



COVID-19 Daily Update

Maryland Department of Health
Maryland Primary Care Program
Program Management Office

1 May 2020



#Thanks
HEALTH
HEROES

Faith, Love and ACTS



Key Takeaways

- ❖ You remain on the front line against COVID-19 in Maryland - **Act Now**
- ❖ You are uniquely positioned to identify at-risk populations, provide important social distancing information to them, and serve their healthcare needs through telemedicine. **No one can do this better than you!**
- ❖ **Your Role in this epidemic will continue to evolve**
 - **Testing**
 - **Volunteering**
 - **Contact Tracing**

Agenda

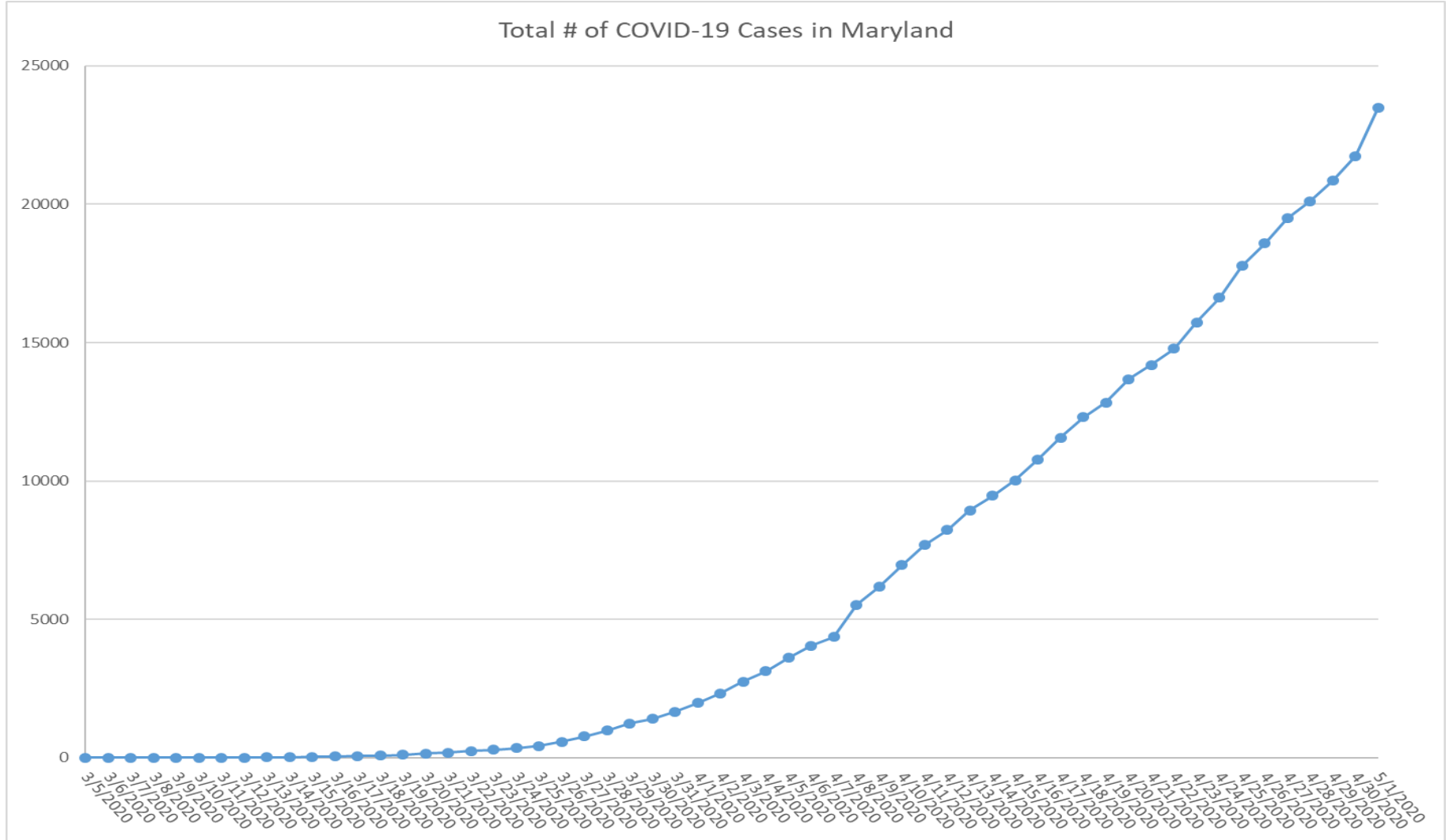
- ❖ Today's key data updates
- ❖ What's Important Now (WIN)
- ❖ Clinical Issues
 - Messaging
 - Data-driven Outreach
 - Testing
 - Management
 - Advance Directives
- ❖ Resources
 - PPE
 - Caregiver Corps
- ❖ Aligned Programs, Volunteer Opportunities, Roadmap to Recovery
- ❖ Announcements
- ❖ Guest Speakers
- ❖ Q & A
- ❖ Additional Resource List

Morbidity and Mortality Update

	New Cases since Apr 28	Cumulative Cases	Cumulative Hospitalized	Cumulative Deaths
United States		1,031,659 (4/30)		60,057 (4/30)
Maryland	1730	23,472	20%	1098

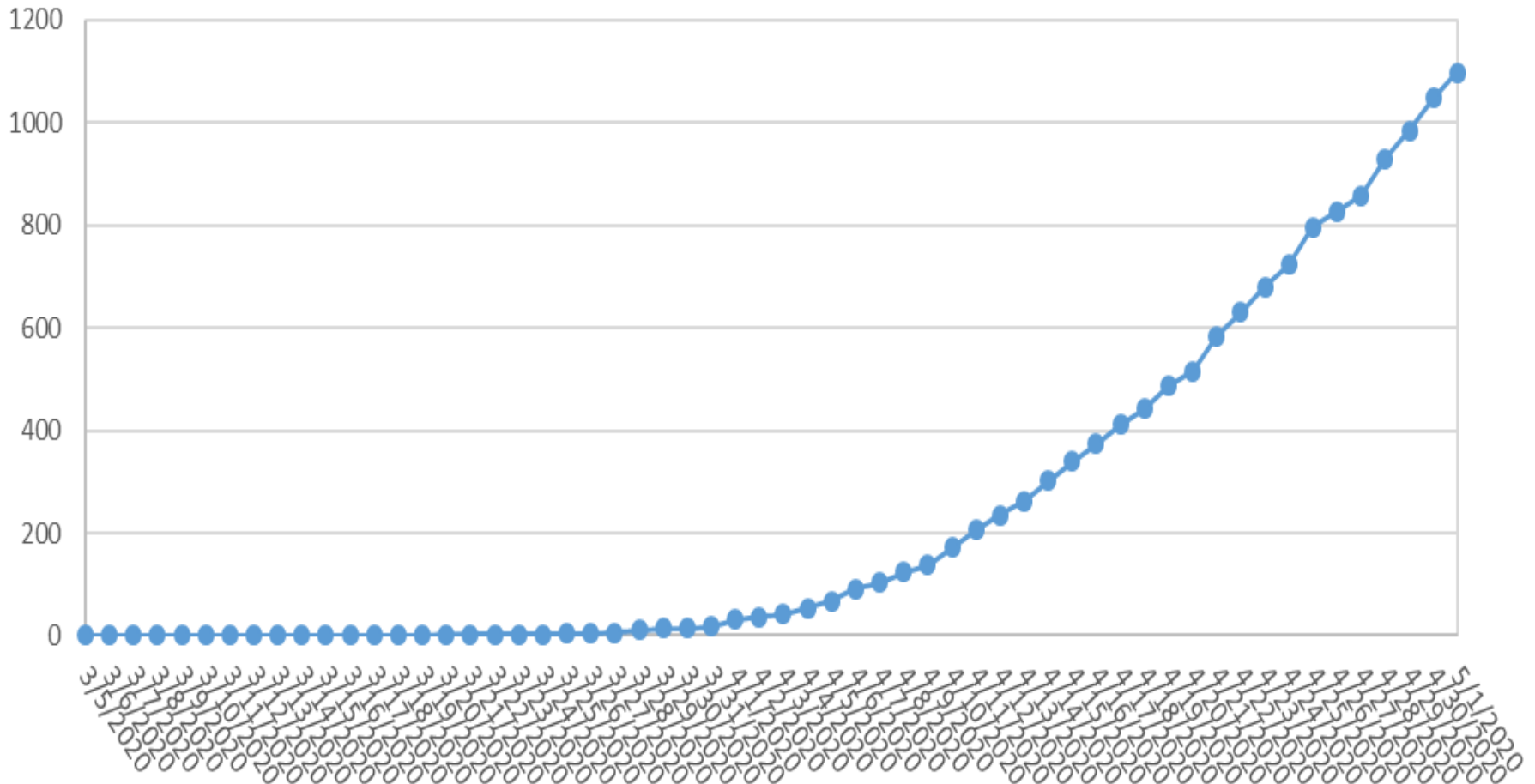
	30-39	40-49	50-59	60-69	70-79	80+
Case rate (per 100,000)	492.31	545.07	489.45	474.10	571.90	853.14
% of cases hospitalized	10.29	14.58	21.83	31.1	42.60	32.97
Rate hospitalized (per 100,000)	50.64	79.45	106.84	147.47	243.60	281.32
Death Rate (per 100,000)	N/A	N/A	N/A	N/A	N/A	N/A

Total COVID-19 Cases in Maryland

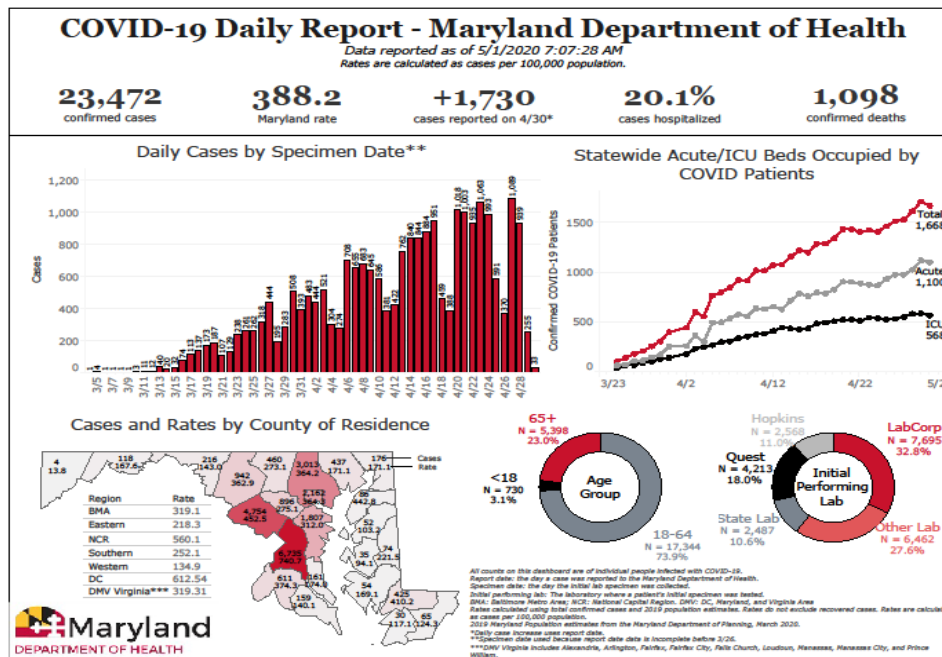


Total COVID-19 Deaths in Maryland

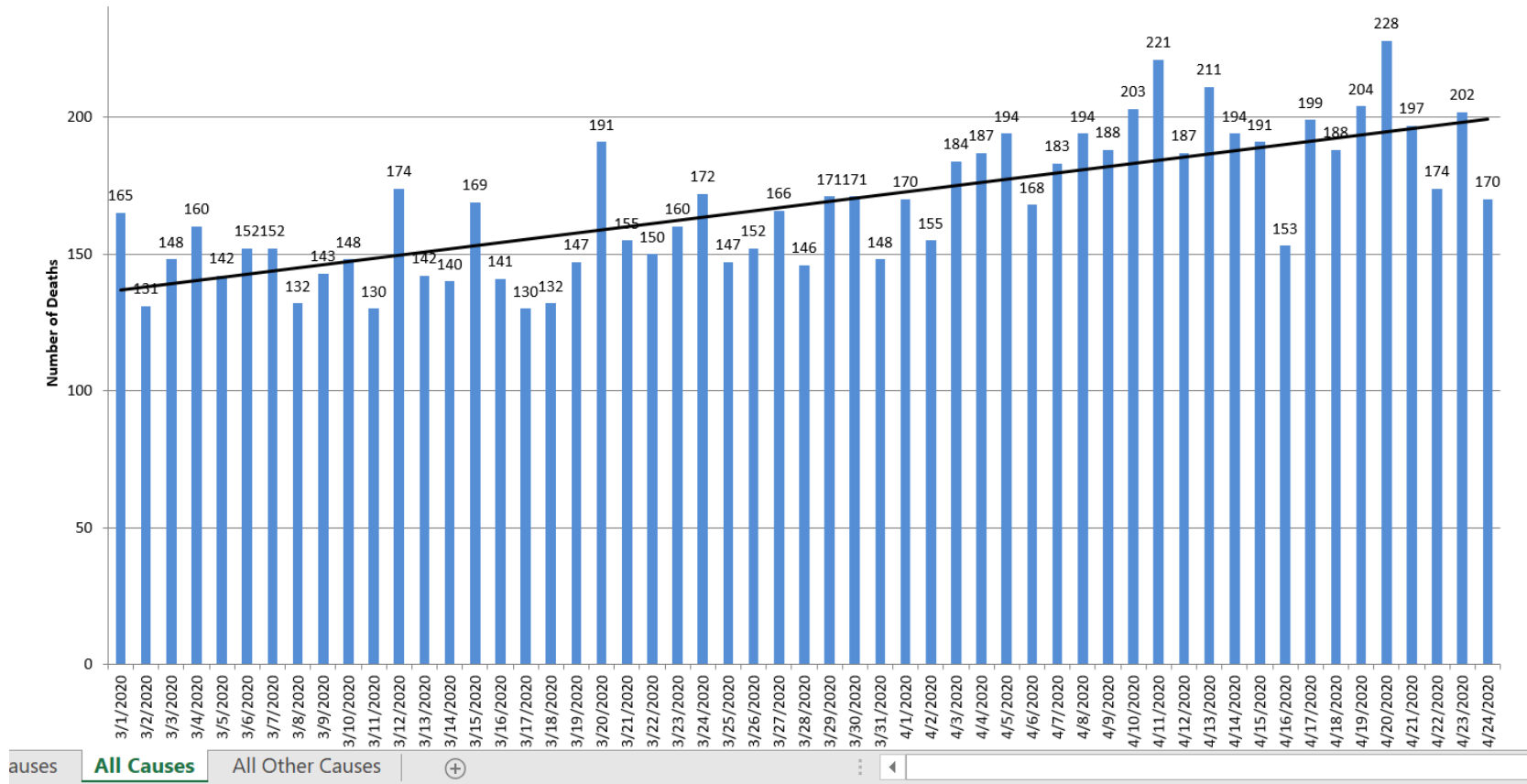
Total # of COVID-19 Deaths in Maryland



MDoH Detailed Daily Report

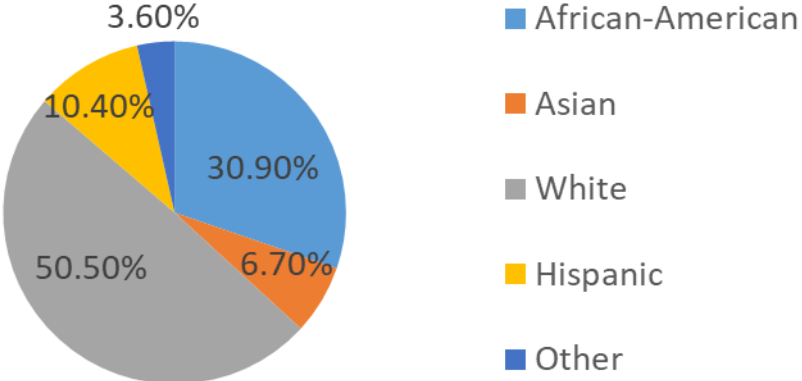


All cause deaths by day during COVID-19

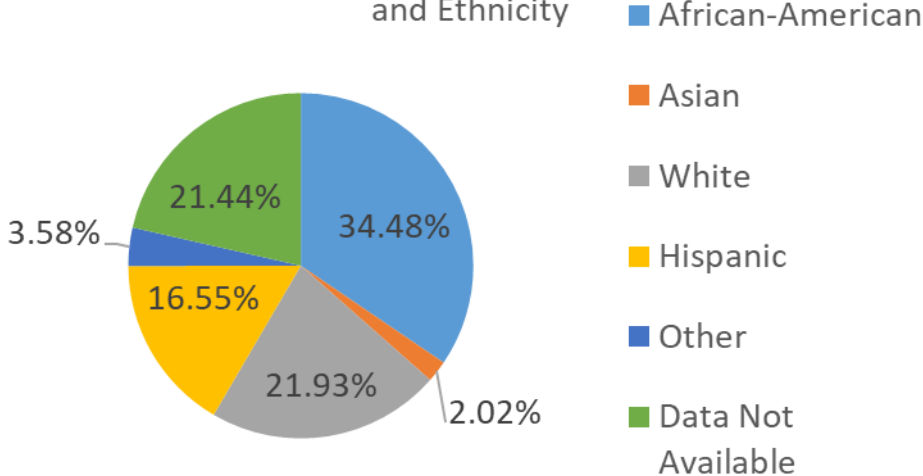


Impact of COVID-19 in Maryland by Race and Ethnicity

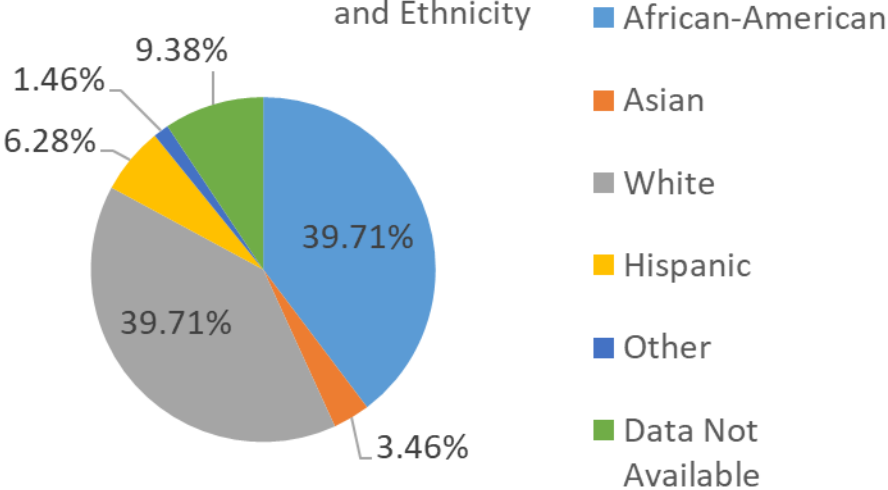
% of **Population** of Maryland, By Race and Ethnicity (Estimate)



% of Total COVID-19 **Cases** in Maryland, By Race and Ethnicity



% of Total COVID-19 **Deaths** in Maryland, By Race and Ethnicity



Maryland COVID-19 Cases in Congregate Facility Settings

Confirmed Staff Cases

1,550

Confirmed Staff Deaths

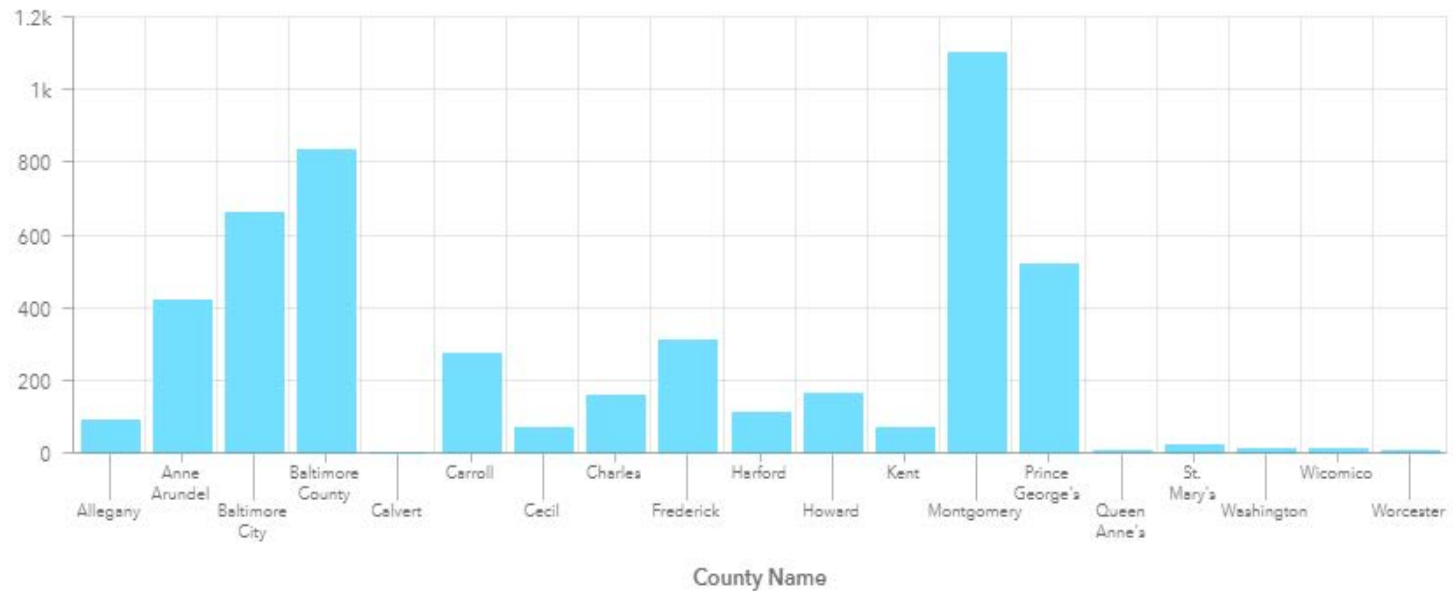
8

Confirmed Resident Cases

3,272

Confirmed Resident Deaths

508



Modeling the Surge

3 days since peak resource use on
April 11, 2020

All beds needed
1,449 beds



All beds available
3,961 beds



Bed Shortage
0 beds

ICU beds needed
256 beds



ICU beds available
266 beds

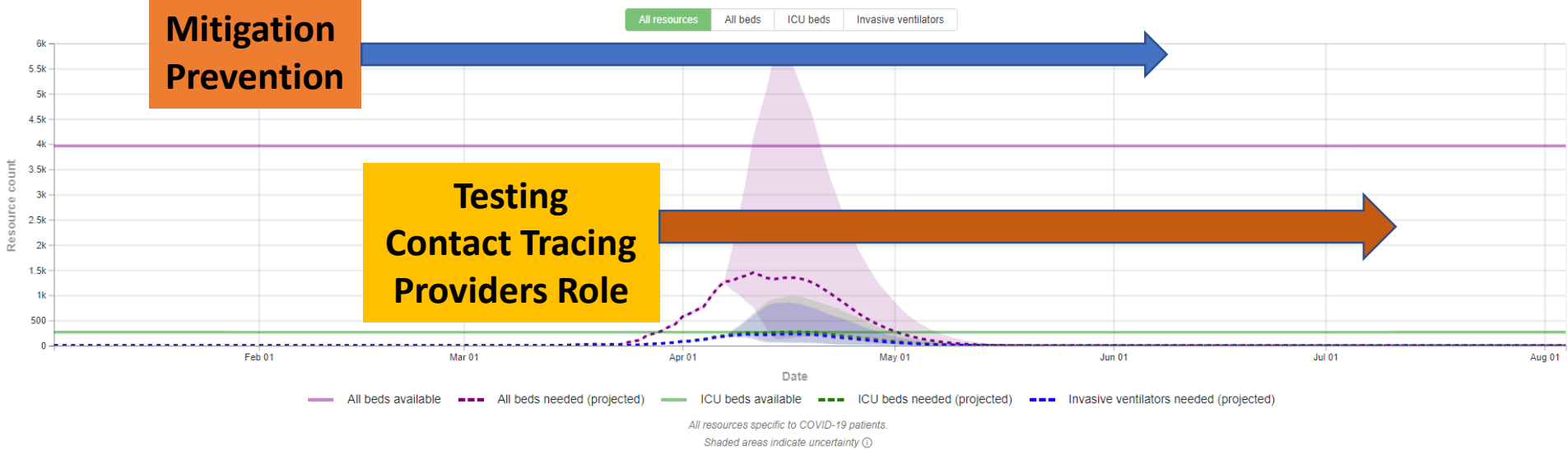


ICU Bed Shortage
0 beds

Invasive ventilators needed
221 ventilators

**Mitigation
Prevention**

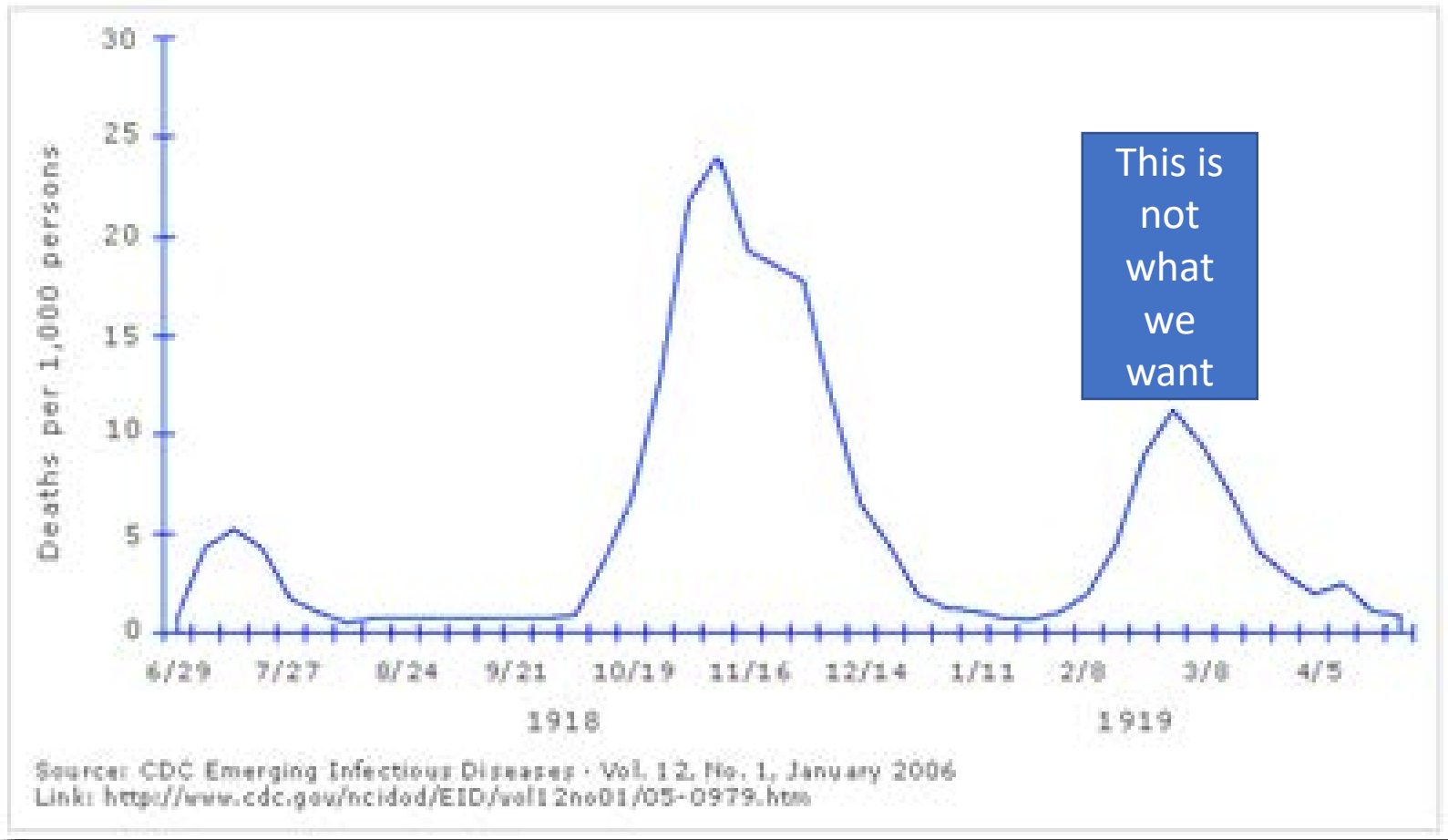
**Testing
Contact Tracing
Providers Role**



<https://covid19.healthdata.org/projections>

1918 Flu Pandemic

Below: Three pandemic waves: weekly combined influenza and pneumonia mortality, United Kingdom, 1918–1919



Messaging to All Patients

- ❖ *Stay home, stay away from this virus* – it can kill you, anyone can carry the virus
- ❖ We are here to support your medical needs - call
- ❖ Ensure your caregiver is also maintaining distance from others and frequently handwashing
- ❖ Maintain at least a 2-week supply of food and medicine
- ❖ Get exercise, rest and social connections - safely

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](#)

Caregiver Services Corps



- If your practice identifies a senior with pressing needs related to help with everyday tasks call **800-337-8958** to reach the CSC call center directly.
- The public (seniors or their families, friends) call 211
- The **CSC** call center is staffed with specialists available 7 days a week who can quickly evaluate care needs for older adults and identify volunteer caregivers and other the resources to deploy to their homes.
- The **CSC** volunteers can perform tasks such as:
 - Assist with the individual's self-administration of medications
 - Help with ambulation or transferring
 - Assist with bathing and completing personal hygiene routines
 - Aid in meal preparation and arrange for delivery for groceries or prepared meals
 - Educate seniors on how to use video technologies to connect with loved ones or healthcare providers

New at-risk patient identifier tool – Socially Determined & CRISP

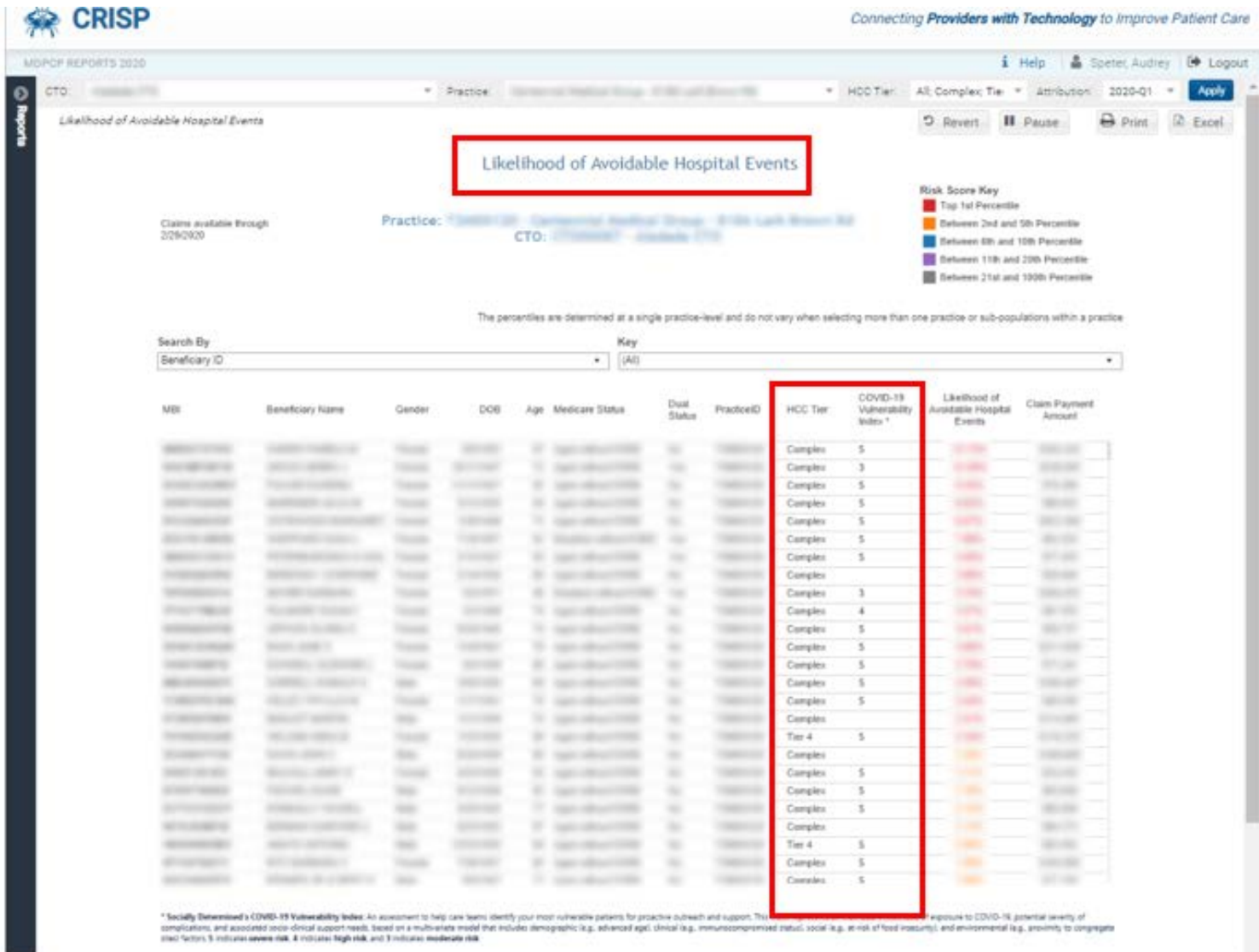
- ❖ Many Maryland Primary Care Program (MDPCP) practices use tools like the Pre-AH to identify clients most at risk for COVID-19
- ❖ CRISP has partnered with MDPCP and Socially Determined, a population health analytics vendor, to develop and offer an additional tool for MDPCP practices, the COVID-19 Social Susceptibility Index
- ❖ The index analyzes multiple factors to score high and severe-risk patients for proactive outreach and support
- ❖ The score variable appears in the Pre-AH tool

Additional information can be found:

[Socially Determined COVID Response Webpage](#)

CRS-team@crisphealth.org

Tool screen example



Symptoms to Consider before Testing

❖ Please consider the following expanded list of COVID-19 symptoms when determining the need for testing:

- Cough
- Shortness of breath or difficulty breathing
- Fever
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell
- Diarrhea
- Vomiting

Personal Protective Equipment (PPE) Requests

- ❖ Routed through Local Health Departments
- ❖ Priority as previously stated - may change over time
- ❖ Remain in scarce supply

- ❖ [PPE request forms and local contacts](#)
- ❖ [PPE Supplier List](#)

COVID-19 Testing Site Information

- ❖ Patients require a provider order for referral to testing sites
- ❖ Providers contact your local hospital or use the link below
- ❖ Sites are subject to host location restrictions and availability
- ❖ MD is also piloting drive-thru testing at several Vehicle Emissions Inspections Program (VEIP) locations – [FAQs available here](#).
- ❖ Current list of testing sites, please click [here](#)

Testing Locations – what is known

Testing Site Name	Location	Contact
MedStar St. Mary's Hospital	25500 Point Lookout Rd., Leonardtown, MD 20650	301-475-4911
UMMS, Upper Chesapeake Hospital	500 Upper Chesapeake Dr., Bel Air, MD 21014	443-843-8880
LifeBridge Health, Carroll Hospital	200 Memorial Ave., Westminster, MD 21157	410-601-2222
LifeBridge Health, Sinai Hospital	2401 W. Belvedere Ave., Baltimore, MD 21215	410-601-2222
Greater Baltimore Medical Center Health Partners	555 W. Towsontown, Blvd., Towson, MD	443-849-6819
Queen Anne's County Health Department	1000 College Circle, Wye Mills, Talbot, MD 21679	443-262-9900
Frederick Health Tollhouse	501 W. 7 th St., Frederick, MD 21701	240-215-6310
FedEx Field	Prince George's County	301-883-6627
<u>MedStar Health</u>	Ctrl + click on "MedStar Health" to your left	

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**

Advance planning for medical care is key, especially under COVID-19

- ❖ Treatments and a vaccine against COVID-19 are only in development
- ❖ Early conversations with patients can improve the quality of care
- ❖ Advance care planning often happens too late in a disease course
- ❖ Primary care teams have longitudinal relationships ideal to work with patients on their end-of-life preferences
- ❖ Advance Directives are advised; the MOLST (Medical Orders for Life-Sustaining Treatment) required for a range of patients
- ❖ Even if a patient has prepared an advance directive, a MOLST form is needed to implement those orders

Advance Directive vs. MOLST

MOLST	Advance Directive
Medical orders related to a patient's current medical condition	Provides guidance to healthcare practitioners for all major current and future medical conditions and death – treatment is based on medical orders
Must be completed for new patients during admission to all assisted living programs, home health agencies, hospices, kidney dialysis centers, and nursing homes	Not mandated, but highly recommended
Consolidates choice of procedures on life-sustaining treatment options	Importantly referred to when a patient is unable to give informed consent; health decision makers can be designated should patient be unable
The patient or authorized decision maker decides; signed by physician, nurse practitioner or physician assistant	Two witnesses (neither a health practitioner) required; no attorney needed. Remote witnessing is allowed under attorney supervision

Billing

- ❖ Billable event with AWW or Separate Encounter
- ❖ 99497 - Advance care planning including the explanation and discussion of advance directives such as standard forms (with completion of such forms, when performed), by the physician or other qualified healthcare professional; first 30 minutes, face-to-face with the patient, family member(s), and/or surrogate
- ❖ 99498 - Advance care planning including the explanation and discussion of advance directives such as standard forms (with completion of such forms, when performed), by the physician or other qualified healthcare professional; each additional 30 minutes (List separately in addition to code for primary procedure)

Resources

❖ Online Maryland Programs:

- My Directives at <http://www.mydirectives.com/>
- Speak Easy at <https://speakeasyhoward.org/>
- [Inspiration](#)

Opportunities to Volunteer and Serve

- ❖ Volunteer staffing opportunities - Maryland Responds Medical Reserve Corps (MRMRC)
 - <https://mdresponds.health.maryland.gov/>
 - Complete [Road to Readiness](#)
- ❖ [NIH serosurvey](#): Donate blood samples to help the NIH determine how many US adults without confirmed history of COVID-19 infection have antibodies to the virus

Hospital Surge Preparedness

- ❖ Convention Center needs medical staff – Visit <https://www.linkedin.com/jobs/view/1788387174>
- ❖ Tents and Modular Units - including ICUs
- ❖ Expansion within facilities
- ❖ Professional student staffing
- ❖ Employment opportunities for healthcare professional and support staff: www.MarylandMedNow.com

Contact Tracing Job Openings

❖ University of Chicago's National Research Opinion Center is hiring for Maryland contact tracing:

- [Aberdeen](#)
- [Baltimore](#)
- [Cambridge](#)
- [Chestertown](#)
- [Columbia](#)
- [Cumberland](#)
- [Frederick](#)
- [Hagerstown](#)
- [Silver Spring](#)

Maryland Strong: Roadmap to Recovery

- ❖ Maryland has flattened and lengthened the curve
- ❖ “Roadmap to Recovery” developed based on recovery plans issued by the federal government, the National Governors Association, Johns Hopkins and the American Enterprise Institute, and experts on Maryland’s Coronavirus Response Team
- ❖ Tailored to the Maryland situation
- ❖ 4 building blocks:
 - Expanded testing capacity (On Track)
 - Increased Hospital Surge Capacity (Ahead of Schedule)
 - Ramping up Supply of PPE (On Track)
 - Robust Contact Tracing (On Track)

Roadmap to Recovery (continued)

- ❖ Maryland Strong Roadmap to Recovery is:
 - In three stages of low, medium, and high risk
 - All stages are broad and multiphasic

- ❖ <https://governor.maryland.gov/recovery/>

MDPCP Staff Training Academy



MedChi approved: 3.5 AMA PRA Category 1 Credits™

New PY1 MDPCP Practices: Virtual Training 001

Friday, May 15 (1:00 pm - 4:00 pm) - Please register [Here](#)

PY2 MDPCP Practices: Virtual Training 002

Friday, May 22 (1:00 pm - 4:00 pm) - Please register: [Here](#)

Primary Care Collaborative (PCC) Clinician Survey

- ❖ PCC represents a broad group of public and private organizations and supports the growth of high-quality primary care against COVID-19
- ❖ Partnered with the Larry A. Green Center to weekly survey PC clinicians: How are you responding and what is your capacity?
- ❖ Results available at thebcc.org/covid
- ❖ [Complete this week's survey by Monday, May 4 at midnight](#)

As of 4/10/2020 at 11:59PM EST, we have paused taking new volunteers. Thank you for your continued support!



[About](#) [News & Updates](#) [PSL In The Media](#) [f](#) [t](#)

[Volunteer Portal](#)

Physician Support Line

1 (888) 409-0141

Helping our colleagues all over the U.S. on the front lines of COVID-19
Free & Confidential | No appointment necessary
Open 7 days a week | 8:00AM - 12:00AM EST

36

Physician Support Line – (888) 409-0141

- ❖ Peer-to-peer national support line; for physicians by physicians
- ❖ Free service staffed by US-licensed volunteer psychiatrists
- ❖ Not focused on COVID-19; all topics may be discussed
- ❖ Open to DO/MD/international equivalents at the attending, fellow, resident, intern, and research levels
- ❖ Currently non-practicing physicians are also welcome
- ❖ Confidential
- ❖ No appointment needed
- ❖ Open every day 8 am until midnight (EST)

CME Accreditation and Designation

- ❖ This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of MedChi, The Maryland State Medical Society, and The Maryland Department of Health. MedChi is accredited by the ACCME to provide continuing medical education for physicians.
- ❖ MedChi designates this live webinar educational activity for a maximum of 1 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. Contact Frank Berry at fberry@medchi.org

CME Disclosures and Evaluation

- ❖ Presenters and Planners: Howard Haft, MD, has reported no relevant financial relationships to disclose.
- ❖ MedChi CME Reviewers: The reviewers from the MedChi Committee On Scientific Activities (COSA) for this activity have reported no relevant financial relationships to disclose.
- ❖ Please complete an evaluation at: [COVID-19 Update Evaluation](#)

Announcements

- ❖ Future Spotlights - Specialty Care, Pediatrics
- ❖ Today:
 - Zachary Rabovsky, CareFirst
 - Guest Healthcare Practitioners
 - Dr. Mindi Cohen, Comprehensive Primary Care
 - Dr. Gnanaraj Johnson Koilpillai, Medical Director, Frederick Health Medical Group
 - Dr. Wayne Meyer, Adventist Medical Group



CareFirst COVID-19 Update

Maryland Department of Health COVID-19 Webinar

Zach Rabovsky, Manager Practice and Payment Transformation

5/1/2020

Proprietary and Confidential

member.carefirst.com/members/home.page

Need Insurance?

Already a Member

For Employers

For Brokers

For Providers

Community

Skip Navigation

Home Our Plans

Coronavirus

CareFirst is offering... and local public resources to help our community.

Find the latest information

Quick Links

Pay Your Bill >

Learn About RealAge® >

Need Care? Know Before You Go >

Prescription Drug Information >

Behavioral Health & Addiction >

Share Your Story >

Coronavirus (COVID-19) Information

We are actively monitoring the evolving coronavirus situation. The following resources can help keep you informed.

Latest Updates

[Prevention & Safety](#)

[Members Updates & Information](#)

[Employers](#)

[Broker & Partners](#)

[Healthcare Providers](#)

[Community Partners](#)

For the most up-to-date information about the virus, visit the [Centers for Disease Control \(CDC\)](#) and [World Health Organization \(WHO\)](#) websites dedicated to this issue.

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ship with state information and our

ount Today!

all your claims

- Access customized health & wellness info
- ...and much more

Register Now

Already a member? Log in now >

Search Now

Video Visit

Meet with a doctor online to get the care you



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[Community Partners](#)

[Links & Resources](#)

Healthcare Providers

[Billing & Claims](#)

[Telemedicine](#)

[Benefit Changes](#)

[FAQs](#)

[Prior Auth Updates](#)

[Economic Assistance](#)

Cases of COVID-19 continue to rise, contributing to financial pressures across our community, including to our healthcare provider organizations and individual practices. To help our PCMH providers, as well as independent practices in certain specialty areas, CareFirst is accelerating funding to numerous provider organizations in Maryland, Washington, D.C. and Northern Virginia.

CareFirst Accelerated Payment Program

CareFirst PCMH Providers

PCMH providers who are eligible for an outcome incentive award have the option of receiving their award

1. CareFirst PCMH Program Providers

- Panels eligible for an Outcome Incentive Award (OIA) for the 2019 Performance Year may opt-in to receive their OIA in a lump sum payment in advance of the August 1, 2020 payout date.
- Deadline to complete OIA Lump Sum Agreement is Friday May 1st.
- Practice Consultants have been in touch with eligible practices throughout the week; please reach out to your Practice Consultant if you have questions.

2. Monthly Advance Funding Options

- CareFirst is offering temporary advanced funding for certain PCMH practices, independent OBGYN, behavioral health providers and Dentists who need additional assistance.
- Eligible Providers in the PCMH Program will be contacted by their Practice Consultant.
- Specialists who are interested must complete the Accelerated Payment Request form by May 7th - found on the CareFirst website under the Economic Assistance Tab

Healthcare Providers

Billing & Claims

Telemedicine

Benefit Changes

FAQs

Prior Auth Updates

Economic Assistance

CareFirst PCMH Providers

PCMH providers who are eligible for an outcome incentive award have the option of receiving their award as a lump-sum payment. Providers should contact their practice consultant for detailed information.

Monthly Advance Funding Option – PCMH, OBGYN and Behavioral Health

CareFirst is offering temporary advanced funding for certain PCMH practices, independent OBGYN and behavioral health providers who need additional assistance. If you are interested, complete the [Accelerated Payment Request form](#) by May 7. Please note, CareFirst is reviewing requests through May 7 for these specialties. After May 18, CareFirst may consider requests from additional specialties.

Provider Assistance

Through the CARES Act and FFCRA, relief for hospitals and providers is being implemented by federal agencies through direct payments, grants and other mechanisms. Funding, eligibility and application details are outlined for each relief program below.



[Expand All](#) | [Collapse All](#)

- > Public Health and Social Services Emergency Fund
- > Expanded Accelerated and Advance Payment Programs
- > Telehealth Network and Resource Centers Grant Programs
- > COVID-19 Telehealth Grant Programs
- > Additional Provider Assistance Funding

[Expand All](#) | [Collapse All](#)

Federal and State Economic Assistance Programs

Business Assistance

Federal and state business assistance programs can provide low-interest loans, grants and tax relief for a provider practice if certain conditions are met. Please refer to the [Small Business Owner's Guide](#)  for additional information and FAQs on the small business programs outlined below or contact your local [Small Business Development Center](#). 

[Expand All](#) | [Collapse All](#)

- > Paycheck Protection Program
- > Economic Injury Disaster Loan and Loan Advance
- > Express Bridge Loan Pilot Program
- > Small Business Administration (SBA) Debt Relief
- > COVID-19-Related Tax Credits for Required Paid Leave
- > Employee Retention Credits
- > Deferred Payroll Taxes
- > Verizon Small Business Recovery Fund
- > Prince George's County COVID-19 Business Relief Fund (Specific to Prince George's County)
- > ACT Now COVID-19 Response Fund (Specific to City of Alexandria)

CareFirst has temporarily expanded our telemedicine policy. Detailed information on how to submit claims for telemedicine services can be found on the provider website

1. Waiving cost sharing for telemedicine
2. If your practice has its own telemedicine capability (audio/video), proceed with visits and bill CareFirst as normal with a place of service “02” and refer to the guidance at carefirst.com
3. If the claim is to evaluate a member for coronavirus, use diagnosis code Z20.828 (Exposure to viral disease).
4. If you are treating a member with confirmed coronavirus use diagnosis code B97.29 for dates of service prior to 4/1/20 and diagnosis code U07.1 or dates of service on and after 4/1/20.
5. If you are currently not set up to conduct telemedicine, you can use a commercially available platform to conduct telemedicine visits. Refer to Office for Civil Rights guidelines
6. Additionally, CareFirst is amending its Medical Policy on a temporary basis to pay for phone consultation provided by physicians and nurse practitioners credentialed in CareFirst’s network for the following specialties: primary care provider, OB/GYN, family practice and pediatrics.
 - \$20 flat fee for CPT 99441

Healthcare Providers


[Billing & Claims](#)[Telemedicine](#)[Benefit Changes](#)[FAQs](#)[Prior Auth Updates](#)[Economic Assistance](#)

Telemedicine Guidelines

[PCPs and OB/GYNs](#)[Behavioral Health](#)[Specialists](#)[Dentists](#)

CareFirst is encouraging members to call their doctor's office if they have symptoms of the flu, COVID-19 or other contagious conditions. During this public health event, we understand the use of telemedicine is a practical option for members who wish to or should stay home. Therefore, we are waiving cost sharing* (copays, coinsurance and deductibles) for members when they have a telemedicine visit with an in-network provider. **Providers are encouraged not to collect member cost sharing for these services.** If a member does owe a copay or coinsurance after the claim is processed, you can bill the member as you do for all other claims. For these purposes we've defined telemedicine as a combination of interactive audio and video.

Telemedicine Capability

If your practice has its own telemedicine capability (audio/video), proceed with visits and bill CareFirst as normal with a place of service "02" and refer to this [guidance](#)  for accepted telemedicine procedure codes and modifiers. Services for diagnosis, consultation or treatment provided through telemedicine must meet all the requirements of a face-to-face consultation or contact between a licensed health care provider and a patient consistent with the provider's scope of practice for services appropriately provided through telemedicine services.

CareFirst Procedure Code/Modifier/Place of Service Instructions for Telemedicine Claims During Covid-19 Public Health Emergency

Please note that we temporarily added additional codes to our telemedicine policy to address the current coronavirus public health emergency. These codes are labeled temporary and are effective for dates of service on and after March 16, 2020. These codes may be re-evaluated after the public health emergency has subsided. The codes labeled existing were included in Telemedicine Medical Policy 2.01.072.

Procedure Code	Modifier	Place of Service	Temporary / Existing Policy
90785	95 or GT	02	Existing
90791	95 or GT	02	Existing
90792	95 or GT	02	Existing
90832	95 or GT	02	Existing
90833	95 or GT	02	Existing
90834	95 or GT	02	Existing
90836	95 or GT	02	Existing
90837	95 or GT	02	Existing
90838	95 or GT	02	Existing
90845	95 or GT	02	Existing
90846	95 or GT	02	Existing
90847	95 or GT	02	Existing
90849	95 or GT	02	Existing
90966	95 or GT	02	Temporary
90967	GT	02	Temporary
90968	95 or GT	02	Temporary
90969	GT	02	Temporary
90970	95 or GT	02	Temporary
92227	95 or GT	02	Existing
92228	95 or GT	02	Existing
92507	95 or GT	02	Existing

Waiving Copays

- **Will CareFirst pay physicians the copay they did not collect from the patient?**

CareFirst is covering the full allowed amount and reimbursing providers the portion that Members are typically responsible for.

- **Will copays be waived for all CareFirst Members?**

Copays are waived for fully insured Members. We are also partnering closely with our self-insured customers to implement similar measures. Unfortunately, not all self-insured accounts have agreed to waive copays.

Telemedicine

- **Does CareFirst reimburse telemedicine visits at the same rate as office visits?**

Yes, telemedicine visits are reimbursed at the same as office visits for eligible codes. Refer to the guidance document on the website.

- **What is the difference between telephone visits and telemedicine visits?**

Telemedicine visits must include video to video communication. Telephone calls only are reimbursed at \$20 plus any PCMH Participation and OIA incentives if eligible.

Appendix

Resources Links

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



Federal Emergency Funds for Small Business

- ❖ [Disaster Loan Assistance](#) (from Small Business Administration)
 - Low-interest financial disaster loans for working capital in small businesses suffering substantial economic injury due to COVID-19
 - [FAQs](#)
- ❖ [CARES Act](#) (pending federal legislation)
 - Sets up a \$350 billion loan program for small businesses
 - Small businesses can apply for low-interest loans that cover up to 2.5 months of expenses
 - Maximum loan amount is \$10 million
 - Loans can cover payroll, rent, utilities, or existing debt obligations
 - Interest rates cannot exceed 4%
 - If employer continues to pay workers through June, the amount of the loans that went toward eligible costs would be forgiven
 - Loans will be available through the [Small Business Administration](#) and Treasury-approved banks, credit unions, and some nonbank lenders

State Emergency Funds for Small Business

- ❖ [COVID-19 Layoff Aversion Fund](#) (from Maryland Governor Larry Hogan and Maryland Dept. of Labor)
 - Designed to support businesses undergoing economic stresses due to the pandemic by minimizing the duration of unemployment resulting from layoffs
 - Award of up to \$50,000 per applicant
 - Will be quick deployable benefit and customizable to specific business needs
- ❖ [View the One-Pager](#)
- ❖ [COVID-19 Layoff Aversion Fund Policy](#)
- ❖ [COVID-19 Layoff Aversion Fund Application](#) (Excel)
- ❖ Submit your completed application to: LaborCOVID19.layoffaversion@maryland.gov.

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/>)

State Emergency Funds for Small Business

- ❖ [Maryland Small Business COVID-19 Emergency Relief Loan Fund](#)
 - \$75 million loan fund (to be paid to for-profit business only)
 - Loans are up to \$50,000
 - No interest or principal payments due for the first 12 months
 - Thereafter converts to 36-month term loan of principal and interest payments, with interest rate of 2% per annum
- ❖ [Maryland Small Business COVID-19 Emergency Relief Grant Fund](#)
 - \$50 million grant program for businesses and non-profits
 - Grant amounts of up to \$10,000
 - Grant amounts not to exceed three months of demonstrated cash operating expenses for Q1 2020
- ❖ [Emergency Relief Fund FAQ](#)
- ❖ Questions or concerns
email fpaaworkflowcoordinator.commerce@maryland.gov.