Covid-19 Flash Update

Maryland Department of Health

Maryland Primary Care Program

Program Management Office

25 January 2021

The Tide is Turning

Daily COVID-19 Report

Data reported as of 1/25/2021 for data through 1/24/2021

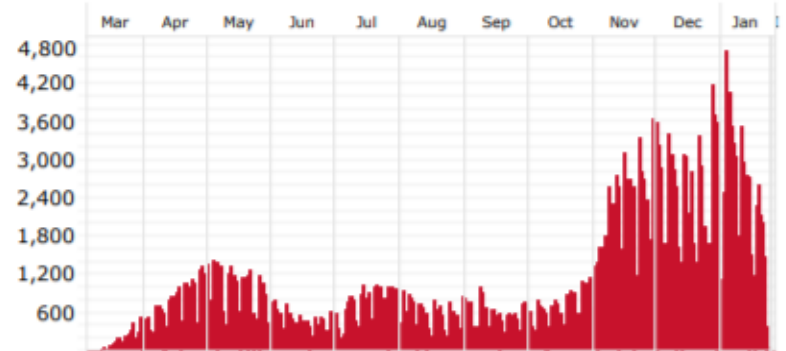| **343,138** cases cumulative	**6,758,236** tests cumulative	**35.3** 7-day avg. case rate	**7,053** total hospital adult census	**6,726** deaths cumulative
1,686 cases reported yesterday	**34,734** tests reported yesterday	**6.84%** 7-day avg. positivity	**-134** change in total hospital census	**36** deaths reported yesterday

7-Day Avg. Percent Positivity and Total Testing Volume
Since 3/1/20

6.84%

Statewide Acute/ICU Beds Occupied by COVID Patients

Total 1,669 (+1)

Acute 1,274 (-2)

ICU 395 (+3)

Daily New Cases
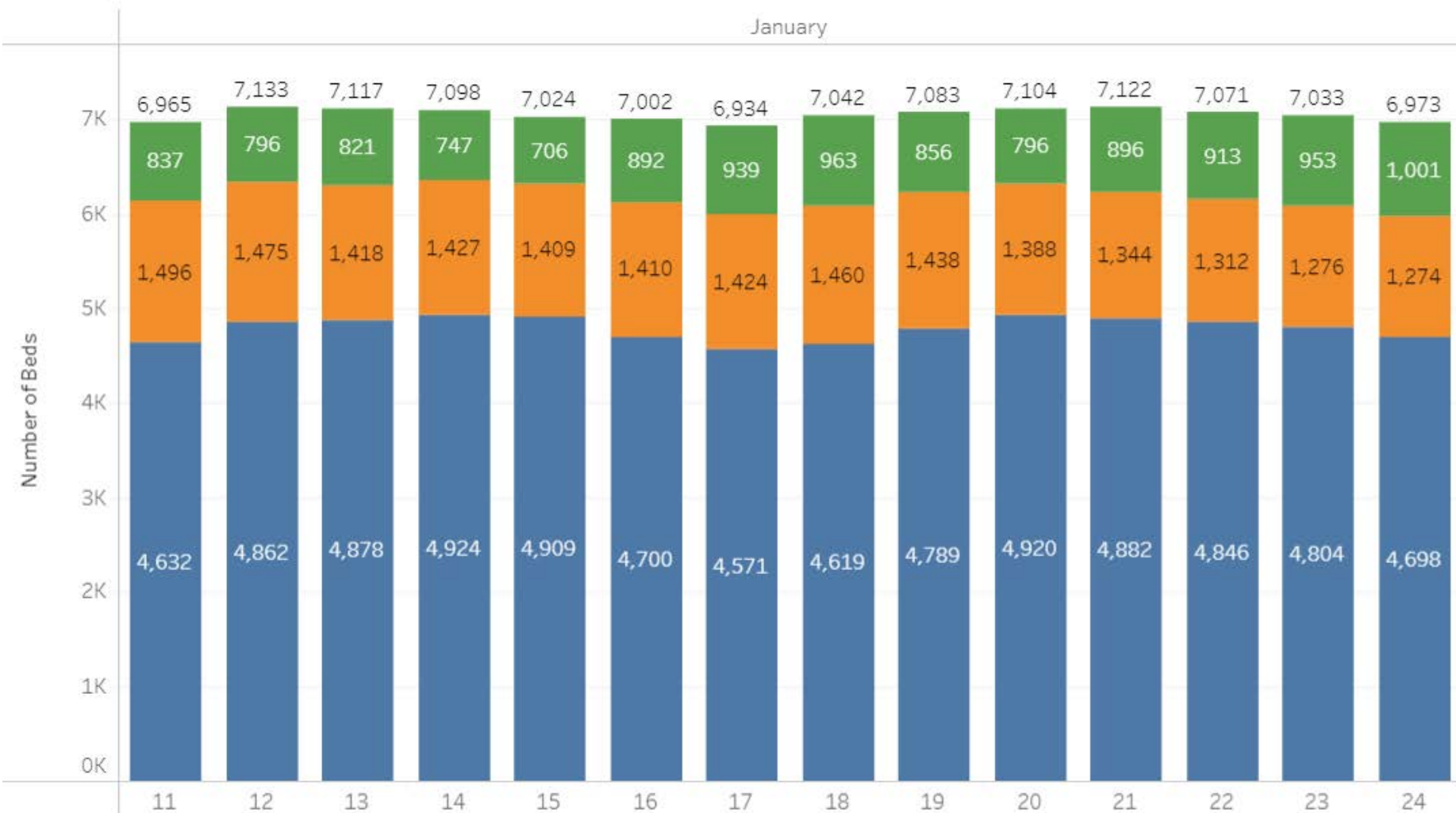*by Specimen Collection Date*
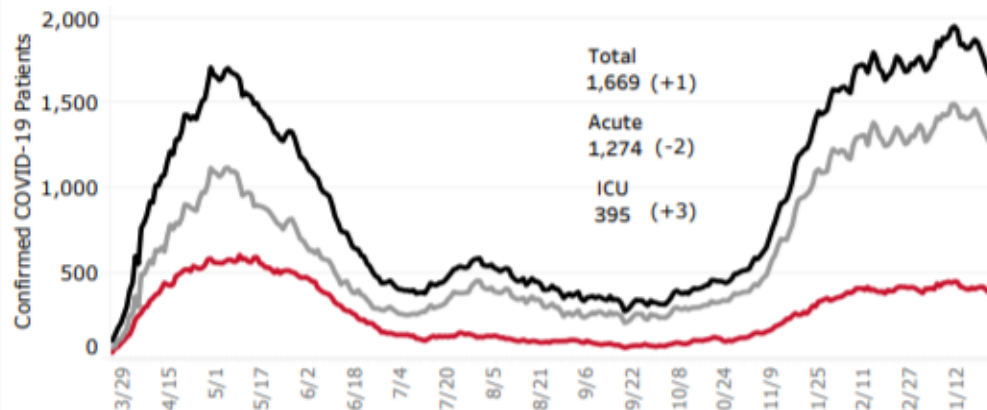
Daily Deaths
Confirmed and Probable
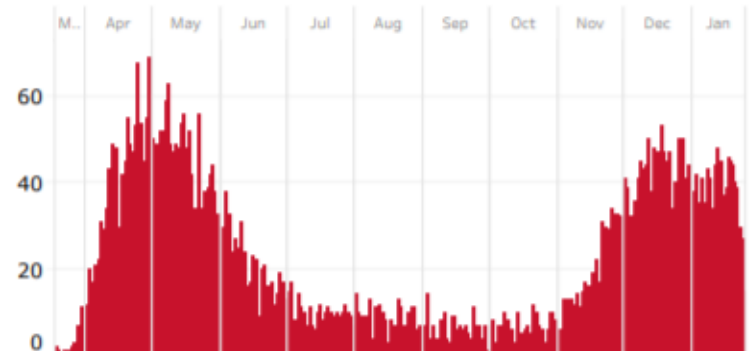
Case rate calculated as total confirmed cases per 100,000 population using the 2019 Maryland Population estimates from the Maryland Department of Planning, March 2020.

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Occupied Staffed - Adult Acute Care

January

Day	11	12	13	14	15	16	17	18	19	20	21	22	23	24
Total	6,965	7,133	7,117	7,098	7,024	7,002	6,934	7,042	7,083	7,104	7,122	7,071	7,033	6,973
Available Beds	837	796	821	747	706	892	939	963	856	796	896	913	953	1,001
Hospitalized Confirmed COVID Patients	1,496	1,475	1,418	1,427	1,409	1,410	1,424	1,460	1,438	1,388	1,344	1,312	1,276	1,274
Beds Occupied Non-COVID	4,632	4,862	4,878	4,924	4,909	4,700	4,571	4,619	4,789	4,920	4,882	4,846	4,804	4,698

Number of Beds

Legend:
- Available Beds
- Hospitalized Confirmed COVID Patients
- Beds Occupied Non-COVID

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Source: CRISP

Updated 1/25/2021

Important Items This Week

❖ **Encouraging leading indicators, deaths are trailing indicator**

❖ **Hospitals have more non Covid patients**

❖ **Vaccines in Phase 1a and 1b and 1c but supply is short**

❖ **Opportunity to reduce hospitalization and treat patients using <u>monoclonal antibodies</u>**

❖ **Important to continue testing to identify candidates for mAbs**

❖ **Emerging variants of Covid virus**

❖ **Continue using Covid-19-specific workflows to mitigate virus spread**

❖ **Vaccine and mAb hesitancy are best addressed by trusted providers**

❖ **Health equity remains important**

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Vaccines- Current

❖ Pfizer
  ➢ mRNA

❖ Moderna
  ➢ mRNA

❖ Johnson and Johnson to follow (February)
  ➢ Viral vector

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Priority Groups

Began 12/15/20 — **1A**
Began 1/18/21 — **1B**
Began 1/25/21 — **1C**

Healthcare workers
Residents and staff of nursing homes
First responders, public safety, corrections

Assisted living, other congregate settings
Adults age 75 and older
Education and continuity of government

Adults age 65-74

Essential workers in lab services, agriculture, manufacturing, postal service, etc

2

Adults 16-64 at increased risk of severe COVID-19 illness due to comorbidities
Essential workers in critical utilities, transportation, food service, etc

3

General population

Vaccine prioritization may be subject to change.

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Source: Maryland Department of Health, Office of Governor Larry Hogan

Vaccine Administration
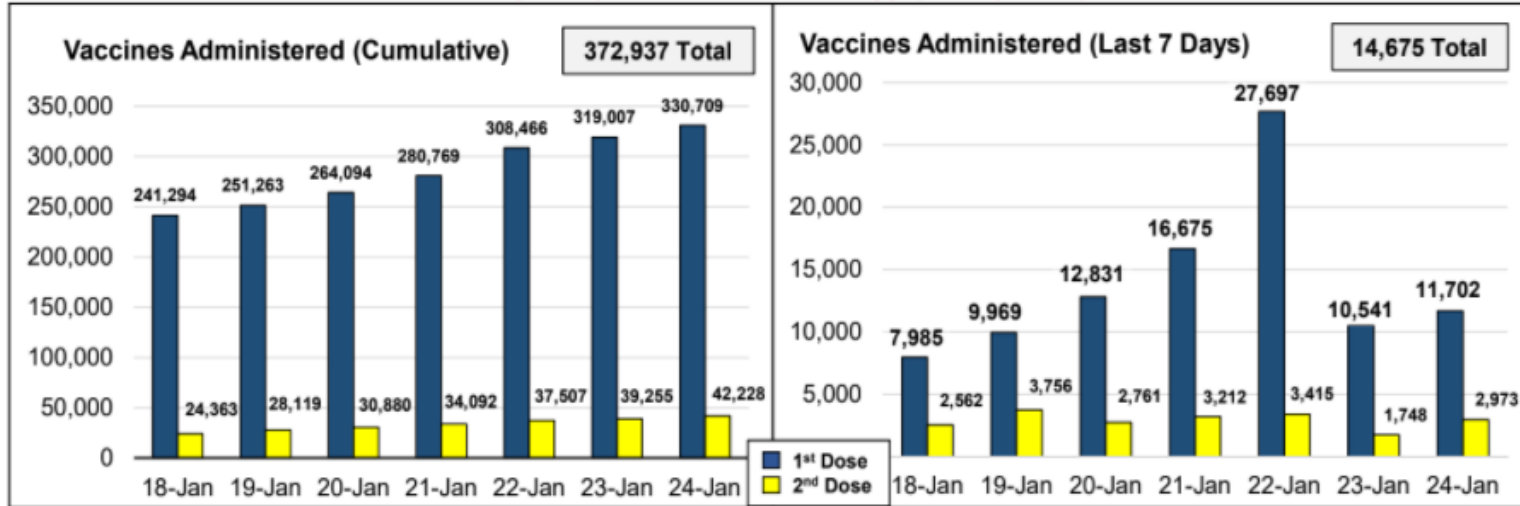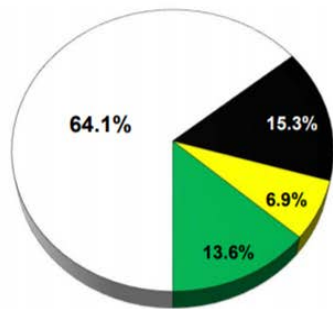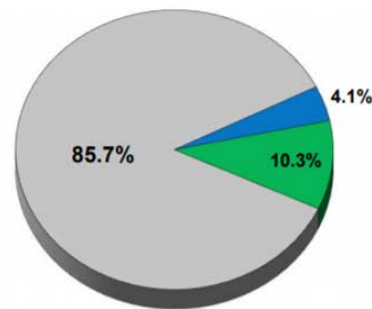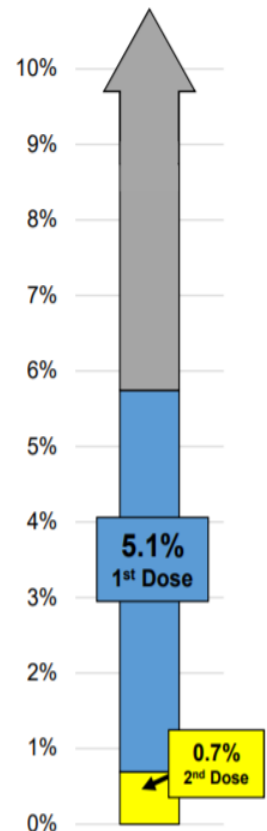
Vaccination Phase

1C
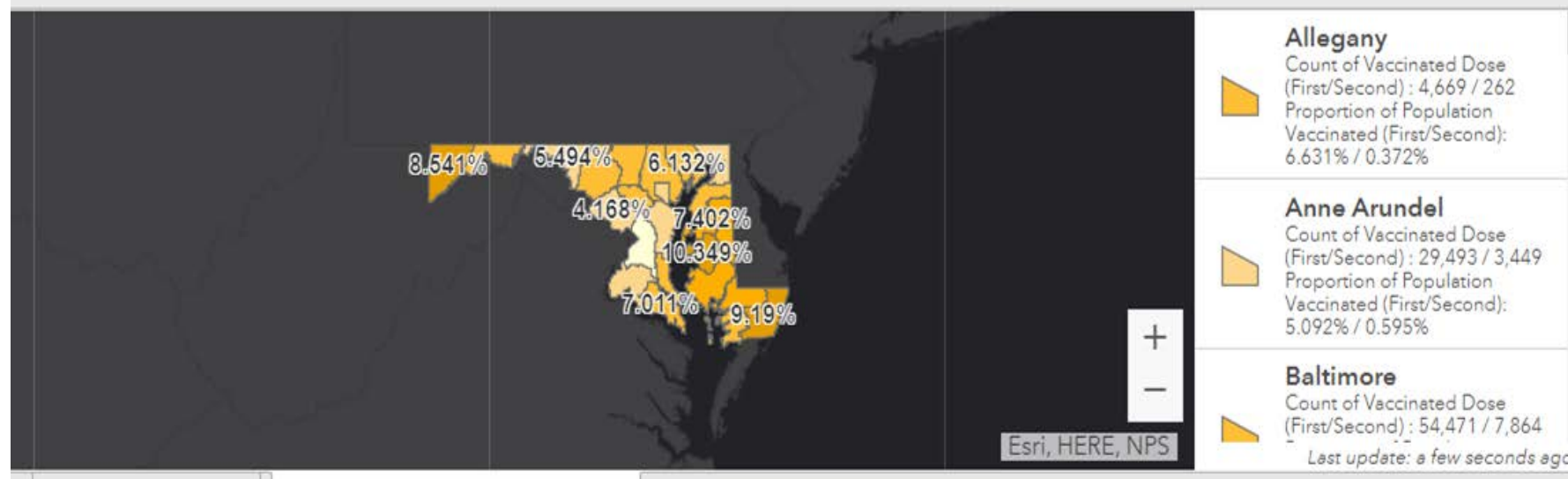
Vaccination Phase
Description

Doses Distributed
667,275

Doses Administered
372,937

All Doses Administered | Vaccinations by Dose

8.541% 5.494% 6.132%
4.168% 7.402%
10.349%
7.011% 9.19%

Allegany
Count of Vaccinated Dose
(First/Second) : 4,669 / 262
Proportion of Population
Vaccinated (First/Second):
6.631% / 0.372%

Anne Arundel
Count of Vaccinated Dose
(First/Second) : 29,493 / 3,449
Proportion of Population
Vaccinated (First/Second):
5.092% / 0.595%

Baltimore
Count of Vaccinated Dose
(First/Second) : 54,471 / 7,864

Esri, HERE, NPS

Last update: a few seconds ago

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Updated 1/25/2021

mRNA Vaccines - FDA Data and ACIP comments

❖ Safety

❖ Efficacy

❖ **Allergic reactions**

❖ Pregnancy and lactation

❖ Active Infections

❖ Post Vaccine signs and symptoms and isolation

❖ Use in immunocompromised

❖ Delayed doses

❖ Vaccines cannot be mixed

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About Monoclonal Antibodies

- ❖ Monoclonal antibodies (mAbs) directly neutralize the COVID-19 virus and are intended to prevent the progression of disease
- ❖ mAbs likely to be most beneficial if given to patients early in symptom progression
- ❖ Product delivered via single IV infusion administration
- ❖ Evidence suggests use of mAb products in **OUTPATIENT** settings to **REDUCE HOSPITALIZATION**

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Monoclonal Antibodies Treatment

❖ Bamlanivimab and Regeneron monoclonal antibody EUAs

❖ Limited supplies- ~ 1500 doses/week

❖ **For ambulatory Covid positive at risk of hospitalization within 10 days on onset of symptoms**

❖ 7 infusion centers + SNFs open - more to follow
  ➢ Baltimore Convention Center Field Hospital
  ➢ Peninsula Regional- Tidal Health
  ➢ Meritus Health
  ➢ Adventist – Takoma Park
  ➢ UPMC
  ➢ Atlantic General
  ➢ MedStar Southern Maryland –
  ➢ SNFs

Referrals are currently low. Refer your patients using this referral form (updated 12/16/20)

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Point-of-Care Rapid Antigen Tests to Identify Monoclonal Antibody Eligible Patients

❖ Tests provided to practices willing to test and refer symptomatic patients eligible for mAb therapy

❖ Interested practices should fill out this Google Form as soon as possible

  ➢ After filling out the form, Maryland Department of Health staff will contact you with next steps

❖ More information is available here

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Vaccine Provider Recruitment and Enrollment

Maryland healthcare providers interested in receiving Covid-19 vaccine will have to take two steps:
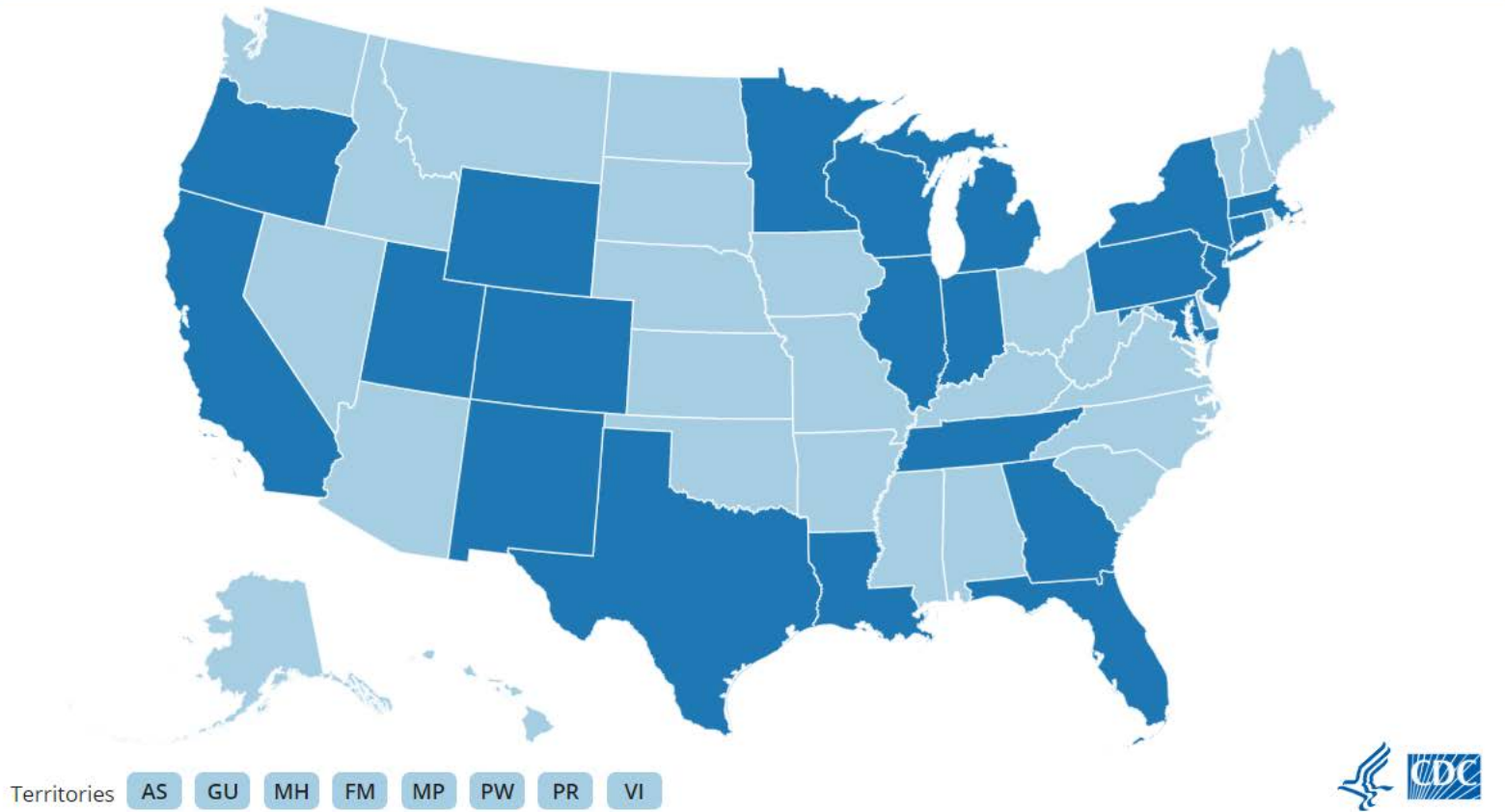
1. **Onboard with ImmuNet** to report vaccination data (enrollment form available [here](#))
    - **EHR connected to ImmuNet** to report all vaccine doses administered (done through EHR vendor)
    - *Reach out to your MDPCP practice coach if you do not know your current ImmuNet onboarding status*

2. [**Register**](#) **with ImmuNet as a vaccine provider** in order to receive and administer vaccine.
   Registration is open now, but providers cannot yet order vaccines

Multiple COVID-19 variants are circulating globally

❖ In the United Kingdom (UK), a new variant called **B.1.1.7** has emerged with an unusually large number of mutations

➢ Spreads more easily and quickly than other variants

➢ No evidence this variant causes more severe illness or increased risk of death

➢ Was first detected in September 2020 and is now highly prevalent in London and southeast England

❖ In South Africa, another variant called **1.351** has emerged independently of the variant detected in the UK.

➢ Originally detected in early October and shares some mutations with the variant detected in the UK

➢ There have been cases caused by this variant outside of South Africa, but it has not been detected in the US

❖ In Brazil, a variant called **P.1** emerged and was identified in four travelers from Brazil who were tested during routine screening at Haneda airport outside Tokyo, Japan.

➢ Contains a set of additional mutations that may affect its ability to be recognized by antibodies

➢ Has not been detected in the US.

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Variant B.1.1.7 in the US

B.1.1.7 Lineage Cases in the United States*† Total Cases: 195

Territories AS GU MH FM MP PW PR VI

Source: The CDC

Moderna Vaccine Effective Against Covid Variants

❖ Moderna vaccine produced neutralizing titers against all key emerging variants tested, including B.1.1.7 and B.1.351

❖ No significant impact on neutralizing titers against the B.1.1.7 variant compared to previous variants

❖ Six-fold reduction in neutralizing titers was observed with the B.1.351 variant compared to previous variants

➢ Neutralizing titer levels with B.1.351 are above levels expected to be protective

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Source: Moderna

Five things you can do to serve you patients

1. **Identify all your high risk patients** —use the Covid Vulnerability Index (CVI) in CRISP, your EHR, and your intuition and do outreach and communication
➢Advise patients to continue to use social distancing and wear masks

2. **Provide vulnerable patients with expanded care** through telemedicine and special accommodations if they need face-to-face care

3. **Offer testing for all patients, every visit – POC for those eligible for mAb therapy**

4. **Stay current, stay safe**—stay current by keeping up-to-date with CDC guidelines and case rates in your area. For up-to-date information, visit CDC, MDH, and MDPCP sites. Stay safe by taking all necessary infection control precautions when seeing patients

5. **Prepare for a vaccine** - address vaccine hesitancy with patients, enroll in ImmuNet and plan for administration

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Implementing COVID-19 Testing At Your Practice

Maryland Department of Health - Testing Adoption Project

Possible Testing Implementation Methods

- ❖ In-Office

- ❖ Drive-Up/Parking Lot

- ❖ Patient Pick-Up and Take Home

- ❖ At-Home/Telehealth

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Labs and Testing Options

	Office or home administered	Patient or Clinician ordered	Costs not covered by insurance?	Results access
myLAB Box	Office or Home	Clinician	Provider-to-lab: No fee. Patient-to-lab: $16 per kit.	Clinician and Patient
LabCorp	Office	Clinician	No fees	Clinician and Patient
Quest Diagnostics	Office	Clinician	No fees	Clinician and Patient
myLAB Box Home Tests	Home	Patient or Clinician	$28 shipping fee per kit	Clinician and Patient
pixel by LabCorp	Home	Patient	No fees	Patient only
LabCorp at Home	Home	Clinician	No fee. If patient does not return sample: $19 fee billed to clinician.	Clinician and Patient
QuestDirect	Home	Patient	$138.30 per kit	Patient only

Additional information regarding testing options is being shared daily. Information will be updated as available.

Baltimore City COVID-19 Testing Partner

- ❖ <u>Only available to Baltimore City Primary Care Practices</u>
- ❖ Partnership with Baltimore City Health Department (BCHD)
- ❖ Becoming a Designated COVID-19 Testing Partner
- ❖ Two options:
  - ➢ BCHD provides test kits, and samples are processed at their Baltimore Disease Control (BDC) laboratory
  - ➢ BCHD provides test kits through a third-party vendor. Samples are processed at the third-party vendor
- ❖ Email Address: COVIDTesting.BDCLab@baltimorecity.gov

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Additional information regarding testing options is being shared daily. Information will be updated as available.

Key Takeaways

- ❖ Choose the strategy that works best for you, your care team, your patients
- ❖ All of the test kits referred to today are PCR tests with anterior nares, nasal swabs
- ❖ Access your test results in a timely-manner
- ❖ Offer the level of care you expect to deliver to your patients

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Additional information regarding testing options is being shared daily. Information will be updated as available.

Appendix

Resources and Links

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Maryland Covid-19 Vaccination Plan

❖ Maryland has developed a Covid-19 vaccination plan to vaccinate all Marylanders interested in receiving vaccine

❖ Plan was released on Tuesday, October 20, 2020

❖ This is a working plan and subject to change as new information is received and the Covid-19 pandemic continues to evolve

❖ Copy of the plan can be found here:

https://phpa.health.maryland.gov/Documents/10.19.2020_Maryland_Covid-19_Vaccination_Plan_CDCwm.pdf

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Phased Approach

	Phase 1	Phase 2
Vaccine availability	Limited	Widespread
Approach	Targeted	Universal
Vaccine available to:	• Frontline healthcare workers • Other essential workers • Those at highest risk of developing complications from Covid-19 (ACIP high risk conditions)	• General public
Vaccine distribution by:	• Local health departments • Hospitals • Vaccination clinics (through LHDs) • Essential employer work sites	• Local health departments • Hospitals • Pharmacies • Primary care practices • Urgent care centers • School vaccination clinics

Current Vaccines

	BIONTECH Pfizer	**moderna** messenger therapeutics
Schedule	• Two dose regimen • 17-21 days apart (can extend)	• Two dose regimen • 28 days apart (can extend)
Indications	• 16 years and older • Pregnant and lactating can be considered • Caution with those with h/o anaphylaxis	• 18 years and older • Pregnant and lactating can be considered • Caution with those with h/o anaphylaxis
Administration and Distribution	• Ultracold storage, 5 days in refrigeration • 985 doses per box • 15 and 30 minute observation periods	• Up to 30 days in refrigerator • 100 doses per box • 15 and 30 minute observation periods

Johnson and Johnson to follow (Likely February)

Source: CDC

Vaccine Resources

❖ [CDC Covid-19 Vaccination Communication Toolkit](#) - ready made materials, how to build vaccine confidence, social media messages

❖ [New York Times Vaccine Tracker](#) - information on every Covid vaccine in development

❖ [New York Times Vaccine Distribution Tracker](#) – information on the distribution of Covid vaccines in the United States

❖ [MDH Covidlink Vaccine Page](#) - information on vaccine priority groups in Maryland

❖ [CDC Vaccine Storage and Handling Toolkit](#)

❖ [Project ECHO Webinar](#) - webinar on vaccines and Long Term Care Facilities, relevant for primary care

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Covid-19 Vaccines/Immunization Information

❖ Maryland Covid-19 Vaccination Plan

❖ New York Times Coronavirus Vaccine Tracker

❖ ImmuNet Information

  ➢ ImmuNet enrollment form

  ➢ ImmuNet helpdesk contact information

  ➢ Guidance for practices how about reporting to ImmuNet

  ➢ Technical specifications for the EHR interface with ImmuNet

  ➢ ImmuNet log-in information portal

❖ Summary of vaccines under development

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Covid-19 mAb Treatment Criteria

❖ Patient Criteria

➢ Have BMI >= 35

➢ Have chronic kidney disease

➢ Have diabetes

➢ Are currently receiving immunosuppressive treatment

➢ Are >= 65 years old

➢ Are >=55 years old and have

- ✓ Cardiovascular disease, or
- ✓ Hypertension, or
- ✓ Chronic obstructive pulmonary disease/other chronic respiratory disease

➢ Are 12 – 17 years old AND have

- ✓ BMI >=85th percentile for their age and gender based on CDC growth charts, or
- ✓ Sickle cell disease, or
- ✓ Congenital or acquired heart disease, or
- ✓ Neurodevelopmental disorders, or
- ✓ A medical-related technological dependence, or
- ✓ Asthma

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Source: FDA

Covid-19 Testing Information

❖ [Maryland Department of Health testing announcements and accessibility information and resources](#)

❖ [CDC Covid-19 testing overview](#)

❖ [MDPCP Roadmap to Recovery – Covid-19 testing guidelines](#)

❖ [Maryland Department of Health guidance regarding point of Care rapid antigen Covid testing](#)

❖ [myLAB Box - Covid-19 testing program for Maryland clinicians](#)

❖ [FDA letter to clinical laboratory staff and health care providers about the potential for false positive results with rapid antigen tests for Covid-19](#)

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Primary Care Involvement

❖ Continue to encourage and vaccinate your patients with the flu shot

❖ Ensure that you are onboarded (connected) with ImmuNet to report vaccinations administered

❖ Once available, register to become a Covid vaccine provider

❖ Use the CVI tool to begin to identify your patients that are at a higher risk for Covid

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Scheduling In-Office Appointments

❖ Patient calls in for an appointment
  ➢ Reception screens patient on the phone using the [pre-visit screening template](#)
  ➢ Schedule in-office visits for different groups: At-risk and vulnerable patients on certain days, healthier patients on other days
  ➢ Schedule telehealth and non-office-based care for other patients including follow-ups and patients uncomfortable with office visits
❖ Check In
  ➢ Practice remote check in and limited front-desk contact
  ➢ Consider using a triage zone outside of office or main area;
  ➢ Or use a barrier at the front desk
  ➢ Design your office to accommodate patients who come in specifically for Covid testing and triage, separate from patients who arrive for non-Covid related and elective procedures
    ✓ Ensure patients and staff do not cross between Covid and non-Covid areas
    ✓ Set aside a specific area for patients who come in for testing to wait and be triaged

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Scheduling In-Office Appointments

❖ Checking out
  ➢ Practice remote check out, limit front desk exposure;
  ➢ Or use a barrier at the front desk

❖ If patient is paying co-pays, etc., set up credit card reader outside of the barrier

❖ Other workflow resources
  ➢ Care management workflows
  ➢ BMJ telemedicine workflow graphics
  ➢ CDC flowchart to identify and assess 2019 novel Coronavirus
  ➢ CDC telephone evaluation flow chart for flu
  ➢ CDC guidance for potential Covid-19 exposure associated with international or domestic travel

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Patient Information and Workflows

❖ Reinforce scheduled visits

❖ Separate sick and well to the extent possible

❖ Avoid waiting room crowds

❖ Outdoors screening and testing as possible

❖ Tailor staff and resources to need

❖ Telehealth, including testing, when applicable

❖ Quarantine period for positive tests shortened to 10 days for asymptomatic and 7 days based on negative test (after 5 days)

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CDC Guidelines for Covid Patient Management

❖ Healthy people can be monitored, self-isolated at home

❖ People at higher risk should contact healthcare providers early, even if illness is mild

❖ Older adults and people with severe underlying chronic medical conditions are at higher risk, need closer contact

❖ Emergency Department and Hospitals only when needed - not for screening or low risk/minimal disease

❖ **Guidelines are important and powerful tools, but remember providers' clinical experience and judgment are key to care**

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Prepare Safe Workflows and Stock Sufficient PPE

❖ Ensure your practice has 30 days of PPE immediately available

❖ Consult usual suppliers and order PPE well in advance of anticipated need

  ➢ There may be PPE shortages in the future

❖ Continue using PPE according to CDC guidelines

❖ Ensure safe workflows for all patients, particularly vulnerable patients

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Sources: Washington Post, Nature

Personal Protective Equipment (PPE) Sources and Requests

❖ Practices should initially request PPE through their usual vendors

❖ Practices should make their PPE requests through their local health departments

❖ Maryland PPE Manufacturers List – next slide

❖ National and international PPE supplier list

❖ PPE request form

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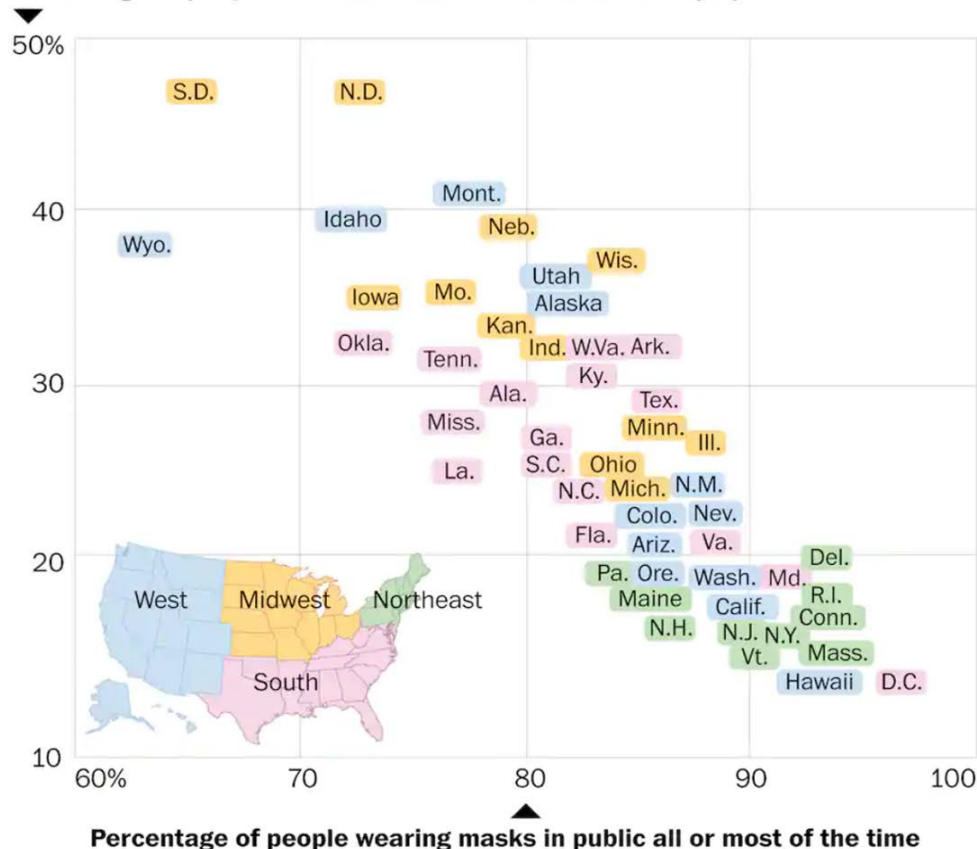
Personal Protective Equipment (PPE) Sources and Requests

❖ Increasing Maryland's supply of PPE – one of the 4 building blocks on the Road to Recovery

❖ Maryland has launched the Maryland Manufacturing Network Supplier Portal, an online platform that helps connect Maryland suppliers with buyers in need of critical resources

❖ For additional business resources during Covid-19, visit businessexpress.maryland.gov/coronavirus

❖ Providers may also request PPE from the non-profit 'Get Us PPE'

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Masks and Distancing Remain Critical

Masking up

Fewer covid-19 symptoms reported in states with higher rates of mask use.

Percentage of people who know someone with covid-19 symptoms

Percentage of people wearing masks in public all or most of the time

Data as of Oct. 19

Source: Delphi CovidCast, Carnegie Mellon University

THE WASHINGTON POST

❖ IHME model:
  ➢ Universal mask use *saves 129,574 lives* before Feb 2021

  ➢ 85% mask use *saves 95,814 lives* before Feb 2021

MD COVID Alert App

❖ New opt-in cell phone app that notifies users if they have been exposed to somebody who is Covid-19 positive

❖ Mimics CDC close contact definition (6-feet or less for >15 minutes) with bluetooth

❖ Individuals who receive exposure notifications:

  ➢ Receive advice to get tested
  ➢ Receive information about possible exposure date
  ➢ COVID-19 positive users may receive a call from a contact tracer

❖ More information is available here
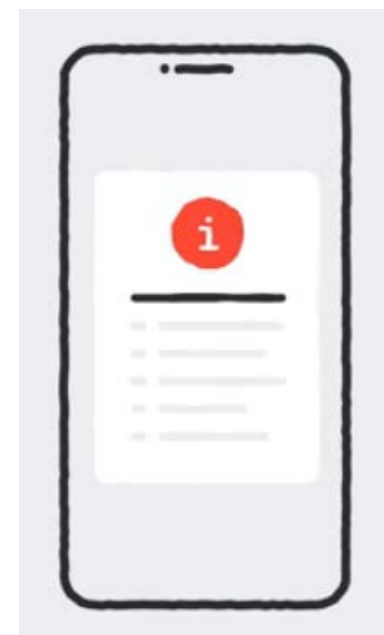
Provider/Patient Mental Health Resources

❖ Providers

➢ "Helping the Helpers and Those They Serve," a webinar series from the Maryland Department of Health Behavioral Health Administration and MedChi (on the 2nd and 4th Thursdays of every month starting 11/12/2020)

➢ Heroes Health Initiative

❖ Patients

➢ Ask Suicide-Screening Questions toolkit

➢ CDC list of resources for coping with stress

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Health Equity Resources

❖ [Maryland Department of Health Office of Minority Health and Health Disparities](#) (MHHD)

❖ Maryland Department of Health Minority Outreach and Technical Assistance Program [overview](#)

❖ MHHD fiscal year 2020 minority outreach and technical assistance [program information](#)

❖ [Description](#) of the term "health disparity"

❖ [Implicit bias test](#)

❖ "Hundreds of Days of Action as a Start to Address Hundreds of Years of Inequality" – New England Journal of Medicine [article](#) by Maulik Joshi, DrPH

❖ "Discussion Draft of the Preliminary Framework for Equitable Allocation of COVID-19 Vaccine" – [discussion draft](#) for public comment by Committee on Equitable Allocation of Vaccine for the Novel Coronavirus, The National Academies of Science, Engineering, Medicine

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Telehealth Resources

❖ Maryland Health Care Commission Telehealth

❖ Maryland Health Care Commission Telehealth Readiness Assessment Tool

❖ U.S. Department of Health and Human Services Health Insurance Portability and Accountability Act (HIPAA) for Professionals

❖ American Telehealth Association

❖ Maryland Telehealth Alliance

❖ National Consortium of Telehealth Resource Centers

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Support for Patients at Home

❖ Food

➢ Meals on Wheels

❖ Caregivers

➢ Visiting nurses and caregivers

❖ Emotional support

➢ Support from family

➢ Phone calls and videochat to fight loneliness

➢ MD Department of Aging [Senior Call Check Program](#)

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Staying Current - Sources

❖ [CDC](#)

❖ [MDH Covid-19 information page](#)

❖ [MDPCP Covid-19 webpage](#)

❖ Local Health Departments

❖ [CONNECT](#)

❖ Clinician Letters

❖ Multiple Resource Links in Appendix

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Resources for Specific Groups

❖ Community- and Faith-Based Organizations (https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-community-faith-organizations.html)

❖ Mass Gatherings and Large Community Events (https://www.cdc.gov/coronavirus/2019-ncov/community/mass-gatherings-ready-for-covid-19.html)

❖ Non-Pharmaceutical Interventions for Specific Groups (https://www.cdc.gov/nonpharmaceutical-interventions/index.html)

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Resources and References

❖ Maryland Department of Health Coronavirus Website (https://coronavirus.maryland.gov)

❖ CDC Coronavirus Website (https://www.cdc.gov/coronavirus/2019-nCoV/index.html)

❖ CDC National data on Covid-19 infection and mortality (https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html)

❖ CDC Interim Guidance for Homes and Communities (https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html)

❖ CDC Interim Guidance for Businesses (https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-response.html)

❖ CDC Interim Guidance for Childcare and Schools (https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-for-schools.html)

❖ CDC Travel Website (https://wwwnc.cdc.gov/travel/)

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