

Governor Phil Murphy

TRANSCRIPT: April 14th, 2020 Coronavirus Briefing Media

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Holding a COVID-19 briefing. WATCH:



Governor Phil Murphy: Good afternoon. Thank you for your patience. We have a lot of balls in the air, so we move this a few minutes to 1:15 and I appreciate your willingness to bear with us. With me today, beginning to my right, the woman who needs no introduction, the Commissioner of the Department of Health, Judy Persichilli. Judy, honored as always. To Judy's right, State Epidemiologist Dr. Christina Tan, also, I think in the category of now not needing an introduction. We're also joined by Dr. Tan's, one of her predecessors. Dr. Eddy Bresnitz. Great to have you with us, Eddy, as always. And the guy to my left, who's definitely in the category of not needing an introduction, Superintendent of the State Police Colonel Pat Callahan.

I think Pat, it's fair to say on off-topic matters, we have, you said, about 4,000 outages and hopefully they're going to be resolved by midnight tonight? And not a lot of accidents to report from yesterday, thank God. Thank you for your leadership. We dodged, I think, a little bit of a weather bullet yesterday, although some places got hit up pretty badly, let there be no doubt about that. Also, we're here with the Director of the Department of Homeland Security Preparedness, Jared Maples. Nice to have you with us, Jared. Deputy Counsel Parimal Garg is also in the house.

I'm going to begin as we have been for the past couple of weeks with the numbers. Judy, I think it's fair to say that when we look at Monday and Tuesday numbers, there's a certain amount of blending that we have to accept, given the weekend reality, so just bear with us. It doesn't make the numbers any easier, trust me, but I



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think you have to sort of look at Monday and Tuesday in sort of an averaging reality. Today we are reporting an additional 4,059 positive test results, which is now a total of 68,824 New Jerseyans who have now tested positive. More on testing in a little bit.

According to our online dashboard, accessible, by the way, through covid19.nj.gov as of 10:00 p.m. last night, 8,185 residents were reported hospitalized, of whom 2,051 were listed in critical or intensive care and 1,626 ventilators were in use. Just as importantly, between 10:00 p.m. Sunday and 10:00 p.m. last night, 514 residents were discharged from our hospitals. As we know each day, the dashboard pulls data as it is reported at 10:00 p.m. each night by hospitals to the New Jersey Hospital Association, and there may be overnight changes or late reports that are not yet reflective in the data. Remember, these numbers are just a snapshot in time for what remains a very fluid and fast-changing situation in our hospitals.

Today, with the heaviest of hearts, we must also sadly note that another 365 blessed souls have been lost due to COVID-19 related complications, and the overall toll of this pandemic on our state in terms of loss of life is now 2,805 lost brothers and sisters of our New Jersey family. Again, it should be noted, and I referred to this a minute ago, that not all of these deaths occurred literally within the past 24 hours. Many of these individuals passed sometime over the past number of days, and are now being reported. It does not make it any easier regardless of when they left us; they have left us. As we do, I'd like to share the stories of just a few of those we have lost in recent days.

Eddy Germain, God bless him. Eddy served our state for more than 30 years at the Department of Transportation, and he most recently served as the Director of Bridge Engineering and Infrastructure Management. He was working literally right up until recent weeks, and his last work was on the structural analysis we needed for our federal waiver of the weight limits on our highways for truckers carrying COVID-19 relief supplies. You may remember last week, I announced the Executive Order associated with that. Commissioner Diane Gutierrez-Scaccetti with whom I just exchanged notes, and she's busted up, I promise you. She knew Eddy well. She called him "A gentle spirit, an excellent professional." To Eddy's family, I reached out and left a message for his daughter Bianca. We salute his dedication to our state, and we'll keep him and each of the members of the family in our prayers. And to his DOT family, we are also thinking about each of you working, as Eddy did, to keep our state moving forward. God bless that guy.

Bedminster Police Patrol Sergeant AlTerek Patterson was taken from us on Easter Sunday. He was in his 14th year serving his community and was a beloved member of the Township's force. He was promoted to sergeant in 2014. He was only 38 years old. He leaves behind his wife Brandy. Again, I tried to reach out to her this morning, and children. They are in our prayers as is his memory, as is everyone in Bedminster who served alongside Sergeant Patterson in all who looked up to him, and there were many who looked up to him as a role model. God bless him.

Next, we have Iris Anaida Martinez Arroyo. She was an icon in our state's strong and proud Puerto Rican community. She was an educator, a cultural manager, and a community and political activist. She was from Santa Isabel, Puerto Rico, but she called New Jersey her home. Iris is survived by two sisters, four nieces and a nephew Vincent with whom I spoke this morning. By the way, the entire, many hundreds thousand strong brothers and sisters of the Puerto Rican community in our state, may God bless her.

We grieve with every family who has lost a loved one. We grieve with the friends they have left behind. We agree with all the colleagues with whom they worked. We grieved with the communities who have lost icons, and leaders and role models. And we grieve because we know we cannot adequately say goodbye to them at this time. COVID-19 didn't just take them. It has taken away our ability to come together to celebrate their lives as we should and as they deserve. That especially makes this illness and these passings so cruel.

It's also what makes it so vital that we continue to do all that we can to defeat COVID-19 so we can come together sooner than later; albeit much later than we would like, to remember these precious lives lost. Here's an update on the map that we've been showing you from time to time that we need to all keep in mind. The lighter the color, the longer it's taking for the virus to double and spread, and that's a good thing. This was a very different map a week or so ago. This is a salute to everybody out there, because so many of us have taken social distancing to heart, we've been able to turn much of this map to the light shade, meaning again

that the rates of COVID-19 spread are slowing, and that the curve is beginning -- and I say beginning -- to flatten. This is the map in many respects by which we measure our progress as an entire state, and we must get every county to be the very lightest shade.

To do that, folks, we have to keep our foot on the gas. We have to stay at home. Absolutely stay at home unless it is essential for us to get out. And if we do go out, we have to keep wearing our face coverings and keep at least six feet apart from one another. We can't take the changes on this map for granted. This could very easily backtrack. COVID-19 can just as easily boomeranging back on us if we stop doing what we're doing. Let's only go through this once. Let's keep our focus on what we need to do today, and that's keeping with our social distancing. And again, if we keep it up, I know without any equivocation, that we will come through this as strong as we've ever been before. Not without casualties, sadly, as we have seen too many lives lost but we will get through this, and we will get through this together as one strong, extraordinary New Jersey family.

PNC Bank Art Center testing site, which we're operating in partnership with FEMA, will be open at 8:00 a.m. tomorrow, Wednesday, April 15, and will handle a maximum of 500 tests. To be tested, you must be a New Jersey resident and you must be exhibiting signs of respiratory illness. The Bergen Community College site, which was opened today, will reopen at 8:00 a.m. Thursday, April 16 and again, also for a maximum of 500 tests. Remember that you need to both be a New Jersey resident and you have to have symptoms of respiratory illness in order to be tested.

Recently, and I can't say this has been true of every day, but I want to say this as long as it is true, because we've seen the long lines, particularly in Bergen. The PNC Bank Art Center site has not been hitting its 500 test maximum. So if you need a test, we recommend you may want to head to Holmdel first on the days that it is open. Again, we're not hitting the 500 test maximum consistently in Holmdel as we are in Paramus at the Bergen Community College, which as we've seen, have ungodly long lines. Consider shifting into the days that Holmdel is open. And again, if that shifts back, we'll let you know.

Additionally, the New Jersey State Policemen's Benevolent Association, or PBA, in partnership with Accurate Diagnostics Labs, has opened multiple appointments only drive-through testing sites for both career and volunteer first responders and frontline healthcare workers. The newest site is located in American Dream, in the Meadowlands, and is a partnership between the NJPBA, Hackensack Meridian Health, Agile Urgent Care and American Dream, and we thank them all for their partnership. Other sites are operating in Deptford and in Somerset. First responders and healthcare workers can opt in to start the screening process for any of these sites by visiting njpba.adlabscovidtest.com. I want to thank by name in particular, New Jersey's PBA President Pat Colligan and Executive Vice President Mark Kovar, two very dear friends, for their work in spearheading this effort.

Also a new site for residents of Hunterdon and Somerset counties will be opening Thursday, April 16. on the campus of Raritan Valley Community College. Testing will be by appointment only to residents age five and older who are exhibiting symptoms and have a valid doctor's prescription with them, which is required. To make an appointment, please visit Somerset-Hunterdon.adlabscovidtest.com, and you can see it at the bottom of that slide. We thank the leaders in both Somerset and Hunterdon Counties, especially the freeholders in both of those counties. We thank RVCC for their partnership. I also want to thank Congressman Tom Malinowski and Congresswoman Bonnie Watson-Coleman for their strong advocacy.

As we note every day, there are many more publicly available testing sites across the state and you can find a list of them by visiting covid19.nj.gov/testing, and there are literally dozens more privately run sites which you can be directed to by your primary care practitioner. Let me say this unequivocally. There is no question that testing anywhere in our country is not nearly where it needs to be and New Jersey is no exception. We've made real progress. According to Brady, we now have at least 66 testing sites now in our state, but we need to do more. We need reliable, safe, quick access to testing for everyone and we need it everywhere, particularly as we begin war gaming and thinking through that process of how and when and what we need in place, particularly from a healthcare infrastructure to begin to responsibly reopen our state.

I want to channel a sort of general approach that I've taken, you've heard me say, as it relates to NJ Transit over the past couple of years. On the one hand, the metrics are clearly getting better as it relates to testing. This is a little bit like online performance for your train. The batting averages are going up. We have run the

fourth-most tests of any state in America, and the three states ahead of us are California, New York, and Florida, and they have a lot more people that we have. So we are punching way above our weight. We have the 11th largest population state in America, and so we will continue to make progress up against that.

On the other hand, no state has the resources they need to test at the scale that they need to test, including those three bigger states, and certainly including New Jersey. So if you're in one of those long lines and you're frustrated, I don't blame you. You should be, and so am I. We need more support for testing. Let me say that unequivocally. I think we've played a very tough hand as well as it can be played but boy, I'd like that hand to be a lot bigger, a lot more inclusive, a lot more resources for testing. We can't begin to think about reopening unless the resources that we get, in particular the cooperation and resources we get from the federal government, are a lot more robust than they had been. We'll continue to play our hand to its maximum potential. But boy, we need help. And we're not alone. Every American state needs help on testing and that includes this one. I have been relentless and advocating for expanding testing with the White House, with our federal partners, and I won't stop until our testing regime is where it needs to be.

Switching gears, the Department of Labor continues its work to upgrade its capabilities to respond to the record number of residents seeking to file unemployment claims. Specifically, the department has expanded the capacity of its call centers to better handle your incoming calls, and has automated more processes to reduce the amount of time it takes for applicants to receive a determination of eligibility. The department also has provided the laptops necessary for an additional 500 departmental employees to assist in helping residents from home. These are just two of the steps the department has taken to ease the current backlog of claim applications and get benefits flowing to residents more quickly.

As we've said many times before, no one is going to lose one single penny of benefits they deserve. The staff at the Department of Labor are dealing with literally unprecedented volumes of applications. By the way, you asked me what is unprecedented? How does this sound? 576,904 applications in just the past three weeks, to give you both some sense of the economic devastation that this virus has wrought on the one hand, and on the other hand, the challenge that our colleagues at the Department of Labor have to process. Even with these steps in place, we ask for your continued patience and understanding. And when you do get through to someone on the phone, as I've said before, remember, they're also dealing likely with the stresses of keeping their own family safe. Let's all be kind to one another, and let's support one another.

Also, for those eligible for unemployment, the additional \$600 per week made available by the Federal CARES Act is hitting accounts starting today. We're one of the first handful of states to get this done. But remember, to qualify for unemployment and this expanded benefit, you cannot choose to collect unemployment benefits if employment at your current place of work is available. A reminder that if you have lost your job due to this emergency, and we know many of you have, but you still want to work. There are more than 50,000 jobs from more than 650 essential employers posted online at covid19.nj.gov. Just click on the link for jobs portal on the main page.

Also, today I will be signing a number of bills that the Legislature sent to my desk yesterday, some of which, as we discussed yesterday, codify my Executive Orders and others which make new changes to help us further our fight against COVID-19. One bill sponsored by Senate President Steve Sweeney will allow employees forced to care for family members because of COVID-19 up to 12 weeks of family leave in a 24 month period without losing their jobs. I thank the Senate President. And as I announced yesterday, I'll be signing the bill, extending the tax filing deadline for income and corporate taxes and for estimated payments from April 15 to July 15, so that it remains consistent with the deadline for federal tax returns. The bill also extends fiscal year 2020 to September 30 of this year. That will ensure that we're able to take a fuller account of the economic effects our pandemic response has had, and to incorporate the revenue data from state income tax returns that we will receive in July. Under the bill, I will present a revised budget message to the Legislature by August 25 2020. I thank again the Legislature for their swift action and for their cooperation and goodwill on both sides of the aisle as we face these challenges together.

And I have also signed an Executive Order postponing deadlines to act on rule proposals and explorations of currently existing rules until 90 days after the current public health emergency has ended. This will ensure that agencies across government can focus their attention on the immediate threat of COVID, which is where it belongs.

On the topic of volunteers, our volunteer intake form at covid19.nj.gov/volunteer has been updated to accept responses for those of you who have prior experience as an emergency medical responder and who wish to pitch in to help our EMS squads. Our Department of Health, led by the woman to my right, has issued a waiver allowing for certain individuals with EMT or paramedic experience, but whose certifications have expired within the past five years, to return to the job to help our response. We can use all the help we can get. We've said that many times and we say it again today. Our current in-state crews are doing a tremendous job, and they're now being assisted by 78 out-of-state crews who have come to help as we mentioned, some from as far away as California. But we know we can still use more. So please head to covid19.nj.gov/volunteer and sign up.

We are still looking, Judy, unless you correct me, for individuals with nursing and other medical experience, especially those with management experience to help in our field medical stations. And again, for you as well, the place to go is covid19.nj.gov/volunteer. We cannot thank enough the more than 21,600 volunteers who have already raised their hands to help us. You are a crucial part of our team and we are honored to have you with us in this fight. Because of this, Judy and her team have been able to provide the names of 240 qualified professionals to our long-term care facilities to help alleviate their crushing staffing needs and serve their residents, including 150 certified nursing assistants, and 90 registered nurses, licensed practical nurses and clinical nurse specialists. The department has availed 25 volunteer nurses to the Veteran's Memorial Home in Menlo Park.

I also spoke a short while ago with Secretary of the Department of Veterans Affairs Robert Wilkie, who agreed to my request for an additional federal assistance for our veterans homes and who will send an additional 90 nurses from the Department of the VA to New Jersey. I know there's going to be more on both veteran homes and long-term care facilities from Judy in her remarks. I want to thank the VA and Secretary Wilkie for that.

Additionally, Attorney General Gurbir Grewal and the Division of Consumer Affairs are announcing today that more than 10,600 out-of-state health care professionals who have received temporary emergency licenses, including professionals deployed to New Jersey with the National Guard and others who are offering telehealth services to New Jersey's residents remotely from their home states. They are on top of the more than 400 retired New Jersey healthcare professionals who reactivated their licenses within the past week. I don't need to say this, but it should be repeated. This is an all hands on deck moment and we thank everyone who is stepping forward.

Other conversations that I've had this morning, a couple I would highlight. One is the Consul General for the People's Republic of China based in New York and Ambassador Huang Ping. He and I had a very good discussion about how to streamline a whole range of requests and initiatives we have in the People's Republic, for things like personal protective equipment and ventilators. It was a very good conversation. I thank the Ambassador for that.

I had likewise a very good conversation with Vice President Mike Pence this morning, a private conversation just to update him on where we are, and as they start to think through in their own deliberations, whenever it is down the road, what sort of healthcare infrastructure we need as a country, and what it looks like when we begin to open back up again, that I raised my hand personally on behalf of New Jersey that we would be honored and would very much want to be a part of that discussion and process.

Before I close and turn things over to Judy, as we've been doing over the past week, I'd like to highlight a few of the good news stories of everyday New Jerseyans stepping forward and coming together to help us defeat COVID-19. We're learning so many of their stories because you are telling them to us by using that hashtag #NJThanksYou on social media. First up comes the County College of Morris. Here's Engineering Lab Coordinator Eric Peterson, who's responding to a call from Atlantic Health Morristown Medical Center for face shields, and is now creating them based on specifications provided by the hospital on the college's 3D printers. So to you Eric, and the team at CCM, thank you.

And here is Zellie Thomas. Zellie's on the right, flying his Yankee colors. He's a community activist and an educator in the Paterson Public Schools. He has helped organize a small band of volunteers. They've named themselves North Jersey Mutual Aid. They're collecting small dollar donations and turning them into

necessities for seniors and other vulnerable residents who are staying in their homes and aren't able to easily go out. They're bringing them everything from toilet paper to hot meals, meals sourced, by the way, from local restaurants, who are also stepping up. To Zellie and every member of North Jersey Mutual Aid, we thank you.

Again, please keep sharing your stories of New Jersey's unsung heroes. We know they're in every community up and down our state. Give them a shout out using hashtag #NJThanksYou so we can all recognize their efforts together. Again, these examples remind us that we are indeed all in this together. It isn't up just to some of us to fight this war, it's up to all of us, each and every single one of the 9 million of us. We cannot let up, not one bit, until it is, in fact, won. Folks leave the worrying to me and to those of us up here, and our teams. We're working overtime to deliver what our state needs. We're going to work with our neighboring states, not just to get through this, but to put in place the plan we need to responsibly get us back, open and back in business so we don't see a COVID-19 boomerang.

But as we do these things, you keep doing the things you need to do to get us through this war. Keep practicing social distancing. Please keep staying at home. Keep being smart and staying in unless you absolutely have to go out, and let's keep leaning on each other for support. Whether it's a simple phone call or a text to someone who may need a little pick me up. This is who we are. Our New Jersey values and a lot of hard work are what we need to get through this.

With that, please help me welcome the person who needs no introduction, the Commissioner of the Department of Health, Judy Persichilli.

Commissioner of Health Judith Persichilli: Thank you, Governor. Good afternoon. As the COVID-19 outbreak continues, new tools are being developed every day to help aid the response. As the Governor has shared, the state has been working hard to expand testing, now with 66 testing sites. The testing now is conducted with a nasal swab performed by a healthcare worker. As we have said in the past, we are testing symptomatic residents. Yesterday, Rutgers University announced a new FDA-approved saliva test that could be self-administered. It has the potential for mass testing. An important benefit of this new FDA-approved method is that if we greatly increase the number of people tested, that will allow the state to collect the data that we need, vital to informing our state strategies going forward. I've been in touch with the Chancellor of Rutgers Biomedical and Health Sciences, Dr. Brian Strom, about this exciting development and we look forward to future discussions with him, and how this test can benefit our residents.

As reported previously, the department continues to work with our hospitals. According to the data reported from our hospitals as of 10:30 and as the Governor shared, there are 8,185 hospitalizations of individuals that test positive for COVID-19 or are persons under investigation. That was a daily growth rate of 4%. There are 2,051 individuals in critical care and 1,626 of those individuals are on ventilators, or about 80%. You may recall a couple of days ago there was about 97% of individuals on ventilators.

Sadly, we report 365 new deaths for a total of 2,805 fatalities in our state, and 27 of these new deaths were residents of long-term care facilities. All of these individuals, their families, are in our thoughts and prayers. There are 342 long-term care facilities in the state with COVID-19 cases for a total of 5,945 cases being reported.

I want to talk a little bit more about long-term care. It continues to be of greatest concern for us. Since March 6th, we've issued 18 orders or guidances to long-term care facilities to include curtailing visitation on March 14, allowing them to hire out-of-state CNAs to supplement their staff who were either ill or had walked off the job; we've enforced mandatory notification of residents, family and staff of the outbreak in their facilities; and on April 6, we required universal masking.

In this past weekend, we sent out an administrative order prohibiting admissions to facilities that cannot cohort and maintain the appropriate infection prevention interventions. We've surveyed all the long-term care facilities about their ability to cohort patients on a separate wing or floor, or their ability to place residents in private rooms with private bathrooms and having adequate staffing and PPE. If they cannot cohort, they cannot admit. Presently, 123 facilities are prohibited from admitting patients.

We took an inventory of their PPE and over the past week, we have distributed 108,000 N-95 masks, 692,500 surgical masks, 7,008 face shields, 4,728 surgical gowns and 727,000 gloves. We've surveyed their employee capacity and reviewed their staffing plans. We've identified the employees who are available to work, those

home on quarantine, those that are symptomatic and isolated, and those that are positive and hospitalized.

We've shared a list of over 150 CNAs registered in our volunteer portal with the long-term care facilities to call them up to work. An additional list of 90 RNs and LPNs who are registered in our portal were also sent out. We sent a list of 25 nurses to the veteran's home in Menlo Park and in Paramus. On a selected basis, local health officers and/or our survey staff have visited facilities that we recognized have significant issues. Specifically, over the weekend at 2:00 a.m. a health officer visited a facility up in North Jersey based on information that we were receiving that seemed inappropriate to be occurring. We are working with Avery Eisenreich from the Alerus Group, Robert Hawk from Genesis and Kevin Slaven from St. Barnabas to bring up over 300 beds available for individuals in hospital beds awaiting nursing home placement. They will be available to admit those patients. They have the ability to cohort. They have the staff in place to take care of these patients, the residents, and they also have the PPE required. Sending survey staff or local health officers to impacted facilities for monitoring residents, we are doing in relation to the statistics that we're gathering. If there is a facility that's at risk, they will be visited.

We have worked with the Department of Human Services to develop an enhanced reimbursement plan for the facilities that are open and admitting patients and able to maintain infection prevention precautions, so that they have the available financial foundation to purchase PPE and/or pay their employees.

According to the data received this morning, and this is switching gears, seven laboratories are sending us their COVID-19 results. Over 95% are being reported. 128,604 tests were performed, 57,654 returned as positive, for a positivity rate of 44.83%. Of the deaths that we're reporting, the veteran home in Paramus reported three new deaths over the past 24 hours. The ethnicity is as follows: 51.5% are White, 22.2% are black non-Hispanic, 15.6% are Hispanic, 5.5% are Asian, and 5.3% are listed as other. That ends my report. As I try to end every day, stay home, stay safe, stay connected, and stay healthy. Thank you.

Governor Phil Murphy: Judy, a couple of things, if I may. Counties, again, positive cases, it's the same five or six counties that have the most as we've been reporting: Bergen, Hudson, Essex, Union, Passaic and Middlesex are the top six. Secondly, underlying conditions look to be about the same as we've been seeing of late?

Commissioner of Health Judith Persichilli: Cardiovascular disease went up a few points to 61.8%. Diabetes mellitus 37.4%, other chronic diseases 30.3%, chronic lung disease 20.8%, chronic renal 15.5% neurological or neurodevelopmental disabilities, 15%, cancer 11.6% and others, 12.6%.

Governor Phil Murphy: Thank you also for the many steps you've outlined on long-term care, and God bless our vets. Again, I'm gratified I know you are, that Secretary Wilkie is going to send 90 nurses our way, because God knows we need them. The racial data on fatalities, I guess just to repeat something you and I have said now for over a week. The African American number is today over 50% more than the representation of the overall state, and that's something that we watch and gives us significant concern. The Hispanic number is a little bit lower today and is a little bit under the representation in the state, which is a different reality if you look at the New York City numbers, in particular. That's one that I know you and I are going to try to get more of a sense of in the coming days. Thank you, Judy, for everything. Pat Callahan, good afternoon. Anything you've got on compliance or PPE or other matters of note.

State Police Superintendent Col. Patrick Callahan: I'll be brief. Thank you, Governor. A subject who was cited on Saturday and Sunday for failing to wear a mask in an establishment allegedly did that again yesterday, except this time because of his willful defiance of these Executive Orders, his charges were placed on a warrant. In Newark, that police department issued 24 Executive Order violations as well as closed a business. In Atlantic City, in addition to being cited for an EO violation, a subject was charged with the crime of robbery and the possession of a controlled deadly weapon, namely a handgun. In Mendham, a club and the attendees there were cited for being open for gathering. It was a tennis facility in the borough of Mendham. In Harrison, a subject was charged with burglary theft and an EO violation. In Stockholm, a subject was arrested and coughed in the direction of the officers. In Point Pleasant, a subject were cited for shutting off the power to various tenants at a motel which was in violation of the Executive Order. In Lakewood, a subject was cited for operating a business, namely 20 or more people were gathered at that establishment. In Camden, a subject, arrested for domestic violence, spat on the police officers as well as an additional officer while being tested at Cooper Hospital.

And just real briefly on PPE, if I'm not mistaken, I think New Jersey's one of, if not the first state to be receiving the decontamination equipment, which will allow us to do upwards of 80,000 N-95 masks a day. It's our hope, we think at first to have that in place for University Hospital. We think we can work beyond that. I know it was in touch with Commissioner Johnson from Human Services last night and we're really going to try and assist her department as well, because her burn rate for all of her workers is, she's going through a lot of PPE. That is a win for us and we hope to have that up and running as soon as possible. That's it, Gov.

Governor Phil Murphy: Thank you, Pat. You know, one comment on compliance that has to be said, notwithstanding the, in some cases, ongoing knucklehead behavior and some folks just letting their guard down, I have to say this to everybody who's watching, there's an overwhelming even grudging, I have to say, compliance by millions of you. That is the singular, again, we've said this many times. If we keep this curve as low as possible, that leads to lower hospitalizations, lower infections, lower hospitalizations, lower intensive care beds, lower ventilators needed, and please God, lower fatalities. While we're doing that, our healthcare professionals, state police and others are building that capacity out so that those lines cross at a reasonable level. There's overwhelming compliance, folks and we can't thank you enough for that.

But you have to keep it up. And we're not overstating this, I promise you. We have got to keep this up, and particularly when the weather gets as nice as it's been this morning and last night, we know it's frustrating. We know sometimes it's not fun and you have a temptation to sort of let your guard down. I would just beg you, don't do that. The faster we can get through this, the better off we will ultimately all be in the long run. And we'll have many more springs and summers, decades, centuries more ahead of us. But this is one, at least for the time being, we've got to stay on this and crack the back of this.

We owe you an answer this week, and it's not going to be today, so I can save the questions on school. I think I may have misstated this yesterday, and I did not intend to. Some of you interpreted, I think, in my saying we'll make a binary yes/no decision on whether or not we're going to close or stay remote for the rest of the year. That's actually not the case. We're looking at a number of different alternatives and as promised, we'll let you know by this Friday.

Secondly, Dan, Brian, we're here again tomorrow at 1:00 p.m. unless folks hear otherwise from us in terms of planning for tomorrow. With that, Brent, we'll start with you over here.

Q&A Session

Brent Johnson, Star-Ledger: Did you give a full percentage of how many of the deaths have underlying conditions? I know you broke down the conditions, but how many did and how many didn't have?

Two, when do you now anticipate the peak demand for hospital beds? What are your estimates? What models are you using? Why do you think New Jersey has not hit the peak yet? Does the state plan to actually move residents in struggling nursing homes? Governor, I don't know if you saw Trump's tweet about Mutiny on the Bounty. Do you take that as a threat that he's going to withhold life-saving equipment from the Stockpile if you disagree with his reopening plan?

And last, is the State Human Services Department going to submit a plan for pandemic EBT, the supplemental benefit for kids who are missing out on school meals? What is the timeline? And if not, why?

Governor Phil Murphy: I think you have about the normal list of questions, but I think you sped through them a lot more quickly today.

Brent Johnson, Star-Ledger: Every time I'm here, like my colleagues give me more to ask, and it's just because I'm so charming.

Governor Phil Murphy: It feels like fewer questions just because you were in such a speed. I'll turn to Judy for most of this, but I'll give two and then maybe Parimal may need to come in on the Human Services question. But I would just say just again, to repeat something you and I have been saying, there's a whole range of models that we're looking at. For those of you watching at home, this is probably the better way to put it. There's a worst-case assumption and there's a best-case assumption. We're looking at not just one model, but a handful of models, Judy and Eddy and Christina know that. We're trying as best we can to sort of

figure out exactly where this is headed. We continue to be, plan for the worst and hope for the best. But the last thing we're going to do is plan for the best and get the worst. We just can't do that. That would be abrogating our responsibility, but more on that from Judy.

I was wondering, was it the Charles Laughton Mutiny on the Bounty or the Marlon Brando Mutiny on the Bounty?

Brent Johnson, Star-Ledger: It had to be Marlon Brando, he seems like he'd be more of a Brando fan.

Governor Phil Murphy: Well, that's the question I was tempted to send back just for clarification. Listen, this is an and/both. I think I said this yesterday and I mean this sincerely. I said this to the Vice President today. We need to both plan responsibly with our neighbors. We're the densest state in the nation. We sit in the densest area of the nation, in the densest region of the nation. We would be abrogating our responsibilities if we, first and foremost, didn't do what we need to do within the four walls of New Jersey, but we've got to make sure we're at least harmonized, if not more so, with our neighbors. That's an absolute necessity. We saw that as we all sort of closed down our economies and closed down our states.

I've said this many times. You couldn't have the unintended consequence of a restaurant having one set of rules on one side of the Hudson or the Delaware, and a restaurant on the other side having a different set. Likewise, we have to have that sort of same level of coordination as we begin to think through what we're going to need to reopen. We've just put more of a specific ring around this, calling it a council, saying we're each going to put forward three persons to represent our state. That is not in lieu of, that is not instead of. It never will be instead of a deep cooperation that we need with the federal government. I said this to the Vice President today. I don't want to speak for him, but I think we were in violent agreement, that this is sort of, you need both.

There's no substituting the Federal Government of the United States of America in any challenging period, let alone a once a century, if longer, healthcare crisis. There's just no substituting for that big gorilla in the room, the Federal Government of the United States of America. And so I can say with great confidence, we need the administration, we need the federal government and the full force of it. Financially, healthcare infrastructure, the plan, and I could say with the same passion, we need a similar reality with our regional partners. Both of those statements can stand. They're not at odds with each other, nor are the actions which underpin them. With that, I don't want to be pounding my shoe on the table. We've got underlying conditions, peak and moving residents I heard, Judy.

Commissioner of Health Judith Persichilli: I'll start with the last one. At this point, because we have so many organizations that have COVID positive patients, the only residents we're going to move are those that cannot be readmitted back into their original facility or the new admissions, which will go to the 300 beds that we're identifying.

The peak, yesterday, and this changes every day as you know, we look at the three models. Yesterday at the peak we identified the possibility of 37,000 hospitalizations and over 7,000 intensive care. With all of the inputs from yesterday, the date of the peak has been stretched out to the 25th and today, it looks like 15,922 hospitalizations 3,821 ICU admissions and 3,503 ventilator requirements. The model today looks better than yesterday, even though our admissions to the hospital increased by 4%. They look at the doubling time and the trend over time. And if this is the worst case, I think our hospitals are very prepared to take care of these individuals and our alternative care sites will be busy and they will be appropriately staffed and adequate. And this will change tomorrow.

Governor Phil Murphy: How about underlying conditions?

Commissioner of Health Judith Persichilli: The underlying conditions, cardiovascular disease is still the leading cause at 61.8%.

Brent Johnson, Star-Ledger: Meaning how many people who have died had an underlying condition and how many did not?

Commissioner of Health Judith Persichilli: The actual numbers, sure. On cardiovascular disease, 797; diabetes mellitus 37.4% or 482 individuals; other chronic diseases, 30.3% or 390; chronic lung 20.8% or 268 individuals; chronic renal disease, 15.5% or 200; neurologic disability 15% or 193; and cancer 11.6% or 149.

Governor Phil Murphy: Brent, your question on human services. I apologize?

Brent Johnson, Star-Ledger: Is the State Human Services Department going to submit a plan for pandemic EBT, the supplemental benefit for kids who are missing out on school meals? What is the timeline for that? And if you're not doing that, why?

Governor Phil Murphy: Parimal, do you have any insight on that?

Deputy Chief Counsel Parimal Garg: I'm not sure about that, but we can get back to you.

Governor Phil Murphy: We're going to get back to you on that. Is that okay? May I just say one thing? Again, you've got best case, worst case scenarios. I want to remind everybody out there, the better news in terms of modeling goes right out the window if we let our guard down. Right out the window. And by the way, we'd know that as early as tomorrow. If everybody right now, please God, don't do this. If everybody just started going out and going about their regular business, we would know within 24 hours and the models would blow up. Remember, we haven't shown the charts in a couple of weeks. So forgive me for my ham-handedness here. Remember what this looked like? I say this on the back of, you said your current is April 25, so the runaway freight train was this first hump. But that chart that we used to show you, in every case showed a peak that was lower, but later. Lower, but later and that's a little bit what you're hearing from Judy right now.

If that best-case scenario comes to pass, the amount of beds, both general, ICU beds, ventilators, please God fatalities will be lower, but the peak will come later. That's not a shock to us. That's the chart that we were showing from day one. This is the runaway freight train had we done nothing. That comes out fast and hard and is really high, and we can't handle it. I'm not sure it's exactly right, the area under each of these curves, by the way, are the same in the sort of theoretical average performance. We're better than average, as we've reminded ourselves, but the peak, interestingly enough, is a lot lower, but it's a lot more smoothed and further into the future. I think that's sort of a different way of saying that's what we're hoping for. Thank you. Brent. Dave, good afternoon.

David Levinsky, Burlington County Times: Hi, Governor. A couple of questions for you and I have to now say the Commissioner who needs no introduction, because there were two women who need no introduction.

Governor Phil Murphy: That's correct.

David Levinsky, Burlington County Times: First of all, with regard to ventilators, although Dr. Tan you've always never needed an introduction, so I don't even need to say it. On the question, on the subject of ventilators, could you remind us where we stand? I believe we started with needing, we had 2,000 ICU beds then the projection was we need to double that. Yesterday, we needed 6,000 ventilators. Today, it's 3,800. This is probably confusing for the average person, much less a reporter. I understand there are different models and different things going on. But you know, maybe if we can just flesh out exactly how many ventilators we've gotten from who, remind us. I know California gave us some and you had mentioned, Governor, that we were waiting for more ventilators from another state. If we could just get a reminder on that.

With regard to the unemployment situation and people applying for benefits, you had made a plug in the beginning of today's discussions, Governor, about the fact that they're trying to increase service and add more people and so forth. You're probably aware that in New York State, they've launched a new app to handle unemployment because it's been so horrible. We have gotten continual calls, people crying, calling our news department, complaining about not being able to get through, they get through, they're an hour on the call and then they get disconnected. It's just sounds nightmarish. Has there been any discussion that you're aware of to try to not necessarily fix this antiquated system, but maybe go to something else, like what they're doing in New York?

And last one, Colonel, you had mentioned the cleaning of the N-95 masks. Is this the hydrogen peroxide vapor cleaning system that I was reading about last week? If not, is there something else going on? And how might this be expanded for the whole state? Because obviously, this is a very big issue. And, you know, you've got everybody wearing scarfs and homemade masks, because there's not enough N-95s. That's it.

Governor Phil Murphy: Real quick. On ventilators, we have, if you add up our ask to the federal stockpile from day one, and you add all the asks together, it was 2,500 ventilators of which we have received 1550. The outstanding balance of our original ask is 950. That 1550 includes the California number, because

theoretically any one state that raises their hand and says I'd like to tag New Jersey, it has to come through the federal stockpile first. That's the way it should be.

I mentioned yesterday another state had raised their hand for us, but in fairness, that process holds for them as well, so there's nothing new on that as we sit here today. I know that we have at least another requisition out as of today, away from the federal stockpile for another 500. So 950 is the balance of our ask from the strategic stockpile, 500 is a new requisition, which would be a purchase and again, our state was not in the PPE or ventilator acquisition business six or seven weeks ago, and this has become one of our most significant lines of business over those past six or seven weeks.

I don't want to speak for Judy, but I would just say the amount of ventilators and she'll say this better than I can, that moves around has to do with not only one day to the next what do the models look like? But also, between one model versus another, and between best case and worst case. Our job, again, is to hope for the best but to plan for the worst, which is part of the reason why we put a requisition out today for another 500 to purchase.

I believe, and I don't want to overstate this, this is a little bit like my testing comment earlier, which is a little bit like my NJ Transit, the numbers look better in the aggregate, our batting average is improved. That's a fact. But at the same token, if it's you on the phone waiting the two hours, if it's you trying to log on and you can't get on, if it's you in that car in line at Bergen Community College and you're frustrated. I don't blame you. You should be. We accept that.

Having said that, I believe I was on with Rob Angelo last night back and forth. I believe literally over the past 24 hours this has gotten to a meaningfully better place. But I will do this. I don't know that I'm aware of any app other than you can link into it through the covid19.nj.gov website which has been the case for several weeks. I will ask, I'll make sure Dan, remind me to make sure we go to Rob to see if there's any other app or other mousetrap that he's got in place. But God willing, we are finally beginning to get through it. Again, we're not alone. The boat is swamped, to say the very least and I have nothing but sympathy for the folks who are on the phone, who can't get through who are trying to log on, can't log on.

I would repeat the minor piece of advice, early in the morning, late at night, has tended to be a better time to get on the system to at least log on. Judy, anything on vents you want to add, and then Pat on the recommissioning of the N-95s.

Commissioner of Health Judith Persichilli: As we spoke many, many weeks ago, I had encouraged all of the hospitals to increase their ICU capacity by 100%, 2000 to 4000. Interestingly, today, we're identifying at worst case that we need 3,821 ICU beds. I can assure you that all of the hospitals have increased their critical care capacity. Then we looked at the ratio of ventilators to patients. We're running between 85% and 97%. I have said repeatedly, one to one. So for every critical care bed, whether it's the licensed bed or the expanded bed, we would need a ventilator. I still feel strongly about that. We need 4,000 and then some in reserve. At the present time, that's why we requested the 2,500 originally, and at the present time, we're still about 950 short of the traditional ventilators.

David Levinsky, Burlington County Times: Have we done any of the anesthesia machines where they've been converted?

Commissioner of Health Judith Persichilli: Yeah, there's a number of hospitals that are converting and have converted anesthesia machines, particularly in emergency situations, where they've run low on ventilators and they've had to support the patient quickly. But I know a number of them have used anesthesia machines quite effectively.

David Levinsky, Burlington County Times: Any idea how many?

Commissioner of Health Judith Persichilli: I don't have, no, these are anecdotal. You know, I speak with them, I'm on the calls with CEOs every week. That's arranged by the New Jersey Hospital Association. There was one yesterday evening. A lot of it is anecdotal. But many of them have used anesthesia machines.

Governor Phil Murphy: Can I just repeat, Pat, before you hit the rehabilitation of the N-95s, you know, I have not lived through something like this before. None of us have, right? I want to say this differently. I've said this 1,000 ways. Judy said it probably 900 or 1,100 ways. Pat has said it, Dr. Tan has said it. The impact of human

behavior on what we need cannot be ignored for one second, and the correlation between what the 9 million of us do, and choose to do and therefore, the derived number of infections, hospitalizations, ICUs, ventilators and sadly, the healthcare workers needed, sadly, fatalities, the correlation is 100%. None of us can forget that.

It is our behavior, which is the most important factor in a lot of the capacity questions that you all have been asking. Rightfully, by the way. It is up to us and any deviation in that behavior, good or bad, and for the most part of late, it's been really good, has a huge impact on the answers that we give you. Again, within ranges, best and worst, as well as a number of different models, but human behavior is the single most important ingredient in this formula. Pat.

State Police Superintendent Col. Patrick Callahan: If you read about that, it's called the Patel CCDS. That is that vaporized hydrogen peroxide where the masks get collected. They get put into a chamber and run through that decontamination cycle and then get repackaged. It's our hope, again, the logistics of how we get these masks to and from places where they're being utilized and then back out to the end user, we're still working through that, but that is the process that will be in place.

Governor Phil Murphy: Sir, in the back. Have you got any? No? Behind the camera? Elise, please. Paul, we'll get to you, I promise.

Elise Young, Bloomberg: Are the field hospitals operating as planned? A few weeks ago, you said the Meadowlands was opening not a moment too soon, and yet it and the Edison site seemed to have very few patients. Is the plan still to open Atlantic City today with 200 beds, or are you reexamining whether it and the others are needed?

Regarding the ventilators, if health workers can convert an anesthesia machines so easily, why not just go with that as opposed to ordering more ventilators? Is it a situation where an anesthesia machine can work adequately, but it's just not ideal? And that's it.

Governor Phil Murphy: Judy, you could talk about capacity. We were actually, at one point, going to go down to Atlantic City, I think this morning. Am I right? Have I got the days right?

State Police Superintendent Col. Patrick Callahan: We were, but –

Governor Phil Murphy: And there was a sort of a reshuffle of the staffing piece. I still expect that we're going to go down there. Do you have an update in terms of when?

State Police Superintendent Col. Patrick Callahan: I do. We anticipate that staffing, basically, just you know, the federal government shifted the Atlantic City Medical Corps staffing up to New York between the Javits Center and hospitals within New York, so we're anticipating another crew to come in, if I'm not mistaken, from California to do the staffing in Atlantic City. I would call it a soft opening, probably Tuesday or Wednesday of next week.

Governor Phil Murphy: It's a fair point. We meant to say this actually, I don't know if we ever advised this, but we were actually talking about going down there today or tomorrow. Judy, in a second, if you could come back to just the field hospitals as a general matter, but I would just say one thing on ventilators before I turn it to you. I assume, as the non-medical guy here, I assume that these anesthesia machines, we need them as well. And that we don't want to run that supply chain dry as well. And so if we go out, you know, what we get from the stockpile is a federal donation, as it were. That comes and goes, as God willing this passes. Things that we acquire are ours and that's important to note. We're not borrowing from Peter to pay Paul in that respect. In other words, taking out one category of equipment that we'll need, for another. Again, that's the non-medical answer. Is that in the ballpark?

Commissioner of Health Judith Persichilli: It's in the ballpark, for sure. You're making a good comment, though, if the anesthesia machines are effective, do we need actually more traditional ventilation? You know, hospitals are used to the traditional ventilators and the amount of oversight to the traditional ventilator by the respiratory therapist and intensivist is far less than an anesthesia machine. We need anesthesiologists and CRNAs who are used to the anesthesia machines then to join the critical care team, usually they're in the OR, and now they're in intensive care units to help monitor the equipment.

So a lot of it has to do with the type of equipment the intensivists and critical care nurses and respiratory therapists are used to. On the other hand, in emergency situations, the resiliency and the extraordinary response of the medical teams, they will save lives by using what they have on hand.

Governor Phil Murphy: How about any comment on the field hospitals?

Commissioner of Health Judith Persichilli: The field hospitals are interesting. The individuals that go to the field hospitals, and I didn't get the stats this morning but as of yesterday, we had 50 in the Meadowlands, they do find patients coming from the hospitals that maybe have two or three more days say they're apprehensive about going to the field hospitals. They don't know, it's a new thing. They can't imagine being in a field hospital. And some of them have said, why don't I just go home on homecare? Which is a really good alternative as well, as long as they can be safely taken care of. I think some of it has to do with making sure that individuals know they'll be cared for well in the field hospitals, but also if they can go home, that's even a better alternative. It's a learning.

Governor Phil Murphy: Thank you for that. Paul, good afternoon.

Reporter: I had several of my readers complain that the golf courses are shut even though they had implemented social distancing guidelines, but you can still buy lottery tickets in a crowded convenience store. In other words, they're complaining they can't play golf in the fresh air, but you can crowd in there and mangle that machine and so forth. They said it looks like the state is protecting its own revenue stream while closing down other businesses.

And then the other question I had was, you mentioned Sunday and Monday that the state won't have an economic recovery until we have a complete health recovery. I think experts say that a complete health recovery could take a year or so. What is your criterion for a health recovery that is complete?

Governor Phil Murphy: Yeah. So on your first question, Paul, the golf courses which were part of entertainment, I guess, is the category that we put that under. I've taken a fair amount of incomings on it. I continue to take a fair amount of incomings on parks. I just got another note from the parent of a high school senior who wants to make sure we have graduations. Sign me up for everything, assuming we could safely do any of the above. I promise we're not holding back artificially any of that. We've just got to make sure we're out of the woods. As it relates to the convenience store –

Reporter: Did you mean in the woods?

Governor Phil Murphy: Exactly. As it relates to the convenience store, all kidding aside, we haven't thought about it in terms of protecting our revenues, our revenues have blown up, that has fallen off a cliff. But on a serious note, and I know your question is serious, if you're in a store that's deemed essential you've got to keep distance from each other. That's the one thing I'd say. I know that may seem a little paradoxical and I feel badly about that, but the fact of the matter is, if you're inside an essential retail operation, you've got to keep your distance six feet, you've got to have a face covering and you've got to play ball.

As it relates to complete, I guess, Paul, I accept that, by the way. Part of the reason why we've begun to think about this now as a state, I know the federal government is thinking about what does reopening look like? The regional group of states, actually one more than when we were here yesterday, Massachusetts, has joined, which I think is a very good add. So seven of us trying to think this through, it includes a heavy dose, and Judy you correct me if I'm wrong, of healthcare infrastructure questions.

It's not just, what's the restaurant look like? But it is, what does the testing regime look like? I'm happy we've made a lot of progress, to repeat what I said earlier on testing, but it's not remotely near, we don't have remotely the assets that we need or the technology. Judy referenced Rutgers, that's something we're going to come back to you on if we think that's got the legs that it looks like it's got right now. But that's a good example. So if you had robust testing, that was mass scalable, you could hear back very quickly.

When I say complete, that masks challenges that you otherwise would have if you literally had to drive this to zero, and keep it at zero. There's a big healthcare infrastructure element to that and If you have the confidence that that infrastructure, particularly testing, contact tracing, what do you do when you find

somebody? How do you quarantine quickly? If we have confidence in that, that allows us a lot faster to get back in the game? Would you be okay with that? Okay. Christina? Okay. The two who need no introduction agree with me, okay. John.

John McAlpin, Bergen Record: Can we get specifics on this 2:00 a.m. visit to a long-term healthcare facility? I mean, where was it? What prompted it? What are the types of things you're finding? People are still clamoring for information, families with people in these places are clamoring for information about them. Can we get names of places to see? Just any kind of information about what's going on there with these types of inspections? Where you're going, what you're doing.

And the surge, what are the things that you're looking at in terms of, is it numbers of admissions? Beds? Intensive care beds? To let you know that you're out of the surge.

Can you detail for us the picture of how you're moving supplies, like ventilators and staff, around the state from hospital to hospital, long-term care, what you're doing. I know the directive from yesterday about, people have 90 minutes to make a decision about putting somebody on a ventilator, how we that ventilator is readily available, as well as staff. How are you keeping track of staff in different places? Especially as the surge is in North Jersey and is expected to hit the Shore and South later?

Governor Phil Murphy: Is that it? Judy, do you want to dive in?

Commissioner of Health Judith Persichilli: Sure. Let's talk about the surge. The three models that we have, and we've described this before, is the Chime model, the IHME model and what we're calling the Lakshmi model, which is a mathematician from New York who's been working with our Innovation Center. They all use somewhat different inputs, but it has to relate to the rate of infection, the doubling time of infection, the doubling time of hospitalizations, number of patients in ICU. All of those inputs, and I'm sure I'm missing some. The algorithms are different for each one. All of the algorithms then predict the rate of infection, how many total infections you expect. From that, it extrapolates into how many hospitalizations. We're pretty much following what the rest of the nation is seeing and 80% to 85% of people that are positive end up home, mild to moderate; 15% in the hospital, and 5% in intensive care. A percentage of that, you hope 1% or less, but it's running a little bit more than that, unfortunately become a fatality. The algorithms are a little bit different. We look at all of them. And as I described, they change every single day.

In terms of the movement of supplies, we have set up for this a central procurement center. The State Police are vigilant and it's at The ROIC and requests come in. We look at inventories. We know pretty much what every requester has in terms of their inventory of all of their supplies and equipment. We have made it pretty clear that we've regionalized the state to try to keep the movement, particularly of supplies and equipment, within region. If we have to move patients, that they're moved first within the region.

We know that there are some very effective systems within the state that already have transport capacity within their own system. If they can do that quickly with their patients, obviously, we would never say not to do that. It's whatever serves the patient the most and best at a certain point in time. It's happening every day. Every day there are patients being moved. Every day there is equipment and supplies that are being moved. We know exactly how many ventilators have gone from central procurement to exactly the site where they've been used. We know how many have gone to Hackensack Meridian. We know how many have gone to Newark Beth Israel, how many have gone to University, we track all of it. It took us a while to get it up – a while, we had our first case March 4, it took us a short period of time, I guess I should say, but I think it's working very well.

Governor Phil Murphy: Judy, I assume the 2:00 a.m. visit is a privacy matter that you're not going to want to get into.

Commissioner of Health Judith Persichilli: I'm not going to talk about the particulars, but I can tell you that I get a lot of incoming. I read them all, I respond to all of them. And if I get a complaint or concern that really sounds something like this couldn't possibly be happening, somebody goes out. We rely so much on the health officers. They're the unsung heroes here as well. You know, they are taking care of their municipalities, their towns, their regions very well.

Governor Phil Murphy: We hear on the long-term care, Judy hears it, I hear it, we all hear it. Folks are rightfully looking for more communication and more answers than they're getting. We've been pounding away on the operators to provide that. It's their responsibility. It's not a New Jersey specific. That should give no solace to anybody but this is a huge issue across the country, comparing notes with other states. I will just say Judy and her team are literally morning, noon and night pounding away, not just with the health officers going out and seeing it with their own eyes, but just to make sure these operators are communicating what the facts are in each of their organizations.

With that, we're going to fold, if that's okay. Thank you, Judy and Dr. Tan, Eddy, it's great to have you with us. I appreciate that. Colonel, as always, Director Maples. We will be together again at one o'clock tomorrow. Thursday will depend a little bit on the White House schedule, but assume that we'll be here each day for the next several at 1:00 p.m. and we will continue to get as much information to you as humanly possible. We want to make sure it's the right information.

I would just ask folks, in the meantime, keep doing what you're doing. Keep wearing these masks or covering your face, as we all do. Keep staying home. I know that's not fun, it's not easy, but it's working. It is absolutely working. We'll have news to report on school year in the next couple of days. That's something we're taking, as you can imagine, very seriously. We're looking to, as we said, all along, we make these calls based on the facts and we'll continue to do that.

Again, everybody in the meantime, just keep doing what you're doing. If you do, and I know you will do, we're going to get through this as one family in New Jersey, stronger than ever before. Thank you all.

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