **Suspension of Required Fingerprinting Availability.** Section 29-17c (a) of the Connecticut General Statutes, which prohibits employees of a municipal police department or the Division of State Police within the Department of Emergency Services and Public Protection from refusing to collect the fingerprints of a person requesting such fingerprinting for the purposes of a criminal history records check, is hereby suspended. The chief of police or Commissioner of Emergency Services and Public Protection or his designee, subject to their discretion, may limit or eliminate fingerprinting hours to limit the transmission of COVID-19 or focus resources on critical public safety needs. The Department of Emergency Services and Public Protection shall continue to perform fingerprinting services for long term care providers pursuant to section 19a-491c of the general statutes at its headquarters in Middletown. Unless modified by further order of the Commissioner or me, State Police barracks will continue to remain open to the general public for other business.
3. **Extension of Time Period for Permits.** Connecticut General Statutes §§ 21-40, 21-47d, 29-28a, 29-147, 29-152h, 29-155b, 29-161m, 29-161q, 29-161z, 29-349, 29-357 are modified to authorize the Commissioner of Emergency Services and Public Protection to extend the expiration date of any permit, license or other credential governed by such sections that expires or expired at any time on or after March 1, 2020, by 90 days, provided that he is authorized to revoke such extensions as he deems necessary in his sole discretion to protect public safety, and to further extend such expiration dates or deadlines for the duration of this public health and civil preparedness emergency, unless extended or terminated by me, and to issue such implementing orders as he deems necessary.
4. **Suspension of the Immediate Recoupment of Public Assistance Benefit Overpayments.** Section 17b-88 and any implementing regulations are modified to authorize the Commissioner of Social Services, to the extent permitted by federal law, to temporarily suspend recoupment of non-fraudulent overpayments for public assistance programs for the duration of this public health and civil preparedness emergency, and issue any implementing orders she deems necessary.

5. **Suspension of In-Person Hearing Attendance at DSS Fair Hearings.**
Section 17b-60 of the Connecticut General Statutes is hereby modified to authorize the Commissioner of Social Services to suspend any requirement that an aggrieved person authorized by law to request a fair hearing on a decision of the Commissioner appear in person at such hearing.

Unless specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified by me.

Dated at Hartford, Connecticut, this 17th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 7

Lamont Executive Order No. 7F

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7F

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – FURTHER CROWD REDUCTION AND OTHER MEASURES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, suspended fingerprinting availability to that for critical requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, there exists a critical need to protect the health of residents and patients of various types of nursing, long term care, and psychiatric facilities while providing for essential legal proceedings under the authority of the Probate Court in order to protect the legal rights of certain such residents; and

WHEREAS, Executive Order No. 7C ordered the cancellation of classes at all public schools throughout the State; and

WHEREAS, Connecticut Unified School District 1 (established per Section 18-99a) and Unified School District 2 (established per Section 17a-37), and Connecticut Department of Mental Health and Addiction Services inpatient facilities providing school classes, are uniquely situated entities and require individualized considerations to maintain stability for the population; and

WHEREAS, the existing COVID-19 pandemic and the accelerating spread of the disease in Connecticut require additional, extraordinary mitigation and social distancing measures, particularly in response to incidents of large gatherings resulting from school cancellations, to protect the public health and safety of our citizens; and

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Closure of Large Shopping Malls.** For purposes of this Order, "Large Shopping Malls" means the Brass Mill Center in Waterbury, the Connecticut Post Mall in Milford, the Crystal Mall in Waterford, the Danbury Fair Mall in Danbury, the Stamford Town Center in Stamford, The Shoppes at Buckland Hills in Manchester, the SoNo Collection in Norwalk, Westfarms Mall in

Farmington, the Westfield Mall in Meriden and the Westfield Mall in Trumbull. Effective at 8 p.m. on March 19, 2020 and through April 30, 2020, unless earlier modified, extended, or terminated by me, all indoor common areas of Large Shopping Malls shall be closed to the public. Any stores, pharmacies, restaurants or other establishments located within or connected to Large Shopping Malls, which have their own external entrances and exits, separate from the general entrances to the Large Shopping Malls, may remain open to the public, provided that (a) only the separate entrances and exits are used; (b) any restaurant or eating establishment and any location licensed for on-premise consumption of alcoholic liquor shall remain subject to Executive Order No. 7D, which requires all such restaurants and establishments to only serve food or non-alcoholic beverages for off-premises consumption; (c) any interior entrances to common areas of the Large Shopping Malls remain closed to the public; and (d) they abide by and comply with all state and local health and safety codes and ordinances and any other existing or future Executive Orders issued pursuant to the current Public Health and Civil Preparedness Emergency.

2. **Closure of Places of Public Amusement.** Effective at 8:00 p.m. on March 19, 2020 and through April 30, 2020, unless earlier modified, extended, or terminated by me, all places of public amusement, whether indoors or outdoors, including but not limited to, locations with amusement rides, carnivals, amusement parks, water parks, aquariums, zoos, arcades, fairs, funplexes, theme parks, bowling alleys, and other family and children's amusement attractions shall be closed to the public. This directive shall not apply to public parks and open recreation areas.
3. **Expansion of Medicaid Telehealth Coverage to Audio-Only Telephone.** Section 17b-262 of the Connecticut General Statutes and any implementing regulations, policies rules or other directives related to the Connecticut Medical Assistance Program, whether or not specifically adopted pursuant to said statute, are modified to authorize the Commissioner of Social Services to temporarily waive any requirements contained therein as the Commissioner deems necessary to enable the Connecticut Medical Assistance Program to cover applicable services provided through audio-only telehealth services. The Commissioner may issue any order and take other action that she deems necessary to implement this order.
4. **Waiver of In-Person Service, Hearing, and Screening Requirements for Facilities that Have Issued Orders Limiting Visitor Access to Protect the Public Health.** Notwithstanding sections 52-57(a), 45a-644 through 45a-667u, 17a-495 through 17a-528, 17a-540 through 17a-550, 45a-669 through 45a-683, and 45a-703 of the Connecticut General Statutes, 1) any requirement for personal service is waived as it relates to any person currently located in a facility that has restricted visitor access under an emergency order issued by a

state agency pursuant to an Executive Order, and service may be made by serving an administrator or the administrator's designee provided that the administrator or administrator's designee shall sign a certification, provided by the process server, that the named party is currently located in the facility and that the administrator or administrator's designee will personally serve the named party; and 2) any requirement for an in-person meeting, hearing, or screening is waived and meetings, hearings, or screenings may take place by any other method that allows for the participation of the interested parties. For the purposes of this order, "administrator" shall mean the nursing home administrator or such other person with administrative oversight of the facility who is on site at the time of service.

5. **Continuation of Classes and Programming at Certain State-operated Schools.** Connecticut Unified School District 1, established per Section 18-99a of the Connecticut General Statutes, Unified School District 2, established pursuant to Section 17a-37, and Connecticut Department of Mental Health and Addiction Services inpatient facilities providing school classes or programs are exempt from Section 1 of Executive Order No. 7C, which cancelled school classes throughout the state.

Unless specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified by me.

Dated at Hartford, Connecticut, this 18th day of March, 2020.



Ned Lamont
Governor



By His Excellency's Command



Denise W. Merrill
Secretary of the State

Exhibit 8

Lamont Executive Order No. 7G

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7G

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – PRESIDENTIAL PRIMARY POSTPONEMENT AND
ADDITIONAL PUBLIC HEALTH MEASURES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, suspended fingerprinting availability to that for critical requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, healthcare providers providing services to patients and those with Medical coverage, need flexibility in testing, diagnosis and treatment while supporting adequate social distancing measures, and to provide healthcare services during the course of the COVID-19 pandemic through the increased utilization of the delivery of health care or other health services through certain modes of telehealth service; and

WHEREAS, subsection (a)(11) of Section 19a-906 of the Connecticut General Statutes provides, in part, that “telehealth” does not include, in part, the use of audio-only telephone as a mode of delivering health care or health services via information and communication technologies to facilitate the diagnosis, consultation and treatment, education, care management and self-management of a patient’s physical and mental health; and

WHEREAS, subsection (a)(12) of Section 19a-906 of the Connecticut General Statutes provides, in part, that a “telehealth provider” means health care providers specifically licensed pursuant to the Connecticut General Statutes governing those health care professions; and

WHEREAS, subsection (f) of Section 19a-906 provides, in part, that the provision of telehealth services and health records maintained and disclosed as part of a telehealth interaction shall comply with the provisions of the Health Insurance Portability and Accountability Act of 1996 P.L. 104-191, as amended from time to time; and

WHEREAS, an in-person visit to investigate a report that an elderly person allegedly is being, or has been, abused, neglected exploited or abandoned, or is in need of protective services, is likely to increase the risk of transmission of COVID-19; and

WHEREAS, if COVID-10 is transmitted to an elderly person, there is a high risk of serious illness or mortality; and

WHEREAS, the Department of Social Services (“DSS”) can fulfill its statutory obligation to investigate such reports without making an in-person visit of the elderly person by using alternative means of communication; and

WHEREAS, DSS staff may be reduced as a result of illness or the need to self-isolate due to COVID-19, and may need additional time to disclose the results of its investigation of such reports; and

WHEREAS, attendance at public proceedings is likely to increase the risk of transmission of COVID-19; and

WHEREAS, in consultation with the Chief Court Administrator on behalf of the Chief Justice of the Supreme Court and the Judicial Branch, I have determined that there exists a compelling state interest that courts conduct only essential business in order to minimize the spread of COVID-19; and

WHEREAS, there is a compelling interest in reducing the risk of transmission of COVID-19 among voters, poll workers, and residents, which risk would be heightened in the settings of indoor polling places and potential lines for voting, especially in polling places such as senior centers, schools, community centers, and other public facilities;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Postponement of Presidential Primary to June 2.** Under my sole authority pursuant to the declaration of public health and civil preparedness emergency, and to protect the health and safety of voters, poll workers, and the most vulnerable members of our population, I hereby modify Section 9-464 of the Connecticut General Statutes to provide that on June 2, 2020 each party shall conduct a primary in each town if the names of two or more candidates for President of the United States are to be placed on such party's ballot in accordance with the provisions of chapter 154 of the General Statutes.
2. **Suspension of Non-Critical Court Operations and Associated Requirements.** Notwithstanding any provision of the Connecticut General Statutes or of any regulation, local rule or other provision of law, I hereby suspend, for the duration of this public health and civil preparedness emergency, unless earlier modified or terminated by me, all statutory (1) location or venue requirements; (2) time requirements, statutes of limitation or

other limitations or deadlines relating to service of process, court proceedings or court filings; and (3) all time requirements or deadlines related to the Supreme, Appellate and Superior courts or their judicial officials to issue notices, hold court, hear matters and/or render decisions including, but not limited to, the following:

- a. All time limitations in Chapters 959, 959a, 960 and 961 of the General Statutes including, but not limited to, C.G.S. § 54-1g concerning the time of arraignments
 - b. and C.G.S. § 54-82m concerning the right to a speedy trial;
 - c. All time limitations for rendering judgments in civil actions provided in C.G.S. § 51-183b;
 - d. All time limitations concerning civil process, service and return provided in Chapter 896 of the General Statutes;
 - e. All statutes of limitations provided in Chapter 926 of the General Statutes;
 - f. All time limitations concerning the automatic review of terms of probation provided in C.G.S. § 53a-29(g);
 - g. All time constraints for the filing of administrative appeals provided in C.G.S. § 4-183;
 - h. All time limitations concerning hearings and rulings pertaining to primary and election disputes provided in Chapter 149 of the General Statutes;
 - i. All time limitations in Title 46b of the General Statutes including, but not limited to, family, juvenile and child support matters;
 - j. All venue and filing requirements including, but not limited to, C.G.S. §§ 51-345, 51-348, 51-352 and 51-353, provided in Chapter 890 of the General Statutes;
 - k. The times and places for the sitting of the Superior Court provided in C.G.S. § 51-181;
 - l. The notice of sessions provided in C.G.S. § 51-182;
3. **Further Clarification of Limits on Restaurants, Bars and Private Clubs.** Effective at 12:00 p.m. on March 20, 2020, Executive Order 7D, which, among other things, restricted sales of alcoholic beverages by certain licensees, is modified as follows: Any business with an active restaurant, café or tavern liquor permit issued by the Department of Consumer Protection shall be permitted to sell sealed containers of alcoholic liquor for pick up at such restaurant, café or tavern under the following conditions: (i) the sale shall accompany a pick-up order of food prepared on the premises; (ii) the type of alcoholic liquor sold for off-premise consumption shall be the same as what the permit type would have permitted for on-premise consumption prior to Executive Order 7D, and (iii) the hours of such sales that include alcoholic liquor as part of the take-out order shall be the same as those for a package store.

Delivery of alcoholic liquor by licensees with these permit types is not permitted. In addition:

- a. Any business whose liquor permit allows for the manufacture of alcoholic liquor, in addition to sales for on-premise and off-premise consumption, shall be permitted to sell sealed bottles of alcoholic liquor for off-premise consumption in a manner consistent with their manufacturer permit. Delivery of alcoholic liquor by these permit types is not permitted.
- b. The Commissioner of Consumer Protection may issue any implementing orders and guidance that she deems necessary to implement this order.

4. **Restriction on Operation of Barbershops, Hair Salons, Tattoo or Piercing Parlors and Related Public Businesses.** Throughout the State, effective at 8:00 p.m. on March 20, 2020, the rendering of services by barbers, hairdressers and cosmeticians, nail technicians, electrologists, estheticians, eyelash technicians, and tattoo and piercing providers is prohibited in all public settings including, but not limited to, barbershops, beauty shops, hairdressing salons, nail salons, spas, kiosks, and tattoo or piercing establishments. The Commissioner of Public Health may issue any order she deems necessary to implement or modify such prohibition without further order from me.

5. **Flexibility for Medicaid Enrolled Providers and In-Network Providers for Commercial Fully Insured Health Insurance to Perform Telehealth Through Additional Methods.** The provisions of Section 19a-906 of the Connecticut General Statutes and any associated regulations, rules and policies regarding the delivery of telehealth are modified or suspended as follows:

- a. Subsection (a)(11)'s definition of "telehealth" is modified such that for telehealth providers that are Medicaid enrolled providers providing covered telehealth services to established patients who are Medicaid recipients, or telehealth providers that are in-network providers for commercial fully insured health insurance providing covered telehealth services to patients with whom there is an existing provider-patient relationship, these providers may engage in telehealth through the use of audio-only telephone;
- b. Subsection (a)(12)'s requirements for the licensure, certification or registration of telehealth providers shall be suspended for such telehealth providers that are Medicaid enrolled providers or in-network providers for commercial fully insured health insurance providing telehealth services to patients, in accordance with any related orders issued by the Commissioner of Public Health pursuant to her established authority as a result of this declared public health and civil preparedness

emergency and in accordance with Sections 19a-131a, 19a-131j and 28-9.

- c. Subsection (f)'s requirements that the provision of telehealth services and health records maintained and disclosed as part of a telehealth interaction shall comply with the provisions of the Health Insurance Portability and Accountability Act of 1996 P.L. 104-191, as amended from time to time (HIPAA), is modified to permit telehealth providers that are Medicaid enrolled providers or in-network providers for commercial fully insured health insurance providing telehealth services to patients to utilize additional information and communication technologies consistent and in accordance with any direction, modification or revision of requirements for HIPAA compliance as related to telehealth remote communications as directed by the United States Department of Health and Human Services, Office of Civil Rights during the COVID-19 pandemic.
 - d. Notwithstanding paragraphs a through c herein, a provider who elects to provide telehealth services for a patient who is not a Medicaid beneficiary or covered by a fully-insured commercial plan, may engage in "telehealth" services as defined in such paragraphs for such patient, provided that any provider engaging in telehealth services under this section must, prior to engaging in such services, determine whether a patient is covered by a health plan other than Medicaid or a fully-insured commercial plan, and whether such plan provides coverage for such telehealth services. A provider who receives payment under such health plan shall not bill a patient for any additional charges beyond the reimbursement received under such health plan. A provider who determines that payment is not available under another such health plan or who determines a patient is uninsured, shall accept as reimbursement for that service as payment in full, the amount that Medicare reimburses for such service, provided that if the provider determines that the patient is uninsured or otherwise unable to pay for such services, the provider shall offer financial assistance, if such provider is otherwise required to provide financial assistance under state or federal law.
 - e. Any related regulatory requirement that such telehealth services be provided from a provider's licensed facility is hereby waived.
6. **Temporary Suspension of In-Person Investigative Visits Regarding Reports of Elder Abuse.** Section 17b-452 is modified to provide the Commissioner of Social Services with authority to waive the required in-person visit to an elderly person in connection with investigation of a report of suspected abuse, neglect, exploitation or abandonment, or a need for protective

services, and, if possible and appropriate, use alternative means to conduct such in-person visit.

7. **Extension of Time for Disclosure of Investigation Results.** Section 17b-452 of the Connecticut General Statutes is modified to provide the Commissioner of Social Services with authority to extend by up to ninety (90) days the requirement that the Commissioner of Social Services, not later than forty-five (45) days after completing an investigation, disclose, in general terms, the result of the investigation to the person or persons who reported the suspected abuse, neglect, exploitation or abandonment or a need for protective services.

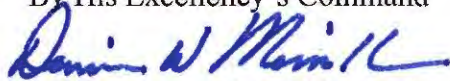
Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified by me.

Dated at Hartford, Connecticut, this 19th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 9

Lamont Executive Order No. 7H

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7H

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – RESTRICTIONS ON WORKPLACES FOR NON-ESSENTIAL
BUSINESSES, COORDINATED RESPONSE EFFORT**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, suspended fingerprinting availability to that for critical requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, my Executive Order No. 7G, dated March 19, 2020, ordered the postponement of the presidential primary, suspended non-critical court operations, expanded the availability of telehealth services, and enacted additional public health measures;

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of people and social distancing in smaller gatherings; and

WHEREAS, to facilitate the most timely and effective response to the COVID-19 emergency disaster, it is critical for the State of Connecticut to act quickly to gather, coordinate, and deploy goods, services, professionals, and volunteers of all kinds;

WHEREAS, in a short period of time, COVID-19 has rapidly spread throughout Connecticut, necessitating updated and more stringent guidance from federal, state, and local officials; and

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Restrictions on Workplaces for Non-Essential Businesses.** Effective on March 23, 2020 at 8:00 p.m. and through April 22, 2020, unless earlier modified, extended, or terminated by me, all businesses and not-for-profit entities in the state shall employ, to the maximum extent possible, any telecommuting or work from home procedures that they can safely employ. Non-essential businesses or not-for-profit entities shall reduce their in-person

workforces at any workplace locations by 100% not later than March 23, 2020 at 8:00 p.m. Any essential business or entity providing essential goods, services or functions shall not be subject to these in-person restrictions.

Not later than 8 p.m. on March 22, 2020, the Department of Economic and Community Development ("DECD") shall issue lawfully binding guidance about which businesses are essential. Those business shall include, but not be limited to, the 16 critical infrastructure sectors as defined by the Department of Homeland Security and available at <https://www.cisa.gov/critical-infrastructure-sectors>, essential health care operations including hospitals, clinics, dentists, pharmacies, elder care and home health care workers, companies and institutions involved in the research and development, manufacture, distribution, warehousing, and supplying of pharmaceuticals, biotechnology therapies, health care data, consumer health products, medical devices, diagnostics, equipment, services and any other healthcare related supplies or services; essential infrastructure, including utilities, wastewater and drinking water, telecommunications, airports and transportation infrastructure; manufacturing, including food processing, pharmaceuticals, and industries supporting the essential services required to meet national security commitments to the federal government and U.S. Military; the defense industrial base, including aerospace, mechanical and software engineers, manufacturing/production workers, aircraft and weapon system mechanics and maintainers; essential retail, including grocery stores and big-box stores or wholesale clubs, provided they also sell groceries; pharmacies, gas stations and convenience stores; food and beverage retailers (including liquor/package stores and manufacturer permittees) and restaurants, provided they comply with previous and future executive orders issued during the existing declared public health and civil preparedness emergency; essential services including trash and recycling collection, hauling, and processing, mail and shipping services; news media; legal and accounting services; banks, insurance companies, check cashing services, and other financial institutions; providers of basic necessities to economically disadvantaged populations; construction; vendors of essential services and goods necessary to maintain the safety, sanitation and essential operations of residences or other essential businesses, including pest control and landscaping services; vendors that provide essential services or products, including logistics and technology support, child care and services needed to ensure the continuing operation of government agencies and the provision of goods, services or functions necessary for the health, safety and welfare of the public.

Any other business may be deemed essential after requesting an opinion from DECD, which shall review and grant such request, should it determine that it is in the best interest of the state to have the workforce continue at full capacity to properly respond to this emergency.

2. **Coordinated Response Effort.** Effective immediately and for the duration of the public health and civil preparedness emergency, notwithstanding Section 28-8a of the Connecticut General Statutes, in order to ensure the coordinated, clear and expeditious execution of civil preparedness functions for the protection of the public health, and pursuant to my emergency powers, including but not limited to Section 28-9(b) of the Connecticut General Statutes, no municipal chief executive officer or designee may enact or enforce any order that conflicts with any provision of any of my Executive Orders or an order issued by an executive agency pursuant to the existing public health and civil preparedness emergency, or issue any shelter-in-place order or order prohibiting travel, unless they first seek and receive written permission from the Department of Emergency Services and Public Protection. The provisions of this order shall not be deemed to invalidate any order previously issued by a municipal chief executive or designee or preclude a municipality from enforcing any existing local rule or ordinance that does not conflict with any executive order issued pursuant to my March 10, 2020 declaration of public health and civil preparedness emergency.

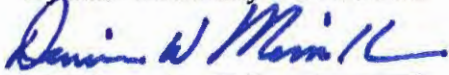
Dated at Hartford, Connecticut, this 20th day of March, 2020.



Ned Lamont
Governor



By His Excellency's Command



Denise W. Merrill
Secretary of the State

Exhibit 10

Lamont Executive Order No. 7I

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7I

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – MUNICIPAL OPERATIONS AND AVAILABILITY OF
ASSISTANCE AND HEALTHCARE**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, suspended fingerprinting availability to that for critical requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, my Executive Order No. 7G, dated March 19, 2020, ordered the postponement of the presidential primary, suspended non-critical court operations, expanded the availability of telehealth services, and enacted additional public health measures; and

WHEREAS, my Executive Order No. 7H, dated March 20, 2020, limited the workplace operations of non-essential businesses, and on-profit, created a process to designate those that are essential, and provided for consistency across the state in governmental response to the COVID-19 pandemic; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, if COVID-10 is transmitted to an elderly person, there is a high risk of serious illness or mortality; and

WHEREAS, to ensure that the pandemic or other emergency does not interfere with the continuity of essential safety net programs, and because the Department of Social Services must be able to ensure ongoing delivery of basic assistance; and

WHEREAS, the state wishes to ensure that children, seniors, persons with disabilities and other low-income individuals can access their prescription medications covered by Medicaid and Medicare and are able to do so without interruption or delay; and

WHEREAS, the HUSKY B program is Connecticut's Children's Health Insurance Program that provides health care coverage to approximately 20,000 low- and moderate-income children and the state wishes to ensure that the pandemic does not interfere with these children's access to medical care, including physician visits and medications; and

WHEREAS, Sections 10-234aa through 10-234dd of the Connecticut General Statutes impose certain requirements that vendors providing certain data and technology services agree in writing to privacy protections for student data; and

WHEREAS, the cancellation of classes has created an urgent need to continue opportunities for students throughout the state, including through the use of technology, but the urgency of such need precludes the ability to draft, review, and approve certain written contracts; and

WHEREAS, the Commissioner of Education has alternative means to assure that student data is afforded privacy protections, including federal student privacy laws, without the use of a written contract; and

WHEREAS, Sections 17a-10a and 17a-16 of the Connecticut General Statutes require the Commissioner of the Department of Children and Families to provide visitation with children in facilities that treat children or youth with psychiatric disabilities and with children in such facilities to protect the health and safety of the children and staff; and

WHEREAS, Sections 17a-76 and 17a-77 of the Connecticut General Statutes require the filing of an application for commitment of a mentally ill child with the Probate Court and a hearing on the application to be held within ten days of the application being filed; and

WHEREAS, Section 20-616 (b) of the Connecticut General Statutes permits a pharmacist to exercise his or her professional judgment in refilling a prescription that is not for a controlled drug, for an up to seventy-two hour supply, without the authorization of the prescribing practitioner, provided (1) the pharmacist is unable to contact such practitioner after reasonable effort, (2) failure to refill the prescription might result in an interruption of a therapeutic regimen or create patient suffering, and (3) the pharmacist informs the patient or representative of the patient at the time of dispensing that the refill is being provided without such authorization and informs the practitioner at the earliest reasonable time that authorization of the practitioner is required for future refills; and

WHEREAS, prescribing practitioners may have limited availability due to COVID-19 to provide a written, oral or electronically transmitted order for the refill of a non-controlled substance within seventy-two hours following a refill issued by pharmacist pursuant to 20-616(b); and

WHEREAS, the Connecticut Business Corporation Act, Sections 33-600 through 33-998, inclusive, of the Connecticut General Statutes (the "Act"), requires corporations incorporated under the laws of the State of Connecticut to hold annual shareholders' meetings at a "place" stated in or fixed in accordance with the bylaws of such corporation or at the corporation's principal office, and precludes the ability to hold such meetings solely by means of remote participation without a place; and

WHEREAS, for the protection of the public health, Connecticut corporations should be granted the option to hold shareholders' meetings solely by remote participation, without requiring any representatives of the corporation or any shareholders to gather in a place; and

WHEREAS, many other states, including the State of Delaware, permit annual shareholders' meetings to be held solely by remote participation without a place; and

WHEREAS, it is in the best interest of the State of Connecticut and the shareholders of Connecticut corporations to have the option to participate in the annual meeting of shareholders solely by remote participation without a place; and

WHEREAS, Sections 10-261a(c), 10-261b, 12-19a, 12-20b, 12-63c, 12-110, 12-111, 12-117, and 12-120, of the Connecticut General Statutes and Section 12-2b-11 of the Regulations of Connecticut State Agencies require municipalities to complete specific duties, including but not limited to Net Grand Lists, Assessor Reports, Board of Assessment Appeals applications and decisions, Grand Lists of Taxable and Tax-Exempt Property, Sales Data Reports, and State Owned, College and Hospital Claim Payment in Lieu of Taxes (PILOT) reimbursement claims that require in-person meetings, application filings, and the filing of reports based on completion of these duties, as well as auditing and review by OPM thereafter, which are likely to be delayed due to closures and staffing shortages arising from the public health and civil preparedness emergency declared to respond to COVID-19; and

WHEREAS, Sections 12-110, 12-111, 12-117 and 12-170aa of the Connecticut General Statutes require the in-person filing of applications that create increased risk of transmission of COVID-19; and

WHEREAS, Section 85 of Public Act 20-1 imposes new reporting requirements, including specific property data for tax exemptions under Subsections 60, 70, 72 and 76 of Section 12-81 by May 1, 2020; and

WHEREAS, Sections 14, 97a, 98, 103, 124, 126, 246, 368k, 440, 444, 446i of the Connecticut General Statutes require persons to participate in the process of various municipal decisions that require in-person, face-to-face interactions, meetings, filings, or service of process between various persons, and such activities are likely to be delayed or compromised due to closures and related staffing or quorum shortages arising from the public health and civil preparedness emergency declared to respond to COVID-19; and

WHEREAS, the in-person contact required for the aforementioned activities create an increased risk of transmission of COVID-19; and

WHEREAS, it is in the public interest to continue municipal functions and decision-making, including budgetary and land use decisions, to the extent feasible without in-person, face-to-face interactions; and

WHEREAS, upon a proclamation that a civil preparedness emergency exists, section 28-9(b) of the Connecticut General Statutes authorizes the modification or suspension in whole or in part by

executive order of any statute or regulation or requirement or part thereof that conflicts with the efficient and expeditious execution of civil preparedness functions or the protection of public health;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Suspension of requirements that public assistance eligibility reinvestigations be conducted at least every 12 or 24 months.** Section 17b-104 and any implementing regulations, rules, or policies are modified to provide the Commissioner of Social Services, to the extent permitted by federal law, the discretionary authority to suspend or extend the time frames for establishing eligibility reinvestigations for public assistance programs, and issue any required implementing orders she deems necessary.
2. **Suspension of copayments for full benefit dually eligible Medicare Part D beneficiaries.** Section 17b-265d(c) is modified to eliminate the requirement that full benefit dually eligible beneficiaries are responsible for copayments of up to \$17.00 per month (aggregate for all prescriptions) for their medications covered by Medicare Part D, and authorize the Department of Social Services to cover the copayment amounts in full, after any other insurer has paid, during the public health emergency. The Commissioner of Social Services may issue any implementing order or modification to the requirements of Section 17b-265d(c) that she deems necessary consistent with this order.
3. **Suspension of copayments for HUSKY B clients.** Section 17b-295(a) is suspended to eliminate HUSKY B copayments and authorize the Department of Social Services to reimburse providers for the full reimbursement amount for services subject to the copayment, including the copayment amount. This suspension applies to copayments only and does not apply to other forms of HUSKY B cost sharing; HUSKY B families will continue to be responsible for monthly premiums and co-insurance and allowances for dental services. The Commissioner of Social Services may issue any implementing order or modification to the requirements of Section 17b-295(a) that she deems necessary consistent with this order.
4. **Suspension of limitations on refills of non-maintenance medications for HUSKY beneficiaries.** Section 17-134d of the Connecticut General Statutes and any implementing regulations, rules or policies are modified to authorize the Commissioner of Social Services to reimburse providers for supplies of both maintenance and non-maintenance medications for a period of up to ninety (90) days, regardless of the quantity of the supply, and to issue any necessary implementing order. This modification does not apply to controlled substances.

5. **Flexibility related to the Student Data Privacy Act.** For the duration of the period of school closure or class cancellation pursuant to any Executive Order or order of the Commissioner of Education, unless modified, extended, or terminated by me, or, if applicable, the Commissioner, the provisions of Sections 10-234aa through 10-234dd, inclusive, and any associated regulations, rules, and policies regarding contracts between boards of education and contractors regarding contracting, sharing, or providing access to student information, are modified to authorize the Commissioner of Education to temporarily waive any requirements contained therein as he deems necessary in order to provide quality online educational opportunities to students during the period in which schools classes are canceled due to the COVID-19 pandemic.
6. **Limits on Visitation with Children Placed in the Care and Custody of the Department of Children and Families.** Notwithstanding Section 17a-10a of the Connecticut General Statutes or any other statute, regulation, local rule or ordinance or provision of law, the Commissioner of the Department of Children and Families is authorized to issue any and all orders restricting visitation with children placed in the care and custody of the commissioner pursuant to an order of temporary custody or an order of commitment, that the Commissioner deems necessary to protect the health and welfare of such children and staff.
7. **Limits on Visitors to Facilities That Treat Children or Youth with Psychiatric Disabilities.** Notwithstanding Section 17a-16 of the Connecticut General Statutes or any other statute, regulation, local rule or ordinance or provision of law, the Commissioner of the Department of Children and Families and the head of a facility or institution under the Commissioner's jurisdiction are authorized to issue any and all orders restricting entrance into facilities, as defined in Section 17a-32 of the Connecticut General Statutes, including the Albert J. Solnit Children's Center - South Campus, and the Albert J. Solnit Children's Center - North Campus, that the Commissioner deems necessary to protect the health and welfare of patients, residents and staff.
8. **Waiver of In-person Service, Screening and Hearing Requirements for Facilities that Have Limited Visitor Access to Protect Public Health.** Notwithstanding sections 17a-76 and 17a-77 of the Connecticut General Statutes, (1) any requirement for personal service is waived as it relates to any child or youth currently located in a facility operated by the Department of Children and Families that has restricted visitor access under an emergency order issued by a state agency pursuant to an Executive Order, and service may be made by serving an administrator or the administrator's designee provided that the administrator or administrator's designee shall sign a certification, provided by the process server, that the named child or youth is currently

located in the facility and that the administrator or administrator's designee will personally serve the named party; and (2) any requirement for an in-person meeting, hearing, or screening is waived and meetings, hearings, or screenings may take place by any other method that allows for the participation of the interested parties. For the purposes of this order, "administrator" shall mean the facility director or such other person with administrative oversight of the facility who is on site at the time of service.

9. **Pharmacist Discretion in Refilling Certain Prescriptions for Longer Periods.** Section 20-616(b) of the Connecticut General Statutes are modified to permit a pharmacist to exercise his or her professional judgment in refilling a prescription that is not for a controlled drug, as defined in section 21a-240, for a quantity of drug not to exceed a thirty-day supply based on the same criteria set forth in such section for a refill that was not to exceed a seventy-two hour supply.
10. **Commissioner Authority to Modify Pharmacy Operation Regulations.** Section 20-576-59 of the Regulations of Connecticut State Agencies is modified to permit the Commissioner of the Department of Consumer Protection, rather than the Commission of Pharmacy, to grant a waiver or modification of any regulation pertaining to the operation of a pharmacy utilizing the same criteria that would otherwise be considered by the Commission of Pharmacy.
11. **Suspension of In-Person Shareholder Meeting Requirements.** Section 33-703 of the Connecticut General Statutes is modified to provide a new clause (c), to read in its entirety as follows: “(c) The board of directors may determine that any meeting of shareholders shall not be held at any place and shall instead be held solely by means of remote communication, but only if the corporation implements the measures specified in subsection (b) of this Section 33-703. The board of directors shall make the list of shareholders entitled to vote available for inspection by any shareholder beginning two business days after notice of the meeting is given for which the list was prepared and continuing through the meeting on a reasonably accessible electronic network, provided that the information required to access such list is provided with the notice of the meeting. The corporation may take reasonable steps to ensure that such information is available only to shareholders of the corporation. Any statute, regulation or requirement, or part thereof, or any bylaw of the corporation, inconsistent with this clause (c) shall be inoperative for the effective period of this Section 33-703(c), and any such meeting shall be deemed validly held if notice of the meeting is given during the effective period of this Section 33-703(c).”

12. Extension of Budget Adoption Deadlines - Additional Municipal Bodies.

For purposes of the provisions set forth under Executive Order 7C, paragraph 5, regarding “Extension of Municipal Budget Adoption Deadlines,” as well as for the provisions set forth in this order, the term “municipal” or “municipality” shall include all municipalities and quasi-municipal corporations, whether created by statute, ordinance, charter, legislative or special act, including but not limited to any town, city or borough, whether consolidated or unconsolidated, any village, school, sewer, fire, lighting, special services or special taxing districts, beach or improvement association, any regional water or resource recovery authority or any other political subdivision of the state or of any municipality having the power to make appropriations or to levy assessments or taxes.

13. Suspension of In-Person Budget Adoption Requirements for Municipalities.

Notwithstanding any contrary provision of the Connecticut General Statutes, including Title 7, or any special act, municipal charter or ordinance that conflicts with this order, the legislative body of a municipality or, in a municipality where the legislative body is a town meeting, the board of selectmen, shall authorize the budget-making authority within said municipality to adopt a budget for the July 1, 2020 – June 30, 2021 fiscal year and to set a mill rate sufficient, in addition to the other estimated yearly income of such town and in addition to such revenue surplus, if any, as may be appropriated, not only to pay the expenses of the municipality for said fiscal year, but also to absorb the revenue deficit of such town, if any, at the beginning of said fiscal year without holding votes required by charter or without complying with any in-person budget adoption requirements, including but not limited to, annual town meetings requiring votes, referendum, and special town meetings. In so acting, the budget-making authority of the municipality shall comply with public meeting requirements consistent with requirements set forth in Executive Order 7B and shall thereby take all reasonable steps to publicize the draft municipal budget for said fiscal year and to receive public comment thereon, including but not limited to publishing draft budgets on the website and providing an email address or other means for the public to submit timely comments on the proposed budget.

14. Suspension of In-Person Budget Adoption Requirements for Regional Boards of Education.

Notwithstanding any contrary provision of the Connecticut General Statutes, including Title 10, or any special act, regional plan, municipal charter or ordinance that conflicts with this order, any regional board of education shall adopt a budget for the July 1, 2020 – June 30, 2021 fiscal year which otherwise complies with the requirements of Section 10-51 of the Connecticut General Statutes without complying with any in-person budget adoption requirements, including but not limited, annual district budget

meetings requiring votes, referendum, and special district meetings. In so acting, the regional board of education shall comply with public meeting requirements consistent with requirements set forth in Executive Order 7B and take all reasonable steps to publicize the proposed budget for said fiscal year and to receive public comment thereon, including but not limited to publishing draft budgets on the website and providing an email address or other means for the public to submit timely comments on the proposed budget.

15. **Extension of Municipal Deadlines and Waiver of Penalties Related to Municipal Planning, Assessment and Taxation.** The deadlines set forth under Sections 10-261a(c), 12-63c, 12-110, 12-111, 12-117, and 12-120, of the Connecticut General Statutes and Section 12-2b-11 of the Regulations of Connecticut State Agencies, for Net Grand Lists, Assessor Reports, Board of Assessment Appeals applications and decisions, Grand List of Taxable and Tax-Exempt Property, Sales Data Reports, and State Owned, College and Hospital Claim Payment in Lieu of Taxes (PILOT) reimbursement claims are extended without penalty. Additionally, the penalty provisions set forth under Sections 10-261b, 12-19a, and 12-20b of the Connecticut General Statutes are suspended.
16. **Suspension of In-Person Filing Requirements Related to Municipal Planning, Assessment and Taxation.** The requirement under Sections 12-110, 12-111, 12-117 and 12-170aa of the Connecticut General Statutes for a taxpayer to appear in person are suspended to the extent necessary to permit any public agency to meet and take such actions authorized by law without permitting or requiring in-person participation in such meetings or filings, and to hold such meetings or obtain necessary information remotely by conference call, videoconference, electronic communication, or other technology, consistent with requirements set forth in Executive Order 7B.
17. **Suspension of Deadlines and Modification of Public Hearing and Appeals Requirements for Assessment and Taxation.** The appeals deadlines set forth under Section 12-19b and 12-20b for the valuation, revaluation, and appeals related to land and buildings for grants and property of private colleges and general hospitals for purposes of state grants in lieu of taxes are suspended.
18. **Extension of New Reporting Requirements on Property.** The reporting requirements set forth under Section 85 of Public Act 20-1 requiring additional specific property data for tax exemptions under Subsections 60, 70, 72 and 76 of Section 12-81 are suspended.
19. **Suspension, Modification and Clarification of Certain Municipal Procedural Requirements and Time Limitations Regarding Notice,**

Commencement and Holding of Public Hearings, Decisions, and Appeals.

In connection with Executive Order 7B (1), dated March 14, 2020, and in order to further prevent the potential health threat and spread of COVID-19 to any person who might otherwise participate in the process of submitting, reviewing, hearing, discussing, deciding, or appealing any municipal decision or action regarding any petition, application or other proposal, or in the adoption or amendment of any municipal plan, regulations or ordinances, under specific Sections of Connecticut General Statutes Chapters 14, 97a, 98, 103, 124, 126, 246, 368k, 440, 444, 446i, and the repealed Section 14-55, if and to the extent such repealed section is revived by current judicial action, and any related special act(s), and municipal charter, ordinance, resolution, or regulation (all such state and municipal laws and regulations being, collectively, the “Covered Laws”); any provision of such Covered Laws that establish procedural requirements for municipal decisions and that conflict with this order, is suspended and modified, as enumerated below, and as hereafter provided:

- a. Any time deadlines contained in the Covered Laws that may pass or expire during the public health and civil preparedness emergency declared by me on March 10, 2020 (“state of emergency”) are extended by an additional 90 days for any and all of the following circumstances: the commencement or completion of any public hearing; the rendering of any decision required to be made within a particular period; and the submission or reporting by any municipality to any agency or quasi-public agency of the State; provided, however, that such preceding 90-day extension shall not apply to any time extensions that are already expressly allowed by the Covered Laws, meaning that, for example, a decision for which the statute already allows up to a total of 65 days of extension (such as site plan decisions) may be further extended by no more than an additional 90 days, for a total of 155 extension days (in this example); and further provided that each individual petition, application, or other proposal, or adoption or amendment of any municipal plan, regulations, or ordinance shall only obtain one 90-day extension period in total, which may be allocated, in part, by an applicant or municipality or agency, for each deadline period, and not multiple 90-day extensions for each time deadline related thereto.
- b. If the 90-day demolition delay required by Section 7-147j would commence or expire during the state of emergency, such period of delay shall be extended for 90 days.

- c. Any Covered Law requiring a municipality or agency to publish any notice or notices in a newspaper of general or substantial circulation is suspended and modified to allow a single notice to be published electronically on a municipality's or agency's website, provided the earlier deadline required for posting notice by the Covered Law is maintained for the electronic posting, and such posting shall remain visible on the municipality's or agency's website until completion of the action, meeting, or proceeding for which such notice is provided, and for any notice of decision, for the duration of the applicable appeal period provided by the Covered Laws.
- d. Any Covered Law requiring any notice to be filed in the office of any municipal clerk, including any town, city, borough, or district clerk, is suspended and modified to allow said notice to be posted electronically on a municipality's website, provided the deadline required for posting remains unchanged, and such posting shall remain visible on the municipality's or agency's web site until the completion of the action, meeting, or proceeding for which such notice is provided, and for any notice of decision, for the duration of the applicable appeal period provided by the Covered Laws.
- e. Any Covered Law requiring a physical sign to be posted in relation to any zoning, inland wetlands, planning, or historic district petition, application or proposal, may be satisfied by the electronic posting on a municipality's website described in paragraph (c) above.
- f. Any Covered Law requiring direct or personal notice by mail from a municipality, agency or applicant to any other person, agency, municipal clerk (including any town, city, borough, or district clerk), municipality, utility company or water company regarding the filing or pendency of any petition, application, or other proposal is suspended and modified to allow said notice requirement to be satisfied by electronic mail notification, if electronic mailing addresses are known or reasonably available for the party to be noticed, provided the same deadline for publication of the electronic notice is met; provided that if electronic mailing addresses are not known or reasonably available, said notice requirement is satisfied by: (i) the posting of a physical, weatherproof sign of at least two feet by three feet in area, in a prominent location on the parcel of land which is

the subject of any petition, application, or proposal, specifying the existence of such petition, application, or proposal, and information regarding the date, time, and location of any hearings (including remote access details) related thereto, provided that such sign shall be posted for the duration of the period for which notice is otherwise required by the Covered Laws; or (ii) the mailing of letters (via regular U.S. mail) to addressees provided by a municipality or agency, or agent thereof, where the noticing party has relied in good faith on the accuracy and completion of said list of addressees.

- g. Any Covered Law prescribing the procedure for any petition, including petition of a decision, to an agency or legislative body, is suspended and modified to allow such petition to be signed electronically (including by pdf or other imaging technology or compilation of emails or other electronic communication) and to allow applicable notice requirements to be fully satisfied by electronic mail notice of such petition on the designated entity. The time period to commence and submit said petition shall remain unchanged.
- h. Any Covered Law prescribing the procedure for commencement of an appeal of a decision to the Superior Court and associated service of process is suspended and modified to permit any such appeal to be commenced by a proper officer by electronic mail notice on the designated municipal clerk (including any town, city, borough, or district clerk). The time period to commence said appeal shall remain unchanged. Municipalities shall clearly post the email address to be used for the electronic service on their website. Notwithstanding C.G.S. Section 6-32, the damages clauses which may result from a state marshal's failure to duly comply with any service requirements of section 6-32(a), to the extent such requirements conflict with this Section 19 of this order, are suspended.
- i. Any Covered Law prescribing the procedure for commencement of an appeal of a decision by a zoning enforcement officer or an agent for an inland wetland agency is suspended and modified to permit any such appeal to be commenced by regular mail or by electronic mail notice to the zoning commission, zoning enforcement officer, zoning board of appeals or inland wetlands agency, as appropriate. The time period to commence said appeal shall remain unchanged.

- j. The suspensions and modifications specified in this, Section 19 of this order, are hereby permitted, provided, however, that: (1) the municipality, within a reasonable time after the reopening of the relevant office, include printed or electronic confirmations of all modifications, extensions, notices, and decisions in the permanent office records, (2) any document required by the Covered Laws to be recorded or filed in the town, borough, district or city clerk records be recorded or filed, as applicable, within a reasonable time thereafter; and (3) any municipality may, by declaration of head of an agency accepting or administering applications, waive any rules, regulations, or policies related to any requirement that applications to such municipal agency be submitted in paper copy or in duplicate.

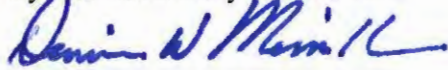
Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 21st day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 11

Lamont Executive Order No. 7J

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7J

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – CLARIFYING EO NO. 7H REGARDING OPERATIONS AT NON-
ESSENTIAL BUSINESSES AND PROVIDING FOR RAPID STATE GOVERNMENT
EMERGENCY RESPONSE**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, suspended fingerprinting availability to that for critical requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, my Executive Order No. 7G, dated March 19, 2020, ordered the postponement of the presidential primary, suspended non-critical court operations, expanded the availability of telehealth services, and enacted additional public health measures; and

WHEREAS, my Executive Order No. 7H, dated March 20, 2020, limited the workplace operations of non-essential businesses, and on-profit, created a process to designate those that are essential, and provided for consistency across the state in governmental response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7I, dated March 21, 2020, among other things, granted various forms of financial relief to recipients of public health and economic assistance, enacted measures to protect the health of children in the care of the Department of Children and Families, and enacted a series of measures to allow municipalities and their administrative bodies to conduct essential business while reducing the risk of COVID-19 transmission; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, if COVID-10 is transmitted to an elderly person, there is a high risk of serious illness or mortality; and

WHEREAS, the availability of methadone for ongoing medication assisted treatment is critical for the treatment of patients by Methadone Maintenance Clinics;

WHEREAS the delivery of methadone take-home doses will allow for patients that are unable to travel to the facility an opportunity to receive their medication in their home and decrease the risk of transmission of COVID-19; and

WHEREAS, it is critical that fire service personnel in the midst of certification testing are able to to meet contractual, bylaw, and probationary requirements as mandated by their employers, and are able to perform their vital public safety role throughout this state of emergency; and

WHEREAS, Governor Rell's Executive Order No. 27, adopted and extended by Governor Malloy's Executive Order No. 3, restricts the rehiring of Temporary Worker Retirees (TWRs) to two calendar years; and

WHEREAS, Public Acts 3-01 and 03-2 prohibit the rehiring of any state employee who participated in the Early Retirement Incentive Program offered in 2003; and

WHEREAS, the COVID-19 pandemic has created staffing disruptions in state agencies and has also increased the need for services provided by state agencies, resulting in critical skills shortages in certain areas, including those related to healthcare and public safety; and

WHEREAS, people who have retired from state service already possess the requisite knowledge, experience and/or licenses and are willing to return to work on a temporary basis can help agencies mitigate the such staffing shortages; and

WHEREAS, during the current public health crisis, accommodations for safe and effective operations of state agencies and state employees and the clients of these agencies are rapidly changing and evolving; and

WHEREAS, during the current public health crisis, additional accommodations and facilities beyond what is currently available in Connecticut may be necessary to address the effects of COVID-19, including but not limited to housing, health care, and medical treatment; and

WHEREAS, it is imperative to the health and safety of the general public that the State of Connecticut is able to adapt to the current crisis on an emergency basis, and provide essential human services for the duration of this emergency; and

WHEREAS, it is critical to the protection of the public health and safety that the Department of Administrative Services and the agencies for which it provides real estate services be able to respond to these emergency circumstances as expeditiously as possible; and

WHEREAS, in order to effectively respond to and alleviate the effects of the emergency, certain statutorily mandated procedures for the leasing, assignment and use of real estate for state agencies, employees and the general public should be condensed and streamlined, to enable the State to enter into leases relating to emergency needs created by the COVID-19 crisis; and

WHEREAS, effective utilization of leased real estate may require the State to make certain minor capital improvements, or acquire furniture, fixtures and equipment; and

WHEREAS, non-essential retailers provide useful and necessary products and employ tens of thousands of people throughout the state, and with proper precautions, may be able to conduct limited operations without increasing the risk of transmission of COVID-19; and

WHEREAS, it is critical to the safety and recovery of non-essential businesses and nonprofit organizations that their buildings and grounds remain secure and in good working order and continue to receive and process mail and packages; and

WHEREAS, upon a proclamation that a civil preparedness emergency exists, section 28-9(b) of the Connecticut General Statutes authorizes the modification or suspension in whole or in part by executive order of any statute or regulation or requirement or part thereof that conflicts with the efficient and expeditious execution of civil preparedness functions or the protection of public health;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Clarification of Executive Order No. 7H Regarding Non-Essential Business Operations.** Executive Order No. 7H, dated March 20, 2020 is hereby amended to permit 1) non-essential retailers to be staffed on site, provided that they may only offer remote ordering (e.g. phone, internet, mail, dropbox) and delivery or curb-side pick-up, and 2) non-essential businesses and nonprofits to allow staff or third parties on site to the minimum extent necessary to provide security, maintenance, and receipt of mail and packages, or other services deemed essential in implementing guidance issued by the Department of Economic and Community Development.
2. **Extension of Time Period for Fire Service Personnel Examinations.** Section 7-323l-18a (d) (1) of the Regulations of Connecticut State Agencies is modified to authorize the Commissioner of Emergency Services and Public Protection to extend the time by which examination components for a given level of certification for fire-service personnel must be completed, by 90 days, provided that he is authorized, in his sole discretion, to revoke such extensions as he deems necessary to protect public safety, and to further extend such timeline as he deems necessary.
3. **Delivery of Methadone to Homebound Patients by Methadone Maintenance Clinics.** Section 21a-252 of the Connecticut General Statutes is modified to permit the delivery of take-home doses of methadone for the treatment of drug dependent patients who are determined to be unable to travel to the treatment facility due to COVID-19 or related concerns. The Commissioner of Consumer Protection may issue any implementing orders or guidance that she deems necessary to implement this order.

4. **Suspension of Rehiring Procedures and Restrictions on Temporary Worker Retirees (TWR).** In order to enable agencies to meet critical staffing needs caused by COVID-19 with skilled and experienced employees who require little to no additional training, Gov. Rell's Executive Order No. 37, Gov. Malloy's Executive Order No. 3, Section 6(b)(F) of Public Act 03-01 and Section 6(b)(G) of Public Act 03-02 are suspended to remove the two-year limitation TWRs and to authorize rehiring employees who participated in retirement incentive programs. Agencies shall expedite review and approval of any related extension or hiring requests.
5. **Modification of Real Property Statutes to Facilitate Leasing, Repairs, Alterations and Use of Real Property to Address the COVID-19 Emergency.** In accordance with the provisions of Section 28-9(b)(1) of the Connecticut General Statutes, the following statutes are modified as set forth herein to authorize the Secretary of the Office of Policy and Management or her designee, or the Commissioner of Administrative Services, as applicable, to take any action they deem necessary to expedite the leasing or use of real property by the State of Connecticut to respond to the COVID-19 emergency:
 - a. subsections (a), (k) and (o) of Section 4b-23 of the Connecticut General Statutes, which require agencies to submit requests for space for approval by the Secretary of the Office of Policy and Management; to obtain approval for any space that was not included in the state facilities plan, and require the approval of the Secretary of the Office of Policy and Management of all leases, lease renewals and holdover agreements proposed by the Commissioner of the Department of Administrative Services;
 - b. subsections (3) and (4) of Section 4-67g(f) of the Connecticut General Statutes, which requires the approval of the Secretary of the Office of Policy and Management prior to any use of state real property by an entity other than a state agency, or use of state real property by a state agency other than the state agency with custody and control over such state real property;
 - c. subsection (f) of section 4b-3 of the Connecticut General Statutes, as to that portion of the statute that requires the approval of the State Properties Review Board of real estate acquisitions, sales, leases and subleases proposed by the Commissioner of Administrative Services;
 - d. section 4b-29 of the Connecticut General Statutes, only as to that portion of the statute that requires the approval of the State Properties Review Board for the Commissioner of Administrative Services to order the assignment and removal of state agencies to and from real estate available

to the state, through ownership or lease, when he deems it necessary to provide space, facilities and necessary accommodations to meet the needs of any of such agencies and when such assignment or removal will be in the best interests of the state;

- e. section 4b-33 of the Connecticut General Statutes in its entirety, which requires any person, firm, partnership, association, corporation or other entity, seeking to enter into a lease or lease-purchase agreement with the state through the Commissioner of Administrative Services to file a sworn statement with said Commissioner disclosing the names of any persons having a financial interest in the property or premises involved, and which provides that failure to make such disclosure is punishable by a civil penalty;
- f. section 4b-34 of the Connecticut General Statutes in its entirety, which mandates advertising for leased space and notification to the Connecticut Association of Realtors of requirements for leased space by executive branch agencies;

6. State Contracting Statutes Modified to Facilitate Leasing, Repairs, Alterations and Use of Real Property to Address the COVID-19 Emergency. In accordance with the provisions of Section 28-9(b)(1) of the Connecticut General Statutes, the following statutes are modified as set forth herein to authorize the Secretary of the Office of Policy and Management or her designee, or the Commissioner of Administrative Services, as applicable, to take any action they deem necessary to expedite the state-wide property transfers, assignments of space and leasing or use of real property by the State of Connecticut to respond to the COVID-19 emergency:

- a. sections 4-252 and 9-612(f)(2)(E) of the Connecticut General Statutes and Governor Malloy's Executive Order 49, which require disclosure of certain gifts and campaign contributions by state contractors and prospective state contractors for state contracts over \$50,000;
- b. section 4e-70 of the Connecticut General Statutes, which requires state contractors to comply with certain confidentiality requirements;
- c. sections 4e-29 and 4e-30 of the Connecticut General Statutes, which require state contractors to permit certain audit and inspection activities by the State at the contractors' expense;
- d. section 4a-57 requiring competitive solicitations for all purchases and contracts for supplies, materials, equipment and contractual services, including, pursuant to section 4d-8, the purchasing, leasing and


contracting for information system and telecommunication system facilities, equipment and services; and

- e. section 4b-91 that sets forth the process for competitive solicitation for public works contracts.

- 7. **Approval for Transactions Covered by Sections 5 and 6 of This Order.** Department of Administrative Services shall submit all proposed real estate transactions subject to this order to the Deputy Secretary of the Office of Policy and Management or his/her designee for review and approval. The Deputy Secretary or his/her designee shall have one (1) calendar day to respond to any proposed transaction pursuant to this Order, after which it shall be deemed approved.

Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 22nd day of March, 2020.


Ned Lamont
Governor



By His Excellency's Command

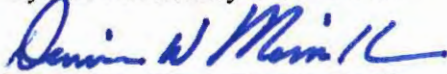

Denise W. Merrill
Secretary of the State

Exhibit 12

Lamont Executive Order No. 7K

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7K

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – REMOTE NOTARIZATION, SUSPENSION OF NON-CRITICAL
PROBATE AND WORKERS' COMPENSATION OPERATIONS, AND VARIOUS
PUBLIC HEALTH MEASURES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, limited fingerprinting availability to that for critical requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, my Executive Order No. 7G, dated March 19, 2020, ordered the postponement of the presidential primary, suspended non-critical court operations, expanded the availability of telehealth services, and enacted additional public health measures; and

WHEREAS, my Executive Order No. 7H, dated March 20, 2020, limited the workplace operations of non-essential businesses, and on-profit, created a process to designate those that are essential, and provided for consistency across the state in governmental response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7I, dated March 21, 2020, among other things, granted various forms of financial relief to recipients of public health and economic assistance, enacted measures to protect the health of children in the care of the Department of Children and Families, and enacted a series of measures to allow municipalities and their administrative bodies to conduct essential business while reducing the risk of COVID-19 transmission; and

WHEREAS, my Executive Order No. 7J, dated March 22, 2020, among other things, expanded the availability of temporary retired workers to fill critical staffing needs, provided authority to expedite acquisition and leasing of property to meet emergency response needs, and clarified restrictions on the operations of non-essential businesses; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, if COVID-10 is transmitted to an elderly person, there is a high risk of serious illness or mortality; and

WHEREAS, the existing COVID-19 pandemic and the accelerating spread of the disease in the State of Connecticut warrants the modification or suspension of certain public health statutes and regulations delineated below or any part thereof that conflict with the execution of civil preparedness functions or the protection of public health; and

WHEREAS, nursing homes and related facilities throughout Connecticut are experiencing staffing shortages as a result of the closure of schools and other effects of the COVID-19 pandemic, increasing the risk to patients, residents and staff; and

WHEREAS, certain documents require the in-person services of a Notary Public or Commissioner of the Superior Court and such interactions should be avoided to the maximum extent possible in order to promote social distancing and the mitigation of the spread of COVID-19; and

WHEREAS, in consultation with the Chairman of the Workers Compensation Commission, I have determined that there exists a compelling state interest that the Workers Compensation Commission conduct only essential business in order to minimize the spread of COVID-19; and

WHEREAS, in consultation with the Probate Court Administrator, I have determined that there exists a compelling state interest that the Probate Courts conduct only essential business in order to minimize the spread of COVID-19; and

WHEREAS, upon a proclamation that a civil preparedness emergency exists, section 28-9(b) of the Connecticut General Statutes authorizes the modification or suspension in whole or in part by executive order of any statute or regulation or requirement or part thereof that conflicts with the efficient and expeditious execution of civil preparedness functions or the protection of public health;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Suspension of Non-Critical Probate Court Operations and Associated Requirements.** Notwithstanding any provision of the Connecticut General Statutes, Probate Court Rules of Procedure or other provisions of law, I hereby suspend all statutory (1) reporting and filing requirements of the Office of the Probate Court Administrator concerning Probate Court operations; (2) Probate Court facility, location or venue requirements; (3) time requirements, statutes of limitation or other limitations or deadlines relating to service of process, court proceedings or court filings; and (4) all time requirements or deadlines related to the Probate Courts or their judicial officials to issue notices, hold court, hear matters and/or render decisions, including, but not limited to, the following chapters and sections of the Connecticut General Statutes:

- a. Chapter 801, relating to administrative procedures;

- b. Chapter 802b, relating to decedents' estates;
- c. Chapter 802c, relating to trusts;
- d. Chapter 802d, relating to Uniform Transfers to Minors Act;
- e. Chapter 802g, relating to disclaimer of property;
- f. Chapter 802h, relating to protected persons including minors, conservatorships and guardians of adults with intellectual disability;
- g. Chapter 803, relating to termination of parental rights and adoption;
- h. Chapter 815p, relating to Uniform Child Custody Jurisdiction Act;
- i. Sections 46b-150 through 46b-150i, relating to emancipation;
- j. Section 46b-172a, relating to paternity;
- k. Chapter 319, relating to commitment of mentally ill children;
- l. Chapter 319a, relating to Interstate Compact;
- m. Section 17a-274, relating to involuntary placement with DDS;
- n. Chapter 319i, relating to adults with psychiatric disabilities;
- o. Sections 17a-685 and 17a-686, relating to treatment of alcohol or drug dependent persons.

Nothing in this order shall preclude a Probate Court from holding hearings or rendering decisions in such time frames as the circumstances of the particular matter warrants and the interest of the parties requires.

2. **Suspension of Non-Critical Workers' Compensation Commission Operations and Associated Requirements.** Notwithstanding any provision of the Connecticut General Statutes or of any regulation, local rule or other provision of law, I hereby suspend all: (1) location or venue requirements; (2) time requirements, statutes of limitation or other limitations or deadlines relating to chapter 568 and the statutes enumerated in (b) below; and (3) all time requirements, or deadlines of the Workers' Compensation Commission relating to the Workers' Compensation Act and other statutory programs and schemes over which the Workers' Compensation Commission provides adjudication, dispute resolution, administrative oversight or support, including, but not limited to, the following:

- a. Chapter 568, relating to the Connecticut Workers' Compensation Act;
- b. Section 5-142, relating to disability compensation;
- c. Section 5-142a, relating to injury or death of sheriff;
- d. Section 5-145a, relating to hypertension or heart disease in certain university, aeronautics, State Capitol police, correction, mental health, criminal justice or hazardous duty personnel;
- e. Section 5-145b, relating to hypertension or heart disease in motor vehicle inspectors;
- f. Section 5-145c, relating to hypertension or heart disease in chief inspectors or inspectors in the division of criminal justice;
- g. Section 7-314a, relating to death, disability and injury benefits;

- h. Section 7-314b, relating to collection of workers' compensation benefits by volunteer firefighters and members of volunteer ambulance services;
 - i. Section 7-322a, relating to benefits for volunteers rendering service to another fire company;
 - j. Section 7-322b, relating to volunteers serving in municipality where employed;
 - k. Section 7-433c, relating to benefits for policemen or firemen due to hypertension or heart disease;
 - l. Section 28-14, relating to compensation for death, disability or injury;
 - m. Section 28-14a, relating to compensation of volunteers involved in homeland security drills;
 - n. Section 29-4a, relating to death or disability from hypertension or heart disease;
 - o. Section 31-40a, relating to reports of occupational diseases;
 - p. Section 31-40v, relating to the establishment of safety and health committees;
 - q. Section 31-283a, relating to rehabilitation programs.
3. **Remote Notarization.** Effective immediately and through June 23, 2020, unless modified, extended or terminated by me, all relevant state laws and regulations are hereby modified to permit any notarial act that is required under Connecticut law to be performed using an electronic device or process that allows a notary public commissioned by the Connecticut Secretary of the State pursuant to section 3-94b of the Connecticut General Statutes ("Notary Public") or a Commissioner of the Superior Court as defined by section 51-85 of the Connecticut General Statutes ("Commissioner") and a remotely located individual to communicate with each other simultaneously by sight and sound ("Communication Technology"), provided that the following conditions are met:
- a. The person seeking the notarial act ("Signatory") from a Notary Public or Commissioner, if not personally known to the Notary Public or Commissioner, shall present satisfactory evidence of identity, as defined by subsection 10 of section 3-94a of the General Statutes, while connected to the Communication Technology, not merely transmit it prior to or after the transaction;
 - b. The Communication Technology must be capable of recording the complete notarial act and such recording shall be made and retained by the Notary Public or Commissioner for a period of not less than ten (10) years;
 - c. The Signatory must affirmatively represent via the Communication Technology that he or she is physically situated in the State of Connecticut;

- d. The Signatory must transmit by fax or electronic means a legible copy of the signed document directly to the Notary Public or Commissioner on the same date it was executed;
- e. The Notary Public or Commissioner may notarize the transmitted copy of the document and transmit the same back to the Signatory by fax or electronic means;
- f. The Notary Public or Commissioner may repeat the notarization of the original signed document as of the date of execution provided the Notary Public or Commissioner receives such original signed document, together with the electronically notarized copy, within thirty days after the date of execution;
- g. Notwithstanding the foregoing, only an attorney admitted to practice law in the State of Connecticut and in good standing may remotely administer a self-proving affidavit to a Last Will and Testament pursuant to section 45a-285 of the General Statutes or conduct a real estate closing as required by Public Act 19-88.

4. **Suspension or Modification of Regulatory Requirements to Protect Public Health and Safety.** Notwithstanding Sections 4-168 to 4-174, inclusive, of the Connecticut General Statutes, the Commissioner of Public Health may temporarily waive, modify or suspend any regulatory requirements adopted by the Commissioner of Public Health or any Boards or Commissions under Chapters 368a, 368d, 368v, 369 to 381a, inclusive, 382a, 383 to 388, inclusive, 398 to 399, inclusive, 400a, 400c and 474 of the Connecticut General Statutes as the Commissioner of Public Health deems necessary to reduce the spread of COVID-19 and to protect the public health.

5. **Temporary Suspension of National Criminal History Records Checks for Long Term Care Providers.** Section 19a-491c(c)(1) of the Connecticut General Statutes, which requires long-term care facilities to submit background searches, including checks of state and national criminal history records conducted in accordance with section 29-17a, to the Department of Public Health prior to extending an offer of employment to, or entering into a contract for, the provision of long-term care services with any individual who will have direct access, or prior to allowing any individual to begin volunteering at such long-term care facility when the long-term care facility reasonably expects such volunteer will regularly perform duties that are substantially similar to those of an employee with direct access, the requirement for checks of state and national criminal history records conducted in accordance with section 29-17a, is suspended. During this suspension period, all long-term care facilities shall

comply with the requirements contained in section 19a-491c(f)(2)(A) to (D), inclusive, of the Connecticut General Statutes.

Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 23rd day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 13

Lamont Executive Order No. 7L

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7L

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC AND
RESPONSE – EXTENSION OF SCHOOL CANCELLATION, MUNICIPAL RETIREE
REEMPLOYMENT, OPEN FISHING SEASON AND ADDITIONAL PUBLIC HEALTH
MEASURES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, limited fingerprinting availability to that for critical requirements,

extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, my Executive Order No. 7G, dated March 19, 2020, ordered the postponement of the presidential primary, suspended non-critical court operations, expanded the availability of telehealth services, and enacted additional public health measures; and

WHEREAS, my Executive Order No. 7H, dated March 20, 2020, limited the workplace operations of non-essential businesses, and on-profit, created a process to designate those that are essential, and provided for consistency across the state in governmental response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7I, dated March 21, 2020, among other things, granted various forms of financial relief to recipients of public health and economic assistance, enacted measures to protect the health of children in the care of the Department of Children and Families, and enacted a series of measures to allow municipalities and their administrative bodies to conduct essential business while reducing the risk of COVID-19 transmission; and

WHEREAS, my Executive Order No. 7J, dated March 22, 2020, among other things, expanded the availability of temporary retired workers to fill critical staffing needs, provided authority to expedite acquisition and leasing of property to meet emergency response needs, and clarified restrictions on the operations of non-essential businesses; and

WHEREAS, my Executive Order No. 7K, dated March 23, 2020, among other things, suspended non-critical operations of the Probate Court and the Workers' Compensation Commission, authorized remote notarization, and provided the Commissioner of Public Health with additional authority to expedite the public health response to the COVID-19 pandemic; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, if COVID-10 is transmitted to an elderly person, there is a high risk of serious illness or mortality; and

WHEREAS, fishing is a healthy outdoor activity and an opportunity to enjoy Connecticut's natural resources, provided that anglers practice social distancing by standing at least six feet apart, and not traveling in groups; and

WHEREAS, opening the fishing season early in inland waters will help to limit community spread of COVID-19 by eliminating the large crowds that often accompany the traditional Opening Day of fishing in April; and

WHEREAS, Section 7-438(b) of the Connecticut General Statutes restricts reemployment of participants in the Connecticut Municipal Employees Retirement System (CMERS) to no more than 20 hours each week or 90 days each calendar year if they are to continue to receive pension benefits; and

WHEREAS, the COVID-19 pandemic has created staffing disruptions in municipalities and increased the need for services provided by municipalities such as police and public safety support, resulting in critical skills shortages in vital municipal operational areas; and

WHEREAS, people who have retired from municipal service already have the requisite knowledge, experience and/or licenses and are willing to return to work to help municipalities mitigate such staffing shortages by performing critical services; and

WHEREAS, Connecticut's Medical Marijuana Program is used by approximately 41,000 patients who have been diagnosed with a debilitating condition and who rely on the program for the palliative treatment of their debilitating condition; and

WHEREAS, it is anticipated that increased demand on the healthcare system resulting from the COVID-19 pandemic and heightened protocols to prevent the spread of the virus will create a shortage of medical personnel and limit the availability of in-person care, making it difficult, if not impossible, for patients to schedule timely appointments to be certified or recertified as medical marijuana patients or to receive follow-up care; and

WHEREAS, employees working in the medical marijuana industry may be adversely affected by COVID-19 and unable to work due to illness, exposure or potential exposure to COVID-19, or childcare and other familial obligations, causing staffing shortages in the industry; and

WHEREAS, there exists a present need to encourage, facilitate and expedite patient transfers from nursing homes that are subject to closure under the provisions of Section 19a-533(h) of the Connecticut General Statutes; and

WHEREAS, due to the closure of some local offices of the registrars of vital statistics throughout the state, which offices, in accordance with section 7-42 of the Connecticut General Statutes, are responsible, inter alia, for ascertaining as accurately as each such registrar can, all marriages, deaths and fetal deaths, and all births in such registrar's town and recording the same in such form and with such particulars as are prescribed by the Department of Public Health; and

WHEREAS, members of the public, genealogical societies and others desire copies of and access to such vital records; and

WHEREAS, marriage licenses must be readily obtainable and valid for a longer period; and

WHEREAS, upon a proclamation that a civil preparedness emergency exists, section 28-9(b) of the Connecticut General Statutes authorizes the modification or suspension in whole or in part by executive order of any statute or regulation or requirement or part thereof that conflicts with the efficient and expeditious execution of civil preparedness functions or the protection of public health;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Continued Cancellation of School Classes.** To promote and secure the safety and protection of children in schools related to the risks of COVID-19, Section 1 of my Executive Order 7C, canceling all public-school classes, is continued through April 20, 2020, unless earlier extended, modified, or terminated by me. Private schools and other non-public schools are encouraged to follow the same schedule. Connecticut Unified School District 1, established pursuant to Section 18-99a of the Connecticut General Statutes, Unified School District 2, established pursuant to Section 17 a-37, and Connecticut Department of Mental Health and Addiction Services inpatient facilities providing school classes or programs are exempt from this section.
2. **Early Opening of Fishing Season.** Notwithstanding Section 26-112 of the Connecticut General Statutes and any associated regulations, effective immediately and through the remainder of the 2020 fishing season, unless earlier modified or terminated by the Commissioner of Energy and Environmental Protection, there is no closed season for fishing in the inland waters of Connecticut. The Commissioner of Energy and Environmental Protection may extend or modify the open seasons for inland waters fishing without notice and public hearing and issue any implementing orders she deems necessary consistent with this order. All other regulations for fishing, including, but not limited to, licensing, stamps, methods, catch-and-release areas, creel limits and length limits shall remain in effect. Anglers shall practice social distancing measures, such as remaining six feet apart.
3. **Suspension of Restrictions on Reemployment of Municipal Retirees.** In order to enable municipalities to meet critical staffing needs caused by COVID-19 with skilled and experienced employees who require little to no additional training, the restrictions set forth in Conn. Gen. Stat. § 7-438(b) are suspended for the duration of the public health and civil preparedness emergency, unless such suspension is modified or terminated by me, to allow any retired member who is participating in the municipal retirement system, except those who are receiving a disability retirement pursuant to this chapter, to work without any hourly or durational limitation while also continuing to receive retirement allowances while so employed.

4. **Flexibility to Maintain Adequate Medical Marijuana Access for Patients.** The provisions of Sections 21a-408c and 21a-408d of the Connecticut General Statutes, 21a-408-2, 21a-408-18, 21a-408-24, 21a-408-29(2), 21a-408-42 and 21a-408-43 of the Regulations of Connecticut State Agencies and any associated statutes, regulations, rules and policies regarding the certification of medical marijuana patients, the expiration of medical marijuana patient certifications or registrations, and staffing requirements at dispensary facilities are hereby modified to: (1) permit a physician or APRN to certify a patient and provide any follow-up care using telehealth services so long as all other requirements for the patient certification and all recordkeeping requirements are met; (2) extend the expiration date for any patient or caregiver certification or registration that expires before June 1, 2020 by ninety (90) day, unless such expiration date is earlier modified, extended or terminated by the Commissioner, (3) permit dispensary facility employees and laboratory employees to switch locations of employment between entities during the state of emergency, provided the Department shall be notified of any permanent changes of employment within five days after the state of emergency concludes, (4) permit the Department of Consumer Protection to provide a replacement registration certificate for a patient or caregiver who has had their registration certificate lost, stolen or destroyed without charging a replacement fee, (5) permit a dispensary facility manager to work a reduced number of hours if approved by the Commissioner, (6) permit a single dispensary facility manager to manage more than one dispensary facility under common ownership in the event that the dispensary facility manager at the other location(s) are unable to work as result of the effects of COVID-19, and (7) permit a dispensary facility to increase the ratio of one dispensary for every three dispensary technicians on duty upon notice and approval by the Commissioner. The Commissioner of Consumer Protection may issue any implementing orders and guidance that she deems necessary to implement this order.
5. **Extension of Time Period for Nursing Home Transfers.** Subsection (h) of Section 19a-533 of the Connecticut General Statutes is modified to extend the time frame for an applicant to transfer nursing homes in accordance with the provisions of said subsection from sixty days to “not later than one year following the date that such applicant was transferred from the nursing home where he or she previously resided.”
6. **Modification of the Duties of Registrars of Vital Records.** Section 7-42 of the Connecticut General Statutes is hereby modified to authorize the Commissioner of Public Health or her designee to conduct birth, death and marriage registration, in order to assist local registrars of vital statistics in carrying out their duties as may be required, and to issue any implementing orders she deems necessary.
7. **Modification of In-Person Purchase of and Access to Copies of Vital Records.** Section 7-51a(a) of the Connecticut General Statutes requiring availability of in-person purchase of or access to copies of vital records, is hereby modified to suspend such in-person purchases or access at the Department of Public Health (DPH). The purchase of copies of

vital records from DPH during the pendency of this order shall be limited to mail or on-line requests.

8. **Modification of the requirement that marriage licenses be obtained in the town where the marriage will be celebrated; extension of marriage license validity.** Section 46b-24 of the Connecticut General Statutes is modified to allow any couple planning to marry in a town in which the office of the registrar of vital statistics is closed due to the COVID-19 pandemic to obtain their marriage license from any available registrar of vital statistics from any town within the State; and to extend the sixty-five (65) day period of validity for marriage licenses for an additional sixty (60) days for any marriage license that is obtained or that will expire during the declared public health and civil preparedness emergency.

Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

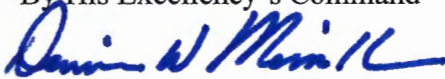
Dated at Hartford, Connecticut, this 24th day of March, 2020.



Ned Lamont
Governor



By His Excellency's Command



Denise W. Merrill
Secretary of the State

Exhibit 14

Lamont Executive Order No. 7M

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7M

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19
PANDEMIC AND RESPONSE – EXTENSION OF AGENCY ADMINISTRATIVE
DEADLINES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, limited fingerprinting availability to that for critical requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, my Executive Order No. 7G, dated March 19, 2020, ordered the postponement of the presidential primary, suspended non-critical court operations, expanded the availability of telehealth services, and enacted additional public health measures; and

WHEREAS, my Executive Order No. 7H, dated March 20, 2020, limited the workplace operations of non-essential businesses, and on-profit, created a process to designate those that are essential, and provided for consistency across the state in governmental response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7I, dated March 21, 2020, among other things, granted various forms of financial relief to recipients of public health and economic assistance, enacted measures to protect the health of children in the care of the Department of Children and Families, and enacted a series of measures to allow municipalities and their administrative bodies to conduct essential business while reducing the risk of COVID-19 transmission; and

WHEREAS, my Executive Order No. 7J, dated March 22, 2020, among other things, expanded the availability of temporary retired workers to fill critical staffing needs, provided authority to expedite acquisition and leasing of property to meet emergency response needs, and clarified restrictions on the operations of non-essential businesses; and

WHEREAS, my Executive Order No. 7K, dated March 23, 2020, among other things, suspended non-critical operations of the Probate Court and the Workers' Compensation Commission, authorized remote notarization, and provided the Commissioner of Public Health with additional authority to expedite the public health response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7L, dated March 24, 2020, among other things, extended the cancellation of public school classes through April 20, 2020, opened fishing season early to provide a safe recreational activity during this period of limited availability of other options, provided for continued availability of medical marijuana for patients with

debilitating conditions, eased the ability for certain patients to transfer between nursing homes, and provided for increased availability of vital records services; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of fifty people or more and social distancing in smaller gatherings; and

WHEREAS, if COVID-10 is transmitted to an elderly person, there is a high risk of serious illness or mortality; and

WHEREAS, the reduction in state personnel working at state agency offices, including those of the Department of Transportation, and the difficulty in receiving and reviewing plans and documents related to encroachment permits, have reduced the ability to review and decide on applications for such encroachments within the statutorily mandated 90-day deadline; and

WHEREAS, in order to further prevent the potential public threat and spread of COVID19 to any person who might participate in the process of submitting, reviewing, hearing, discussing, deciding, or appealing an agency, board or commission decision, action, or related activity, and to allow for delays and unavailability caused by disruptions related to the COVID-19 pandemic, state agencies, boards, and commissions of this State require discretion to manage deadlines associated with Chapter 54 of the Connecticut General Statutes, the Uniform Administrative Procedure Act, and other statutory and regulatory deadlines relevant to conducting the business of this State; and

WHEREAS, there is a significant public interest in ensuring that citizens retain their rights under the Freedom of Information Act during this public health and civil preparedness emergency, despite the delays and administrative difficulties that the COVID-19; and

WHEREAS, upon a proclamation that a civil preparedness emergency exists, section 28-9(b) of the Connecticut General Statutes authorizes the modification or suspension in whole or in part by executive order of any statute or regulation or requirement or part thereof that conflicts with the efficient and expeditious execution of civil preparedness functions or the protection of public health;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Tolling of Time Periods for Department of Transportation (DOT) Final Determinations on Permits.** Notwithstanding any provision of the Connecticut General Statutes or any associated regulation, I hereby modify Section 13b-31f(1) of the Connecticut General Statutes to authorize the Commissioner of Transportation to toll any deadlines for review and final determination on any of the permit applications in such section, and issue any implementing orders he deems necessary, provided such tolling period shall cease on the date of termination of the public health and civil preparedness emergency declared on March 10, 2020.
2. **Suspension of Mandatory Statutory Filing Requirements for Freedom of Information Act Appeals and Decisions by the Freedom of Information Commission.** Notwithstanding the provisions of Conn. Gen. Stat. Sec. 1-206(b)(1), I hereby suspend, for the duration of this public health and civil preparedness emergency: (1) the time requirements for filing an appeal with the Freedom of Information Commission, which shall be applicable to any appeal filed on or after the issuance date of this order; and (2) the requirement that the Freedom of Information Commission must hear and decide an appeal within one year after the filing of such appeal, which shall be applicable to any appeal pending before such Commission and any appeal filed on or after the issuance date of this order.
3. **Authority to Extend Statutory and Regulatory Administrative Deadlines by 90 Days.** Notwithstanding any provision of the Connecticut General Statutes, any regulation, or other provision of law, I hereby authorize each department head, commissioner, agency head, and board and commission of this State to extend, as they deem reasonably necessary to respond to the COVID-19 pandemic or its effects, any statutory or regulatory time requirements, decision-making requirements, hearings, or other time limitations or deadlines, procedure or legal process pertaining to matters under their respective jurisdiction, functions or powers for a period not to exceed 90 days. Department heads, commissioners, agency heads, and board and commission of this State may issue any orders necessary to implement and effectuate the purposes of this order and shall publicly post and maintain such orders on their respective websites.

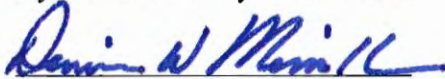
Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 25th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 15

Lamont Executive Order No. 7N

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7N

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – INCREASED DISTANCING, EXPANDED FAMILY ASSISTANCE,
AND ACADEMIC ASSESSMENT SUSPENSION**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms, fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, limited fingerprinting availability to that for critical

requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, my Executive Order No. 7G, dated March 19, 2020, ordered the postponement of the presidential primary, suspended non-critical court operations, expanded the availability of telehealth services, and enacted additional public health measures; and

WHEREAS, my Executive Order No. 7H, dated March 20, 2020, limited the workplace operations of non-essential businesses, and on-profit, created a process to designate those that are essential, and provided for consistency across the state in governmental response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7I, dated March 21, 2020, among other things, granted various forms of financial relief to recipients of public health and economic assistance, enacted measures to protect the health of children in the care of the Department of Children and Families, and enacted a series of measures to allow municipalities and their administrative bodies to conduct essential business while reducing the risk of COVID-19 transmission; and

WHEREAS, my Executive Order No. 7J, dated March 22, 2020, among other things, expanded the availability of temporary retired workers to fill critical staffing needs, provided authority to expedite acquisition and leasing of property to meet emergency response needs, and clarified restrictions on the operations of non-essential businesses; and

WHEREAS, my Executive Order No. 7K, dated March 23, 2020, among other things, suspended non-critical operations of the Probate Court and the Workers' Compensation Commission, authorized remote notarization, and provided the Commissioner of Public Health with additional authority to expedite the public health response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7L, dated March 24, 2020, among other things, extended the cancellation of public school classes through April 20, 2020, opened fishing season early to provide a safe recreational activity during this period of limited availability of other options, provided for continued availability of medical marijuana for patients with debilitating conditions, eased the ability for certain patients to transfer between nursing homes, and provided for increased availability of vital records services; and

WHEREAS, my Executive Order No. 7M, dated March 25, 2020, preserved the rights of the public in certain proceedings under the Connecticut Freedom of Information Act and authorized commissioners of state agencies to suspend or modify administrative deadlines and other requirements of Chapter 54 of the Connecticut General Statutes and other agency-specific administrative requirements; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of ten people or more and social distancing in smaller gatherings; and

WHEREAS, confirmed COVID-19 infections and resulting hospitalizations have increased significantly in recent days, at the same time that residents of areas with high infection rates have arrived in Connecticut, creating a need to enact further mandatory distancing measures to limit the rate of spread of the disease; and

WHEREAS, Public Act 19-117, codified as Section 22a-246a of the 2020 Supplement to the Connecticut General Statutes, in order to reduce waste and litter and their resulting harm to the quality of the environment and waters of the State of Connecticut and associated environmental costs, imposed a 10-cent-per-bag tax on single-use plastic checkout bags at various retail and other establishments; and

WHEREAS, while the Connecticut Department of Public Health has examined this issue and found that existing precautions, including frequent handwashing for at least 20 seconds or use of alcohol based sanitizer, avoiding touching the face with unwashed hands, and routine cleaning of public spaces and frequently handled items will greatly reduce the risk of COVID-19 transmission for workers in high volume retail settings, many employees of retail establishments have expressed concern about the handling of such bags; and

WHEREAS, retail and especially grocery and restaurant workers are making a critical contribution to keeping food readily available to the public during this public health and civil preparedness emergency, their continued contribution is essential to the state's ability to enact appropriate distancing measures, and their concerns are respected; and

WHEREAS, Connecticut law mandates annual statewide assessments to measure student achievement and to determine school accountability, in addition to the federal testing requirements which were waived by the U.S. Department of Education on March 20, 2020 for the full state; and

WHEREAS, in light of the major disruption caused by the cancellation of classes statewide in Connecticut, on March 20, 2020, the Connecticut State Department of Education secured a federal waiver for the 2019-20 school year from (i) all state-mandated assessments in all grades and subjects; and (ii) district/school accountability measures under the Every Student Succeeds Act; and

WHEREAS, demand for firearms and ammunition since the declaration of this public health and civil preparedness emergency has increased dramatically, for example with 19,943 firearms purchase or transfer authorizations completed in March 2020 so far compared to 12,572 in all of March 2019, resulting in difficulty for dealers in transmitting authorization requests, larger than normal lines and crowds, and significant burdens on the staff and systems who process such requests, compromising their ability to process the requests and perform other critical emergency services and public safety duties; and

WHEREAS, upon a proclamation that a civil preparedness emergency exists, section 28-9(b) of the Connecticut General Statutes authorizes the modification or suspension in whole or in part by executive order of any statute or regulation or requirement or part thereof that conflicts with the efficient and expeditious execution of civil preparedness functions or the protection of public health;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Restriction of Social and Recreational Gatherings to No More Than 5 People.** Effective immediately, and through April 30, 2020, unless earlier modified, extended, or terminated by me, the prior order set forth in Executive Order No. 7D, prohibiting social and recreational gatherings of 50 people or more, is hereby amended and modified to require that all such gatherings of six (6) or more people, including but not limited to, community, civic, leisure, or sporting events; parades; concerts; festivals; plays or live performances; conventions; and similar activities, are prohibited throughout the State of Connecticut, except that religious, spiritual or worship gatherings shall not be subject to such increased restrictions, and shall instead remain subject to the prohibition on gatherings of 50 or more people, provided that they employ reasonable and appropriate distancing measures. To further clarify this order, it does not apply to government operations, private workplaces, retail establishments, or other activities that are not social or recreational gatherings.
2. **Restrictions on Restaurant Payment and Pickup Operations.** Where reasonably practicable, restaurants, eating establishments, and any bars that remain open for sales of food for off-premise consumption, shall limit entrance of customers into their locations to the minimum extent necessary to pick up and/or pay for orders, use touchless payment systems, and require remote ordering and payment, whether by telephone, computer, mobile application, or other technology. Nothing in this order shall require any such business to acquire or use ordering or payment technology that they do not already possess, prohibit drive-through ordering and pickup, or prohibit in-person payment or cash payment where there is no reasonable alternative. Previously issued guidance for hospital and business cafeterias remains in effect.

3. **Further Restrictions on Retail Operations.** Any retail establishment that has been allowed to remain open and permit customers inside such establishment during this public health and civil preparedness emergency shall take appropriate and reasonable measures to ensure customers maintain six feet of distance between each other, and to manage any resulting lines to maintain such distance while people are waiting to enter, and where reasonably practical, employ touchless payment technology if they already have such technology available.
 - a. **Firearms Transactions by Appointment Only.** Effective immediately and through May 15, 2020, unless earlier modified, extended, or terminated by me, because the nature of certain regulated retail transactions, including purchase, sale, and transfer of firearms, ammunition, and their components or supplies, requires the customer's presence inside the business to accommodate certain parts of those transactions or associated background check processes, and in order to limit person-to-person contact as much as possible and manage the large increase in requests for authorizations for such transactions and the resulting burdens on the communications technology and public safety staff responsible for reviewing and providing such authorizations, any firearms dealer shall conduct all such transactions by appointment only, shall limit such appointments to a number that will maintain a distance of six feet between any customers and/or staff in a store, including customers and staff conducting such transactions, and shall allow entrance into their establishments only to those customers conducting such transactions.
4. **Temporary Suspension of Tax on Single-Use Checkout Bags.** All provisions of Section 355 of Public Act 19-117, as codified in Section 22a-246a of the 2020 Supplement to the Connecticut General Statutes, regarding single-use plastic checkout bags, are temporarily suspended through May 15, 2020, unless earlier modified, extended, or terminated by me. The Commissioner of Revenue Services shall issue any implementing order he deems necessary, and any guidance for businesses on accounting or other necessary measures during this temporary suspension.
5. **Employees Not Required to Bag Items in Reusable Bags.** Effective immediately and through May 15, 2020, unless earlier modified, extended, or terminated by me, no employer in a retail establishment shall require any employee to bag any item in a customer-provided reusable bag, provided that nothing in this order shall prohibit customers who wish to use such reusable

bags from doing so; such customers shall bag their own items where the employee of the retail establishment declines to do so.

6. **Suspension of 21-month Limit on Temporary Family Assistance.** Section 17b-112 of the Connecticut General Statutes and any implementing regulations are modified to exclude from the statutory 21-month time limit on receipt of Temporary Family Assistance all months of such assistance received during the public health and civil preparedness emergency.
7. **Suspension of School Testing Assessments for 2019-20 School Year.** The provisions of Section 10-14n of the Connecticut General Statutes related to the administration of all state summative and alternate assessments; Section 10-14t, related to the administration of universal screening reading assessment for students in Grades K-3; and Section 10-265g, related to the administration of reading assessments in priority districts at the end of the school year, are hereby suspended for the 2019-20 school year. Any associated regulations, rules, and policies regarding statewide assessments are modified to authorize the Commissioner of Education to temporarily waive any requirements contained therein as he deems necessary to respond to the effects of the COVID-19 pandemic.

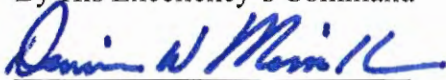
Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 26th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 16

Lamont Executive Order No. 70

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 70

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19
PANDEMIC AND RESPONSE – FLEXIBILITY IN DPH LICENSING
RENEWAL REQUIREMENTS AND PROVIDER ASSIGNMENT, EXPANDED
HAND SANITIZER PRODUCTION, WAIVER OF BIRTH-TO-THREE FEES**

WHEREAS, on March 10, 2020, I issued declarations of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, my Executive Order No. 7, dated March 12, 2020, among other things, prohibited gatherings of 250 people or more for social and recreational activities, including but not limited to, community, civic, leisure, and sporting events; parades; concerts; festivals; movie screenings; plays or performances; conventions; and similar activities, and suspended various statutes and regulations to protect public health and safety; and

WHEREAS, my Executive Order No. 7A, dated March 13, 2020, authorized the Commissioner of Public Health to restrict entrance into nursing homes and similar facilities to protect people who are most vulnerable to COVID-19; and

WHEREAS, my Executive Order No. 7B, dated March 14, 2020, among other things, modified in-person open meetings requirements, waived certain rules to mitigate the critical shortage of hand sanitizer and personal protective equipment (PPE), maintain and increase the availability of childcare, and provide for increased healthcare resources and facilities; and

WHEREAS, my Executive Order No. 7C, dated March 15, 2020, among other things, cancelled classes in public schools for at least two weeks, provided for closure and remote conduct of business at Department of Motor Vehicle branches, extended deadlines for municipal budget preparations, and suspended or modified laws and regulations governing health care data and visitation at certain health care and congregate care settings; and

WHEREAS, my Executive Order No. 7D, dated March 16, 2020, restricted social and recreational gatherings of all types to fewer than 50 people, closed bars and restaurants to all service except food and non-alcoholic beverage takeout and delivery, closed gyms,

fitness centers and movie theaters, and prohibited on-site operations at off-track betting facilities; and

WHEREAS, my Executive Order No. 7E, dated March 17, 2020, among other things, waived the requirement for an 180-day school year, limited fingerprinting availability to that for critical requirements, extended the duration of various licenses and permits under the authority of the Commissioner of Emergency Services and public protection, and suspended certain requirements for recoupment of overpayment and hearings conducted by the Department of Social Services; and

WHEREAS, my Executive Order No. 7F, dated March 18, 2020, ordered the closure of Large Shopping Malls, the closure of places of public amusement except public parks and open recreation areas, expanded Medicaid telehealth coverage, waived in-person service, hearing, and screening requirements for certain Probate Court proceedings in vulnerable group care settings, and clarified my order cancelling school classes; and

WHEREAS, my Executive Order No. 7G, dated March 19, 2020, ordered the postponement of the presidential primary, suspended non-critical court operations, expanded the availability of telehealth services, and enacted additional public health measures; and

WHEREAS, my Executive Order No. 7H, dated March 20, 2020, limited the workplace operations of non-essential businesses and non-profits, created a process to designate those that are essential, and provided for consistency across the state in governmental response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7I, dated March 21, 2020, among other things, granted various forms of financial relief to recipients of public health and economic assistance, enacted measures to protect the health of children in the care of the Department of Children and Families, and enacted a series of measures to allow municipalities and their administrative bodies to conduct essential business while reducing the risk of COVID-19 transmission; and

WHEREAS, my Executive Order No. 7J, dated March 22, 2020, among other things, expanded the availability of temporary retired workers to fill critical staffing needs, provided authority to expedite acquisition and leasing of property to meet emergency response needs, and clarified restrictions on the operations of non-essential businesses; and

WHEREAS, my Executive Order No. 7K, dated March 23, 2020, among other things, suspended non-critical operations of the Probate Court and the Workers' Compensation Commission, authorized remote notarization, and provided the Commissioner of Public Health with additional authority to expedite the public health response to the COVID-19 pandemic; and

WHEREAS, my Executive Order No. 7L, dated March 24, 2020, among other things, extended the cancellation of public school classes through April 20, 2020, opened fishing season early to provide a safe recreational activity during this period of limited availability

of other options, provided for continued availability of medical marijuana for patients with debilitating conditions, eased the ability for certain patients to transfer between nursing homes, and provided for increased availability of vital records services; and

WHEREAS, my Executive Order No. 7M, dated March 25, 2020, preserved the rights of the public in certain proceedings under the Connecticut Freedom of Information Act and authorized commissioners of state agencies to suspend or modify administrative deadlines and other requirements of Chapter 54 of the Connecticut General Statutes and other agency-specific administrative requirements; and

WHEREAS, my Executive Order No. 7N, dated March 26, 2020, restricted social and recreational gatherings to no more than five (5) people, imposed additional distancing measures on restaurants, eating establishments, and retail operations, suspended the tax on single-use plastic checkout bags and allowed employees to decline to bag items in reusable bags, suspended the 21-month limit on Temporary Family Assistance, and suspended school testing assessments for the current school year; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce the spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of ten people or more and social distancing in smaller gatherings; and

WHEREAS, confirmed COVID-19 infections and resulting hospitalizations have increased significantly in recent days, at the same time that residents of areas with high infection rates have arrived in Connecticut, creating a need to enact further mandatory distancing measures to limit the rate of spread of the disease; and

WHEREAS, the Department of Public Health is required by statute and regulations to license certain individuals and facilities and, in the interest of limiting person-to-person contact and continuing to provide adequate healthcare resources and ensure the continuity of other licensed work, it is necessary to suspend license renewal activities and certain inspections during the declared public health and civil preparedness emergency; and

WHEREAS, the continued operation of health care facilities or institutions, as defined by Section 19a-905 of the Connecticut General Statutes, is critical to the response to the declared public health and civil preparedness emergency; and

WHEREAS, Connecticut may experience a shortage of health care providers, as defined in such statute, because of the spread of COVID-19; and

WHEREAS, the maintenance of staffing levels at such facilities or institutions may require certain health care providers to work at multiple health care facilities or institutions during the response to COVID-19; and

WHEREAS, the issuance and maintenance by such health care facilities or institutions of identification badges, in complete conformance with Section 19a-905 of the Connecticut General Statutes, for health care providers who provide direct patient care at such facility or institution, may hinder flexible and responsive deployment of healthcare resources during the emergency; and

WHEREAS, the state has experienced widespread shortages of hand sanitizer which is critical for the prevention of COVID-19 related transmission when access to hand washing is not available, and certain manufacturers of other products, including liquor, are able and willing to produce it; and

WHEREAS, there is a critical lack of supply for certain medical devices, including personal protective equipment, which is needed to reduce the transmission of COVID-19 and to keep healthcare workers safe in the workplace; and

WHEREAS, the Office of Early Childhood wishes to ensure continuity of care for infants and toddlers with disabilities, and required family cost participation fees for early intervention services pose a barrier to participation for families experiencing financial hardship due to COVID-19; and

WHEREAS, upon a proclamation that a public health or civil preparedness emergency exists, Section 28-9(b) of the Connecticut General Statutes authorizes the modification or suspension in whole or in part by executive order of any statute or regulation or requirement or part thereof that conflicts with the efficient and expeditious execution of civil preparedness functions or the protection of public health;

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

- 1. Suspension of Requirements for License Renewal and Inspections by the Department of Public Health.** Pursuant to Section 19a-131j(e) of the Connecticut General Statutes and my emergency powers under Sections 19a-131j and 28-9, any statute, regulation or requirement or part thereof relating to license renewals and inspections by the Department of Public Health is hereby modified to authorize the Commissioner of Public Health to waive licensing, renewal, and inspection requirements pursuant to Sections 19a-131j(b), (c) and (d), and as she otherwise deems necessary to ensure the provision of adequate healthcare during, and mitigate the effects of, this public

health and civil preparedness emergency, and to issue any implementing orders she deems necessary.

2. **Modification of Health Care Provider Identification Badge Requirements.** Section 19a-905 of the Connecticut General Statutes is hereby modified to allow healthcare providers to provide direct patient care at a healthcare facility or institution, with the permission of such facility or institution, with an identification badge displaying the name of a different healthcare facility or institution, provided all other information on such identification badge conforms to the requirements of such section. This section is further modified to authorize the Commissioner of Public Health to establish policies and procedures regarding the badging of COVID-19 response personnel should she or her designee deem it necessary to rapidly move staff due to the need for mass care in a circumstance of limited resources, and to issue any related orders she deems necessary.
3. **Allowing Non-traditional Manufacturers to Make Alcohol-Based Hand Sanitizers and Medical Devices.** Section 21a-70 (b) of the Connecticut General Statutes as it pertains to the compounding of alcohol-based hand sanitizer production and the production of medical devices, including personal protective equipment used to assist in the treatment of COVID-19 is modified to permit such activities without registering as a manufacturer. The manufacturing of alcohol-based hand sanitizer shall follow Food and Drug Administration (FDA) guidance issued by the FDA and which is available on its website. All manufacturers of medical devices, including personal protective equipment, shall follow the requirements issued by the FDA and the Center for Disease Control and Prevention (CDC), which guidance is available on those agencies' websites, comply with the requirements of the National Institute for Occupational Safety and Health (NIOSH), and comply with any registration requirements imposed by those agencies, including any modifications to such requirements issued by such agencies in response to the COVID-19 pandemic. The Commissioner of Consumer Protection may issue any implementing orders or guidance that she deems necessary to effectuate the intent of this order.
4. **Waiver of Birth-to-Three Family Cost Participation Fees.** Section 17a-248g (e) of the Connecticut General Statutes, and Section 17a-248-13 (g) of the Regulations of Connecticut State Agencies are modified to authorize the Commissioner of Early Childhood to waive the fees required to be paid by the parents or legal guardians of children eligible

for remote early intervention services, waive any resulting suspension of services due to non-payment of such fees, and issue any implementing orders she deems necessary.

Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

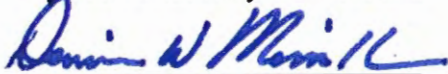
Dated at Hartford, Connecticut, this 27th day of March, 2020.



Ned Lamont
Governor



By His Excellency's Command



Denise W. Merrill
Secretary of the State

Exhibit 17

Lamont Executive Order No. 7P

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7P

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19
PANDEMIC AND RESPONSE – SAFE HOUSING FOR PEOPLE
EXPERIENCING HOMELESSNESS, FIRST RESPONDERS, AND
HEALTHCARE WORKERS**

WHEREAS, on March 10, 2020, I issued a declaration of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, pursuant to such declaration, I have issued sixteen executive orders to suspend or modify statutes and to take other actions necessary to protect public health and safety and to mitigate the effects of the COVID-19 pandemic; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce the spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of ten people or more and social distancing in smaller gatherings; and

WHEREAS, confirmed COVID-19 infections and resulting hospitalizations have increased significantly in recent days, at the same time that residents of areas with high infection rates have arrived in Connecticut, creating a need to enact further mandatory distancing measures to limit the rate of spread of the disease; and

WHEREAS, the continued operation of health care facilities or institutions, as defined by Section 19a-905 of the Connecticut General Statutes, is critical to the response to the declared public health and civil preparedness emergency; and

WHEREAS, first responders and healthcare workers on the front lines of the COVID-19 pandemic face increased risk of exposure and infection, and if exposed or infected, may need alternative housing to avoid transmitting the disease to coworkers or family members, and municipalities and agencies who arrange such housing may require federal reimbursement; and

WHEREAS, the Centers for Disease Control has recommended that states, especially those with higher rates of growth in the number of infected people, take measures to reduce density within homeless shelters and other congregant housing situations, and the Federal Emergency Management Agency is making funding available to reimburse states for certain related expenditures; and

WHEREAS, in consultation with the Commissioner of Public Health and other members of my leadership team, I have determined that reducing density in congregant housing and providing alternate housing for people experiencing homelessness is necessary to protect public health and safety; and

WHEREAS, Connecticut may experience a shortage of health care providers, as defined in such statute, because of the spread of COVID-19; and

WHEREAS, the issuance and maintenance by such health care facilities or institutions of identification badges, in complete conformance with Section 19a-905 of the Connecticut General Statutes, for health care providers who provide direct patient care at such facility or institution, may hinder flexible and responsive deployment of healthcare resources during the emergency; and

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

- 1. Authorization to Provide for Non-Congregant Housing for Persons at Risk.** The Commissioner of Public Health, Secretary of the Office of Policy and Management, and commissioners of Emergency Services and Public Protection and Housing are authorized to issue such orders as they deem necessary to provide or arrange non-congregant housing with sufficient physical distancing capacity for people who, from the nature of their existing housing or working environments, are at increased risk of exposure to, infection with, or transmission of COVID-19, and to seek reimbursement for any resulting expenditures from appropriate federal agencies or other sources.

Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 28th day of March, 2020.



Ned Lamont
Governor



By His Excellency's Command



Denise W. Merrill
Secretary of the State

Exhibit 18

Lamont Executive Order No. 7Q

STATE OF CONNECTICUT

BY HIS EXCELLENCY

NED LAMONT

EXECUTIVE ORDER NO. 7Q

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC
AND RESPONSE – CHILDCARE SAFETY, REMOTE NOTARIZATION UPDATE**

WHEREAS, on March 10, 2020, I issued a declaration of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

WHEREAS, pursuant to such declaration, I have issued seventeen (17) executive orders to suspend or modify statutes and to take other actions necessary to protect public health and safety and to mitigate the effects of the COVID-19 pandemic; and

WHEREAS, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

WHEREAS, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

WHEREAS, the risk of severe illness and death from COVID-19 appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions; and

WHEREAS, to reduce the spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of ten people or more and social distancing in smaller gatherings; and

WHEREAS, ongoing childcare operations are necessary to support the essential workforce, and it is vital to protect the health and safety of children and staff in childcare facilities and limit the spread of COVID-19; and

WHEREAS, current regulations allow group sizes of as many as 20 children in childcare facilities, increasing the risk of transmission of COVID-19 among staff, children, and their families, and reducing such group sizes is necessary to reduce such risk; and

WHEREAS, certain documents require the in-person services of a Notary Public or Commissioner of the Superior Court and such interactions should be avoided to the maximum

extent possible in order to promote social distancing and the mitigation of the spread of the COVID-19; and

WHEREAS, certain documents, in addition to notarization or acknowledgement, require the presence of in-person witnesses to their signature, which could increase the risk of transmission of COVID-19; and

NOW, THEREFORE, I, NED LAMONT, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Limited Group Sizes in Childcare.** To limit the spread of COVID-19 and protect the health and safety of children and staff in all child care facilities that are continuing to operate during this civil preparedness and public health emergency, Section 19a-79 and any related regulations, rules, or policies, are modified to require that all child care facilities shall limit group sizes to no more than ten children in one space, and to authorize the Commissioner of Early Childhood to issue any implementing orders she deems necessary. Any childcare operation seeking to caring for more than thirty children in one facility shall seek approval to do so from the Commissioner and demonstrate sufficient separation of groups within the facility. This order applies to all childcare operations, including but not limited to childcare centers, group childcare homes, family childcare homes, youth camps, and childcare facilities that are exempt from licensing requirements pursuant to Section 19a-77 of the Connecticut General Statutes.
2. **Enhanced Health Procedures for All Operating Child Care Programs.** All children and childcare workers shall be screened before entrance to any childcare operation, as described herein, for any observable illness, including cough or respiratory distress, and to confirm body temperature below one hundred degrees Fahrenheit. All staff shall practice enhanced handwashing and health practices, including covering coughs and sneezes with a tissue or the corner of the elbow and assisting children with such increased handwashing and health practices. Enhanced cleaning and disinfection practices shall be implemented in all facilities to prevent the spread of COVID-19. This order applies to all childcare operations including but not limited to childcare centers, group childcare homes, family childcare homes, youth camps, and childcare facilities that are exempt from licensing requirements pursuant to Section 19a-77 of the Connecticut General Statutes. The Commissioner of Early Childhood may issue any implementing orders she deems necessary consistent with this order.
3. **Remote Notarization - Amended Procedures.** Effective immediately and through June 23, 2020, unless modified, extended or terminated by me, Section 3 of my prior Executive Order 7K concerning remote notarizations is hereby superseded and replaced in its entirety by this Executive Order. All relevant state laws and regulations

are hereby modified to permit any notarial act that is required under Connecticut law to be performed using an electronic device or process that allows a notary public commissioned by the Connecticut Secretary of the State pursuant to section 3-94b of the Connecticut General Statutes ("Notary Public") or a Commissioner of the Superior Court as defined by section 51-85 of the Connecticut General Statutes ("Commissioner") and a remotely located individual to communicate with each other simultaneously by sight and sound ("Communication Technology"), provided that the following conditions are met:

- a. The person seeking the notarial act ("Signatory") from a Notary Public or Commissioner, if not personally known to the Notary Public or Commissioner, shall present satisfactory evidence of identity, as defined by subsection 10 of section 3-94a of the General Statutes, while connected to the Communication Technology, not merely transmit it prior to or after the transaction;
- b. The Communication Technology must be capable of recording the complete notarial act and such recording shall be made and retained by the Notary Public for a period of not less than ten (10) years;
- c. The Signatory must affirmatively represent via the Communication Technology that he or she is physically situated in the State of Connecticut;
- d. The Signatory must transmit by fax or electronic means a legible copy of the signed document directly to the Notary Public or Commissioner on the same date it was executed;
- e. The Notary Public or Commissioner may notarize the transmitted copy of the document and transmit the same back to the Signatory by fax or electronic means;
- f. The Notary Public or Commissioner may repeat the notarization of the original signed document as of the date of execution, provided the Notary Public or Commissioner receives such original signed document, together with the electronically notarized copy, within thirty days after the date of execution;
- g. Notwithstanding the foregoing, only an attorney admitted to practice law in the State of Connecticut and in good standing may remotely administer a self-proving affidavit to a Last Will and Testament pursuant to section 45a-285 of the General Statutes or conduct a real estate closing as required by Public Act 19-88. Any witnessing requirement for a Last Will and Testament may be satisfied remotely through the use of Communication

Technology if it is completed under the supervision of a Commissioner. The supervising Commissioner shall certify that he or she supervised the remote witnessing of the Last Will and Testament

- h. All witness requirements on any document, other than a Last Will and Testament, requiring a notarial act are hereby suspended for the duration of this Executive Order.
- i. All Remotely Notarized documents pertaining to real property shall be accepted for recording on the land records by all Connecticut Town or City Clerks. A one-page certification confirming the use of Remote Notarization procedures shall be attached to each remotely notarized document submitted for recording on the land records in Connecticut.

Unless otherwise specified herein, this order shall take effect immediately and shall remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified or terminated by me.

Dated at Hartford, Connecticut, this 30th day of March, 2020.



Ned Lamont
Governor

By His Excellency's Command



Denise W. Merrill
Secretary of the State



Exhibit 19

Affidavit of Jonathan Giftos

**Connecticut Superior Court
Judicial District of Hartford**

**Connecticut Criminal Defense Lawyers
Association,
Willie Breyette,
Daniel Rodriguez,
Anthony Johnson, and
Marvin Jones,**
Plaintiffs

No. HHD-CV20-_____-S

April 2, 2020

v.

Ned Lamont and Rollin Cook,
Defendants.

STATE OF NEW YORK)
 ss.:
COUNTY OF KINGS)

Affidavit of Dr. Jonathan Giftos

Jonathan Giftos, being duly sworn, says:

1. I am a doctor duly licensed to practice medicine in the State of New York. I am board-certified in internal medicine and addiction medicine. I received my Bachelor of Science degree from Boston College, and my Medical Degree from Mount Sinai School of Medicine.
2. I am currently the Medical Director, Addiction Medicine & Drug User Health at Project Renewal and a Clinical Assistant Professor in the Department of Medicine at Albert Einstein College of Medicine.
3. Between August 2016 and January 2020, I was an Attending Physician and the Clinical Director of Substance Use Treatment for NYC Health & Hospitals, Division of Correctional Health Services at Rikers Island. During this time, I provided primary medical care to detainees and sentenced patients, and supervised the nation's oldest and largest jail-based opioid treatment program. I successfully led an effort to remove non-clinical barriers to opioid treatment program enrollment in 2017, which dramatically expanded treatment access from 25% to over 80%, while also reducing post-release mortality for people with opioid use disorder.
4. I have extensive experience working with vulnerable populations such as the incarcerated and those experiencing homelessness.

The Coronavirus Pandemic

5. On March 11, 2020, the World Health Organization declared that the rapidly spreading outbreak of COVID-19, a respiratory illness caused by a novel coronavirus, is a pandemic, announcing that the virus is both highly contagious and deadly. To date, the virus is known to spread from person-to-person through respiratory droplets, close personal contact, and from contact with contaminated surfaces and objects. The CDC also warns of “community spread” where the virus spreads easily and sustainably within a community where the source of the infection is unknown.
6. There is currently no vaccine or cure. The primary focus is on preventing the spread of the virus at this juncture. To prevent new infections, the Centers for Disease Control and Prevention strongly recommend the following actions: thorough and frequent handwashing, cleaning surfaces with EPA-approved disinfectants, keeping at least six feet of space between people, and avoiding group settings. Social distancing has also been encouraged to slow the rate of COVID-19 infections so that hospitals have the resources to address infected individuals with urgent medical needs. In correctional settings, such sanitation, social distancing, and self-quarantining measures are nearly impossible.
7. The Centers for Disease Control have identified two groups of people at higher risk of contracting and succumbing to COVID-19: adults over 60 years old and people with chronic medical conditions. COVID-19 is more dangerous to persons in these high-risk groups than to the general population. Older people who contract COVID-19 are more likely to die than people under the age of 60. It has been found that older people diagnosed with COVID-19 are more likely to be very sick and require hospitalization to survive because the acute symptoms include respiratory distress, cardiac injury, arrhythmia, septic shock, liver dysfunction, kidney injury and multi-organ failure. Access to a mechanical ventilator is often required. People with chronic medical conditions (no matter their age) are also at significantly greater risk from COVID-19 because their already-weakened systems are less able to fight the virus. These chronic medical conditions include lung disease, cancer, heart failure, cerebrovascular disease, renal disease, liver disease, diabetes, immunocompromising conditions, and pregnancy. Those with pre-existing medical conditions have a higher probability of death if infected.

COVID-19 Within Correctional Settings

8. Based on my years of providing medical care at Rikers Island, I know that correctional settings increase the risk of contracting an infectious disease like COVID-19. This is because there are high numbers of people with chronic, often untreated, illnesses housed in a setting with minimal levels of sanitation, limited access to personal hygiene, limited access to medical care, and no possibility of staying at a distance from others.
9. Correctional facilities house large groups of inmates together, and move inmates in groups to eat, bathe, and recreate. They frequently have insufficient medical care for the population, and, in times of crisis, even those medical staff cease coming to the facility.

Hot water, soap, disinfectants, and paper towels are frequently in limited supply, and inmates, rather than professional cleaners, are responsible for cleaning the facilities. As a result, there are more people susceptible to getting infected congregated together in a context in which fighting the spread of an infection is nearly impossible.

10. Indeed, outbreaks of the flu regularly occur in jails, and during the H1N1 epidemic in 2009, many jails and prisons dealt with high numbers of cases. In the current outbreak, Rikers Island went from just one confirmed case of COVID-19 on March 18 to 231 confirmed cases in just two weeks.¹
11. My experience in correctional health also exposed me to the limitations of correctional health care. Similar to an outpatient primary care clinic, correctional health care is designed to provide urgent care for ailments that are non-life threatening. It is not capable of providing the type of care one receives in a hospital, let alone in an intensive care unit. As a result, when an incarcerated person requires hospitalization or intensive care, they are transferred to a hospital in the community. During my time at Rikers Island, we routinely transferred incarcerated people to community hospitals to receive care that we could not provide at the facility.
12. For prison systems that are already understaffed, staffing shortages will only increase as employees need to stay home to care for children whose schools are closed, elderly family members, and—if infected or exposed to infection—themselves. With fewer staff, correctional officers are even less able to monitor prisoners' health.
13. During the COVID-19 pandemic, these limitations in correctional health care have important public health implications not just for incarcerated populations, but for the general population as well. According to the most recent estimates, at least 15% of people who contract COVID19 will require hospitalization, and 5% will require intensive care. Based on the vulnerability of the incarcerated population, it is likely that these numbers would be at least as high, if not higher, within a correctional setting.
14. A person who contracts COVID-19 in jail or prison and requires hospitalization will need to be transferred to a community hospital. As a result, the problem of a prison outbreak of COVID-19 infections cannot and will not be contained within the institution itself. Instead, it will explode into the community, increasing the pressure on our already taxed community hospitals.
15. Even at baseline, ICU beds and ventilators in our community hospitals are a scarce commodity. A recent analysis by the Harvard Global Health Institute indicates that under most scenarios, “vast communities in America are not prepared to take care of the COVID-19 patients” that require hospital care. An outbreak of COVID-19 at a jail or prison, which would likely require numerous transfers to a community hospital, could

¹ *Compare As Testing Expands, Confirmed Cases of Coronavirus in N.Y.C. Near 2,000*, N.Y. Times (Mar. 18, 2020), <https://www.nytimes.com/2020/03/18/nyregion/coronavirus-new-york-update.html> (first positive case at Rikers) *with* The Legal Aid Society, *Covid-19 Tracking in NYC Jails*, Apr. 2, 2020, <https://www.legalaidnyc.org/covid-19-infection-tracking-in-nyc-jails> (231 cases today).

push a hospital even further past its breaking point. Specifically, a surge in COVID-19 infections in a correctional setting could mean that ICU beds in the community hospital would no longer be available to everyone who needed them.

16. Every effort should be made to reduce chances of exposure to COVID-19. However, based on my experience in correctional health, I do not believe that screening, social distancing, and quarantining measures can be sufficiently employed within correctional settings to combat the spread of COVID-19.
17. Correctional settings simply cannot be equipped to keep people safe during this pandemic. There are too many structural limitations, and correctional health care can only do so much. Decreasing the incarcerated population so that there is more ability to physically distance within the facility, fewer people who can contract the virus inside the facility, and more medical care for those who need it is the only way to prevent the complications from surging. Otherwise, the unchecked transmission of COVID-19 in jail or prison will have serious, and fatal, implications for the broader community.
18. Decreasing the incarcerated population will also decrease the necessary staffing for the facility and protect staff from exposure. Reducing the number of needed correctional officers and healthcare workers will, in turn, reduce the number of people entering and exiting the facility on a daily basis. This too will reduce the spread of COVID-19 to the broader community.
19. It is my professional opinion that these steps are both necessary and urgent. The horizon of risk for COVID-19 in these facilities is a matter of hours, not days. Once a case of COVID-19 identified in a facility, it will likely be too late to prevent a widespread outbreak.



Jonathan Giftos, M.D.

Sworn to before me by video in conformance with
Gov. Cuomo Exec. Order No. 202.7 (Mar. 19, 2020)
on April 2, 2020:



Notary Public

Blake Abrash
Notary Public, State of New York
No. 02AB6236598
Qualified in Nassau County
Commission Expires Feb. 28, 2023

Exhibit 20

Letter from Yale Transitions Clinic to
Governor Lamont

Yale University

Emily A. Wang, M.D., MAS
Associate Professor
Division of General Internal Medicine
School of Medicine

Campus address:
Harkness Hall, Bldg A
367 Cedar St., Suite 410A
New Haven, CT 06510
Tel: (203) 737-6317
Fax: (203) 737-3306
emily.wang@yale.edu

Hon. Governor Ned Lamont
Office of Governor Ned Lamont
State Capitol
210 Capitol Ave.
Hartford, CT 06106

cc:

Judge Patrick Carroll, Chief Court Administrator;
Richard Colangelo, Chief State's Attorney;
Rollin Cook, Commissioner of the Connecticut Department of Correction;
Jonathan Dach, Policy Director;
Michael J. Freda, First Selectman of the Connecticut Conference of Municipalities;
Matthew Knickerbocker, First Selectman of the Connecticut Council of Small Towns;
Melissa McCaw, Secretary to the Governor;
Keith Mello, President of the Connecticut Police Chiefs Association;
Paul Mounds, Chief of Staff;
Marc Pelka, Undersecretary;
Christine Rapillo, Chief Public Defender of Connecticut

Dear Connecticut Leaders:

We write out of our grave concern that, absent immediate action, COVID-19 will overrun Connecticut's jails and prisons. That tragedy will have far-reaching effects not only for the thousands of Connecticut residents who live and work in correctional facilities, their families and communities, but also for the population of the state as a whole. Connecticut's healthcare system simply does not have the capacity to treat a massive outbreak in the incarcerated population at the same time as it treats patients throughout the rest of the state. As jails and prisons become flashpoints for infection, the outbreak will overwhelm already limited state healthcare resources.

Connecticut has days, not weeks, to chart a different future. Under current conditions, in which there is no cure and no widespread testing, the thousands of Connecticut residents who live and work in correctional facilities are simply unable to practice the most effective method of prevention: social distancing. To create the requisite spacing of 6 feet between individuals, the State must (a) rapidly decrease the density of its prisons, jails, and halfway houses and (b)

implement humane and evidence-based approaches to protect the health of incarcerated individuals and staff alike. Success is possible but will require coordinated, urgent action among all relevant agencies, including the Department of Correction, the judiciary, the Chief State's Attorney, law enforcement, the Department of Public Health, and the Connecticut Department of Housing. We call upon you to use the full powers of your office to lead the way through this public health emergency.

I. The Public Health Perspective

COVID-19 is a highly infectious disease. Due to its novelty, there exist few tools for containment and even fewer for treatment. The scientific community currently lacks a vaccine or cure. Neither the United States nor the state of Connecticut possesses sufficient resources to screen or test individuals, and projections show that, absent extreme intervention, infections will rapidly outpace available healthcare resources. We commend that your office has already taken decisive action to limit exposure among most state residents by ordering one of the few proven prevention methods: social distancing. As already seen in the reduced rates of new infections, social distancing works.

Unfortunately, effective social distancing is impossible under typical conditions in Connecticut's correctional facilities. In Connecticut's jails and lower security level prisons, incarcerated people sleep within feet of each other and use communal bathrooms, mess halls, dayrooms, and showers. Even in maximum security facilities, many people are double-celled and share spaces to eat, bathe, and recreate. Further, while the Department of Correction has already taken important actions, such as suspending visitors and volunteers, there is still a steady flow of people into and among facilities. Staff, officers, contractors, and vendors are still moving throughout and between facilities and they all link the facilities with surrounding communities. These individuals can introduce the virus into the facility or contract it themselves and transmit it to others in the community.

The Department of Correction has stated that it is employing standard measures used to contain other communicable diseases, such as the flu, but these are inadequate in the face of the novel coronavirus. COVID-19 is estimated to be nearly 3 times more contagious than the flu and is deadlier. Furthermore, we are learning more about this novel coronavirus every day and it is becoming increasingly clear that a significant percent of infections are transmitted by people even before they develop symptoms, meaning that there is no screening practice (checking temperatures or asking about symptoms) that is adequate. Additionally, whereas the flu is transmitted only by large droplets (i.e., 6 feet of distancing protects people), COVID-19 is now known to be passed in the air as well. Under these circumstances, even heightened hygiene practices—frequent washing of hands with soap, regular bleaching and disinfection of public surfaces, and the like—are insufficient. Further, proper containment and treatment of the novel coronavirus will require facilities to quarantine people and will surely put a strain on the already understaffed healthcare

system in the Department of Correction. At Yale-New Haven Hospital, we have already seen that as more people have become sick, staff have become sick as well, and we are struggling to develop adequate staffing plans. Sick individuals will need to be sent to community-based hospitals, which themselves are already struggling to provide adequate care to others.

While more must be done in the coming weeks and months, as a starting point, we suggest the following immediate actions:

1. To the maximum extent possible, reduce the number of people entering and re-entering the system. We applaud the state for already making efforts to mitigate dangers in this area, as announced in the Department of Correction's March 24 release. Police and State's Attorneys should decline to arrest or prosecute individuals except where an individual poses a serious threat to public safety. Parole officers should halt the reincarceration of people on technical parole violations.

2. Immediately release, to the maximum extent possible, people detained pretrial. As of today, we estimate that there are 2,905 unsentenced (mostly pretrial) people in custody, 95 of whom are 60 or older. For the duration of the pandemic, people should be presumptively released on personal recognizance, absent a showing of a compelling threat to public safety.

3. Immediately release all people convicted of nonviolent offenses who are scheduled to be released in 90 days, all people who are eligible for parole and community supervision/release, and anyone incarcerated for a technical parole, probation violation, or conditional discharge. As of today, we estimate that there are 4,112 people in custody with fewer than 90 days left on their sentences, 201 of whom are 60 or older. Additionally, we estimate that 1,503 people are currently in custody for violation of probation or conditional discharge, 51 of whom are 60 or older. The state should continue to exercise the use of transitional supervision more aggressively to facilitate the release of people with shorter sentences. Additionally, the Connecticut Board of Pardons and Parole should expedite the release of people already found suitable for release on parole, expedite all review processes for people eligible for parole, exercise its power to commute sentences, and use its discretion to grant compassionate parole release. The Board should refrain, however, from requiring transitional housing as part of that process, in order to prevent the spread of COVID-19 within these congregate settings.

The advantage of releasing the populations outlined above lies in the fact that most have spent less time incarcerated and are more likely to have maintained social bonds with their communities outside of prison. Their families and communities are better equipped to aid them in self-quarantine than are prisons, jails, and halfway houses. Individuals who fit the above criteria for release should be screened to determine if they have somewhere to live in the community where they can self-isolate if necessary. Individuals with such available housing should be prioritized for immediate release.

We note that the goal here is to thin the incarcerated population—by the most expeditious means possible, including releasing the healthy—to allow for social distancing. In some cases, sick individuals may have a more difficult time finding a safe place to live upon release, not least because of the lack of medical capacity in the state.

We are very appreciative of the significant efforts you have already made to ensure people who are released have safe accommodations in the community, and to ensure that no one is released to homelessness.

4. Transition older adults and medically vulnerable individuals to medical and community settings. Finally, we note that U.S. Attorney General William Barr, in response to requests from Congress for a plan to mitigate the risk of widespread COVID-19 infection in federal prisons, has recommended that the federal Bureau of Prisons release certain at-risk individuals—including individuals with certain medical conditions and individuals over 60 years old. We agree that this would be a worthy step to pursue in Connecticut, but we also emphasize that time is of the essence here. We do not yet have a COVID-19 outbreak in our correctional facilities, but we must act *now* to thin these populations out, social distance, and attempt to prevent one. That means releasing whoever can be released most quickly and safely now. The next step would be to address these at-risk populations. Many of the people who are most vulnerable will also be more challenging to discharge: those without housing and those who, due to medical complexity, require more comprehensive medical discharge planning. The state must nonetheless work toward releasing older adults and other medically vulnerable inmates, who pose the least public safety risk and are most at-risk of COVID-19 complications. To that end, we, the Yale Transitions Clinic, have created a hotline that DOC reentry coordinators and medical discharge planners can use to refer people to us, and we will figure out the medical discharge follow-up.

We are eager to work with your office to facilitate any of these critical efforts for the public health of our state. We would also be glad to work with you in convening public health experts and physicians to further assess these issues, and the appropriate medical and public health protocols for this population, as the pandemic evolves.

Thank you for your leadership on these issues thus far.

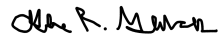
Sincerely,

A handwritten signature in cursive script, appearing to read "Emily Wang".

Emily Wang, MD, MAS



Lisa Puglisi, MD



Abbe R. Gluck
Professor of Law and Faculty Director, Solomon Center for Health Law and Policy
Yale Law School
Professor of Medicine (General Medicine), Yale Medical School



Jackson Skeen
J.D. '22
Yale Law School
Transitions Medical Legal Partnership

Exhibit 21

Appendix

Appendix: Court Actions Across the Country to Reduce Incarceration in Light of Covid-19¹

State	Judicial Body	Forum	Nature of Relief
Alabama	Circuit Court for the 19 th Judicial Circuit of Alabama	Administrative order	<ul style="list-style-type: none"> Judge Fuller ordered “all inmates currently held on appearance bonds of \$5,000.00 or less be immediately released on recognizance with instructions to personally appear at their next schedule court appearance.”²
Arizona	Coconino County court system and jail, Judge Dan Slayton, along with other county judges	Court order	<ul style="list-style-type: none"> As of March 20, 2020, Judge Dan Slayton and other county judges have released around 50 people who were held in the county jail on non-violent charges.³
California	Supreme Court of California, Chief Justice Tani Cantil-Sakauye	Advisory	<ul style="list-style-type: none"> The Chief Justice issued guidance encouraging the state’s superior courts to, among other things: <ul style="list-style-type: none"> “Lower bail amounts significantly for the duration of the coronavirus emergency, including lowering the bail amount to \$0 for many lower level offenses.” “Consider a defendant’s existing health conditions, and conditions existing at the anticipated place of confinement, in setting conditions of custody for adult or juvenile defendants.” “Identify detainees with less than 60 days in custody to permit early release, with or without supervision or community-based treatment.”⁴
	Sacramento Superior Court, Judge Hom	Order	<ul style="list-style-type: none"> The Court entered a standing order authorizing their sheriff to release those within 30 days of release, regardless of crime.⁵
Hawai‘i	Supreme Court	Order	<ul style="list-style-type: none"> The Court suspended the custodial portions of all intermittent sentences and appointed a special master to oversee a collaborative release effort.⁶

Kentucky	Kentucky, Chief Justice John Minton Jr.	Letter to state judges and court clerks	<ul style="list-style-type: none"> Kentucky, Chief Justice John Minton Jr. told state’s judges and court clerks to release jail inmates “as quickly as we can” noting, “jails are susceptible to worse-case scenarios due to the close proximity of people and the number of pre-existing conditions,” and that courts have the responsibility “to work with jailers and other county officials to safely release as many defendants as we can as quickly as we can.”⁷
Maine	State of Maine Superior Court, Chief Justice Mullen and District Court Chief Judge Sparaco and Deputy Chief Judge French	Emergency Order	<ul style="list-style-type: none"> The Superior Court and District Court ordered all trial courts to immediately vacate all outstanding warrants for unpaid fines, restitution, fees, and failures to appear.⁸
Michigan	Chief Justice Bridget M. McCormack, Michigan Supreme Court	Joint Statement	<ul style="list-style-type: none"> In a Joint statement, Chief Justice McCormack urged judges to “use the statutory authority they have to reduce and suspend jail sentences for people who do not pose a public safety risk[,]. . . release far more people on their own recognizance while they await their day in court...[a]nd judges should use probation and treatment programs as jail alternatives.”⁹
Montana	Supreme Court of Montana, Chief Justice McGrath	Letter to Judges	<ul style="list-style-type: none"> Chief Justice of the Montana Supreme Court urged judges to “review your jail rosters and release, without bond, as many prisoners as you are able, especially those being held for non-violent offenses.”¹⁰
New Jersey	New Jersey Supreme Court, Chief Justice Rabner	Consent Order	<ul style="list-style-type: none"> In New Jersey, after the Supreme Court ordered briefing and argument on why it should not order the immediate release of individuals serving county jail sentences, the Attorney General and County Prosecutors agreed to create an immediate presumption of release for every person serving a county jail sentence in New Jersey.¹¹
New York	New York State Supreme Court, Bronx County, Justice Doris M. Gonzales	Judicial ruling based on writ of habeas corpus	<ul style="list-style-type: none"> In a habeas petition brought by the Legal Aid Society, a Justice Doris M. Gonzales ordered the release of 106 individuals currently held at Rikers Island on a non-criminal technical parole violation. These individuals were selected in the petition by virtue of their age and/or underlying medical condition.¹²

	New York Supreme Court Justice Mark Dwyer	Judicial ruling based on writ of habeas corpus	<ul style="list-style-type: none"> In a habeas petition brought by the Legal Aid Society, a Justice Mark Dwyer ordered the release of 16 individuals currently held at Rikers Island on pretrial detention or parole violation. These individuals were selected in the petition by virtue of their age and/or underlying medical condition.¹³
Ohio	Ohio Supreme Court, Chief Justice Maureen O'Connor	News Conference	<ul style="list-style-type: none"> Chief Justice O'Connor urged "judges to use their discretion and release people held in jail and incarcerated individuals who are in a high-risk category for being infected with the virus."¹⁴
South Carolina	Supreme Court of South Carolina, Chief Justice Beatty	Memorandum	<ul style="list-style-type: none"> The Chief Justice instructed that "any person charged with a non-capital crime shall be ordered released pending trial on his own recognizance without surety, unless an unreasonable danger to the community will result or the accused is an extreme flight risk."¹⁵ Following the order, more than 85 people have been released from the Greenville County Detention Center in Greenville, South Carolina.
Texas	Travis County, Texas, Judges	Individual Court Orders	<ul style="list-style-type: none"> Travis County has begun releasing some defendants in custody with underlying health conditions, to reduce the potential spread of COVID-19 in the county's jails. After Austin saw its first positive cases of COVID-19, judges in the county nearly doubled its release of people from local jails on personal bonds, with one judge alone reversing four bond decisions after "balancing this pandemic and public health safety of inmates against what they're charged with."¹⁶
Utah	Utah Supreme Court and Utah Judicial Council, Chief Justice Durrant	Administrative Order	<ul style="list-style-type: none"> The Chief Justice of the Utah Supreme Court ordered that for defendants in-custody on certain misdemeanor offenses, "the assigned judge must reconsider the defendant's custody status and is encouraged to release the defendant subject to appropriate conditions."¹⁷

Washington	Washington Supreme Court, Chief Justice Stephens	Order	<ul style="list-style-type: none"> Chief Justice Stephens ordered judges not to issue bench warrants for failure to appear, “unless necessary for the immediate preservation of public or individual safety” and “to hear motions for pretrial release on an expediated basis without requiring a motion to shorten time.” Additionally, for populations designated as at-risk or vulnerable by the Centers for Disease Control, the COVID-19 crisis is presumed to be a material change in circumstances to permit amendment of a previous bail order or to modify conditions of pre-trial release.¹⁸
Wyoming	Wyoming Supreme Court, Chief Justice Davis	Order	<ul style="list-style-type: none"> The Chief Justice instructed judges to issue summonses instead of bench warrants, unless public safety compels otherwise.¹⁹
Federal Criminal Detention	C.D. Cal, Judge James V. Selna	Minute Order	<ul style="list-style-type: none"> The Court granted temporary release for 90 days, pursuant to 18 U.S.C. § 3142 (i), which authorizes discretionary temporary release when necessary for a person’s defense or another compelling reason. Judge Selna held the defendant’s age and medical conditions, which place him in the population most susceptible to COVID-19, and in light of the pandemic, to constitute “another compelling reason” and granted his temporary release.²⁰
	D. Conn., Judge Jeffrey A. Meyer	Order	<ul style="list-style-type: none"> Judge Meyer ordered the release of defendant stating that “the conditions of confinement at Wyatt are not compatible” with current COVID-19 public health guidance concerning social distancing and avoiding congregating in large groups. Judge Meyer is one of four federal judges in Connecticut who has released inmates in connection with the COVID-19 pandemic.²¹
	D. Conn., Judge Vanessa Bryant	Order	<ul style="list-style-type: none"> Judge Bryant ordered the release of a sentenced prisoner at Wyatt who had “less than eight weeks left to serve on his sentence, [and] is immunocompromised and suffers from multiple chronic conditions that are in flux and predispose him to potentially lethal complications if he contracts COVID-19.”²²

	D.D.C., Judge Randolph D. Moss	Minute Order	<ul style="list-style-type: none"> Judge Moss released defendant, despite acknowledging offense charged--marijuana distribution and felon in possession—"is serious" because among other factors mitigating public safety concerns "incarcerating the defendant while the current COVID-19 crisis continues to expand poses a greater risk to community safety than posed by Defendant's release to home confinement."²³
	D.D.C., Judge Randolph D. Moss	Memorandum Opinion	<ul style="list-style-type: none"> Judge Moss released defendant while awaiting trial after weighing the risk to the public of releasing defendant [charged with distribution of child pornography] directly against risk to community safety if defendant remained incarcerated in light of the COVID-19 pandemic.²⁴
	D. Nev., Judge Jones	Opinion and Order	<ul style="list-style-type: none"> Judge Jones delayed defendant's date to surrender to begin his intermittent confinement by a minimum of 30 days because "[i]n considering the total harm and benefits to prisoner and society . . . temporarily suspending [defendant's] intermittent confinement would appear to satisfy the interests of everyone during this rapidly encroaching pandemic." In coming to this conclusion, the court placed weight on the fact that "incarcerated individuals are at special risk of infection, given their living situations, and may also be less able to participate in proactive measures to keep themselves safe; because infection control is challenging in these settings."²⁵
	D. S.C., Judge David C. Norton	Order	<ul style="list-style-type: none"> Judge Norton granted compassionate release for 73-year-old with severe health conditions under the First Step Act, "[g]iven defendant's tenuous health condition and age, remaining incarcerated during the current global pandemic puts him at even higher risk for severe illness and possible death, and Congress has expressed its desire for courts to [release federal inmates who are vulnerable to COVID-19]."²⁶

	N.D. Cal., Judge Vince Chhabria	Sua Sponte Order	<ul style="list-style-type: none"> Judge Chhabria issued a sua sponte decision extending defendant's surrender date from June 12, 2020 to September 1, 2020 stating: "By now it almost goes without saying that we should not be adding to the prison population during the COVID-19 pandemic if it can be avoided . . . To avoid adding to the chaos and creating unnecessary health risks, offenders who are on release and scheduled to surrender to the Bureau of Prisons in the coming months should, absent truly extraordinary circumstances, have their surrender dates extended until this public health crisis has passed."²⁷
	N.D. Cal., Judge Hixson	Order	<ul style="list-style-type: none"> Judge Hixson released a 74-year old in light of COVID-19 holding "[t]he risk that this vulnerable person will contract COVID-19 while in jail is a special circumstance that warrants bail. Release under the current circumstances also serves the United States' treaty obligation to Peru, which – if there is probable cause to believe Toledo committed the alleged crimes – is to deliver him to Peru alive."²⁸
	S.D.N.Y., Judge Paul A. Engelmayer	Amended Order	<ul style="list-style-type: none"> Judge Engelmayer granted defendant temporary release from custody, pursuant to 18 U.S.C. § 3142(i), "based on the unique confluence of serious health issues and other risk factors facing this defendant, including but not limited to the defendant's serious progressive lung disease and other significant health issues, which place him at a substantially heightened risk of dangerous complications should be contract COVID-19 as compared to most other individuals."²⁹
	S.D.N.Y., Judge Alison J. Nathan	Opinion & Order	<ul style="list-style-type: none"> Judge Nathan ordered the Defendant released subject to the additional conditions of 24-hour home incarceration and electronic location monitoring as directed by the Probation Department based in part on "the unprecedented and extraordinarily dangerous nature of the COVID-19 pandemic" which may place "at a heightened risk of contracting COVID-19 should an outbreak develop [in a prison]." ³⁰

Federal Immigration Detention	9th Cir., Judges Wardlaw, M. Smith, and Judge Siler, 6 th Cir., sitting by designation.	Sua Sponte Order	<ul style="list-style-type: none"> The panel held “[i]n light of the rapidly escalating public health crisis, which public health authorities predict will especially impact immigration detention centers, the court <i>sua sponte</i> orders that Petitioner be immediately released from detention and that removal of Petitioner be stayed pending final disposition by this court.”³¹
	C.D. Cal, Judge Terry J. Halter, Jr.	TRO and order to show cause based on writ of habeas corpus	<ul style="list-style-type: none"> Judge Halter ordered the release of two ICE detainees. The court found that in detention “[p]etitioners have not been protected [against risks associated with COVID-19]. They are not kept at least 6 feet apart from others at all times. They have been put into a situation where they are forced to touch surfaces touched by other detainees, such as with common sinks, toilets and showers. Moreover, the Government cannot deny the fact that the risk of infection in immigration detention facilities – and jails – is particularly high if an asymptomatic guard, or other employee, enters a facility. While social visits have been discontinued at Adelanto, the rotation of guards and other staff continues.”³²
	D. Mass, Judge Mark L. Wolf	Oral Order	<ul style="list-style-type: none"> Judge Wolf ordered the release, with conditions, from ICE custody a member of the class in <i>Calderon v. Nielsen</i> based, in part, on the “extraordinary circumstances” posed by COVID-19.³³
	S.D.N.Y., Judge George B. Daniels	Memorandum Decision and Order	<ul style="list-style-type: none"> Judge Daniels ordered the release, under <i>Mapp v. Reno</i>, 241 F.3d 221 (2d Cir. 2001), of an individual as there was likelihood of success on the merits and COVID-19 risks and individual’s own medical issues constituted “extraordinary circumstances warranting release.”³⁴
	S.D.N.Y., Judge Alison J. Nathan	Opinion and Order	<ul style="list-style-type: none"> Judge Nathan ordered the immediate release of four detainees finding “no evidence that the government took any specific action to prevent the spread of COVID-19 to high-risk individuals . . . held in civil detention.”³⁵

	S.D.N.Y., Judge Analisa Torres	Memorandum Decision and Order.	<ul style="list-style-type: none"> Judge Torres granted immediate release on recognizance for ten individuals in immigration detention who have a variety of chronic health conditions that put them at high risk for COVID-19. These conditions include obesity, asthma, diabetes, pulmonary disease, history of congestive heart failure, respiratory problems, gastrointestinal problems, and colorectal bleeding. The court held detainees face serious risks to their health in confinement and “if they remain in immigration detention constitutes irreparable harm warranting a TRO.”³⁶
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¹ This chart provides only a sample of the judicial action taken throughout the country as judges continue to respond to the COVID-19 pandemic.

²Administrative Order, No. 2020-00010, Ala. Ct. App. (Mar. 18, 2020), <https://drive.google.com/file/d/1I4QLwsytSVkdOuo5p6qb1JcuFWcAV4oA/view?usp=sharing>. Note: the original order has been revised to provide discretion to the Sheriffs. See Mike Carson, *Alabama Judge Orders Jail Inmates Released, then Leaves it Up to Sheriffs*, AL.Com (Mar. 19, 2020), <https://www.al.com/news/2020/03/alabama-judge-orders-jail-inmates-released-then-leaves-it-up-to-sheriffs.html>.

³ Scott Buffon, *Coconino County Jail Releases Nonviolent Inmates in Light of Coronavirus Concerns*, Arizona Daily Sun (updated Mar. 25, 2020), https://azdailysun.com/news/local/coconino-county-jail-releases-nonviolent-inmates-in-light-of-coronavirus/article_a6046904-18ff-532a-9dba-54a58862c50b.html.

⁴ Advisory from California Chief Justice Tani Cantil-Sakauye to Presiding Judges and Court Executive Officers of the California Courts (Mar. 20, 2020), <https://newsroom.courts.ca.gov/news/california-chief-justice-issues-second-advisory-on-emergency-relief-measures>.

⁵ *Standing Order of the Sacramento Superior Court*, No. SSC-20-PA5 (Mar. 17, 2020), <https://www.saccourt.ca.gov/general/standing-orders/docs/ssc-20-5.pdf>.

⁶ Order, *Office of the Public Defender v. Connors*, SCPW-20-0000200 and SCPW-20-0000213 (Sup. Ct. Haw. April 2, 2020), <https://drive.google.com/open?id=1dRyOtJhLG3-oe8AH4MmFx12X4XmSruEC>

⁷ Kyle C. Barry, *Some Supreme Courts Are Helping Shrink Jails to Stop Outbreaks. Others Are Lagging Behind.*, The Appeal (Mar. 25, 2020), <https://theappeal.org/politicalreport/some-supreme-courts-are-helping-shrink-jails-coronavirus>; John Cheves, *Chief Justice Pleads for Kentucky Inmate Release Ahead of COVID-19 but Progress Slow*, Lexington Herald Leader (Mar. 23, 2020), <https://www.kentucky.com/news/coronavirus/article241428266.html>.

⁸ Emergency Order Vacating Warrants for Unpaid Fines, Unpaid Restitution, Unpaid Court-Appointed Counsel Fees, and Other Criminal Fees (Mar. 17, 2020), <https://www.courts.maine.gov/covid19/emergency-order-vacating-warrants-fines-fees.pdf>.

⁹ Joint Statement of Chief Justice Bridget M. McCormack, Mich. Sup. Ct. and Sheriff Matt Saxton, Exec. Dir., Mich. Sheriff Ass'n (Mar. 26, 2020), [https://courts.michigan.gov/News-Events/press_releases/Documents/CJ%20and%20MSA%20Joint%20Statement%20draft%202%20\(003\).pdf](https://courts.michigan.gov/News-Events/press_releases/Documents/CJ%20and%20MSA%20Joint%20Statement%20draft%202%20(003).pdf).

¹⁰ Letter from Chief Justice Mike McGrath, Mont. Sup. Ct. to Mont. Ct. of Ltd. Jurisdiction Judges (Mar. 20, 2020), <https://courts.mt.gov/Portals/189/virus/Ltr%20to%20COLJ%20Judges%20re%20COVID-19%20032020.pdf?ver=2020-03-20-115517-333>.

¹¹ Consent Order, *In the Matter of the Request to Commute or Suspend County Jail Sentences*, No. 084230 (N.J. March 22, 2020), https://www.aclu-nj.org/files/5415/8496/4744/2020.03.22_-_Consent_Order_Filed_Stamped_Copy-1.pdf.

¹² *People of the State of New York, ex rel., v. Cynthia Brann*, No. 260154/2020 (Sup. Ct. NY Mar. 25, 2020), https://linkprotect.cudasvc.com/url?a=https%3a%2f%2flegalaidnyc.org%2fwp-content%2fuploads%2f2020%2f03%2fLAS-Mass-Parole-Holds-Writ.pdf&c=E,1,pDbcoVtCJ0c6j6E8cI3m276yaRxs-nztikQuvDWwS91mRHj6RhL8o5pEJmJl-lk86sC7-f1rq9dTlh2Pe3ZmAUCoZCiC9er2g4Z4mL_ToQ,&typo=1; see also Frank G. Runyeon, *NY Judges Release 122 Inmates as Virus Cases Spike in Jails*, Law360 (March 27, 2020), <https://www.law360.com/newyork/articles/1257871/ny-judges-release-122-inmates-as-virus-cases-spike-in-jails>.

¹³ *Jeffrey v. Bran*, (Sup. Ct. NY Mar. 26, 2020). See Press Release, Redmon Haskins, *Legal Aid Wins Release of 16 Incarcerated New Yorkers at a High Risk of COVID-19 from City Jails* (Mar. 26, 2020), <https://legalaidnyc.org/wp-content/uploads/2020/03/03-26-20-Legal-Aid-Wins-Release-of-16-Incarcerated-New-Yorkers-at-a-high-risk-of-COVID-19-from-City-Jails.pdf>;

see also Runyeon, *NY Judges Release 122 Inmates*, *supra* note 11.

¹⁴ Press Conference, Ohio Chief Justice Maureen O'Connor and Gov. Mike DeWine (Mar. 19, 2020); see also WLWT5, *Release Ohio Jail Inmates Vulnerable to Coronavirus, Chief Justice Urges* (Mar. 19, 2020), <https://www.wlwt.com/article/release-ohio-jail-inmates-vulnerable-to-coronavirus-chief-justice-urges/31788560#>.

¹⁵ Memorandum from Chief Justice Beatty, Sup. Ct of S.C to Magistrates, Mun. Judges, and Summary Ct. Staff (March 16, 2020), <https://www.sccourts.org/whatsnew/displayWhatsNew.cfm?indexId=2461>.

¹⁶ Ryan Autullo, *Travis County Judges Releasing Inmates to Limit Coronavirus Spread*, Statesman (Mar. 16, 2020), <https://www.statesman.com/news/20200316/travis-county-judges-releasing-inmates-to-limit-coronavirus-spread?fbclid=IwAR3VKawwn3bwSLSO9jXBxXNRuaWd1DRLsCBFc-ZkPN1INWW8xnzLPvZYNO4>.

¹⁷ Order, *Administrative Order for Court Operations During Pandemic* (Utah Mar. 21, 2020), <https://www.utcourts.gov/alerts/docs/20200320%20-%20Pandemic%20Administrative%20Order.pdf>.

¹⁸ Am. Order, *In the Matter of Statewide Response by Washington State Courts to the Covid-19 Public Health Emergency*, No. 25700-B-607 (Wash. Mar. 20, 2020),

<http://www.courts.wa.gov/content/publicUpload/Supreme%20Court%20Orders/Supreme%20Court%20Emergency%20Order%20re%20CV19%20031820.pdf>.

¹⁹ Order Adopting Temporary Plan to Address Health Risks Posed by the COVID-19 Pandemic, *In the Matter of the Wyoming Supreme Court's Temporary Plan Regarding COVID-19 Pandemic* (Wyo. Mar. 18, 2020), <http://www.courts.state.wy.us/wp-content/uploads/2020/03/COVID-19-Order.pdf>.

²⁰ Minute Order, *United States v. Michaels*, 8:16-cr-76-JVS, (C.D. Cal. Mar. 26, 2020), https://drive.google.com/file/d/1BeWih63M7FKreKEvLJyIQevYSivGA_PU/view.

²¹ Edmund H. Mahony, *Courts Ponder the Release of Low Risk Inmates in an Effort to Block the Spread of COVID-19 to the Prison System*, Hartford Currant (Mar. 24, 2020), <https://www.courant.com/coronavirus/hc-news-covid-inmate-releases-20200323-20200324-oreyf4kbfbe3adv6u6ajsj57u-story.html>.

²² Order, *United States v. Jepsen*, No. 3:19-cv-00073 (VLB) (D. Conn. Apr. 2, 2020), <https://drive.google.com/open?id=1QMistlQofKz3pmMlahAJLIVN2skqZWap>

²³ Minute Order, *United States v. Jaffee*, No. 19-cr-88 (RDM) (D.D.C. Mar. 26, 2020), <https://drive.google.com/file/d/1AYfIU6QKCOElpX5Vh3Af6BDqO8goZ5WE/view>.

²⁴ *United States v. Harris*, No. 19-cr-356 (RDM) (D.D.C. Mar. 26, 2020), <https://drive.google.com/file/d/1aO3BNOKB8ukL20A76Mu7Fn0GyCng0Ras/view>.

²⁵ *United States v. Barkma*, No. 19-cr-0052 (RCJ-WGC), 2020 U.S. Dist. LEXIS 45628, at *3 (D. Nev. Mar. 17, 2020), https://drive.google.com/file/d/1o35MokiprkmmhzCUUieg_Eua6e05v4zOw/view.

²⁶ *United States v. Copeland*, No. 2:05-cr-135-DCN, at 7 (D.S.C. Mar. 24, 2020), <https://drive.google.com/file/d/1tyA8Kjvld23QTL0Wo7xbAdqLEOCCVC4q/view>.

²⁷ *United States v. Garlock*, No. 18-CR-00418-VC-1, 2020 WL 1439980, at *1 (N.D. Cal. Mar. 25, 2020), https://drive.google.com/file/d/1H47EQMXtQZkXFv_GXSffAV6Xkse3-kpl/view.

²⁸ *In The Matter Of The Extradition Of Alejandro Toledo Manrique*, No. 19-mj-71055-MAG, 2020 WL 1307109, at *1 (N.D. Cal. Mar. 19, 2020), <https://drive.google.com/file/d/1AfU1ft4Lcm60QbPhjgo9HgGAHkbPKPzD/view>.

²⁹ AM. Order, *United States v. Perez*, 19-cr-297 (PAE), at 1 (S.D.N.Y. Mar. 19, 2020), <https://drive.google.com/file/d/17xE8qdGeeTI2d2dWjNDfwmXLc8GxTtfA/view>.

³⁰ *United States v. Stephens*, No. 15-cr-95-AJN, 2020 WL 1295155, at *2-3 (S.D.N.Y. Mar. 19, 2020), <https://drive.google.com/file/d/1hEhz9oICfaKRinDvUOKqjDTcx3-nc4vq/view>.

³¹ *Xochihua-Jaimes v. Barr*, No. 18-cv-71460 (9th Cir. Mar. 23, 2020), <https://drive.google.com/file/d/16eh6qMzihmNlSEq0SzmCSQx98OiLn38l/view>

³² *Castillo v. Barr*, No. 20-cv-605 (TJH)(AFM), at 10 (C.D.Cal. Mar. 27, 2020), <https://drive.google.com/file/d/1BeFuU-Lrjj-VVeA6QA2O7zLud7aWlVnEN/view>.

³³ Transcript of Oral Argument, at 3-4, 6, *Jimenez v. Wolf*, No. 18-10225-MLW (D. Mass. Mar. 26, 2020),

<https://www.courtlistener.com/recap/gov.uscourts.mad.195705/gov.uscourts.mad.195705.507.1.pdf>.

³⁴ *Jovel v. Decker*, No. 12-cv-308 (GBD), at 2 (S.D.N.Y. Mar. 26, 2020),

<https://drive.google.com/file/d/1mrJ9WbCgNGeyWn1cy3xAvo61yJWnaDe8/view>.

³⁵ *Coronel v. Decker*, No. 20-cv-2472 (AJN), at 10 (S.D.N.Y. Mar. 27, 2020), <https://legalaidnyc.org/wp-content/uploads/2020/03/20cv2472-Op.-Order-3.27.20.pdf>.

³⁶ *Basank v. Decker*, No. 20-cv-2518 (AT), at 7, 10 (S.D.N.Y. Mar. 26, 2020),

https://drive.google.com/file/d/1FJ7tU9JCskKPh4xkoe4j3YgoQ5y2_y0P/view.

Exhibit 22

Updated Appendix

Appendix (Updated): Court Actions Across the Country to Reduce Incarceration in Light of Covid-19¹

State	Judicial Body	Forum	Nature of Relief
Alabama	Circuit Court for the 19 th Judicial Circuit of Alabama	Administrative order	<ul style="list-style-type: none"> Judge Fuller ordered “all inmates currently held on appearance bonds of \$5,000.00 or less be immediately released on recognizance with instructions to personally appear at their next schedule court appearance.”²
Arizona	Coconino County court system and jail, Judge Dan Slayton, along with other county judges	Court order	<ul style="list-style-type: none"> As of March 20, 2020, Judge Dan Slayton and other county judges have released around 50 people who were held in the county jail on non-violent charges.³
California	Supreme Court of California, Chief Justice Tani Cantil-Sakauye	Advisory	<ul style="list-style-type: none"> The Chief Justice issued guidance encouraging the state’s superior courts to, among other things: <ul style="list-style-type: none"> “Lower bail amounts significantly for the duration of the coronavirus emergency, including lowering the bail amount to \$0 for many lower level offenses.” “Consider a defendant’s existing health conditions, and conditions existing at the anticipated place of confinement, in setting conditions of custody for adult or juvenile defendants.” “Identify detainees with less than 60 days in custody to permit early release, with or without supervision or community-based treatment.”⁴
	Sacramento Superior Court, Judge Hom	Order	<ul style="list-style-type: none"> The Court entered a standing order authorizing their sheriff to release those within 30 days of release, regardless of crime.⁵
Hawai‘i	Supreme Court	Order	<ul style="list-style-type: none"> The Court suspended the custodial portions of all intermittent sentences and appointed a special master to oversee a collaborative release effort.⁶

Kentucky	Supreme Court of Kentucky, Chief Justice John Minton Jr.	Letter to state judges and court clerks	<ul style="list-style-type: none"> Kentucky Chief Justice John Minton Jr. told state's judges and court clerks to release jail inmates "as quickly as we can" noting, "jails are susceptible to worse-case scenarios due to the close proximity of people and the number of pre-existing conditions," and that courts have the responsibility "to work with jailers and other county officials to safely release as many defendants as we can as quickly as we can."⁷
Louisiana	Louisiana Supreme Court, Chief Justice	Letter to all criminal court judges	<ul style="list-style-type: none"> On April 2, the Chief Justice of the Louisiana Supreme Court asked that all criminal court judges "in conjunction with prosecutors, public defenders and sheriffs, conduct a comprehensive and heightened risk-based assessment of all detainees." In addition to addressing the pretrial population, judges are instructed to review cases of those serving sentences for misdemeanors to "consider modification to a release and supervised probation or simply time-served."⁸
Maine	State of Maine Superior Court, Chief Justice Mullen and District Court Chief Judge Sparaco and Deputy Chief Judge French	Emergency Order	<ul style="list-style-type: none"> The Superior Court and District Court ordered all trial courts to immediately vacate all outstanding warrants for unpaid fines, restitution, fees, and failures to appear.⁹

Massachusetts	Supreme Court	Ruling	<ul style="list-style-type: none"> On April 3, the Massachusetts Supreme Judicial Court ruled in a pending lawsuit that people who are held pretrial on bail and have not been found dangerous or charged with a violent or otherwise excluded offense are entitled to a hearing within two business days of filing their motions, where they will be entitled to a rebuttable presumption of release. A special master appointed by the court will facilitate the hearings. The Court ordered the state Department of Correction and each sheriff to provide daily reports on the number of COVID-19 tests and number of positive results for all people in their custody, correctional officers, and other staff, and the number of people released pursuant to the Court's procedures and guidance. The Court also urged the parole board to expedite the hearings of individuals who are eligible for parole.¹⁰
Michigan	Chief Justice Bridget M. McCormack, Michigan Supreme Court	Joint Statement	<ul style="list-style-type: none"> In a Joint statement, Chief Justice McCormack urged judges to "use the statutory authority they have to reduce and suspend jail sentences for people who do not pose a public safety risk[,]... release far more people on their own recognizance while they await their day in court...[a]nd judges should use probation and treatment programs as jail alternatives."¹¹
Montana	Supreme Court of Montana, Chief Justice McGrath	Letter to Judges	<ul style="list-style-type: none"> Chief Justice of the Montana Supreme Court urged judges to "review your jail rosters and release, without bond, as many prisoners as you are able, especially those being held for non-violent offenses."¹²
New Jersey	New Jersey Supreme Court, Chief Justice Rabner	Consent Order	<ul style="list-style-type: none"> In New Jersey, after the Supreme Court ordered briefing and argument on why it should not order the immediate release of individuals serving county jail sentences, the Attorney General and County Prosecutors agreed to create an immediate presumption of release for every person serving a county jail sentence in New Jersey.¹³
New York	New York State Supreme Court, Bronx County, Justice Doris M. Gonzales	Judicial ruling based on writ of habeas corpus	<ul style="list-style-type: none"> In a habeas petition brought by the Legal Aid Society, a Justice Doris M. Gonzales ordered the release of 106 individuals currently held at Rikers Island on a non-criminal technical parole violation. These individuals were selected in the petition by virtue of their age and/or underlying medical condition.¹⁴

	New York Supreme Court Justice Mark Dwyer	Judicial ruling based on writ of habeas corpus	<ul style="list-style-type: none"> In a habeas petition brought by the Legal Aid Society, a Justice Mark Dwyer ordered the release of 16 individuals currently held at Rikers Island on pretrial detention or parole violation. These individuals were selected in the petition by virtue of their age and/or underlying medical condition.¹⁵
Ohio	Ohio Supreme Court, Chief Justice Maureen O'Connor	News Conference	<ul style="list-style-type: none"> Chief Justice O'Connor urged "judges to use their discretion and release people held in jail and incarcerated individuals who are in a high-risk category for being infected with the virus."¹⁶
Rhode Island	Supreme Court	Order	<ul style="list-style-type: none"> On April 3, the Rhode Island Supreme Court established a process for the trial courts to hear on an expedited basis motions to reduce the sentences of inmates within 90 days of the end of their sentences in cases where the Public Defender, Attorney General, and DOC have not stipulated to the early release of the inmate. The court ordered the release of 52 inmates where the parties had already reached an agreement on release.¹⁷
South Carolina	Supreme Court of South Carolina, Chief Justice Beatty	Memorandum	<ul style="list-style-type: none"> The Chief Justice instructed that "any person charged with a non-capital crime shall be ordered released pending trial on his own recognizance without surety, unless an unreasonable danger to the community will result or the accused is an extreme flight risk."¹⁸ Following the order, more than 85 people have been released from the Greenville County Detention Center in Greenville, South Carolina.
Texas	Travis County, Texas, Judges	Individual Court Orders	<ul style="list-style-type: none"> Travis County has begun releasing some defendants in custody with underlying health conditions, to reduce the potential spread of COVID-19 in the county's jails. After Austin saw its first positive cases of COVID-19, judges in the county nearly doubled its release of people from local jails on personal bonds, with one judge alone reversing four bond decisions after "balancing this pandemic and public health safety of inmates against what they're charged with."¹⁹

Utah	Utah Supreme Court and Utah Judicial Council, Chief Justice Durrant	Administrative Order	<ul style="list-style-type: none"> The Chief Justice of the Utah Supreme Court ordered that for defendants in-custody on certain misdemeanor offenses, “the assigned judge must reconsider the defendant’s custody status and is encouraged to release the defendant subject to appropriate conditions.”²⁰
Washington	Washington Supreme Court, Chief Justice Stephens	Order	<ul style="list-style-type: none"> Chief Justice Stephens ordered judges not to issue bench warrants for failure to appear, “unless necessary for the immediate preservation of public or individual safety” and “to hear motions for pretrial release on an expedited basis without requiring a motion to shorten time.” Additionally, for populations designated as at-risk or vulnerable by the Centers for Disease Control, the COVID-19 crisis is presumed to be a material change in circumstances to permit amendment of a previous bail order or to modify conditions of pre-trial release.²¹
Wyoming	Wyoming Supreme Court, Chief Justice Davis	Order	<ul style="list-style-type: none"> The Chief Justice instructed judges to issue summonses instead of bench warrants, unless public safety compels otherwise.²²
Federal Criminal Detention	C.D. Cal, Judge James V. Selna	Minute Order	<ul style="list-style-type: none"> The Court granted temporary release for 90 days, pursuant to 18 U.S.C. § 3142 (i), which authorizes discretionary temporary release when necessary for a person’s defense or another compelling reason. Judge Selna held the defendant’s age and medical conditions, which place him in the population most susceptible to COVID-19, and in light of the pandemic, to constitute “another compelling reason” and granted his temporary release.²³
	D. Conn., Judge Jeffrey A. Meyer	Order	<ul style="list-style-type: none"> Judge Meyer ordered the release of defendant stating that “the conditions of confinement at Wyatt are not compatible” with current COVID-19 public health guidance concerning social distancing and avoiding congregating in large groups. Judge Meyer is one of four federal judges in Connecticut who has released inmates in connection with the COVID-19 pandemic.²⁴

	D. Conn., Judge Vanessa Bryant	Order	<ul style="list-style-type: none"> Judge Bryant ordered the release of a sentenced prisoner at Wyatt who had “less than eight weeks left to serve on his sentence, [and] is immunocompromised and suffers from multiple chronic conditions that are in flux and predispose him to potentially lethal complications if he contracts COVID-19.”²⁵
	D.D.C., Judge Randolph D. Moss	Minute Order	<ul style="list-style-type: none"> Judge Moss released defendant, despite acknowledging offense charged--marijuana distribution and felon in possession—“is serious” because among other factors mitigating public safety concerns “incarcerating the defendant while the current COVID-19 crisis continues to expand poses a greater risk to community safety than posed by Defendant’s release to home confinement.”²⁶
	D.D.C., Judge Randolph D. Moss	Memorandum Opinion	<ul style="list-style-type: none"> Judge Moss released defendant while awaiting trial after weighing the risk to the public of releasing defendant [charged with distribution of child pornography] directly against risk to community safety if defendant remained incarcerated in light of the COVID-19 pandemic.²⁷
	D. Nev., Judge Jones	Opinion and Order	<ul style="list-style-type: none"> Judge Jones delayed defendant’s date to surrender to begin his intermittent confinement by a minimum of 30 days because “[i]n considering the total harm and benefits to prisoner and society . . . temporarily suspending [defendant’s] intermittent confinement would appear to satisfy the interests of everyone during this rapidly encroaching pandemic.” In coming to this conclusion, the court placed weight on the fact that “incarcerated individuals are at special risk of infection, given their living situations, and may also be less able to participate in proactive measures to keep themselves safe; because infection control is challenging in these settings.”²⁸
	D. S.C., Judge David C. Norton	Order	<ul style="list-style-type: none"> Judge Norton granted compassionate release for 73-year-old with severe health conditions under the First Step Act, “[g]iven defendant’s tenuous health condition and age, remaining incarcerated during the current global pandemic puts him at even higher risk for severe illness and possible death, and Congress has expressed its desire for courts to [release federal inmates who are vulnerable to COVID-19].”²⁹

	N.D. Cal., Judge Vince Chhabria	Sua Sponte Order	<ul style="list-style-type: none"> Judge Chhabria issued a sua sponte decision extending defendant's surrender date from June 12, 2020 to September 1, 2020 stating: "By now it almost goes without saying that we should not be adding to the prison population during the COVID-19 pandemic if it can be avoided . . . To avoid adding to the chaos and creating unnecessary health risks, offenders who are on release and scheduled to surrender to the Bureau of Prisons in the coming months should, absent truly extraordinary circumstances, have their surrender dates extended until this public health crisis has passed."³⁰
	N.D. Cal., Judge Hixson	Order	<ul style="list-style-type: none"> Judge Hixson released a 74-year old in light of COVID-19 holding "[t]he risk that this vulnerable person will contract COVID-19 while in jail is a special circumstance that warrants bail. Release under the current circumstances also serves the United States' treaty obligation to Peru, which – if there is probable cause to believe Toledo committed the alleged crimes – is to deliver him to Peru alive."³¹
	S.D.N.Y., Judge Paul A. Engelmayer	Amended Order	<ul style="list-style-type: none"> Judge Engelmayer granted defendant temporary release from custody, pursuant to 18 U.S.C. § 3142(i), "based on the unique confluence of serious health issues and other risk factors facing this defendant, including but not limited to the defendant's serious progressive lung disease and other significant health issues, which place him at a substantially heightened risk of dangerous complications should be contract COVID-19 as compared to most other individuals."³²
	S.D.N.Y., Judge Alison J. Nathan	Opinion & Order	<ul style="list-style-type: none"> Judge Nathan ordered the Defendant released subject to the additional conditions of 24-hour home incarceration and electronic location monitoring as directed by the Probation Department based in part on "the unprecedented and extraordinarily dangerous nature of the COVID-19 pandemic" which may place "at a heightened risk of contracting COVID-19 should an outbreak develop [in a prison]." ³³

Federal Immigration Detention	9th Cir., Judges Wardlaw, M. Smith, and Judge Siler, 6 th Cir., sitting by designation.	Sua Sponte Order	<ul style="list-style-type: none"> The panel held “[i]n light of the rapidly escalating public health crisis, which public health authorities predict will especially impact immigration detention centers, the court <i>sua sponte</i> orders that Petitioner be immediately released from detention and that removal of Petitioner be stayed pending final disposition by this court.”³⁴
	C.D. Cal, Judge Terry J. Halter, Jr.	TRO and order to show cause based on writ of habeas corpus	<ul style="list-style-type: none"> Judge Halter ordered the release of two ICE detainees. The court found that in detention “[p]etitioners have not been protected [against risks associated with COVID-19]. They are not kept at least 6 feet apart from others at all times. They have been put into a situation where they are forced to touch surfaces touched by other detainees, such as with common sinks, toilets and showers. Moreover, the Government cannot deny the fact that the risk of infection in immigration detention facilities – and jails – is particularly high if an asymptomatic guard, or other employee, enters a facility. While social visits have been discontinued at Adelanto, the rotation of guards and other staff continues.”³⁵
	D. Mass, Judge Mark L. Wolf	Oral Order	<ul style="list-style-type: none"> Judge Wolf ordered the release, with conditions, from ICE custody a member of the class in <i>Calderon v. Nielsen</i> based, in part, on the “extraordinary circumstances” posed by COVID-19.³⁶
	S.D.N.Y., Judge George B. Daniels	Memorandum Decision and Order	<ul style="list-style-type: none"> Judge Daniels ordered the release, under <i>Mapp v. Reno</i>, 241 F.3d 221 (2d Cir. 2001), of an individual as there was likelihood of success on the merits and COVID-19 risks and individual’s own medical issues constituted “extraordinary circumstances warranting release.”³⁷
	S.D.N.Y., Judge Alison J. Nathan	Opinion and Order	<ul style="list-style-type: none"> Judge Nathan ordered the immediate release of four detainees finding “no evidence that the government took any specific action to prevent the spread of COVID-19 to high-risk individuals . . . held in civil detention.”³⁸

	S.D.N.Y., Judge Analisa Torres	Memorandum Decision and Order.	<ul style="list-style-type: none"> Judge Torres granted immediate release on recognizance for ten individuals in immigration detention who have a variety of chronic health conditions that put them at high risk for COVID-19. These conditions include obesity, asthma, diabetes, pulmonary disease, history of congestive heart failure, respiratory problems, gastrointestinal problems, and colorectal bleeding. The court held detainees face serious risks to their health in confinement and “if they remain in immigration detention constitutes irreparable harm warranting a TRO.”³⁹
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¹ This chart, updated as of April 6, 2020, provides only a sample of the judicial action taken throughout the country as judges continue to respond to the COVID-19 pandemic.

²Administrative Order, No. 2020-00010, Ala. Ct. App. (Mar. 18, 2020), <https://drive.google.com/file/d/1I4QLwsytSVkdOuo5p6qb1JcuFWcAV4oA/view?usp=sharing>. Note: the original order has been revised to provide discretion to the Sheriffs. See Mike Carson, *Alabama Judge Orders Jail Inmates Released, then Leaves it Up to Sheriffs*, AL.Com (Mar. 19, 2020), <https://www.al.com/news/2020/03/alabama-judge-orders-jail-inmates-released-then-leaves-it-up-to-sheriffs.html>.

³ Scott Buffon, *Coconino County Jail Releases Nonviolent Inmates in Light of Coronavirus Concerns*, Arizona Daily Sun (updated Mar. 25, 2020), https://azdailysun.com/news/local/coconino-county-jail-releases-nonviolent-inmates-in-light-of-coronavirus/article_a6046904-18ff-532a-9dba-54a58862c50b.html.

⁴ Advisory from California Chief Justice Tani Cantil-Sakauye to Presiding Judges and Court Executive Officers of the California Courts (Mar. 20, 2020), <https://newsroom.courts.ca.gov/news/california-chief-justice-issues-second-advisory-on-emergency-relief-measures>.

⁵ *Standing Order of the Sacramento Superior Court*, No. SSC-20-PA5 (Mar. 17, 2020), <https://www.saccourt.ca.gov/general/standing-orders/docs/ssc-20-5.pdf>.

⁶ Order, *Office of the Public Defender v. Connors*, SCPW-20-0000200 and SCPW-20-0000213 (Sup. Ct. Haw. April 2, 2020), <https://drive.google.com/open?id=1dRyOtJhLG3-oe8AH4MmFx12X4XmSruEC>

⁷ Kyle C. Barry, *Some Supreme Courts Are Helping Shrink Jails to Stop Outbreaks. Others Are Lagging Behind.*, The Appeal (Mar. 25, 2020), <https://theappeal.org/politicalreport/some-supreme-courts-are-helping-shrink-jails-coronavirus>; John Cheves, *Chief Justice Pleads for Kentucky Inmate Release Ahead of COVID-19 but Progress Slow*, Lexington Herald Leader (Mar. 23, 2020), <https://www.kentucky.com/news/coronavirus/article241428266.html>.

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- ⁸ Letter from Chief Justice Bernette Joshua Johnson, La. Sup. Ct., to All District Court Judges (Apr. 2, 2020), <http://www.lasc.org/COVID19/2020-04-02-LASC-ChiefLetterReCOVID-19andjailpopulation.pdf>
- ⁹ Emergency Order Vacating Warrants for Unpaid Fines, Unpaid Restitution, Unpaid Court-Appointed Counsel Fees, and Other Criminal Fees (Mar. 17, 2020), <https://www.courts.maine.gov/covid19/emergency-order-vacating-warrants-fines-fees.pdf>.
- ¹⁰ Order, Comm. Pub. Counsel Serv. v. Chief Justice of the Trial Court, Ma. Sup. Ct., No. SJC-12926 (Apr. 3, 2020), https://www.aclum.org/sites/default/files/field_documents/sjc-12926_41_opinion.pdf
- ¹¹ Joint Statement of Chief Justice Bridget M. McCormack, Mich. Sup. Ct. and Sheriff Matt Saxton, Exec. Dir., Mich. Sheriff Ass'n (Mar. 26, 2020), [https://courts.michigan.gov/News-Events/press_releases/Documents/CJ%20and%20MSA%20Joint%20Statement%20draft%202%20\(003\).pdf](https://courts.michigan.gov/News-Events/press_releases/Documents/CJ%20and%20MSA%20Joint%20Statement%20draft%202%20(003).pdf).
- ¹² Letter from Chief Justice Mike McGrath, Mont. Sup. Ct. to Mont. Ct. of Ltd. Jurisdiction Judges (Mar. 20, 2020), <https://courts.mt.gov/Portals/189/virus/Ltr%20to%20COLJ%20Judges%20re%20COVID-19%20032020.pdf?ver=2020-03-20-115517-333>.
- ¹³ Consent Order, *In the Matter of the Request to Commute or Suspend County Jail Sentences*, No. 084230 (N.J. March 22, 2020), https://www.aclu-nj.org/files/5415/8496/4744/2020.03.22_-_Consent_Order_Filed_Stamped_Copy-1.pdf.
- ¹⁴ *People of the State of New York, ex rel., v. Cynthia Brann*, No. 260154/2020 (Sup. Ct. NY Mar. 25, 2020), https://linkprotect.cudasvc.com/url?a=https%3a%2f%2flegalaidnyc.org%2fwp-content%2fuploads%2f2020%2f03%2fLAS-Mass-Parole-Holds-Writ.pdf&c=E,1,pDbcoVtCJ0c6j6E8cl3m276yaRxs-nzttikQuvDWwS91mRHj6RhL8o5pEJmJl-lk86sC7-f1rq9dTlh2Pe3ZmAUCoZCiC9er2g4Z4mL_ToQ,&typo=1; see also Frank G. Runyeon, *NY Judges Release 122 Inmates as Virus Cases Spike in Jails*, Law360 (March 27, 2020), <https://www.law360.com/newyork/articles/1257871/ny-judges-release-122-inmates-as-virus-cases-spike-in-jails>.
- ¹⁵ *Jeffrey v. Bran*, (Sup. Ct. NY Mar. 26, 2020). See Press Release, Redmon Haskins, *Legal Aid Wins Release of 16 Incarcerated New Yorkers at a High Risk of COVID-19 from City Jails* (Mar. 26, 2020), <https://legalaidnyc.org/wp-content/uploads/2020/03/03-26-20-Legal-Aid-Wins-Release-of-16-Incarcerated-New-Yorkers-at-a-high-risk-of-COVID-19-from-City-Jails.pdf>;
- see also Runyeon, *NY Judges Release 122 Inmates*, *supra* note 11.
- ¹⁶ Press Conference, Ohio Chief Justice Maureen O'Connor and Gov. Mike DeWine (Mar. 19, 2020); see also WLWT5, *Release Ohio Jail Inmates Vulnerable to Coronavirus, Chief Justice Urges* (Mar. 19, 2020), <https://www.wlwt.com/article/release-ohio-jail-inmates-vulnerable-to-coronavirus-chief-justice-urges/31788560#>.
- ¹⁷ Order, *In Re Request for Prison Census Control*, No. 2020-103-M.P. (Apr. 2, 2020), [https://www.courts.ri.gov/PDF/In%20re%20Request%20for%20Prison%20Census%20Control%20\(Order\).pdf](https://www.courts.ri.gov/PDF/In%20re%20Request%20for%20Prison%20Census%20Control%20(Order).pdf)
- ¹⁸ Memorandum from Chief Justice Beatty, Sup. Ct of S.C to Magistrates, Mun. Judges, and Summary Ct. Staff (March 16, 2020), <https://www.sccourts.org/whatsnew/displayWhatsNew.cfm?indexId=2461>.

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- ¹⁹ Ryan Autullo, *Travis County Judges Releasing Inmates to Limit Coronavirus Spread*, Statesman (Mar. 16, 2020), <https://www.statesman.com/news/20200316/travis-county-judges-releasing-inmates-to-limit-coronavirus-spread?fbclid=IwAR3VKawwn3bwSLSO9jXBxXNRuaWd1DRLsCBFc-ZkPN1INWW8xnzLPvZYNO4>.
- ²⁰ Order, *Administrative Order for Court Operations During Pandemic* (Utah Mar. 21, 2020), <https://www.utcourts.gov/alerts/docs/20200320%20-%20Pandemic%20Administrative%20Order.pdf>.
- ²¹ Am. Order, *In the Matter of Statewide Response by Washington State Courts to the Covid-19 Public Health Emergency*, No. 25700-B-607 (Wash. Mar. 20, 2020), <http://www.courts.wa.gov/content/publicUpload/Supreme%20Court%20Orders/Supreme%20Court%20Emergency%20Order%20re%20CV19%20031820.pdf>.
- ²² Order Adopting Temporary Plan to Address Health Risks Posed by the COVID-19 Pandemic, *In the Matter of the Wyoming Supreme Court's Temporary Plan Regarding COVID-19 Pandemic* (Wyo. Mar. 18, 2020), <http://www.courts.state.wy.us/wp-content/uploads/2020/03/COVID-19-Order.pdf>.
- ²³ Minute Order, *United States v. Michaels*, 8:16-cr-76-JVS, (C.D. Cal. Mar. 26, 2020), https://drive.google.com/file/d/1BeWih63M7FKreKEvLJyIQevYSivGA_PU/view.
- ²⁴ Edmund H. Mahony, *Courts Ponder the Release of Low Risk Inmates in an Effort to Block the Spread of COVID-19 to the Prison System*, Hartford Currant (Mar. 24, 2020), <https://www.courant.com/coronavirus/hc-news-covid-inmate-releases-20200323-20200324-oreyf4kdbdfbe3adv6u6ajsj57u-story.html>.
- ²⁵ Order, *United States v. Jepsen*, No. 3:19-cv-00073 (VLB) (D. Conn. Apr. 2, 2020), <https://drive.google.com/open?id=1QMistlQofKz3pmMlahAJLIVN2skqZWap>.
- ²⁶ Minute Order, *United States v. Jaffee*, No. 19-cr-88 (RDM) (D.D.C. Mar. 26, 2020), <https://drive.google.com/file/d/1AYfIU6QKCOElpX5Vh3Af6BDqO8goZ5WE/view>.
- ²⁷ *United States v. Harris*, No. 19-cr-356 (RDM) (D.D.C. Mar. 26, 2020), <https://drive.google.com/file/d/1aO3BNOKB8ukL20A76Mu7Fn0GyCng0Ras/view>.
- ²⁸ *United States v. Barkma*, No. 19-cr-0052 (RCJ-WGC), 2020 U.S. Dist. LEXIS 45628, at *3 (D. Nev. Mar. 17, 2020), https://drive.google.com/file/d/1o35MokiprkmhzCUUieg_Eua6e05v4zOw/view.
- ²⁹ *United States v. Copeland*, No. 2:05-cr-135-DCN, at 7 (D.S.C. Mar. 24, 2020), <https://drive.google.com/file/d/1tyA8Kjvld23QTL0Wo7xbAdqLEOCCVC4q/view>.
- ³⁰ *United States v. Garlock*, No. 18-CR-00418-VC-1, 2020 WL 1439980, at *1 (N.D. Cal. Mar. 25, 2020), https://drive.google.com/file/d/1H47EQMXtQZkXFv_GXSffAV6Xkse3-kpl/view.
- ³¹ *In The Matter Of The Extradition Of Alejandro Toledo Manrique*, No. 19-mj-71055-MAG, 2020 WL 1307109, at *1 (N.D. Cal. Mar. 19, 2020), <https://drive.google.com/file/d/1AfU1ft4Lcm60QbPhjgo9HgGAHkbPKPzD/view>.
- ³² AM. Order, *United States v. Perez*, 19-cr-297 (PAE), at 1 (S.D.N.Y. Mar. 19, 2020), <https://drive.google.com/file/d/17xE8qdGeeTI2d2dWjNDfwmXLc8GxTtfA/view>.

³³ *United States v. Stephens*, No. 15-cr-95-AJN, 2020 WL 1295155, at *2-3 (S.D.N.Y. Mar. 19, 2020), <https://drive.google.com/file/d/1hEhz9olCfaKRinDvUOKqjDTcx3-nc4vq/view>.

³⁴ *Xochihua-Jaimes v. Barr*, No. 18-cv-71460 (9th Cir. Mar. 23, 2020), <https://drive.google.com/file/d/16eh6qMzihmNISEq0SzmCSQx98OiLn38l/view>

³⁵ *Castillo v. Barr*, No. 20-cv-605 (TJH)(AFM), at 10 (C.D.Cal. Mar. 27, 2020), <https://drive.google.com/file/d/1BeFuU-Lrjj-VVeA6QA2O7zLud7aWIVeN/view>.

³⁶ Transcript of Oral Argument, at 3-4, 6, *Jimenez v. Wolf*, No. 18-10225-MLW (D. Mass. Mar. 26, 2020), <https://www.courtlistener.com/recap/gov.uscourts.mad.195705/gov.uscourts.mad.195705.507.1.pdf>.

³⁷ *Jovel v. Decker*, No. 12-cv-308 (GBD), at 2 (S.D.N.Y. Mar. 26, 2020), <https://drive.google.com/file/d/1mrJ9WbCgNGeyWn1cy3xAvo61yJWnaDe8/view>.

³⁸ *Coronel v. Decker*, No. 20-cv-2472 (AJN), at 10 (S.D.N.Y. Mar. 27, 2020), <https://legalaidnyc.org/wp-content/uploads/2020/03/20cv2472-Op.-Order-3.27.20.pdf>.

³⁹ *Basank v. Decker*, No. 20-cv-2518 (AT), at 7, 10 (S.D.N.Y. Mar. 26, 2020), https://drive.google.com/file/d/1FJ7tU9JCskKPh4xkoe4j3YgoQ5y2_y0P/view.

Exhibit 23

Second Appendix

Appendix 2: Gubernatorial and Agency Actions Across the Country to Reduce Incarceration in Light of Covid-19¹

State	Forum	Nature of Relief
Arkansas	Department of Corrections	<ul style="list-style-type: none"> The Arkansas Board of Corrections voted on March 25 to expedite parole consideration for 114 prisoners.²
California	Department of Corrections	<ul style="list-style-type: none"> The California Department of Corrections and Rehabilitation announced on March 31 that it would expedite the transition to parole for nonviolent offenders with 60 days or less left on their sentences, with priority going to individuals with less than 30 days left.³
Colorado	Executive Order	<ul style="list-style-type: none"> The Governor of Colorado issued an executive order on March 25 suspending all statutory caps and criteria for the award of earned time and giving DOC “the discretion to make awards of earned time credits as it deems necessary and appropriate to safely facilitate the reduction of the population of incarcerated persons and parolees to prevent an outbreak in prisons.” The order suspends the criteria for release on Special Needs Parole, and gives DOC the discretion to identify interim criteria for Special Needs Parole and refer people who meet those criteria to the parole board.⁴
Georgia	Parole Board	<ul style="list-style-type: none"> The Georgia Board of Pardons and Paroles on March 31 announced that it had begun to review approximately 200 people for early release. They are considering people serving time for nonviolent offenses who are within 180 days of completing their prison sentences (or of their tentative parole date).⁵
Iowa	Department of Corrections	<ul style="list-style-type: none"> The director of the Iowa Department of Corrections reported on March 23 the expedited release of about 700 incarcerated people who have been determined eligible for release by the Iowa Board of Parole.⁶
Kentucky	Executive Order	<ul style="list-style-type: none"> The Governor of Kentucky announced on April 2 that the state will release nearly 1,000 state prisoners. The Governor signed an executive order commuting the sentences of 186 people convicted of C or D felonies who are more susceptible to COVID-19 because they have respiratory, heart and/or other health problems. Before their release, the prisoners will be screened for COVID-19, and state officials will verify that they have a home where they can be quarantined. The state has identified an additional 743 people to release who are within six months of completing their sentences.⁷

Michigan	Executive Order	<ul style="list-style-type: none"> Michigan's Governor issued an executive order on March 29 permitting actions that would be authorized in the event of a declaration of a county jail overcrowding state of emergency. Judges are authorized to "reduce any validly imposed jail sentence" and are "strongly encouraged to consider early release" of "[o]lder people, people who have chronic conditions or are otherwise medically frail, people who are pregnant, and people nearing their release date" as long as they do not pose a public safety risk.⁸
North Dakota	Parole Board	<ul style="list-style-type: none"> The North Dakota parole board on March 20 granted early release dates to 56 people held in state prison with expected release dates later in March and early April.⁹

¹ This chart provides only a sample of the executive and agency action taken throughout the country as they continue to respond to the COVID-19 pandemic.

² John Moritz, *Parole Consideration Moved Up for 114 Inmates; Crowded Prisons a Concern Amid Outbreak*, Ark. Democrat-Gazette (Mar. 25, 2020), <https://www.arkansasonline.com/news/2020/mar/25/parole-consideration-moved-114-inmates-crowded-pri>.

³ Justin Wise, *California to Release up to 3,500 Non-violent Inmates Amid Coronavirus Outbreak*, The Hill (Mar. 31, 2020), <https://thehill.com/homenews/state-watch/490498-california-to-release-3500-non-violent-inmates-amid-coronavirus-outbreak>.

⁴ Executive Order No. D 2020 016, *Temporarily Suspending Certain Regulatory Statutes Concerning Criminal Justice* (Mar. 25, 2020), <https://drive.google.com/file/d/18o0yWHZleHJ87hmgLuBmXwpM8R74Q5x/view>.

⁵ Joshua Sharpe, *Georgia to Release Some Inmates due to Covid Fears*, AJC (Mar. 31, 2020), <https://www.ajc.com/news/local/breaking-georgia-release-some-inmates-due-covid-fears/np6zhBrIP1oe2jOkUmWVoL/>.

⁶ Linh Ta, *Iowa's Prisons Will Accelerate Release of Approved Inmates to Mitigate COVID-19*, Times-Republican (Mar. 23, 2020), <https://www.timesrepublican.com/news/todays-news/2020/03/iowas-prisons-will-accelerate-release-of-approved-inmates-to-mitigate-covid-19>.

⁷ Brian Panalp, *Nearly 1,000 Kentucky Prison Sentences To Be Commuted*, Beshear says, Fox61 News, Apr. 2, 2020, <https://www.fox19.com/2020/04/02/watch-live-gov-beshear-provides-update-covid-kentucky>.

⁸ Michigan Courts News Release: Chief Justice Bridget M. McCormack, Michigan Supreme Court Sheriff Matt Saxton (ret.), Executive Director, Michigan Sheriffs' Association Joint Statement (Mar. 26, 2020), https://courts.michigan.gov/News-Events/press_releases/Documents/CJ%20and%20MSA%20Joint%20Statement%20draft%202%20%28003%29.pdf.

⁹ Tim Olson, *Over 50 inmates granted early release to prepare state penitentiary for COVID-19*, Kxnet.com (Mar. 20, 2020), <https://www.kxnet.com/news/health/coronavirus/over-50-inmates-granted-early-release-to-prepare-state-penitentiary-for-covid-19/>.

Exhibit 24

Affidavit of Josiah Rich

Affidavit of Dr. Josiah Rich, MD, MPH

1. I am a doctor duly licensed to practice medicine in the state of Rhode Island.
2. I am currently Professor of Medicine and Epidemiology at The Warren Alpert Medical School of Brown University, and the Director and Co-founder of The Center for Prisoner Health and Human Rights at The Miriam Hospital.
3. I have been a practicing Infectious Disease Specialist since 1994. I provide clinical care at The Miriam Hospital Immunology Center, as well as at the Rhode Island Department of Corrections, where I care for prisoners with HIV infection and addiction and also work in the correctional setting doing research.
4. My primary field and area of specialization and expertise is in the overlap between infectious diseases and illicit substance use, the treatment and prevention of HIV infection, and the care and prevention of disease in addicted and incarcerated individuals. I am an elected member of the National Academy of Medicine and I have served as an expert for the National Academy of Sciences, the Institute of Medicine, and many others. I have also been appointed by Rhode Island Governor Gina Raimondo to the Overdose Prevention and Intervention Task Force Expert Team. I have published over 200 peer-reviewed publications, predominantly in the overlap between infectious diseases, addictions, and incarceration.
5. The matters that I discuss below are proceeding at a rapid pace across the country. I have published about these urgent concerns in the New England Journal of Medicine, the Washington Post, and elsewhere. I attach copies of those articles to this affidavit.

The extreme challenges Covid-19 poses for Connecticut's prison system.

6. As we are quickly seeing throughout the United States and the world, highly transmissible novel respiratory pathogens such as SARS-CoV-2—the virus that causes Covid-19—create a perfect storm for correctional settings.

7. First, correctional settings are ideal for rapid spread of viruses that are transmitted person-to-person, especially those passed by droplets through coughing and sneezing. When people must share dayrooms, bathrooms, showers, and other common areas, the opportunities for transmission are great. And while there continues to be disagreement about whether SARS-CoV-2 is an airborne virus, in the context of limited information, we must assume that it is. In that case, the poor ventilation systems within correctional facilities will ensure maximal opportunities for transmission.

8. When viruses are transmitted from person to person, the best initial strategy is to practice social distancing. Yet social distancing is extremely challenging in correctional settings. Even when facilities are locked down and use of common space are limited, there is inevitably frequent contact among prisoners, and especially between prisoners and staff. Even a quick cell change or shower involves multiple opportunities for contact with others. Accordingly, no matter what measures we take, correctional facilities are congregate settings that are poorly designed to prevent the inevitable rapid and widespread dissemination of this virus.

9. I understand that Connecticut, like other systems, has suspended visitation and facility transfers, and has taken certain other measures to try to limit infection. Irrespective of these interventions, however, infected persons—especially staff members—will inevitably continue to enter correctional settings. It is essential to understand that, despite being physically

secure, jails and prisons are not isolated from the community. Rather, the boundaries between correctional institutions and the communities in which they sit are extremely porous. Staff, visitors, contractors, and vendors pass between communities and facilities and can bring infectious diseases into facilities. Moreover, population turnover means that people cycle between facilities and communities. And people often need to be transported to and from facilities, including for disciplinary and/or quarantining purposes. All of this is problematic in the context of this pandemic: While entry temperature checks may be effective screening mechanisms for symptomatic infections, they are ineffective with SARS-CoV-2 due to high rates of asymptomatic or pre-symptomatic infection.

10. Moreover, there are reduced prevention opportunities in prisons. During an infectious disease outbreak, free people can protect themselves by washing hands. Correctional facilities do not provide adequate opportunities to exercise necessary hygiene measures, such as frequent handwashing or use of alcohol-based sanitizers when handwashing is unavailable. These facilities are often under-resourced and ill-equipped with sufficient hand soap and alcohol-based sanitizers for both people detained in and working in these settings. High-touch surfaces (doorknobs, light switches, etc.) should also be cleaned and disinfected regularly with bleach to prevent virus spread, but bleach is often unavailable, and cleaning agents used by correctional settings may not have been shown to effectively neutralize this virus, particularly in the diluted form commonly employed. There may also be a lack of people available to perform necessary cleaning procedures, which is exacerbated as people fall ill and movement is restricted.

11. A containment strategy for this virus requires both widespread screening and that people who are symptomatic be immediately isolated. It also requires that correctional officers and caregivers have access to personal protective equipment, including gloves, masks, gowns,

and face shields. Yet correctional settings are often under-resourced and ill-equipped to provide sufficient personal protective equipment for people who are incarcerated and caregiving staff, increasing the risk for everyone in the facility where an outbreak is occurring. Correctional settings are also unlikely to be able to perform the widespread screening and contact-tracing necessary to prevent further infection.

12. All of the above is compounded by the fact that half of all incarcerated people in the United States have at least one chronic disease. With limited ability to protect themselves and others by self-isolating, thousands of susceptible people are at heightened risk for severe illness.

Lessening the spread of Covid-19 requires urgent, scaled-up decarceration

13. The more preemptive measures taken by legal, public health, and correctional health partnerships, the lighter the burden the correctional facilities and their surrounding communities will bear. The global context offers some precedent here. Iran, for example, responded to its escalating pandemic by releasing 70,000 prisoners, something that may have helped “bend the curve” of that country’s epidemic. Conversely, failure to calm incarcerated populations in Italy led to widespread rioting in Italian prisons.

14. At minimum, Connecticut must be prepared to isolate and separate incarcerated persons who are infected and those who are under investigation for possible infection from the general prison population; to hospitalize those who are seriously ill; and to cope with the high burden of disease and severe staff shortages that are likely to come.

15. But this won’t be enough. It is imperative to scale up efforts to “decarcerate,” or release, as many people as possible, including those detained on bail. Each person needlessly infected in a correctional setting who develops severe illness will be one too many. And public

safety will be at even greater peril if we fail to mitigate risks associated with confining too many people in correctional facilities during a pandemic.

16. It is my strong opinion that urgent decarceration is imperative to flatten the curve of Covid-19 cases among incarcerated populations and to limit the impact of transmission both inside correctional facilities and in the community. The abrupt onset of severe Covid-19 infections among incarcerated individuals will require mass transfers to local hospitals for intensive medical and ventilator care—highly expensive interventions are already in very short supply. Each severely ill patient coming from the Department of Correction who occupies an ICU bed may mean others may die for inability to obtain care. These are preventable infections, and we should act to prevent them.



Dr. Josiah Rich

April 6, 2020

-Notarization to follow-

Exhibit 25

Affidavit of Brie Williams

AFFIDAVIT OF BRIE WILLIAMS, M.D.

I, Brie Williams, hereby affirm as follows:

1. I am a doctor licensed to practice medicine in the State of California.
2. I am currently a Professor of Medicine at the University of California, San Francisco (“UCSF”) in the Geriatrics Division, Director of UCSF’s Amend: Changing Correctional Culture Program, as well as Director of UCSF’s Criminal Justice & Health Program. In that capacity, my clinical research has focused on improved responses to disability, cognitive impairment, and symptom distress in older or seriously ill prisoners; a more scientific development of compassionate release policies; and a broader inclusion of prisoners in national health datasets and in clinical research. I have developed new methods for responding to the unique health needs of criminal justice-involved older adults—including an evidence-based approach to reforming compassionate release policies and the design of a new tool to assess physical functioning in older prisoners. I was previously a consultant for the California Department of Corrections and Rehabilitation, as well as for other state prison systems.
3. I have extensive experience working with vulnerable populations, in particular the incarcerated and the elderly.

The Risk of Infection and Accelerated Transmission of COVID-19 within Jails and Prisons is Extraordinarily High.

4. Prisons and jails are not actually isolated from our communities: hundreds of thousands of correctional officers and correctional healthcare workers enter these facilities every day, returning to their families and to our communities at the end of their shifts, bringing back and forth to their families and neighbors and to incarcerated patients any exposures they have had during the day. Access to testing for correctional staff has been “extremely limited,”

guards—including, as I understand, those in Connecticut—have reported a very “short supply” of protective equipment, and prisons are not routinely or consistently screening correctional officers for symptoms.¹

5. The risk of exposure is particularly acute in pre-trial facilities where the inmate populations shift frequently.² For example, despite the federal government’s guidance to stay inside and many states’ stay-in-place orders, many prosecutors are still arresting individuals and seeking detention.³ Pre-trial detention facilities are still accepting new inmates who are coming from communities where COVID-19 infection is rampant.

6. Because inmates live in close quarters, there is an extraordinarily high risk of accelerated transmission of COVID-19 within jails and prisons. Inmates share small cells, eat together and use the same bathrooms and sinks. In dorm settings, they eat together at small tables that are cleaned only irregularly. Some are not given tissues or sufficient hygiene supplies.⁴

¹ Keegan Hamilton, *Sick Staff, Inmate Transfers, and No Tests: How the U.S. Is Failing Federal Inmates as Coronavirus Hits*, Vice (Mar. 24, 2020), https://www.vice.com/en_ca/article/jge4vg/sick-staff-inmate-transfers-and-no-tests-how-the-us-is-failing-federal-inmates-as-coronavirus-hits.

See also Daniel A. Gross, “*It Spreads Like Wildfire*”: *The Coronavirus Comes to New York’s Prisons*, The New Yorker (Mar. 24, 2020), <https://www.newyorker.com/news/news-desk/it-spreads-like-wildfire-covid-19-comes-to-new-yorks-prisons>; Josiah Bates, “*We Feel Like All of Us Are Gonna Get Corona*,” *Anticipating COVID-19 Outbreaks, Rikers Island Offers Warning for U.S. Jails, Prisons*, Time (Mar. 24, 2020), <https://time.com/5808020/rikers-island-coronavirus/>; Sadie Gurman, *Bureau of Prisons Imposes 14-Day Quarantine to Contain Coronavirus*, WSJ (Mar. 24, 2020), <https://www.wsj.com/articles/bureau-of-prisons-imposes-14-day-quarantine-to-contain-coronavirus-11585093075>; Cassidy McDonald, *Federal Prison Workers Say Conflicting Orders on Coronavirus Response Is Putting Lives at Risk*, CBS News (Mar. 19, 2020), <https://www.cbsnews.com/news/coronavirus-prison-federal-employees-say-conflicting-orders-putting-lives-at-risk-2020-03-19/>.

² Emma Grey Ellis, *Covid-19 Poses a Heightened Threat in Jails and Prisons*, Wired (Mar. 24, 2020), <https://www.wired.com/story/coronavirus-covid-19-jails-prisons/>.

³ Stephen Rex Brown, “*Business as Usual*” *For Federal Prosecutors Despite Coronavirus*, Nadler Writes, *Calling for Release of Inmates*, N.Y. Daily News (Mar. 20, 2020), <https://www.nydailynews.com/new-york/ny-nadler-doj-inmates-20200320-d6hbdjcu5aitppi3ui2xz7tjy-story.html>.

⁴ Justine van der Leun, *The Incarcerated Person Who Knows How Bad It Can Get*, Medium (Mar. 19, 2020), <https://gen.medium.com/what-its-like-to-be-in-prison-during-the-coronavirus-pandemic-1e770d0ca3c5> (“If you don’t have money, you don’t have soap or tissues.”); Keri Blakinger and Beth Schwartzapfel, *How Can Prisons Contain Coronavirus When Purrell Is a Contraband?*, ABA Journal (Mar. 13, 2020), <https://www.abajournal.com/news/article/when-purrell-is-contraband-how-can-prisons-contain-coronavirus>.

Effective social distancing in most facilities is virtually impossible, and is often compounded by inadequate sanitation, such as a lack of hand sanitizer or sufficient opportunities to wash hands.⁵

Inmate Populations Also Have the Highest Risk of Acute Illness and Poor Health Outcomes if Infected with COVID-19.

7. There are more than 2.3 million people incarcerated in the United States⁶ approximately 16% of whom are age 50 or older.⁷ The risk of coronavirus to incarcerated seniors is high. “Their advanced age, coupled with the challenges of practicing even the most basic disease prevention measures in prison, is a potentially lethal combination.”⁸ To make matters worse, correctional facilities are often ill-equipped to care for aging prisoners, who are more likely to suffer from chronic health conditions than the general public.

8. An estimated 39-43% of all prisoners, and over 70% of older prisoners, have at least one chronic condition, some of the most common of which are diabetes, hypertension, and heart problems.⁹ According to the CDC, each of these conditions—as well as chronic bronchitis,

⁵ Rosa Schwartzburg, ‘*The Only Plan the Prison Has Is to Leave Us To Die in Our Beds*’, The Nation (Mar. 25, 2020), <https://www.thenation.com/article/society/coronavirus-jails-mdc/>.

⁶ Kimberly Kindy *et al.*, ‘*Disaster Waiting to Happen*’: Thousands of Inmates Released as Jails and Prisons Face Coronavirus Threat, Washington Post (Mar. 25, 2020), https://www.washingtonpost.com/national/disaster-waiting-to-happen-thousands-of-inmates-released-as-jails-face-coronavirus-threat/2020/03/24/761c2d84-6b8c-11ea-b313-df458622c2cc_story.html.

⁷ Brie Williams *et al.*, *Strategies to Optimize the Use of Compassionate Release from US Prisons*, 110 AJPH S1, S28 (2020), available at <https://ajph.aphapublications.org/doi/full/10.2105/AJPH.2019.305434>; Kimberly A. Skarupski, *The Health of America’s Aging Prison Population*, 40 Epidemiologic Rev. 157, 157 (2018), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5982810/>.

⁸ Weihua Li and Nicole Lewis, *This Chart Shows Why the Prison Population is So Vulnerable to COVID-19*, The Marshall Project (Mar. 19, 2020), <https://www.themarshallproject.org/2020/03/19/this-chart-shows-why-the-prison-population-is-so-vulnerable-to-covid-19>.

⁹ Brie A. Williams *et al.*, *How Health Care Reform Can Transform the Health of Criminal Justice-Involved Individuals*, 33 Health Affairs 462-67 (2014), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4034754/>; Brie A. Williams *et al.*, *Coming Home: Health Status and Homelessness Risk of Older Pre-release Prisoners*, 25 J. Gen. Internal Med. 1038-44 (2010), available at <https://link.springer.com/content/pdf/10.1007/s11606-010-1416-8.pdf>; Laura M. Maruschak *et al.*, *Medical Problems of State and Federal Prisoners and Jail Inmates, 2011-12*, U.S. Dept of Justice (Oct. 4, 2016), at 5, available at <https://www.bjs.gov/content/pub/pdf/mpsfpi1112.pdf>.

emphysema, heart failure, blood disorders, chronic kidney disease, chronic liver disease, any condition or treatment that weakens the immune response, current or recent pregnancy in the last two weeks, inherited metabolic disorders and mitochondrial disorders, heart disease, lung disease, and certain neurological and neurologic and neurodevelopment conditions¹⁰—puts them at a “high-risk for severe illness from COVID-19.”¹¹

9. However, even many young federal prisoners suffer from asthma, rendering them also very vulnerable to coronavirus.¹²

10. But it is not only the elderly, or those with preexisting medical conditions that are at risk of coronavirus in a correctional setting. As of March 23, 2020, New York City reported that “[p]eople ranging in ages from 18 to 44 have accounted for 46 percent of positive tests.”¹³ Across the United States, 38% of those hospitalized are between the ages of 20 and 54 and 12% of the intensive care patients are between 20 and 44.¹⁴

11. This data is of particular concern for inmate populations, since prisoners’ physiological age *averages 10 to 15 years older* than their chronological age.¹⁵ Therefore, the

¹⁰ Harvard Health Publishing, *Coronavirus Research Center*, Harvard Medical School (Mar. 25, 2020), <https://www.health.harvard.edu/diseases-and-conditions/coronavirus-resource-center>.

¹¹ Centers for Disease Control and Prevention, *Coronavirus Disease 2019: People Who Are at Higher Risk*, <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/people-at-higher-risk.html> (last updated Mar. 22, 2020).

¹² Laura Maruschak, *Medical Problems of Jail Inmates*, Dep’t of Justice (Nov. 2006), at p. 2, *available at* <https://www.bjs.gov/content/pub/pdf/mpji.pdf>.

¹³ Kimiko de Freytas-Tamura, *20-Somethings Now Realizing That They Can Get Coronavirus, Too*, N.Y. Times (Mar. 23, 2020), <https://www.nytimes.com/2020/03/23/nyregion/nyc-coronavirus-young.html>.

¹⁴ *Id.*

¹⁵ Brie A. Williams *et al.*, *Aging in Correctional Custody: Setting a Policy Agenda for Older Prisoner Health Care*, 102 Am. J. Public Health 1475-81 (2012), *available at* <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3464842/>; *see also* Brie Williams *et al.*, *Detained and Distressed: Persistent Distressing Symptoms in a Population of Older Jail Inmates*, 64 J. Am. Geriatrics Soc. 2349-55 (2016), <https://onlinelibrary.wiley.com/doi/pdf/10.1111/jgs.14310> (“For example, older jail inmates with an average age of 60 in this study reported poor or fair health [and] chronic

consensus of those who study correctional health is that inmates are considered “geriatric, by the age of 50 or 55 years.”¹⁶ It is not clear that prison health care administrations are taking accelerated ageing into account when determining the eligibility criteria for age-related screening tools and medical care protocols for coronavirus, potentially leaving large swathes of the prison population at risk.¹⁷

12. In one study, we found that inmates who died in hospitals were, on average, nearly two decades younger than non-incarcerated decedents, had significantly shorter hospitalizations, and had higher rates of several chronic conditions including cancer, liver disease and/or hepatitis, mental health conditions, and HIV/AIDS.”¹⁸

The Entire Community is at Risk If Prison Populations Are Not Reduced

13. As the World Health Organization has warned, prisons around the world can expect “huge mortality rates” from Covid-19 unless they take immediate action including screening for the disease.¹⁹

lung disease . . . at rates similar to those reported by community-based lower income older adults with an average age of 72.”).

¹⁶ Brie A. Williams *et al.*, *The Older Prisoner and Complex Chronic Medical Care* 165-70 in World Health Organization, *Prisons and Health* (2014), <https://pdfs.semanticscholar.org/64aa/10d3cff6800ed42dd152fcf4e13440b6f139.pdf>.

¹⁷ Brie A. Williams *et al.*, *Differences Between Incarcerated and Non-Incarcerated Patients Who Die in Community Hospitals Highlight the Need For Palliative Care Services For Seriously Ill Prisoners in Correctional Facilities and in Community Hospitals: a Cross-Sectional Study*, 32 J. Palliative Med. 17-22 (2018), available at <https://journals.sagepub.com/doi/pdf/10.1177/0269216317731547>.

¹⁸ *Id.* at 20.

¹⁹ Hannah Summers, ‘Everyone Will Be Contaminated’: Prisons Face Strict Coronavirus Controls, *The Guardian* (Mar. 23, 2020), <https://www.theguardian.com/global-development/2020/mar/23/everyone-will-be-contaminated-prisons-face-strict-coronavirus-controls>.

14. Jails and prisons are fundamentally ill-equipped to handle a pandemic. Medical treatment capacity is not at the same level in a correctional setting as it is in a hospital. Some correctional facilities have no formal medical ward and no place to quarantine sick inmates, other than the facilities' Special Housing Unit (SHU).²⁰ While the cells in the SHU often have solid doors to minimize the threat of viral spread in otherwise overcrowded facilities, they rarely have intercoms or other ways for sick inmates to contact officers in an emergency.²¹ This is particularly dangerous for those with COVID-19 infection since many patients with COVID-19 descend suddenly and rapidly into respiratory distress.²²

15. Even those facilities that do have healthcare centers can only treat relatively mild types of respiratory problems for a very limited number of people.²³ This means that people who become seriously ill while in prisons and jails will be transferred to community hospitals for care. At present, access to palliative care in prison is also limited.

16. Corrections officers may also be particularly vulnerable to coronavirus due to documented high rates of diabetes and heart disease.²⁴ Multiple prison staff in Connecticut, like those in Pennsylvania, Michigan, New York and Washington state, among others, have tested

²⁰ MCC New York COVID 19 Policy Memo, Mar. 19, 2020, <https://www.documentcloud.org/documents/6818073-MCC-New-York-COVID-19-Policy-Memo.html>; Danielle Ivory, 'We Are Not a Hospital': A Prison Braces for the Coronavirus, N.Y. Times (Mar. 17, 2020), <https://www.nytimes.com/2020/03/17/us/coronavirus-prisons-jails.html>.

²¹ Brie Williams *et al.*, *Correctional Facilities in the Shadow of COVID-19: Unique Challenges and Proposed Solutions*, Health Affairs (Mar. 26, 2020), <https://www.healthaffairs.org/doi/10.1377/hblog20200324.784502/full/>.

²² Lizzie Presser, *A Medical Worker Describes Terrifying Lung Failure From COVID-19—Even in His Young Patients*, ProPublica (Mar. 21, 2020), <https://www.propublica.org/article/a-medical-worker-describes--terrifying-lung-failure-from-covid19-even-in-his-young-patients>.


²³ Ellis, *Covid-19 Poses a Heightened Threat in Jails and Prisons*; Li and Lewis, *This Chart Shows Why the Prison Population is So Vulnerable to COVID-19*.

²⁴ Brie Williams, *Role of US-Norway Exchange in Placing Health and Well-Being at the Center of US Prison Reform*, <https://ajph.aphapublications.org/doi/10.2105/AJPH.2019.305444> (published Jan. 22, 2020).

positive for the virus, resulting in inmate quarantines. Fifty-nine federal prison staffers have also tested positive.²⁵

17. For this reason, correctional health is public health. Decreasing risk in prisons and jails decreases risk to our communities.

18. Reducing the overall population within correctional facilities will also help medical professionals spread their clinical care services throughout the remaining population more efficiently. With a smaller population to manage and care for, healthcare and correctional leadership will be better able to institute shelter in place and quarantine protocols for those who remain. This will serve to protect the health of both inmates as well as correctional and healthcare staff.



Dr. Brie Williams

San Francisco, California
April 6, 2020

-Notarized copy to follow-

²⁵ Board of Prisons, Open COVID-19 Tested Positive Cases, <https://www.bop.gov/coronavirus>.

Exhibit 26

Complaint Redline

Connecticut Superior Court
Judicial District of ~~Hartford~~Waterbury

Connecticut Criminal Defense Lawyers

Association,

Willie Breyette,

Daniel Rodriguez,

Anthony Johnson, ~~and~~

Marvin Jones,

Kerri Dirgo, and

Joshua Wilcox,

Plaintiffs

No.

~~HHB~~UWY-CV20-~~_____~~-605430

9-S

April ~~30~~31, 2020

v.

Ned Lamont and Rollin Cook,

Defendants.

Amended Complaint¹

The Coronavirus pandemic poses an imminent and grave threat to the thousands of men and women confined in Connecticut's unified prison system, as well as their employees and surrounding communities. In this action, Plaintiffs—sentenced and unsentenced people, and an organization of criminal defense lawyers—seek intervention from the Court to force the governor and correction commissioner to discharge their statutory and constitutional duties to care for the health of people in their custody. For weeks, Defendants have known about the looming threat to incarcerated people. While Governor Lamont and Commissioner Cook have made attempts to mitigate the dangers posed by the virus, conditions of confinement in prisons prevent them from ensuring the safety and livelihood of thousands of those in their care. As public health experts indicate, the only feasible way to mitigate the disease within prison and jails is to take swift action ~~—before~~ the disease hits ~~—~~to significantly decrease the population in

¹ For the Court's reference, a redlined version of this amended complaint against the original complaint is attached as Exhibit 26.

custody so that social distancing may be practiced and at-risk groups are out of harm's way.

We are now watching public health experts' warnings play out in real-time. DOC announced that the **first** person in state custody had tested positive on March 30, 2020. As of April 2, when the complaint in this action was filed, **16** DOC staff members and **8** incarcerated people had tested positive for COVID-19. By April 6, both those numbers have more than doubled, to **32** DOC staff members and **21** incarcerated people. By April 7, these numbers had grown exponentially: **41** DOC staff members and **44** incarcerated people have tested positive, with **53** prisoner test results still pending.²

The steps taken by Defendants are insufficient in light of the grave risks presented by the present crisis, necessitating court intervention through the issuance of mandamus.

Parties

1. Plaintiff Connecticut Criminal Defense Lawyers Association (CCDLA) is a non-profit Connecticut organization comprising lawyers who represent people accused of crimes in the state.
2. CCDLA has approximately ~~three hundred~~300 members statewide.
3. Its members represent clients held in each of the facilities controlled by the Connecticut Department of Correction (DOC).
4. CCDLA engages in education and advocacy for the fair treatment of those accused of crimes, and for positive changes in Connecticut's criminal and motor vehicle code. CCDLA also serves as an amicus curiae to Connecticut's appellate courts.

² See Connecticut Dep't of Correction, *Covid-19 Tracker*, <https://portal.ct.gov/DOC/Common-Elements/Common-Elements/Health-Information-and-Advisories> (last visited Apr. 7, 2020).

5. Plaintiff Willie Breyette is a person incarcerated at MacDougall-Walker Correctional Institution in Suffield. Mr. Breyette has Hashimoto's disease, an autoimmune condition in which a person's immune system attacks their thyroid gland. Mr. Breyette also has asthma.
6. Plaintiff Daniel Rodriguez is a person incarcerated at Osborn Correctional Institution in Somers. Mr. Rodriguez is eligible for halfway house placement in May, but has been told by DOC that no one will be released to a halfway house during the COVID-19 pandemic.
7. Plaintiff Anthony Johnson is a person incarcerated at Willard-Cybulski Correctional Institution in Enfield. Mr. Johnson is sixty-one years old.
8. Plaintiff Marvin Jones is a person being held at the New Haven Correctional Center because he cannot afford his \$5,000 bond. On account of a past injury, he has only one lung.
9. Plaintiff Kerri Dirgo is a person being held at the York Correctional Institution in Niantic because she cannot afford her \$22,000 bond. She has multiple sclerosis and takes immunosuppressive medication known to increase risk of viral infection.
10. Plaintiff Joshua Wilcox is a person incarcerated at Cheshire Correctional Institution. His maximum release date is less than eight weeks away, on May 27, 2020—meaning, he must be released from state custody by then.
11. ~~9.~~ Defendant Ned Lamont is the governor of Connecticut.
12. ~~10.~~ Defendant Rollin Cook is the commissioner of the Connecticut Department of Correction.

The Viral Pandemic, and the Governor's Emergency Declaration

13. ~~11.~~ Beginning in December 2019, cases of viral pneumonia caused by a novel pathogen occurred in China; the World Health Organization shortly thereafter named the virus COVID-19.
14. ~~12.~~ The pathogen “is both highly contagious and deadly,” spreading from person to person through “respiratory droplets, close personal contact, and from contact with contaminated surfaces and objects.” Affidavit of Dr. Jonathan Giftos (attached as Exhibit 19) ¶ 5.
15. ~~13.~~ There is no vaccine or cure for the virus; the focus on combatting it “is on preventing [its] spread.” *Id.* ¶ 6.
16. ~~14.~~ Although the virus is highly dangerous to all humans, the United States Centers for Disease Control and Prevention (CDC) has identified particular danger for “adults over 60 years old and people with chronic medical conditions,” which include “lung disease, cancer, heart failure, cerebrovascular disease, renal disease, liver disease, diabetes, immunocompromising conditions, and pregnancy.” *Id.* ¶ 7.
17. ~~15.~~ By early March 2020, the virus had spread to the New York City metro area, and Connecticut recorded its first diagnosed case.
18. ~~16.~~ On March 10~~th~~, defendant Gov. Lamont declared a dual emergency of public health and civil preparedness until September 2020 on account of the virus. ~~Gov. Lamont, Letter to the Secretary of the State (Mar. 10, 2020), available at~~
~~<https://tinyurl.com/wptdlw6>~~³

³ Gov. Lamont, Letter to the Secretary of the State (Mar. 10, 2020), available at <https://tinyurl.com/wptdlw6>.

19. ~~17.~~ Since then, Governor Lamont has issued ~~eighteen~~²³ Executive Orders intended to protect public health during the growing pandemic.

The Governor's Efforts to Dampen the Spread of the Virus

20. ~~18.~~ Governor Lamont's Executive Orders have found that COVID-19 "spreads easily from person to person and may result in serious illness or death," and that the "risk of severe illness and death . . . appears to be higher for individuals who are 60 years of age or older and for those who have chronic health conditions." Gov. Lamont Exec. Order No. 7 at 1 (Mar. 12, 2020) (Exhibit 1).

21. ~~19.~~ The Executive Orders have also found that there is a dire need for people to keep a six-foot distance from others in order to staunch the airborne transmission of the disease. Most recently, the defendant forbade "social and recreational gatherings of . . . six (6) or more people." Lamont Exec. Order 7N at 4 (Mar. 28, 2020) (Exhibit 15).

22. ~~20.~~ The defendant has repeatedly highlighted the particular threat COVID-19 poses to institutional and congregant housing. His first order found that "there is an increased risk of rapid spread of COVID-19 among persons who are living in congregate settings, such as long-term care facilities." Lamont Exec. Order No. 7 at 1.

23. ~~21.~~ He later reiterated his findings of the risk posed by congregate settings, adding that such settings include "inpatient or outpatient hospitals, clinics or other facilities for the diagnosis, observation or treatment of persons with psychiatric and intellectual disabilities." Lamont Exec. Order No. 7C at 2 (Mar. 15, 2020) (Exhibit 4).

24. ~~22.~~ On March 28, the defendant again acknowledged public health guidance to reduce human density in closed spaces, recognizing that the “Centers for Disease Control has recommended that states, especially those with higher rates of growth in the number of infected people, take measures to reduce density within homeless shelters and other congregant housing situations.” Lamont Exec. Order No. 7P at 2 (Mar. 28, 2020) (Exhibit 17).
25. ~~23.~~ Governor Lamont has also spoken to the press about the dangers of close quarter living arrangements, in one instance referring to nursing homes as a “petri dish” for the spread of COVID-19.⁴ ~~Patrick Skahill, Connecticut Tracks COVID-19 Cases But Doesn’t Keep Nursing Home Tally, WNPR, Mar. 27, 2020, <https://www.wnpr.org/post/connecticut-tracks-covid-19-cases-doesnt-keep-nursing-home-tally>.~~
26. ~~24.~~ As a result of these conclusions, Governor Lamont has restricted entry into nursing homes and similar facilities; modified in-person open meetings requirements; closed public schools; prohibited bars and restaurants from serving sit-in customers and closed gyms, fitness centers, and movie theaters; closed malls; postponed the presidential primary; and limited the workplace operations of non-essential businesses and non-profits.
27. ~~25.~~ Governor Lamont has implemented similar measures targeted specifically at courts, including suspending certain court operations and authorizing remote notarization. See Lamont Exec. Order No. 7G at 3-4 (Mar. 19, 2020), (Exhibit 8); Lamont Exec. Order No. 7Q at 2-3 (Mar. 30, 2020) (Exhibit 18).

⁴ Patrick Skahill, *Connecticut Tracks COVID-19 Cases But Doesn’t Keep Nursing Home Tally*, WNPR, Mar. 27, 2020, <https://www.wnpr.org/post/connecticut-tracks-covid-19-cases-doesnt-keep-nursing-home-tally>.

The People in the Defendants' Custody

28. ~~26.~~ Although Governor Lamont has shown great concern for the general public and businesses of the state, the interventions he and Commissioner Cook have issued do not adequately protect the people in their custody: those sentenced to incarceration, and those being detained before trial or sentencing.

29. ~~27.~~ As of April ~~2nd~~7, there were ~~3,241~~3,173 unsentenced people ~~in pre-trial detention~~, and ~~8,586~~8,489 sentenced people ~~serving sentences of incarceration~~ in Connecticut's unified prison system.

30. ~~28.~~ Those figures have not materially changed since the outbreak of the COVID-19 virus in Connecticut. On January 1, 2020, for example, there were 3,393 people detained prior to trial and 8,891 people serving sentences of incarceration in Connecticut's prison system.

31. ~~29.~~ The threat to the health and lives of Connecticut's incarcerated population falls disproportionately on Black and Latinx prisoners.

32. ~~30.~~ As of March 1, 2020, Black people comprised 5,349 of the 12,411 people in Connecticut's prisons, or 43.1% of the state's prison population.

33. ~~31.~~ The 2010 decennial census identified Black people as comprising 11% of Connecticut's population.

34. ~~32.~~ As of March 1, 2020, Latinx people comprised 3,307 of the 12,411 people in Connecticut's prisons, or 26.7% of the state's prison population.

35. ~~33.~~ The 2010 decennial census identified Latinx people as comprising 16.5% of Connecticut's population.

- [36.](#) ~~34.~~ Many people in the defendants' custody are needlessly facing danger as the pandemic arrives in Connecticut prisons.
- [37.](#) ~~35.~~ Approximately 200 people—like Mr. Jones—are being held on a bail of \$50,000 or less, that is, they are in a highly dangerous congregate living situation for lack of the \$5,000 or smaller ten percent cash bond.
- [38.](#) ~~36.~~ Approximately ~~4,000~~[822](#) of the roughly 12,000 people in Connecticut prisons are within ~~ninety~~[90](#) days of their sentence end, by which time the pandemic is likely to be still raging. [1,416 are within six months of end of sentence.](#)
- [39.](#) ~~37.~~ ~~1,092~~[1,607](#) are incarcerated for technical violations of parole or probation.
- [40.](#) ~~38.~~ ~~3,339~~[Approximately 5,364](#) are parole-eligible, yet remain within the walls of Connecticut prisons as the pandemic bears down on them.
- [41.](#) ~~39.~~ In addition, Connecticut's prison population is aging. ~~595~~[596](#) of the people in the state custody are age ~~sixty~~[60](#) or older like Mr. Johnson, a factor that the CDC has identified as a risk for severe complications from a COVID-19 infection. [Affidavit of Brie M. Williams, M.D. \(Exhibit 25\) ¶ 7.](#) These individuals pose the least risk to the public, yet are most at risk of serious illness or death. [At the same time, the high risk presented to older people by COVID-19 is "of particular concern for inmate populations, since prisoners' physiological age averages 10 to 15 years older than their chronological age." Id. \(emphasis in original\). More than 2,000 people in state custody are age 50 or older.](#)
- [42.](#) ~~40.~~ Many prisoners have compromised immune systems or, like Mr. Breyette, have autoimmune disorders also identified by CDC as heightening the risk of a serious illness or death from COVID-19.

Routine Prison Conditions Lend Themselves to Rapid Spread of the Virus

- ~~43.~~ ~~41.~~ In Connecticut prisons, as elsewhere, people are held in a congregate living situation at least as dense as is found in nursing homes and hospitals.
- ~~44.~~ Similar communal living arrangements exist for halfway houses, whose residents remain in the custody of the DOC.
- ~~45.~~ ~~42.~~ Some prisons have dormitory-style housing, like Willard-Cybulski, where Mr. Johnson is held. His dormitory has ~~one hundred~~100 men in it, and, in Mr. Johnson's words, "once the virus comes in, it's going to spread like wildfire." - ~~Five~~Eight prisoners at Willard-Cybulski have already tested positive for ~~the pathogen~~COVID-19.
- ~~46.~~ ~~43.~~ In most other prisons, incarcerated people are held two to a cell in close quarters.⁵ ~~*See Second Connecticut Prison Inmate Tests Positive for the COVID-19 Virus, NBC Conn., Mar. 31, 2020,*~~
~~<https://www.nbcconnecticut.com/news/coronavirus/second-connecticut-prison-inmate-tests-positive-for-the-covid-19-virus/2247971/>~~ (reporting that the second person to test positive at Corrigan-Radgowski "was in a two-person cell").
- ~~47.~~ ~~44.~~ In Connecticut prisons as elsewhere, detainees and prisoners do not have the ability to maintain personal hygiene to the same standards as free people do, because people in prison must in many cases live in a cell containing a toilet, are not allowed hand sanitizer, have limited access to cleaning supplies —even when provided, they are often diluted—and soap, and have no control over disinfecting common areas or commonly touched surfaces.

⁵ *See Second Connecticut Prison Inmate Tests Positive for the COVID-19 Virus, NBC Conn., Mar. 31, 2020,*
<https://www.nbcconnecticut.com/news/coronavirus/second-connecticut-prison-inmate-tests-positive-for-the-covid-19-virus/2247971/> (reporting that the second person to test positive at Corrigan-Radgowski "was in a two-person cell").

48. ~~45.~~ Connecticut prisoners, like their counterparts nationwide, are given almost all of their medical treatment in the same facility in which they are housed, rather than in a dedicated medical facility such as a clinic or hospital.

49. ~~46.~~ As a result, “correctional settings increase the risk” of contracting the virus, because in prison, “there are high numbers of people with chronic, often untreated, illnesses housed in a setting with minimal levels of sanitation, limited access to personal hygiene, limited access to medical care, and no possibility of staying at a distance from others,” Giftos Aff. ¶ 8, such that “there are more people susceptible to getting infected congregated together in a context in which fighting the spread of an infection *is nearly impossible.*” *Id.* ¶ 9 (emphasis added).

50. In addition: “Prisons and jails are not actually isolated from our communities: hundreds of thousands of correctional officers and correctional healthcare workers enter these facilities every day, returning to their families and to our communities at the end of their shifts, bringing back and forth to their families and neighbors and to incarcerated patients any exposures they have had during the day.” Williams Aff. ¶4.

51. ~~47.~~ COVID-19 public health experts have sounded the alarm that prisons are extremely high-risk settings for the spread of COVID-19 since the pandemic’s arrival in the United States. ~~See Dr. Lipi Roy, *Infections And Incarceration: Why Jails And Prisons Need To Prepare For COVID-19 Now*, Forbes, Mar. 11, 2020, <https://www.forbes.com/sites/lipiroy/2020/03/11/infections-and-incarceration-why>~~ A recent letter from Connecticut doctors experienced in correctional health to Governor Lamont, for example, relayed “grave concern that, absent immediate

action, COVID-19 will overrun Connecticut's jails- and-
prisons-need to prepare for covid 19 stat; Brie Williams et al., *Correctional*
Facilities in the Shadow of COVID-19: Unique Challenges and Proposed
Solutions, Health Affairs, Mar. 26, 2020,-
<https://www.healthaffairs.org/doi/10.1377/hblog20200324.784502/full/>
(cataloguing the significant differences between combatting the virus inside of
prison versus outside of it); Timothy Williams, Benjamin Weiser, and William K.
Rashbaum, '*Jails Are Petri Dishes*': *Inmates Freed as the Virus Spreads Behind*
Bars, N.Y. Times, Mar. 30, 2020,-
<https://www.nytimes.com/2020/03/30/us/coronavirus-prisons-jails.html>
(reporting that, after the New York City corrections department's physician
warned the mayor that "a storm is coming," the city "released at least 650
people")" and that "Connecticut has days, not weeks, to chart a different future."
Letter from Dr. Emily Wang et al. to Governor Lamont (attached as Exhibit 20).
Infectious disease doctors who work in correctional health similarly warn that a
virus like COVID-19 "create[s] a perfect storm for correctional settings" because
of ease of transmission, lack of prevention opportunities, concentration of people
with chronic health issues, and the fact that "despite being physically secure, jails

and prison are not isolated from the community.” Affidavit of Dr. Josiah Rich (Exhibit 24) ¶¶ 6, 8–12.⁶

52. ~~48. Their~~ These warnings have proven tragically accurate. ~~One week ago, On~~ March 22, one staff member at Chicago’s Cook County Jail ~~had tested positive,~~ followed by two COVID-19 diagnoses; ~~as of March 30th, in those incarcerated~~ there; a week later, 12 staff members and 101 incarcerated people ~~and 12 staff members have~~ had tested positive for the virus. ~~Compare Andy Grimm, Two Cook County Jail Detainees Test Positive for Coronavirus, Chicago Sun Times, Mar. 23, 2020, https://chicago.suntimes.com/2020/3/23/21191438/two-cook-county-jail-detainees-test-positive-covid-19-coronavirus-with-Sam-Kelly, 101 inmates at Cook County Jail Confirmed Positive for COVID-19, Chicago Sun Times, Mar. 30, 2020, https://chicago.suntimes.com/coronavirus/2020/3/29/21199171/cook-county-jail~~

⁶ See also Dr. Lipi Roy, *Infections And Incarceration: Why Jails And Prisons Need To Prepare For COVID-19 Now*, Forbes, Mar. 11, 2020, <https://www.forbes.com/sites/lipiroy/2020/03/11/infections-and-incarceration-why-jails-and-prisons-need-to-prepare-for-covid-19-stat>; Brie Williams et al., *Correctional Facilities in the Shadow of COVID-19: Unique Challenges and Proposed Solutions*, Health Affairs, Mar. 26, 2020, <https://www.healthaffairs.org/doi/10.1377/hblog20200324.784502/full/> (cataloguing the significant differences between combatting the virus inside of prison versus outside of it); Timothy Williams, Benjamin Weiser, and William K. Rashbaum, ‘Jails Are Petri Dishes’: Inmates Freed as the Virus Spreads Behind Bars, N.Y. Times, Mar. 30, 2020, <https://www.nytimes.com/2020/03/30/us/coronavirus-prisons-jails.html> (reporting that, after the New York City corrections department’s physician warned the mayor that “a storm is coming,” the city “released at least 650 people”).

~~11 coronavirus positive 101 cases covid-19.~~⁷ As of April 5, those numbers stood at 70 staffers and 221 incarcerated people.⁸

53. ~~49.~~ In just two weeks, the New York City jail Rikers Island went from **one** confirmed case of COVID-19 to **231** cases. ~~Compare Chelsia Rose Marcus, Rikers Island Inmate Has Contracted Coronavirus: Officials, N.Y. Daily News, Mar. 18, 2020,~~
~~<https://www.nydailynews.com/coronavirus/ny-coronavirus-rikers-island-inmate-tests-positive-20200318-gf3r7q4cefaxzlmwrmuevzz3y-story.html> with The Legal Aid Society, Covid-19 Tracking in NYC Jails, Apr. 2, 2020,~~
~~<https://www.legalaidnyc.org/covid-19-infection-tracking-in-nyc-jails>~~⁹ The most recent figures show 273 confirmed cases among detainees, 321 among corrections officers, and 53 among jail health workers.¹⁰ The first New York City detainee to die from COVID-19 infection died Sunday; he was awaiting hearing on a technical parole violation.¹¹

⁷ Compare Andy Grimm, Two Cook County Jail Detainees Test Positive for Coronavirus, Chicago Sun-Times, Mar. 23, 2020,
<https://chicago.suntimes.com/2020/3/23/21191438/two-cook-county-jail-detainees-test-positive-covid-19-coronavirus> with Sam Kelly, 101 inmates at Cook County Jail Confirmed Positive for COVID-19,
Chicago Sun-Times, Mar. 30, 2020,
<https://chicago.suntimes.com/coronavirus/2020/3/29/21199171/cook-county-jail-coronavirus-positive-101-cases-covid-19>.

⁸ Tyler Kendall, “We’re at war with no weapons”: Coronavirus cases surge inside Chicago’s Cook County Jail,
<https://www.cbsnews.com/news/chicago-cook-county-jail-coronavirus-life-inside-covid-19-cases>,
Apr. X 2020.

⁹ Compare Chelsia Rose Marcus, Rikers Island Inmate Has Contracted Coronavirus: Officials, N.Y. Daily News, Mar. 18, 2020,
<https://www.nydailynews.com/coronavirus/ny-coronavirus-rikers-island-inmate-tests-positive-20200318-gf3r7q4cefaxzlmwrmuevzz3y-story.html> with The Legal Aid Society, Covid-19 Tracking in NYC Jails, Apr. 2, 2020,
<https://www.legalaidnyc.org/covid-19-infection-tracking-in-nyc-jails>.

¹⁰ Reuven Blau and Rosa Goldensohn, First Rikers Virus-Positive Fatality Was Jailed on a Technicality, The City, Apr. 6, 2020,
<https://thecity.nyc/2020/04/first-rikers-covid-death-was-jailed-on-technicality.html>.

¹¹ Id.

54. ~~50.~~ As of March 29th, 2020, Rikers Island had a COVID-19 infection rate surpassing every country in the world.
55. ~~51.~~ Here in Connecticut, ~~as~~ [DOC announced that the first person in state custody had tested positive on March 30, 2020. As](#) of April 2, ~~sixteen~~ [right before the complaint in this action was filed, 16](#) DOC staff members and ~~eight~~ incarcerated people ~~have already had~~ tested positive for COVID-19. ~~Connecticut Dep't of Correction, Covid-19 Tracker,~~
~~<https://portal.ct.gov/DOC/Common-Elements/Common-Elements/Health-Information-and-Advisories> (last visited Apr. 2, 2020)~~ [By April 6, both those numbers have more than doubled: 32 DOC staff members and 21 incarcerated people have tested positive.](#)¹² [By April 7, these numbers had grown exponentially: 41 DOC staff members and 44 incarcerated people have tested positive, with 53 prisoner test results still pending.](#)¹³
56. ~~52.~~ The trajectory of other correctional systems ~~make~~ [makes](#) clear that Connecticut has limited time to act to prevent the virus from ~~taking over its facilities~~ [sickening exponential numbers of both incarcerated people and staff](#), and contributing [to](#) the statewide overload on hospital beds. ~~See Andrew Clark et al., Opinion: Prison Outbreak Affects Health of Entire State, Conn. Post, Mar. 31, 2020 (explaining that, "[a]s jails and prisons become flashpoints for infection, the outbreak will overwhelm already limited state health~~ [Rich Aff. ¶ 16 \("The abrupt onset of severe Covid-10 symptoms among incarcerated individuals will require](#)

¹² [See Connecticut Dep't of Correction, Covid-19 Tracker, <https://portal.ct.gov/DOC/Common-Elements/Common-Elements/Health-Information-and-Advisories> \(last visited Apr. 6, 2020\).](#)

¹³ [See Connecticut Dep't of Correction, Covid-19 Tracker, <https://portal.ct.gov/DOC/Common-Elements/Common-Elements/Health-Information-and-Advisories> \(last visited Apr. 7, 2020\).](#)

mass transfers to local hospitals for medical and ventilator care-resources,”
~~because correctional facilities are linked to surrounding communities by~~
~~employees and contractors moving in and out of them~~ and “[e]ach severely ill
patient who occupies an ICU bed may mean others may die for inability to obtain
care”); Giftos Aff. ¶ 15 (“Specifically, a surge in COVID-19 infections in a
correctional setting could mean that ICU beds in the community hospital would
no longer be available to everyone who needed them.”). “For this reason,
correctional health is public health.” Williams App. ¶ 17 (explaining that “The
Entire Community is at Risk if Prison Populations Are Not Reduced”).

57. Other states have concluded that the only effective way to avoid a widespread outbreak in ~~prisons is to~~ correctional settings and their communities is to take
swift, comprehensive, and wide-scale action to significantly reduce the number of people in them. See Updated Appendix, Court Actions to Reduce Incarceration in Light of COVID-19 (Exhibit ~~21~~22) (listing representative actions by state courts, as well as actions by federal courts in both the criminal and immigration detention contexts); ~~see also Consent Order, In re Request to Commute of Suspend County Jail Sentences, No. 084230, slip op. at 2 (N.J. Mar. 22, 2020)~~ (“[A]ny inmate currently Second Appendix, Gubernatorial and State Agency Actions to Reduce Incarceration in Light of COVID-19 (Exhibit 23) (listing representative actions by state government, departments of correction, and boards of parole). These include New Jersey, which created an immediate presumption of release for every person serving a county jail sentence ~~(1) as a condition of probation, or (2) as a result of a municipal court conviction, shall be ordered released.”), available at~~

~~https://www.aclu-nj.org/files/5415/8496/4744/2020.03.22_-_Consent_Order_Filed_Stamped_Copy_1.pdf; Emergency Order, slip op. at 1 (Me. Dist. and Super. Cts. Mar. 17, 2020) (joint order of trial courts immediately canceling “any outstanding¹⁴; Maine, which canceled warrants [across the board](#) for unpaid fines, unpaid restitution, unpaid court-appointed counsel fees, failure to appear for unpaid fine hearings, and any other “failure to appear and pay other fees”);~~
~~[available at](#)~~

~~<https://www.courts.maine.gov/covid19/emergency-order-vacating-warrants-fines-fees.pdf>¹⁵; and Kentucky, whose governor just announced plans to commute the sentences of nearly 1,000 state prisoners, including those more susceptible to COVID-19 and those within six months of end of sentence, within a matter of days.¹⁶ Here in Connecticut, at FCI Danbury—the federal prison located in the state— four prisoners tested positive for COVID-19 one week ago.¹⁷ As of today, 28 prisoners and 12 staff have tested positive. Against this background, on April 3, Attorney General William Barr both ordered the Board of Prisons to conduct a systematic review and immediately identify every person at FCI Danbury with~~

¹⁴ These include, *e.g.*, [Consent Order, *In re Request to Commute of Suspend County Jail Sentences*, No. 084230, slip op. at 2 \(N.J. Mar. 22, 2020\) \(“\[A\]ny inmate currently serving a county jail sentence \(1\) as a condition of probation, or \(2\) as a result of a municipal court conviction, shall be ordered released.”\), \[available at https://www.aclu-nj.org/files/5415/8496/4744/2020.03.22 - Consent_Order_Filed_Stamped_Copy-1.pdf\]\(#\).](#)

¹⁵ [Emergency Order, slip op. at 1 \(Me. Dist. and Super. Cts. Mar. 17, 2020\) \(joint order of trial courts immediately canceling “any outstanding warrants for unpaid fines, unpaid restitution, unpaid court-appointed counsel fees, failure to appear for unpaid fine hearings, and any other failure to appear and pay other fees”\), \[available at https://www.courts.maine.gov/covid19/emergency-order-vacating-warrants-fines-fees.pdf\]\(#\).](#)

¹⁶ [Brian Panalp, *Nearly 1,000 Kentucky prison sentences to be commuted, Beshear says*, Fox61 News, Apr. 2, 2020, <https://www.fox19.com/2020/04/02/watch-live-gov-beshear-provides-update-covid-kentucky/>.](#)

¹⁷ [Kaitlyn Krasselt, *Coronavirus Outbreak Hits Danbury Federal Prison with 9 Cases*, Apr. 1, 2020, <https://www.ctpost.com/news/coronavirus/article/Coronavirus-outbreak-hits-Danbury-federal-prison-15172855.php>.](#)

COVID-19 risk factors, as well as substantially broadened the use of home confinement to encourage release.

The Defendants' Prison Medical Staff Will be Quickly Overwhelmed

58. ~~53.~~ Even prior to the COVID-19 outbreak, Connecticut has long struggled to provide sufficient medical services to the people it holds prisoner. Defendants' medical staff in prisons is now nearly certain to be overrun when the virus begins spreading inside the walls.

59. ~~54.~~ In July 2019, the Connecticut Mirror reported that DOC had 309 nurses on staff to serve 13,320 prisoners, or one nurse for every 43 prisoners. For medical providers, including doctors and physician assistants, the DOC employs only one for every 579 prisoners.¹⁸ ~~Jenna Carlesso and Kelan Lyons, *One Year after DOC Took Over Inmate Healthcare, Troubles Persist*, Conn. Mirror, July 2, 2019, <https://ctmirror.org/2019/07/02/one-year-after-doc-took-over-inmate-health-care-troubles-persist>.~~

60. ~~55.~~ Little has changed since that report. In early 2020, Cheshire Correctional Institution and Corrigan-Radgowski Correctional Center reported employing twenty-nine and twenty-seven nurses, respectively, or thirty-nine prisoners per nurse at Cheshire and forty at Corrigan-Radgowski.

61. ~~56.~~ Accessing medical doctors at those prisons is difficult: at Cheshire, one psychiatrist and one principal physician are the only doctors serving a population

¹⁸ Jenna Carlesso and Kelan Lyons, *One Year after DOC Took Over Inmate Healthcare, Troubles Persist*, Conn. Mirror, July 2, 2019, <https://ctmirror.org/2019/07/02/one-year-after-doc-took-over-inmate-health-care-troubles-persist>.

of 1,131. Corrigan-Radgowski, with a population of 1,083, does not employ a single physician beyond a staff psychiatrist.

- ^{62.} ~~57.~~ The woeful medical provisions at Cheshire and Corrigan-Radgowski are not unique to those prisons.
- ^{63.} ~~58.~~ In February of this year, Commissioner Rollin Cook told members of the Black and Puerto Rican Legislative Caucus that there were 139 healthcare positions vacant out of 843 budgeted.¹⁹ ~~Lisa Baekus, *Staffing Shortage Creates ‘Dangerous’ Situation in CT Prisons*, Conn. Post, Feb. 3, 2020,~~
~~<https://www.ctpost.com/local/article/Staffing-shortage-creates-dangerous-15027264.php>.~~
- ^{64.} ~~59.~~ This month, a DOC spokesperson suggested that facilities can manage shortages by scheduling medical employees for twelve hours at a time in an emergency.²⁰ ~~Kelan Lyons, *Elderly Prisoners in Connecticut Vulnerable to Potential Coronavirus Outbreak*, Hartford Courant, Mar. 11, 2020,~~
~~<https://www.courant.com/coronavirus/hc-pol-coronavirus-connecticut-prisons-20200311-ote3jd6orje77ipl44qgi3bb6i-story.html>~~
- ^{65.} ~~60.~~ However, the Connecticut Mirror reported that healthcare staff were already logging what would appear to be the maximum possible overtime *before* the pandemic, sometimes staying on shift for sixteen to twenty-four hours a day. Carlesso and Lyons, *supra* ¶ 54.

¹⁹ Lisa Baekus, *Staffing Shortage Creates ‘Dangerous’ Situation in CT Prisons*, Conn. Post, Feb. 3, 2020, <https://www.ctpost.com/local/article/Staffing-shortage-creates-dangerous-15027264.php>.

²⁰ Kelan Lyons, *Elderly Prisoners in Connecticut Vulnerable to Potential Coronavirus Outbreak*, Hartford Courant, Mar. 11, 2020, <https://www.courant.com/coronavirus/hc-pol-coronavirus-connecticut-prisons-20200311-ote3jd6orje77ipl44qgi3bb6i-story.html>.

66. ~~61.~~ And, as of a month ago, head nurses, nurses, and licensed nurse practitioners were among the twenty top wage earners in the DOC based on their overtime pay; at least three nursing staff were making twice their annual pay in overtime.

Backus, *supra* ¶ 58.

67. ~~62.~~ That the DOC is over 100 staff short to provide for ordinary healthcare needs at its facilities is alarming, because retirees and medical students are already being called to aid overwhelmed medical staff in regions where COVID-19 is rampant.²¹ ~~Selena Simmons Duffin, *States Get Creative to Find and Deploy More Workers in COVID-19 Fight*, NPR, Mar. 25, 2020, <https://www.npr.org/sections/health-shots/2020/03/25/820706226/states-get-creative-to-find-and-deploy-more-health-workers-in-covid-19-fight>.~~

68. ~~63.~~ DOC medical staff have sounded the alarm about possible systemic failure. Dr. Gerald Valletta, the primary physician at Garner and Manson Youth Institution in Cheshire, told the Courant that “[t]he more people get sick and call out, the more burdened staff will be. We were already facing a huge shortage.”²² ~~Eliza Fawcett, *With COVID-19 Threat Looming, State Prisons and Jails are on Edge*, Hartford Courant, Mar. 28, 2020, <https://www.courant.com/coronavirus/hc-news-coronavirus-connecticut-prisons-20200328-pvg57sfcafh5zck4wftabooxre-story.html>.~~

²¹ Selena Simmons Duffin, *States Get Creative to Find and Deploy More Workers in COVID-19 Fight*, NPR, Mar. 25, 2020, <https://www.npr.org/sections/health-shots/2020/03/25/820706226/states-get-creative-to-find-and-deploy-more-health-workers-in-covid-19-fight>.

²² Eliza Fawcett, *With COVID-19 Threat Looming, State Prisons and Jails are on Edge*, Hartford Courant, Mar. 28, 2020, <https://www.courant.com/coronavirus/hc-news-coronavirus-connecticut-prisons-20200328-pvg57sfcafh5zck4wftabooxre-story.html>.

^{69.} ~~64.~~ Debra Cruz, head nurse at Cheshire, expressed similar concerns, suggesting that even mandating 16-hour shifts, as permitted in the workers' contract, would not guarantee adequate healthcare. "We're all just holding our breaths and hoping this passes us by," the Hartford Courant quotes Cruz as saying on March 11. Lyons, *supra* ¶ 59.

Despite Their Efforts to Mitigate the Pandemic's Impact, Defendants Have Not Demonstrated Ability to Prevent and Treat the Virus in Prisons

^{70.} ~~65.~~ The risk to incarcerated people is heightened by DOC's inadequate response to COVID-19 and its facilities' lack of capacity to safely house people at current densities.

^{71.} ~~66.~~ Initially, DOC's only plan to address COVID-19 was a repurposed 2007 policy for flu outbreaks, ~~see Connecticut Dep't of Correction, Pandemic Influenza Response Plan (February 14, 2007), available at~~ ~~<https://portal.ct.gov/-/media/DOC/Pdf/Coronavirus-3-20/A-7-02a-Pandemic-Influenza-response-plan.pdf>~~²³, despite the fact that COVID-19 is understood to be transmitted more easily and in different ways than flu.²⁴ ~~See, e.g., Johns Hopkins Hosp., Coronavirus Disease 2019 vs. the Flu,~~ ~~<https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/>~~

²³ ~~see Connecticut Dep't of Correction, Pandemic Influenza Response Plan (February 14, 2007), available at~~ ~~<https://portal.ct.gov/-/media/DOC/Pdf/Coronavirus-3-20/A-7-02a-Pandemic-Influenza-response-plan.pdf>~~.

²⁴ ~~See, e.g., Johns Hopkins Hosp., Coronavirus Disease 2019 vs. the Flu,~~ ~~<https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/coronavirus-disease-2019-vs-the-flu>~~ (accessed Mar. 30, 2020) (reporting that, unlike influenza, COVID-19 may "spread through the airborne route, meaning that tiny droplets remaining in the air could cause disease in others even after the ill person is no longer near").

~~coronavirus disease 2019 vs the flu (accessed Mar. 30, 2020) (reporting that, unlike influenza, COVID-19 may “spread through the airborne route, meaning that tiny droplets remaining in the air could cause disease in others even after the ill person is no longer near”).~~

72. ~~67.~~ On March 11~~th~~, spokesperson Karen Martucci doubled down on the outdated plan in a press interview. “This isn’t new for us. We quarantine for the flu every year,” she said. “We didn’t have to create a pandemic plan. This was already created.” Lyons, *supra* ¶ 59.

73. ~~68.~~ Though the 2007 plan has now been replaced online with one specific to the current pandemic, the DOC’s preventative measures are insufficient to stop the virus once inside prison walls.

74. ~~69.~~ For example, the DOC’s plan permits recreation and programming to take place in groups of up to fifty incarcerated people, ten times the number of people permitted by the Governor’s executive order.²⁵ ~~Compare Conn. Dep’t of Correction, COVID-19 Operational Response Plan 1 (Mar. 20, 2020), available at~~
~~<https://portal.ct.gov/-/media/DOC/Pdf/Coronavirus-3-20/Covid-19-Operational-Response-Plan.pdf> with Lamont Exec. Order 7N at 4.~~

75. ~~70.~~ However, the sanitation practices inside prisons continues to be woefully insufficient in light of the danger posed by coronavirus. Prisoners in certain facilities do not have adequate access to soap. Corrections staff are not wearing masks or gloves, ~~and~~, Certain prisoners are given ~~supplies~~ very diluted cleaning

²⁵ Compare Conn. Dep’t of Correction, COVID-19 Operational Response Plan 1 (Mar. 20, 2020), available at <https://portal.ct.gov/-/media/DOC/Pdf/Coronavirus-3-20/Covid-19-Operational-Response-Plan.pdf> with Lamont Exec. Order 7N at 4.

agents with which to disinfect their cells only once a week, while others are given none. Common areas and showers are being cleaned only once a day. Some prisoners have been given one cloth mask per person, regardless of whether it tears, while others have not.

76. At York, where Ms. Dirgo is confined, prisoners working on cleaning details have run out of cleaning agents and rubber gloves, yet continued to work around the facility.

77. At Cheshire, where Mr. Wilcox is confined, corrections staff are not wearing masks. The roughly 100 people in his unit share a dozen phones and several tables in the common room, as well as bathrooms; he has not observed any special sanitation or cleaning practices.

78. ~~71.~~ In addition, though everyone entering a Connecticut correctional facility must have a wellness screening, including a temperature check, recent data suggests that around 60% of COVID-19 cases are asymptomatic. ~~Jane Qiu, Covert Coronavirus Infections Could Be Seeding New Outbreaks, Nature, Mar. 20, 2020, available at <https://www.nature.com/articles/d41586-020-00822-x>.~~²⁶ As a result, fevers are not be a reliable indicator of whether someone is a carrier. Rich Aff. ¶ 9.

79. ~~72.~~ The prevalence of ~~symptomatic~~asymptomatic and pre-symptomatic COVID-19 carriers also ~~belie~~belies the claim, made by both the defendant and his Department of Correction, that moving prisoners around inside the same sealed buildings will prevent the spread of infection. Asked about prisoner releases in

²⁶ Jane Qiu, *Covert Coronavirus Infections Could Be Seeding New Outbreaks*, Nature, Mar. 20, 2020, available at <https://www.nature.com/articles/d41586-020-00822-x>.

response to COVID-19, a DOC spokeswoman claimed, “Overcrowding is not a concern for our agency. We have space to use.” Lyons, *supra* ¶ 59.

80. ~~73.~~ On March 24~~th~~, Governor Lamont refused to consider releasing anyone in his custody but offered that “[w]e are going to do everything we can to make sure that anybody who may be at risk of being a carrier is segregated or quarantined in a separate area.”²⁷ ~~Kelan Lyons, *Lamont Says No Prison Releases Because of COVID-19 Despite Pressure From Advocates*, Conn. Mirror, Mar. 24, 2020, <https://ctmirror.org/2020/03/24/lamont-says-no-prison-releases-because-of-covid-19-despite-pressure-from-advocates>~~ At a press conference held on April 6, 2020, he reversed course somewhat and acknowledged releases that had taken place in March, without explaining that nearly half—333 out of 782—were people due to be released anyway because they were at the end of their sentences.

81. ~~74.~~ At MacDougall-Walker, where Mr. Breyette is confined, staff have cleared a space for quarantine: “seg,” or the restrictive housing unit where prisoners are placed as punishment. But quarantining people in a non-medical restrictive housing unit, where cells “rarely have intercoms or other ways for sick inmates to contact officers in an emergency,” “is particularly dangerous for those with COVID-19 infection since many patients with COVID-19 descend suddenly and rapidly into respiratory distress.” Williams Aff. ¶ 14.

82. ~~75.~~ At Osborn, where Mr. Rodriguez is confined, some prisoners work in a factory making filter masks for healthcare providers, but are not given any additional cell disinfection time or materials.

²⁷ Kelan Lyons, *Lamont Says No Prison Releases Because of COVID-19 Despite Pressure From Advocates*, Conn. Mirror, Mar. 24, 2020, <https://ctmirror.org/2020/03/24/lamont-says-no-prison-releases-because-of-covid-19-despite-pressure-from-advocates>.

83. At York, Ms. Dirgo’s cellmate has been running a low fever, feeling ill and fatigued, and exhibiting other possible symptoms of COVID-19. She was diagnosed with “allergies” and returned to her unit. Upon knowledge and belief, she has not been tested for COVID-19.

84. ~~76.~~ Even when carriers are successfully identified and quarantined, additional space within a prison does not address the threat of potentially airborne diseases within sealed buildings; ~~the CDC has emphasized that heating, ventilating, and air conditioning systems can transmit particles of highly infectious diseases. U.S. Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report, Prevention and Control of Tuberculosis in Correctional and Detention Facilities: Recommendations from CDC (July 7, 2006), available at~~ <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5509a1.htm>, see Rich Aff. ¶ 7, which is only exacerbated by the poor ventilation in DOC facilities.²⁸

85. ~~77.~~ It is therefore unrealistic to think that “screening, social distancing, and quarantining measures can be sufficiently employed within correctional settings to combat the spread of COVID-19,” Giftos Aff. ¶ 16, because “[t]here are too many structural limitations, and correctional health care can only do so much.” *Id.* ¶ 17.

86. ~~78.~~ “Decreasing the incarcerated population so that there is more ability to physically distance within the facility, fewer people who can contract the virus inside the facility, and more medical care for those who need it is the only way to prevent the complications from surging.” *Id.* ¶ 18.

²⁸ See also U.S. Centers for Disease Control and Prevention, Morbidity and Mortality Weekly Report, Prevention and Control of Tuberculosis in Correctional and Detention Facilities: Recommendations from CDC (July 7, 2006), available at <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5509a1.htm>.

The Defendants' Unmet Obligations to the People in Their Custody

- [87.](#) ~~79.~~ During a declared civil preparedness emergency like the current COVID-19 one, the governor is required to “take appropriate measures for protecting the health and safety of inmates of state institutions” Conn. Gen. Stat. § 28-9(b)(5).
- [88.](#) ~~86.~~ At all times, the commissioner is required to “provide for the relief of any sick or infirm prisoner” Conn. Gen. Stat. § 18-7.
- [89.](#) ~~81.~~ During the COVID-19 pandemic, and at all other times, the defendants bear the duty to refrain from depriving anyone of sanitation or medical care on the basis of their “race, color, ancestry, or national origin.” Conn. Const. art. 1, § 20.
- [90.](#) ~~82.~~ During the COVID-19 pandemic, and at all other times, the defendants bear the duty to refrain from cruelly and unusually punishing sentenced prisoners of the State in contravention of the Connecticut and United States Constitutions by failing to provide adequate sanitation and medical care.
- [91.](#) ~~83.~~ During the COVID-19 pandemic, and at all other times, the defendants bear the duty to refrain from punishing pre-trial detainees of the State through lack of sanitation or medical care, since by virtue of their presumed innocence any such deprivation contravenes the Fourteenth Amendment to the United States Constitution.
- [92.](#) ~~84.~~ Defendants’ interventions to date are commendable, but unfortunately insufficient to comply with their constitutional and statutory obligation to ensure the safety of those in their custody. [In order to “lighte\[n\] the burden the correctional facilities and their surrounding communities will bear,” Rich Aff.](#)

¶13, “[i]t is imperative to scale up efforts to ‘decarcerate,’ or release, as many people as possible.” *Id.* at 15. Because the conditions of confinement in Connecticut prisons leave prisoners in a highly dangerous congregate living situation certain to result in widespread COVID-19 infection, court action is necessary for defendants to execute their non-discretionary duties with respect to the sanitation and medical care of the prisoners and detainees in their custody.·

Request for Relief

93. ~~85.~~ For such reasons stated above, the Court should issue a writ of mandamus compelling the defendants to:

(a) immediately release all people having the CDC heightened risk factors for serious illness or death from COVID-19, ~~directly to a hospital or an~~ appropriate medical facility where necessary;

(b) immediately and meaningfully reduce the population density at each and every facility in which they confine people, including by:

(1) immediately releasing all pre-trial detainees facing misdemeanor charges, or detained subject to a bond of \$50,000 or less, except for charges comprising a crime of family violence;

(2) immediately ~~release~~releasing to transitional supervision all those eligible for such;

- (3) immediately ~~release~~releasing to home confinement those eligible for such pursuant to Conn. Gen. Stat. § 18-100h;
 - (4) immediately ~~release~~releasing those currently incarcerated only for a technical violation of their parole or probation;
 - (5) immediately ~~release~~releasing on furlough all prisoners who are within six months of their end of sentence;
- (c) submit for the Court's review and ongoing monitoring a plan:
- (1) to provide adequate sanitation and social distancing in prisons; so as to prevent the spread of COVID-19, including by taking all measures for screening, cleaning, hygiene and social distancing that the CDC recommends for correctional facilities;
 - (2) to diagnose and treat people showing symptoms of COVID-19 in accordance with contemporary standards of care,
 - (3) to approve, within seven days, community or private residences to those qualified for release to such via Conn. Gen. Stat. § 18-100,
 - (4) to approve, within seven days, residences for any prisoner or detainee who is now eligible for release but for the defendant's approval of a residence, and
 - (5) to sufficiently fund transitional housing for the duration of the pandemic; and
- (d) undertake any other task necessary to discharge their duties to those in their custody during the pandemic, including by working with other arms of state government to expedite their handling of requests for release, and

ensuring consideration of relief for all incarcerated people who can safely
return to their communities.

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