



Covid-19 Flash Update

**Maryland Department of Health
Maryland Primary Care Program
Program Management Office**

28 December 2020

COVID-19 Daily Report - Maryland Department of Health

Data reported as of 12/28/2020

269,183
confirmed cases

38,928
tests reported 12/27

5,611,691
cumulative tests

5,573
confirmed deaths

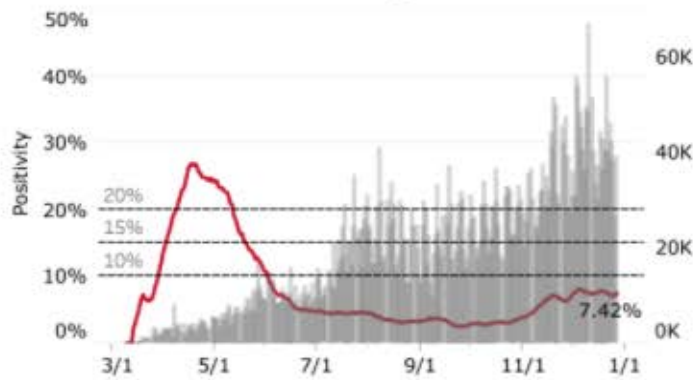
+1,985
cases reported on 12/27*

7.05%
daily positivity reported 12/27

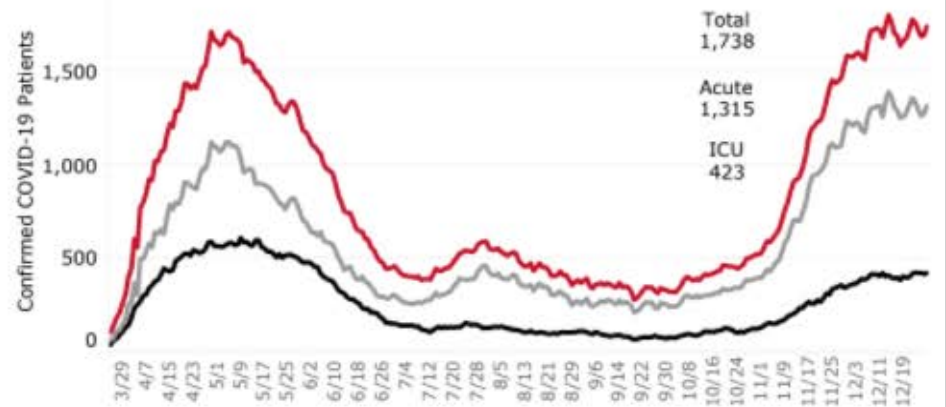
7.42%
7-day avg. positivity** reported 12/27

+28
deaths reported on 12/27

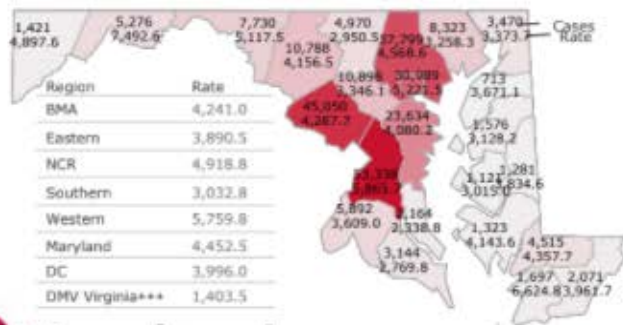
7-Day Avg. Percent Positive Testing** and Total Testing Volume



Statewide Acute/ICU Beds Occupied by COVID Patients



Cases and Rates by County of Residence



Daily Cases by Specimen Collection Date



Daily Deaths



All case-related counts on this dashboard are of individual people infected with COVID-19.

Report date: the day a case was reported to the Maryland Department of Health.

Specimen date: the day the initial lab specimen was collected.

BMA: Baltimore Metro Area; NCR: National Capital Region; DMV: DC, Maryland, and Virginia Area

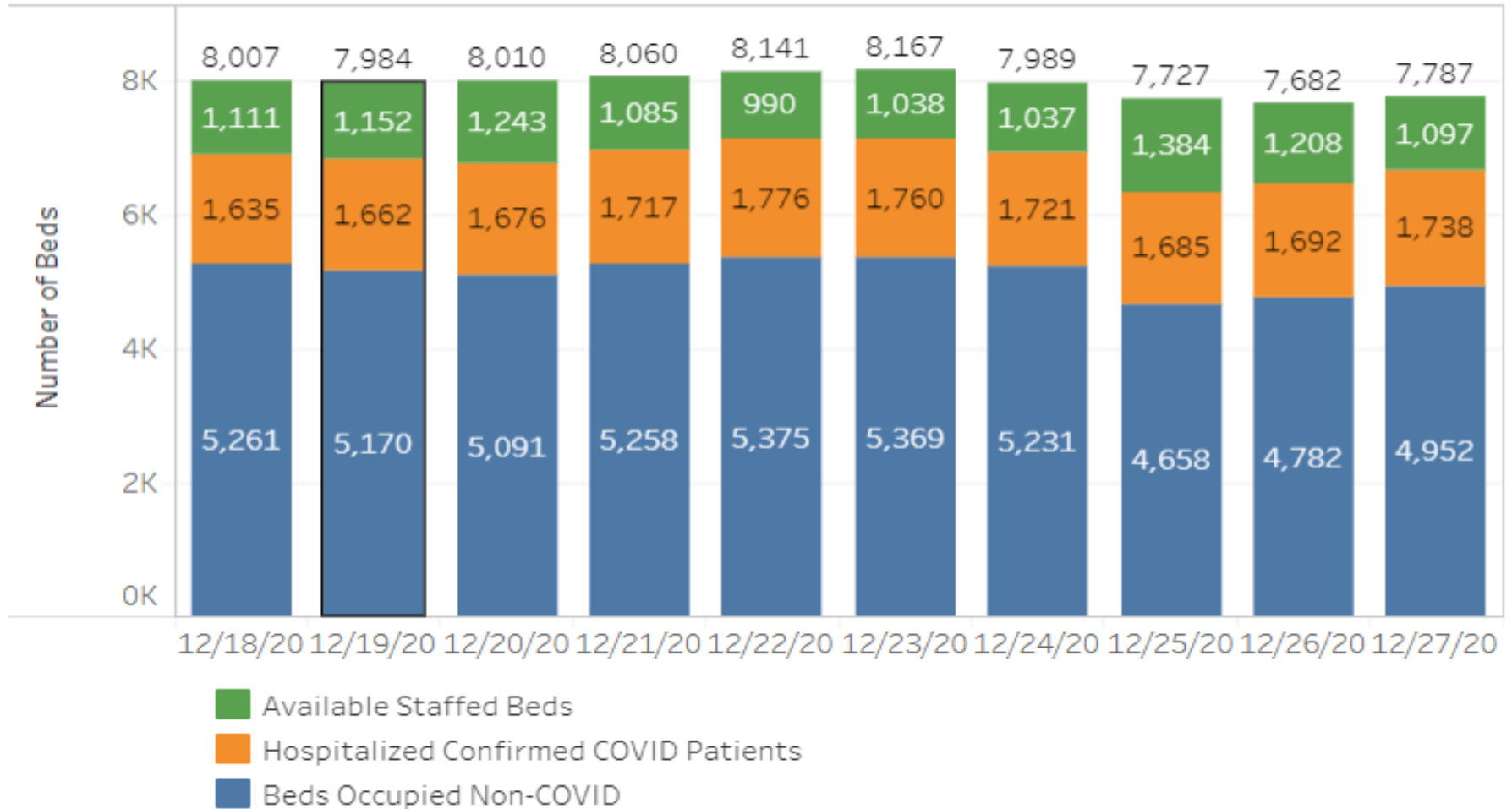
Rates calculated using total confirmed cases and 2019 population estimates. Rates do not exclude recovered cases. Rates are calculated as cases per 100,000 population. 2019 Maryland Population estimates from the Maryland Department of Planning, March 2020.

*Daily case increase uses report date.

**Positivity calculated using a 7-day rolling average

***DMV Virginia includes Alexandria, Arlington, Fairfax, Fairfax City, Falls Church, Loudoun, Manassas, Manassas City, and Prince William.

Statewide Occupied Staffed - Adult Acute Care and ICU - Last 10 Days



Important Items This Week

- ❖ Anticipate more cases, hospitalization and deaths in weeks to come
- ❖ Hospitals near capacity
- ❖ Staffing shortages looming- volunteer and paid opportunities via [MarylandMedNow](#)
- ❖ Vaccines in Phase 1a
- ❖ Opportunity to reduce hospitalization using monoclonal antibodies
- ❖ Important to continue testing; assistance available from Testing Adoption Team
- ❖ Contact tracing is being overwhelmed- inform positive patients to quarantine
- ❖ Continue using COVID-19-specific workflows to mitigate virus spread

Vaccines



Source: [WBALTV11](https://www.wbal.com/story/news/health/2021/03/15/vaccine-elderly-umms/), UMMS

Vaccines- Current

- ❖ Pfizer

- mRNA

- ❖ Moderna

- mRNA

- ❖ Johnson and Johnson to follow (February)

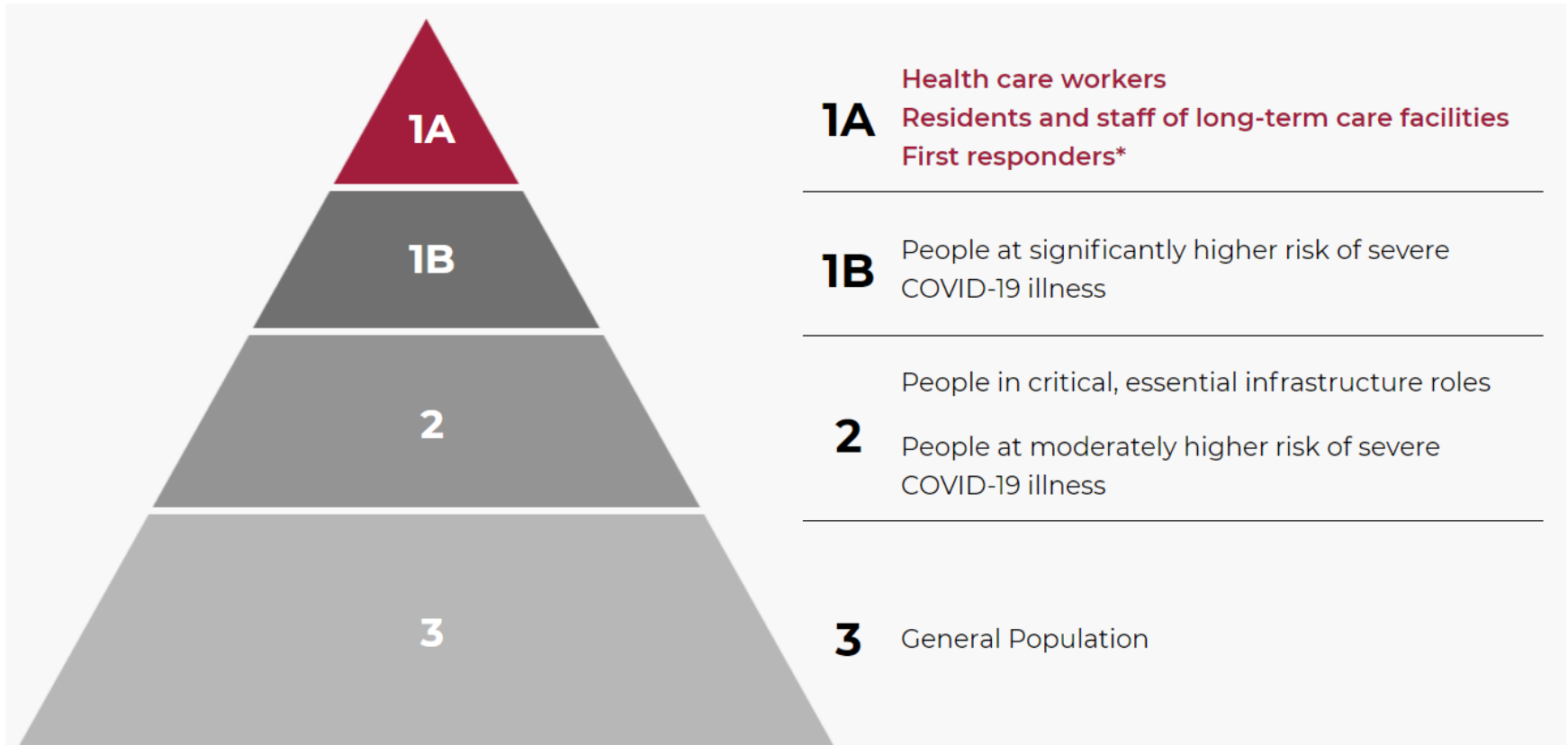
- Viral vector

- ❖ All initially in short supply

Distribution

- ❖ Hospitals and Health Departments in Phase 1A
 - 155,000 initial
- ❖ Pharmacy Chains for SNF residents and staff
- ❖ January- provider registration for Covid vaccine opens
 - Must be fully connected and operational on ImmuNet in advance
 - Vaccine ordering through ImmuNet in phase 2

Priority Groups



Vaccine prioritization may be subject to change.

ACIP Recommendations for Phases 1b, 1c

Work Group considerations: Balancing Goals

	Prevention of Morbidity & Mortality	Preservation of Societal Functioning
1a	LTCF residents	Health care personnel
1b	Persons 75 years and older	Frontline Essential Workers
1c	Persons 65-74 years Persons 16-64 with high-risk medical conditions	Other Essential Workers

Vaccination Phase

1A

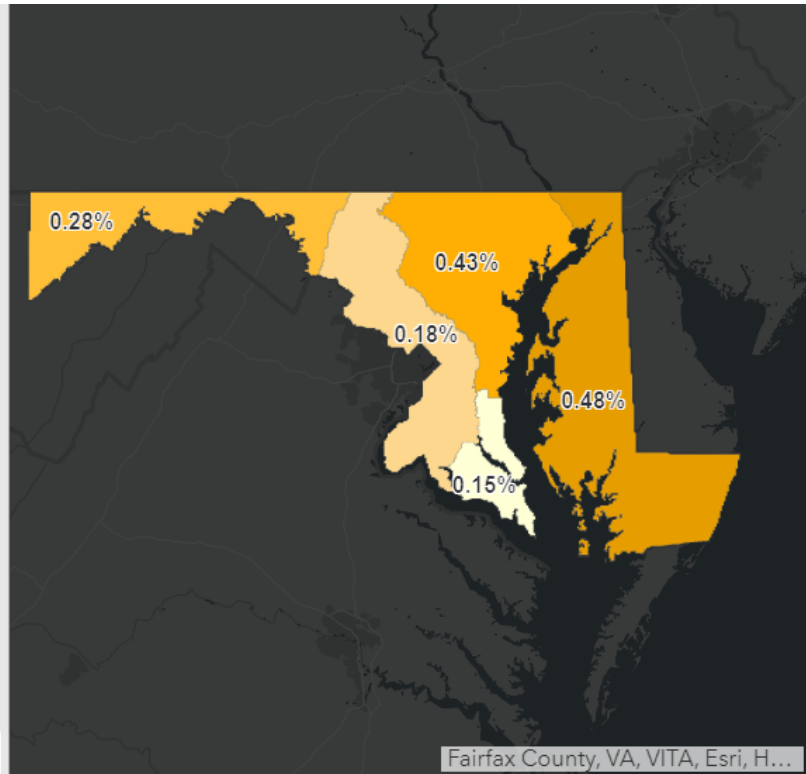
Vaccination Phase Description

Total Vaccinations

20,812

24hr Change +994

Vaccinat...



Baltimore Metropolitan Area

(Anne Arundel, Baltimore City, Baltimore, Carroll, Harford, Howard)
Count of Vaccinated: 11,935
Proportion of Population Vaccinated: 0.43%

Eastern Shore

(Caroline, Cecil, Dorchester, Kent, Queen Anne's, Somerset, Talbot, Wicomico, Worcester)
Count of Vaccinated: 2,187
Proportion of Population Vaccinated: 0.48%

National Capital Region

(Charles, Frederick, Montgomery, Prince George's)
Count of Vaccinated: 4,221
Proportion of Population Vaccinated: 0.18%

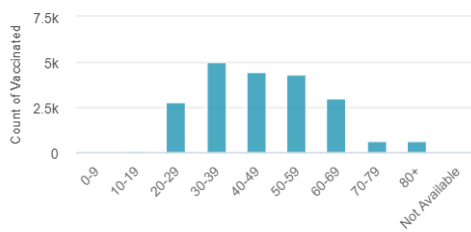
Southern Maryland

(Calvert, St. Mary's)
Count of Vaccinated: 305
Proportion of Population Vaccinated: 0.15%

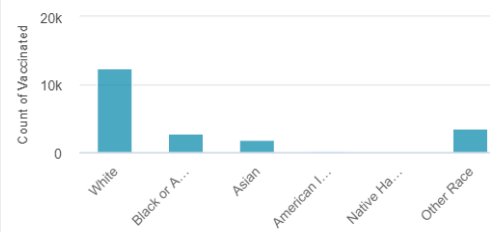
Western Maryland

(Allegany, Garrett, Washington)
Count of Vaccinated: 689
Proportion of Population Vaccinated: 0.28%

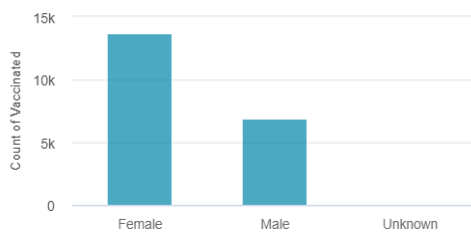
Vaccinations Statewide by Age



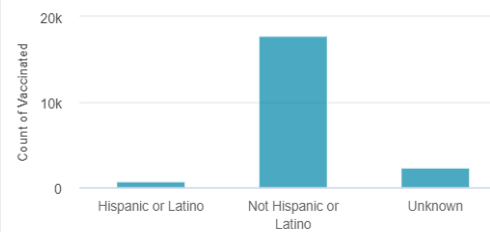
Vaccinations Statewide by Race



Vaccinations Statewide by Gender



Vaccinations Statewide by Ethnicity



Pfizer Vaccine – Key points

❖ Administration and distribution

- Ultracold storage, 5 days in refrigeration
- 985 doses per box
- 15 and 30 minute observation periods
- 2 dose regimen- 17-21 days (can extend)
- Can defer for 90 days after illness

❖ Indications

- 16 years and older
- Pregnant and lactating can be considered
- caution with those with h/o anaphylaxis

Pfizer Vaccine Efficacy - from [FDA Briefing Document](#)

❖ End point Symptomatic, PCR(+) 7 days after second injection

Table 6. Final Analysis of Efficacy of BNT162b2 Against Confirmed COVID-19 From 7 Days After Dose 2 in Participants Without Evidence of Prior SARS-CoV-2 Infection - Evaluable Efficacy Population

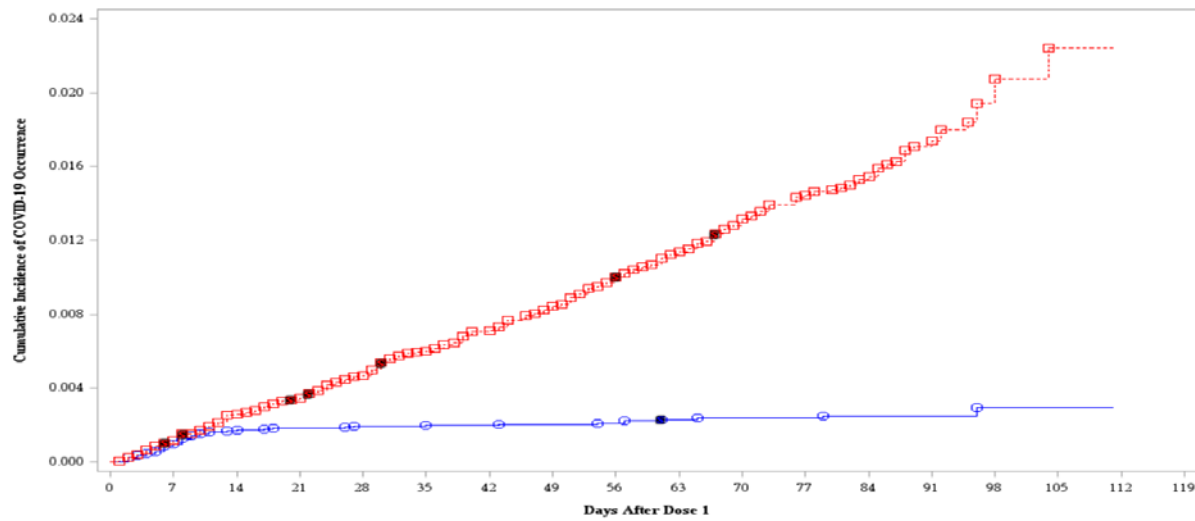
Pre-specified Age Group	BNT162b2 N^a = 18198 Cases n1^b Surveillance Time^c (n2^d)	Placebo N^a = 18325 Cases n1^b Surveillance Time^c (n2^d)	Vaccine Efficacy % (95% CI)	Met Predefined Success Criterion*
All participants	8 2.214 (17411)	162 2.222 (17511)	95.0 (90.3, 97.6) ^e	Yes
16 to 55 years	5 1.234 (9897)	114 1.239 (9955)	95.6 (89.4, 98.6) ^f	NA
> 55 years and older	3 0.980 (7500)	48 0.983 (7543)	93.7 (80.6, 98.8) ^f	NA



Efficacy

- ❖ 95% reduction in symptomatic PCR tested cases within 7 days after second dose
- ❖ No evidence that transmissibility is eliminated; vaccinated individuals should still wear masks

Figure 13 Cumulative Incidence Curves for the First COVID-19 Occurrence After Dose 1 – Dose 1 All-Available Efficacy Population



No. with events/No. at risk

A:	0/21314	21/21230	37/21054	39/20401	41/19314	42/18377	42/17702	43/17106	44/15464	47/14038	48/12169	48/9591	49/6403	49/3374	50/1463	50/398	50/0
B:	0/21258	25/21170	55/20970	73/20366	97/19209	123/18218	143/17578	166/17025	192/15290	212/13876	235/11994	249/9471	257/6294	267/3301	274/1449	275/398	275/0

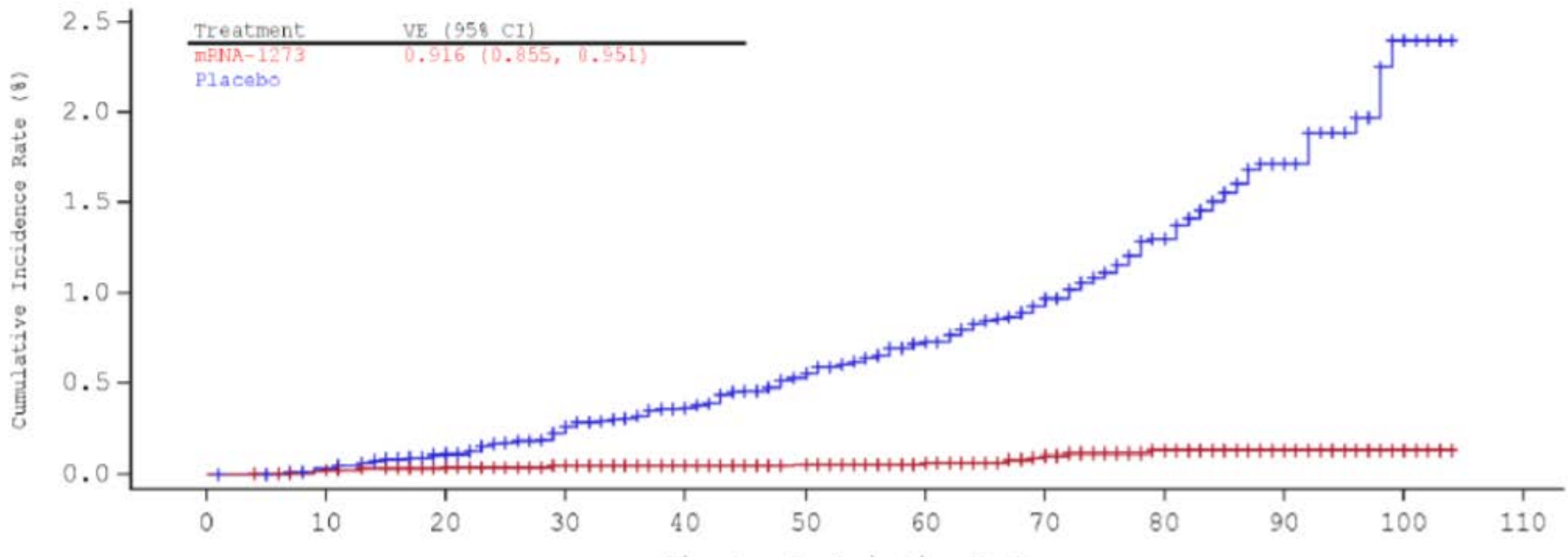
—○— A. BNT162b2 (30 µg) - - - □ - - - B. Placebo

Moderna Vaccine



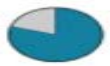


- ❖ Effectiveness assessed by RCT
 - Volunteers received vaccine or placebo (30,350 participants)
 - Of 196 cases, 185 occurred in the placebo group, 11 occurred in the vaccination group – 94.1% effective
 - 18 and over
 - Does not require ultracold storage
- ❖ The FDA met to discuss EUA for the Moderna vaccine Monday, 12/14
 - FDA granted EUA for the Moderna vaccine 12/19
 - Distribution beginning on 12/21
 - ACIP Evidence to Recommendations meeting on Moderna vaccine:
<https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/slides-12-19/04-COVID-Oliver.pdf>






Moderna Efficacy Compared to Placebo

Figure 2. Cumulative Incidence Curves for the First COVID-19 Occurrence After Randomization, mITT Set



Comparison of Pfizer and Moderna Vaccines

	Name	Pfizer & BioNTech Covid-19 vaccine	Moderna
	Type	RNA – virus genetic code	RNA – virus genetic code
	Doses	Two injections 21 days apart	Two injections 4 weeks apart
	How Effective	90%	95%
	Storage	-75C	-20C up to 6 months

	Name	Flu vaccine	MMR vaccine
	Type	Inactivated virus	Live attenuated vaccine
	Doses	Annual injection	Two injections at least 28 days apart
	How Effective	40%-60%	97% against measles and rubella, 88% against mumps
	Storage	2C to 8C	2C to 8C

Vaccine Safety

- ❖ Serious adverse event rare in 2 month follow up
- ❖ Frequent side effects
 - Local reaction
 - Fatigue
 - Fever, chills, headache
- ❖ Consider side effects when vaccinating critical workers in closed units
- ❖ Caution with allergic reactions – CDC guidance available [here](#)
- ❖ CDC presentation on use of mRNA Covid-19 vaccines:
<https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2020-12/slides-12-19/06-COVID-Mbaeyi.pdf>

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

Allergy considerations for mRNA vaccines - information from [ACIP meeting](#)

Contraindications to vaccination

- Prescribing information for both Pfizer-BioNTech and Moderna COVID-19 vaccines:
 - Severe allergic reaction (e.g., anaphylaxis) to **any component of the vaccine** is a contraindication to vaccination
 - Appropriate medical treatment used to manage immediate allergic reactions must be immediately available in the event an acute anaphylactic reaction occurs following administration of the vaccine

Key messages

Preparing for the potential management of anaphylaxis at COVID-19 vaccination sites

Early recognition of anaphylaxis symptoms



Prompt treatment with epinephrine



Activate emergency medical services



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

Vaccine Provider Recruitment and Enrollment

Maryland healthcare providers interested in receiving Covid-19 vaccine will have to take two steps:

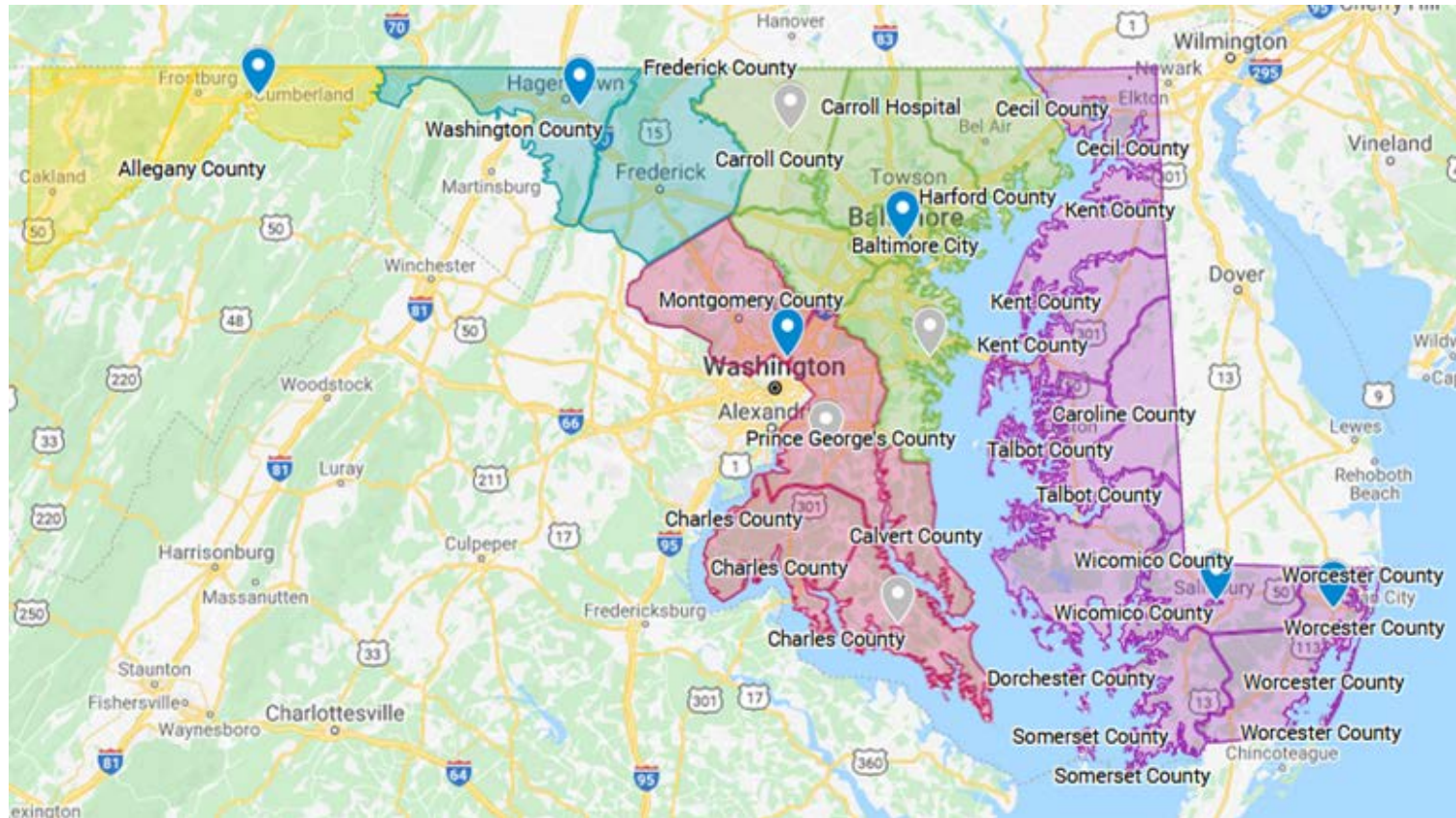
- 1. Onboard with ImmuNet** to report vaccination data (enrollment form available [here](#))
 - **EHR connected to ImmuNet** to report all vaccine doses administered (done through EHR vendor)
 - *Reach out to your MDPCP practice coach if you do not know your current ImmuNet onboarding status*
- 2. Register with ImmuNet as a vaccine provider** in order to receive and administer vaccine.

More information soon – not open currently for ambulatory providers. If you try to register now, it will not work

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
- ❖ Early evidence suggest promise of mAb products in **OUTPATIENT** settings to **REDUCE HOSPITALIZATION**

Regional Hospital-based Infusion Sites



Monoclonal Antibodies Clinician Letter (Updated 12/16/20)

- ❖ 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**
- ❖ 6 infusion centers + SNFs open - more to follow
 - Baltimore Convention Center Field Hospital
 - Peninsula Regional- Tidal Health
 - Meritus Health
 - Adventist – Takoma Park
 - UPMC
 - Atlantic General
 - SNFs

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

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 $\geq 85^{\text{th}}$ 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

Testing Marylanders in Primary Care

- ❖ Testing in offices serves patients and normalizes the process
- ❖ Testing or referring patients for testing is key to keep the State safe
- ❖ Specimen collection continues to evolve from nasopharyngeal sampling to the current simplified nasal sampling
- ❖ Testing will continue to evolve with Point of Care tests and saliva tests
- ❖ [MDPCP Guidance on testing in primary care \(from July 2020\)](#)

Updates on Testing Adoption Team

- ❖ Teams began outreach 12/1
- ❖ Streamlined workflows with less PPE required
- ❖ Anterior nasal and saliva testing reduce PPE burn rate
- ❖ Ordering for home based tests when appropriate
- ❖ Testing resource information in appendix
- ❖ Practices that would like assistance from the Testing Adoption Teams can direct their requests to mdh.pcmode@maryland.gov

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)

Updates on PPE

- ❖ Order from current suppliers
- ❖ Use list in appendix
- ❖ If all supplier resources exhausted
 - Use form previously supplied (appendix)
 - Request from County Health Departments
 - State resources as last resort- distributed through local health department
 - Priority
 - ✓ Hospitals
 - ✓ SNFs
 - ✓ Community Providers, others

Five things you can do as Health Care Providers

- 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**
- 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 set up reporting now, and work with your patients to get them flu shots

Discussion and Q/A

Appendix

Resources and Links

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

Phased Approach

	Phase 1	Phase 2
<i>Vaccine availability</i>	Limited	Widespread
<i>Approach</i>	Targeted	Universal
<i>Vaccine available to:</i>	<ul style="list-style-type: none"> • Frontline healthcare workers • Other essential workers • Those at highest risk of developing complications from Covid-19 (ACIP high risk conditions) 	<ul style="list-style-type: none"> • General public
<i>Vaccine distribution by:</i>	<ul style="list-style-type: none"> • Local health departments • Hospitals • Vaccination clinics (through LHDs) • Essential employer work sites 	<ul style="list-style-type: none"> • Local health departments • Hospitals • Pharmacies • Primary care practices • Urgent care centers • School vaccination clinics

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](#)

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](#)

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

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

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

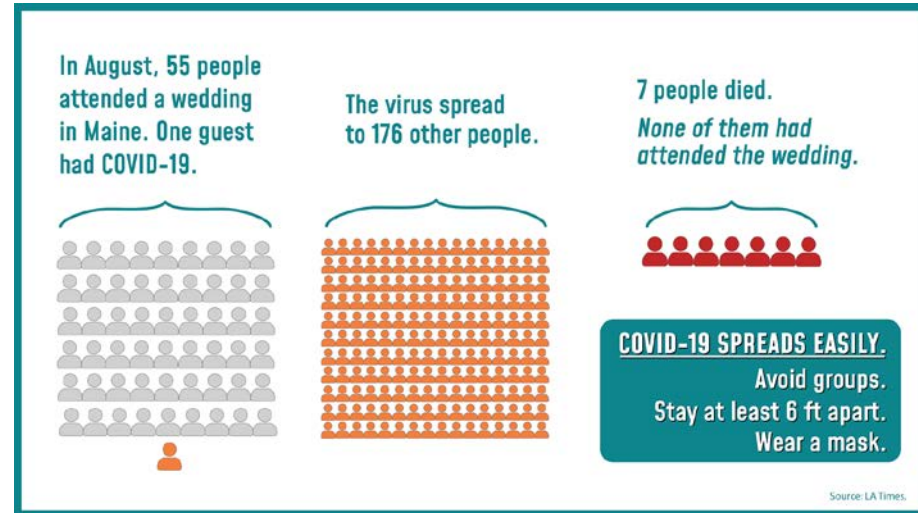
- ❖ Other workflow resources
 - [Care management workflows](#)
 - [BMJ telemedicine workflow graphics](#)
 - [CDC flowchart to identify and assess 2019 novel Coronavirus](#)
 - [CDC telephone evaluation flow chart for flu](#)
 - [CDC guidance for potential Covid-19 exposure associated with international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

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**

Covid Guidance for the Holidays

- 1) Celebrate with the people in your own immediate household
- 2) Don't attend events or social gatherings if you're feeling ill or if you have had close contact with someone with Covid-19 in the last 14 days
- 3) Understand the Covid-19 precautions for the event or social gathering you are attending
- 4) Wear a face covering



Large (and small) social gatherings spread Covid-19

Covid Guidance for the Holidays

- 5) Limit the number of people you come into contact with by avoiding large gatherings or multiple events with different groups of people
- 6) Check for local travel advisories and guidelines related to testing and quarantining
- 7) If hosting, clean frequently touched surfaces
- 8) Wash your hands
- 9) Eat/celebrate outside if possible

More information is available [here](#)

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

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](#)

Personal Protective Equipment (PPE) Sources and Requests

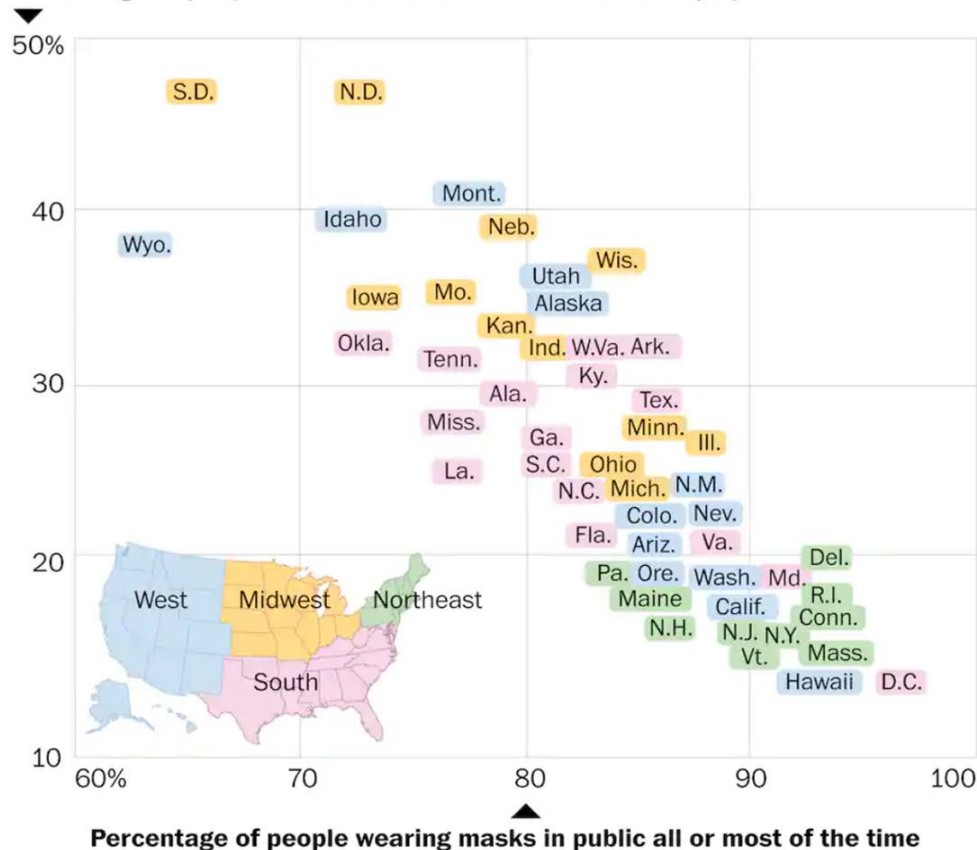
- ❖ Increasing Maryland's supply of PPE – one of the 4 building blocks on the Road to Recovery
- ❖ Maryland has launched the [Maryland Manufacturing Network Supplier Portal](#), an online platform that helps connect Maryland suppliers with buyers in need of critical resources
- ❖ For additional business resources during Covid-19, visit businessexpress.maryland.gov/coronavirus
- ❖ Providers may also request PPE from the non-profit ['Get Us PPE'](#)

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



Data as of Oct. 19

Source: Delphi CovidCast, Carnegie Mellon University

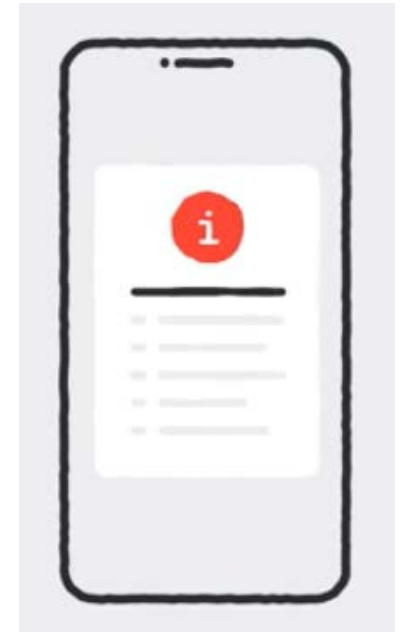
THE WASHINGTON POST

- ❖ 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

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

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](#)

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](#)

Staying Current - Sources

- ❖ [CDC](#)
- ❖ [MDH Covid-19 information page](#)
- ❖ [MDPCP Covid-19 webpage](#)
- ❖ Local Health Departments
- ❖ [CONNECT](#)
- ❖ Clinician Letters
- ❖ Multiple Resource Links in Appendix

MedChi/CareFirst/Backline Grant

CareFirst BlueCross BlueShield (CareFirst) and the Maryland State Medical Society (MedChi) launched a grant program that will equip additional Maryland physicians with the technology they need to provide needed virtual care during the Covid-19 pandemic and beyond

Eligibility Requirements

- The medical practice and medical license are in Maryland
- The medical practice is a private, independent group of five or fewer physicians
- The practice enrolls in Backline after March 1, 2020 as the result of the Covid-19 crisis
- MedChi has confirmed the practice's enrollment with DrFirst
- Enrollment in Backline occurs before December 31, 2020

Application Steps

Can be completed in less than 5 minutes

- Complete the application linked [here](#)
- Email completed application to amullin@medchi.org
- For questions, email or call Andrea Mullin at amullin@medchi.org or 800-492-1056 x3340

Grant Amount

\$300 per eligible physician



Food Resources

❖ Nutrition: Inform patients that children can receive three free meals/day at sites listed on:

➤ [Maryland Summer Meals](#)

[Howard County](#)

➤ [Montgomery County](#)

[Anne Arundel County](#)

➤ [Prince Georges County](#)

[St. Mary's County](#)

➤ [Charles County](#)

[Harford County](#)

➤ [Frederick County](#)

[Calvert County](#)

❖ Free meals available from 42 rec centers in Baltimore

➤ Call 311 for locations and to schedule pickup time

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>)

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/>)