



COVID-19 Daily Update

Maryland Department of Health
Maryland Primary Care Program
Program Management Office

4 May 2020



#Thanks
HEALTH
HEROES

Faith, Love and ACTS

Agenda

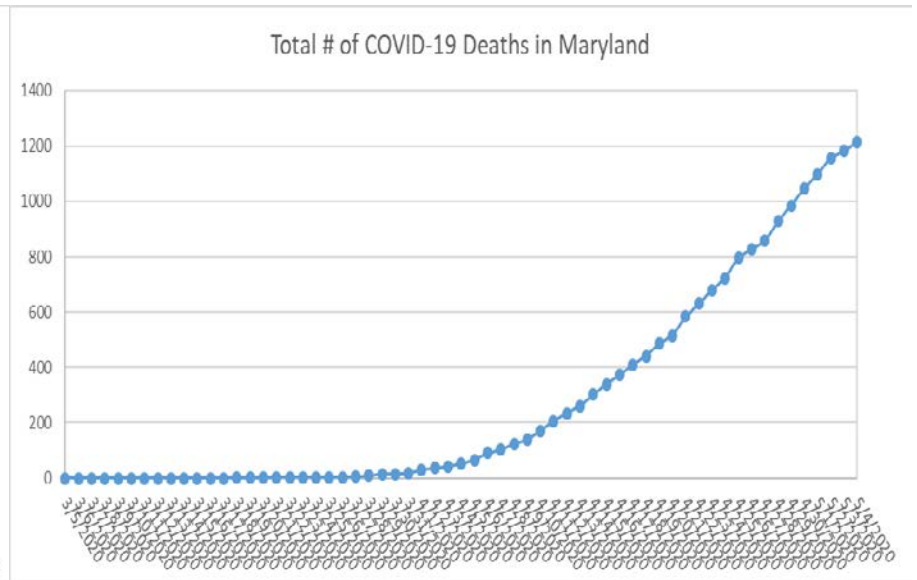
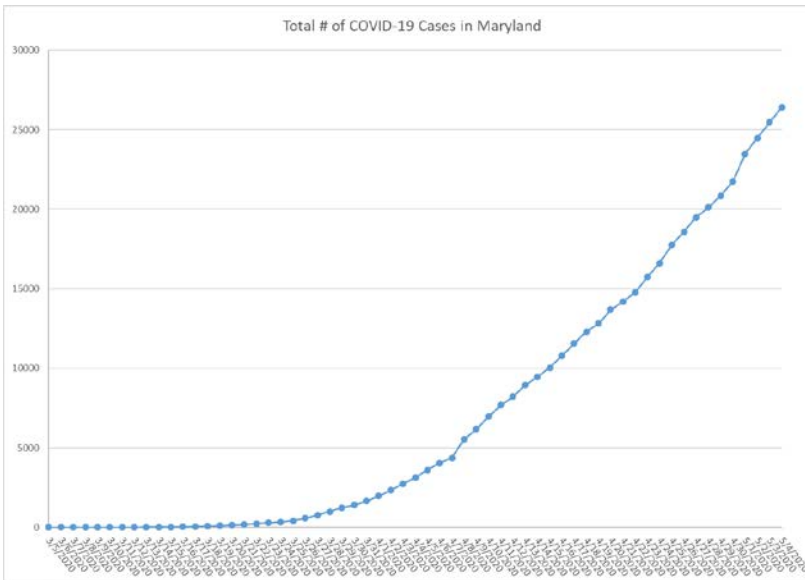
- ❖ Today's Morbidity and Mortality Data Update
- ❖ CMS Updates
- ❖ Clinical Issues
 - Data-driven Outreach
 - Advance Planning and Directives
 - Resources Overview
- ❖ Roadmap to Recovery and Employment/Volunteer Opportunities
- ❖ Announcements
- ❖ Guest Speakers
- ❖ Q & A
- ❖ Resources Appendix

Morbidity and Mortality Update

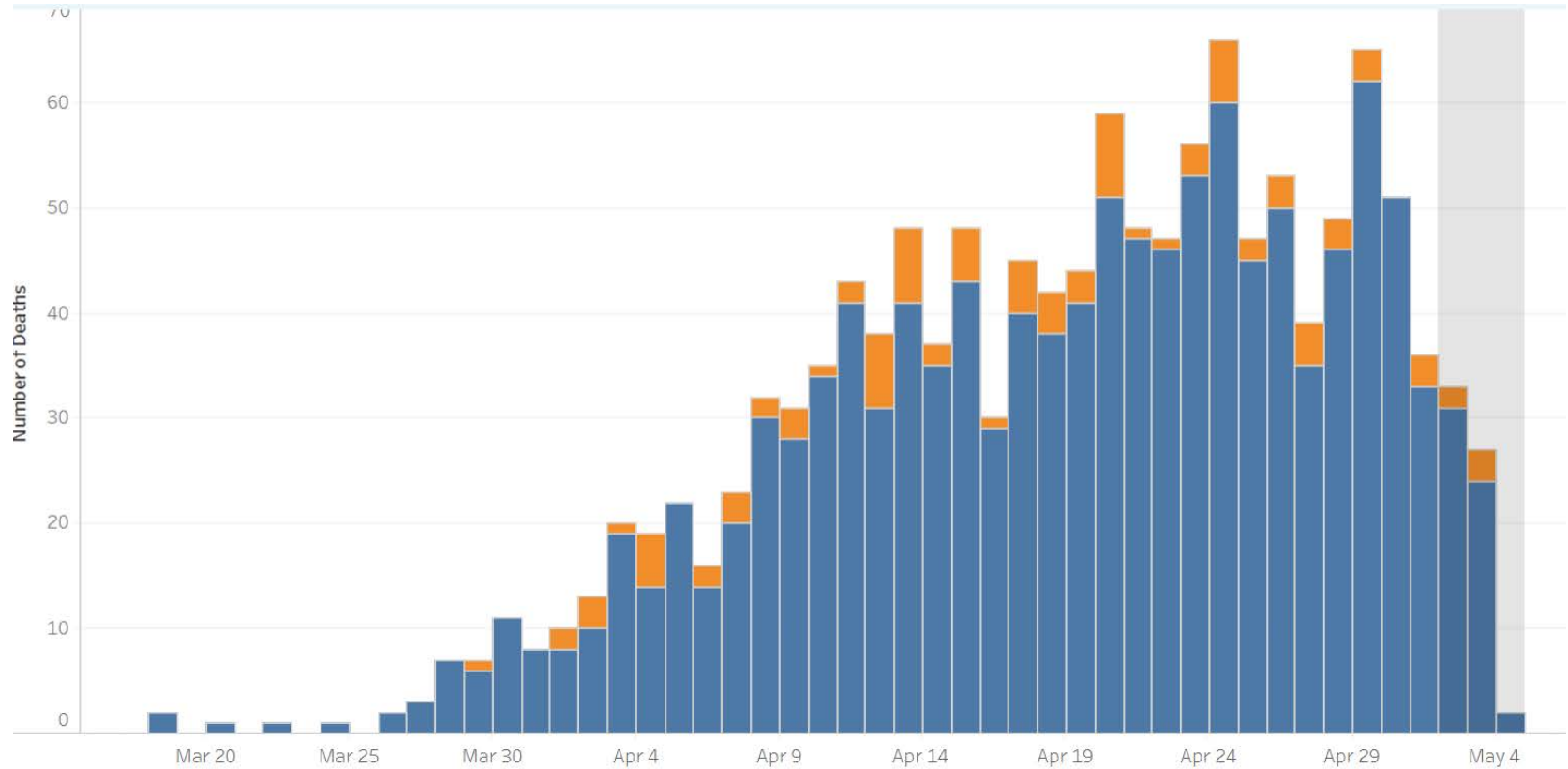
	New Cases since May 3	Cumulative Cases	Cumulative Hospitalized	Cumulative Deaths
United States		1,122,486 (5/3)		65,735 (5/3)
Maryland	946	26,408	20%	1216

	30-39	40-49	50-59	60-69	70-79	80+
Case rate (per 100,000)	556.53	605.69	540.80	526.31	635.62	983.94
% of cases hospitalized	9.96	14.31	21.66	31.24	41.38	31.76
Rate hospitalized (per 100,000)	55.41	86.67	117.11	164.43	263.01	312.53

Total COVID-19 Cases in Maryland



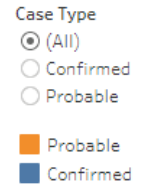
Deaths by Day



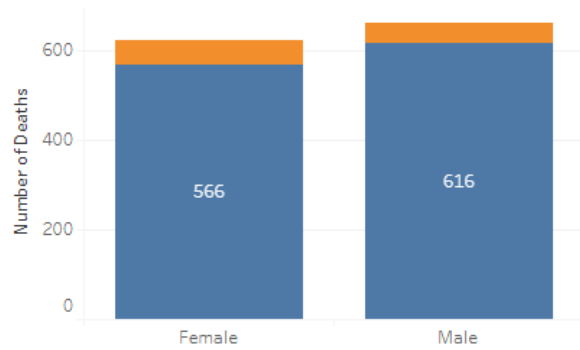
COVID-19 Fatalities

Please note: Numbers are of deaths reported by the Maryland Vital Statistics Administration - Maryland residents only.
As with all reports, do not distribute this information publicly.

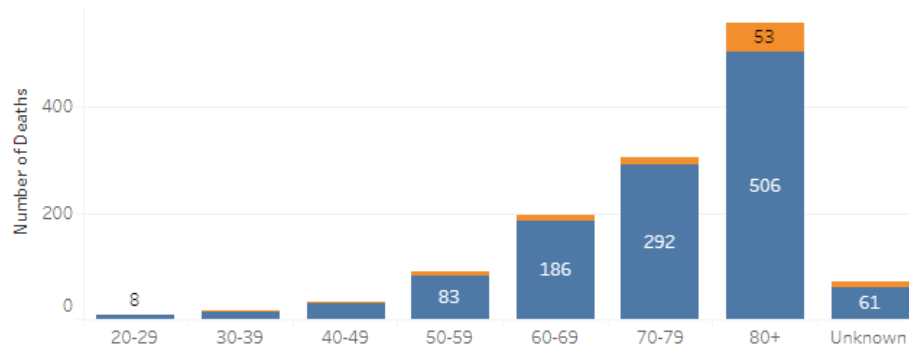
Total Deaths In Maryland: **1,281**



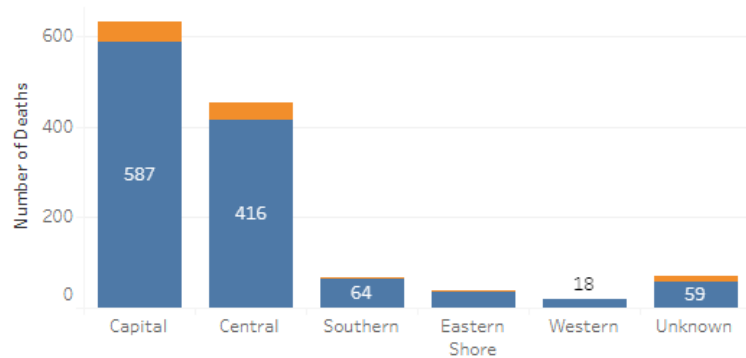
Gender



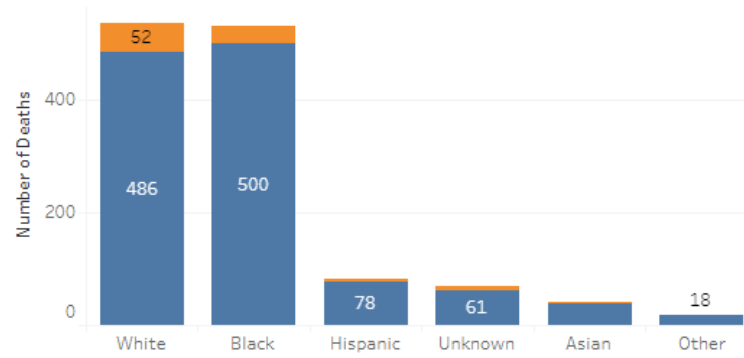
Age Group



MDH Region



Race and Ethnicity



Death Data available through 5/3/2020

Confirmed death: Laboratory-confirmed positive COVID-19 test result

Maryland COVID-19 Cases in Congregate Facility Settings

Confirmed Staff Cases

1,550

Confirmed Staff Deaths

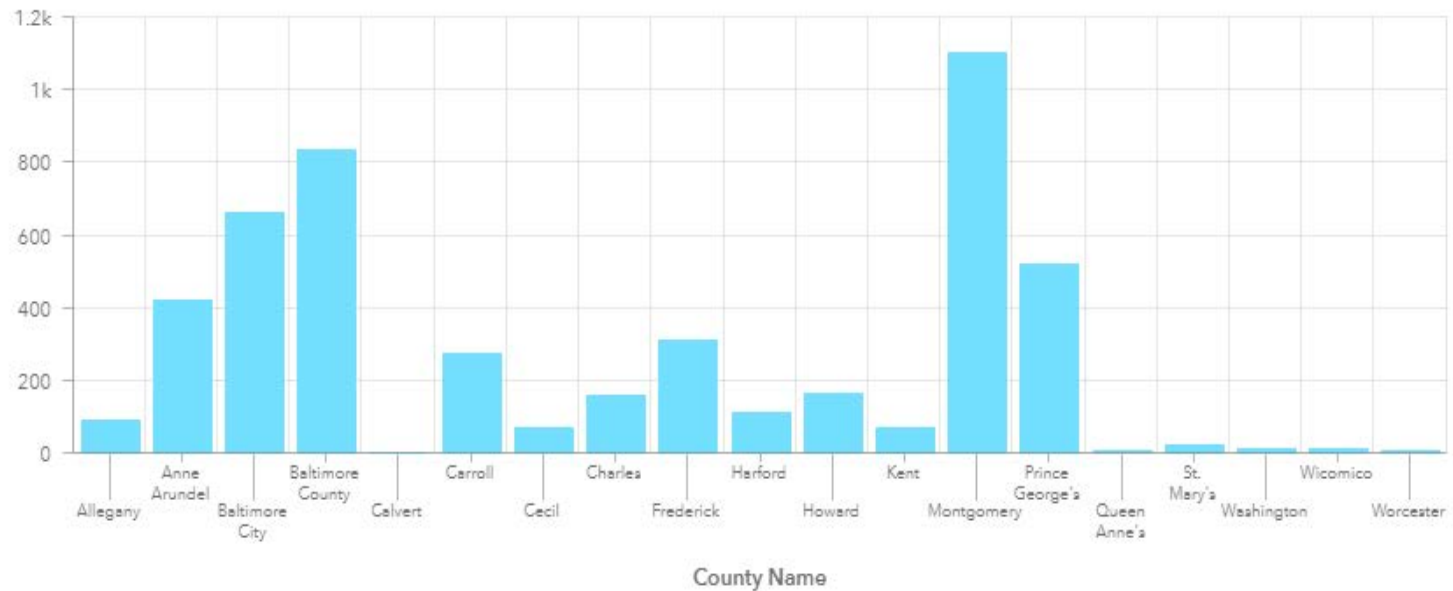
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Confirmed Resident Cases

3,272

Confirmed Resident Deaths

508



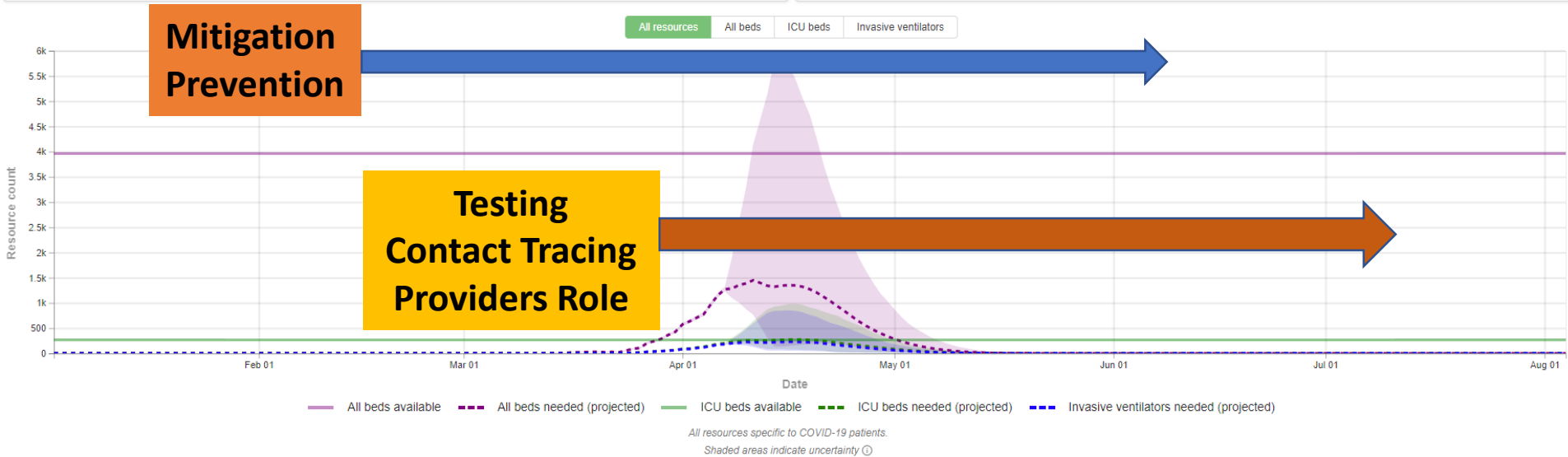
Important Updated CMS Information

- ❖ Any authorized healthcare professional can now [order](#) COVID-19 tests
- ❖ [Medicare](#) and Medicaid now cover:
 - certain serology (antibody) tests
 - lab processing of certain FDA-authorized [tests](#) that beneficiaries self-collect
- ❖ Nurse practitioners, clinical nurse specialists, and physician assistants can now [provide](#) home health services
- ❖ During the COVID-19 pandemic, CMS has waived limitations on the types of clinical practitioners who can furnish [Medicare telehealth services](#)
- ❖ CMS has:
 - ❖ increased [payments](#) for telephone visits to match those for similar office and outpatient services (effective 3/1/2020)
 - ❖ [waived](#) the video requirement for certain telephone evaluation and management services
- ❖ [List of telehealth services](#) Medicare covers during the public health emergency

Modeling the Surge

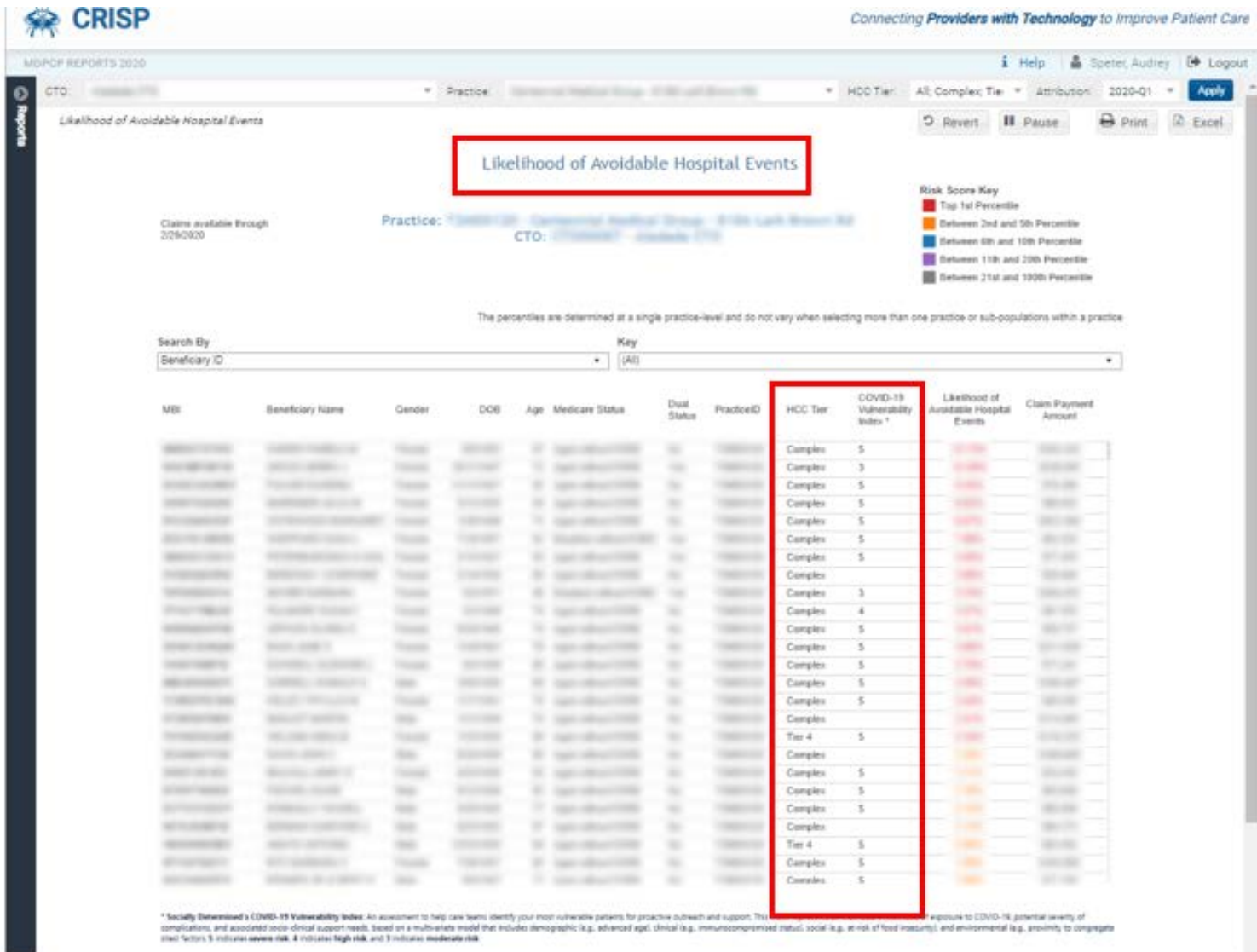
3 days since peak resource use on
April 11, 2020

Resources needed for COVID-19 patients on peak date				
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				



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

Data-driven Outreach to High-Risk Patients



ImmuNet – registration, ordering and free vaccine

The screenshot shows the Maryland ImmuNet website interface. At the top, there is a navigation bar with the text "Production Region" on the left and "Maryland.gov | Phone Directory | State Agencies | Online Services" on the right. Below this is a banner featuring the Maryland state flag on the left, the "ImmuNet: Maryland's Immunization Information System" logo in the center, and a yellow "WEBSITE NOTICE" box on the right that reads: "ImmuNet works best with the most current version of Internet Explorer or Google Chrome." Below the banner is a blue navigation menu with links for "Home", "Resources", "About Us", and "Contact Us". The main content area is a light gray box containing a login form. The form includes a blue padlock icon with a key, two input fields labeled "User Name" and "Password", a blue "Login" button, and a "Forgot Password" link. A "Register Now" link is located at the bottom right of the form. At the bottom of the page, there is a footer with a row of three small images showing people.

Maryland ImmuNet .. [Portal Main] x +

mdimmunet.org/prd-IR/portalHeader.do

Production Region Maryland.gov | Phone Directory | State Agencies | Online Services

ImmuNet:
Maryland's Immunization Information System
DEPARTMENT OF HEALTH

WEBSITE NOTICE:
ImmuNet works best with the most current version of Internet Explorer or Google Chrome.

Home Resources About Us Contact Us

User Name
Password
Login Forgot Password
Register Now

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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

Resources in the Appendix Slides

❖ Patients

- Meals on Wheels
- Caregiver Services Corps
- Senior Call Check Program

❖ Providers

- PPE
- Financial Support
- Testing
- Telemedicine
- CDC Guidelines
- Volunteering & Employment Opportunities

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

Contact Tracing Job Openings

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

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

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)

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 thepcc.org/covid
- ❖ [Complete this week's survey by Monday, May 4 at midnight](#)

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

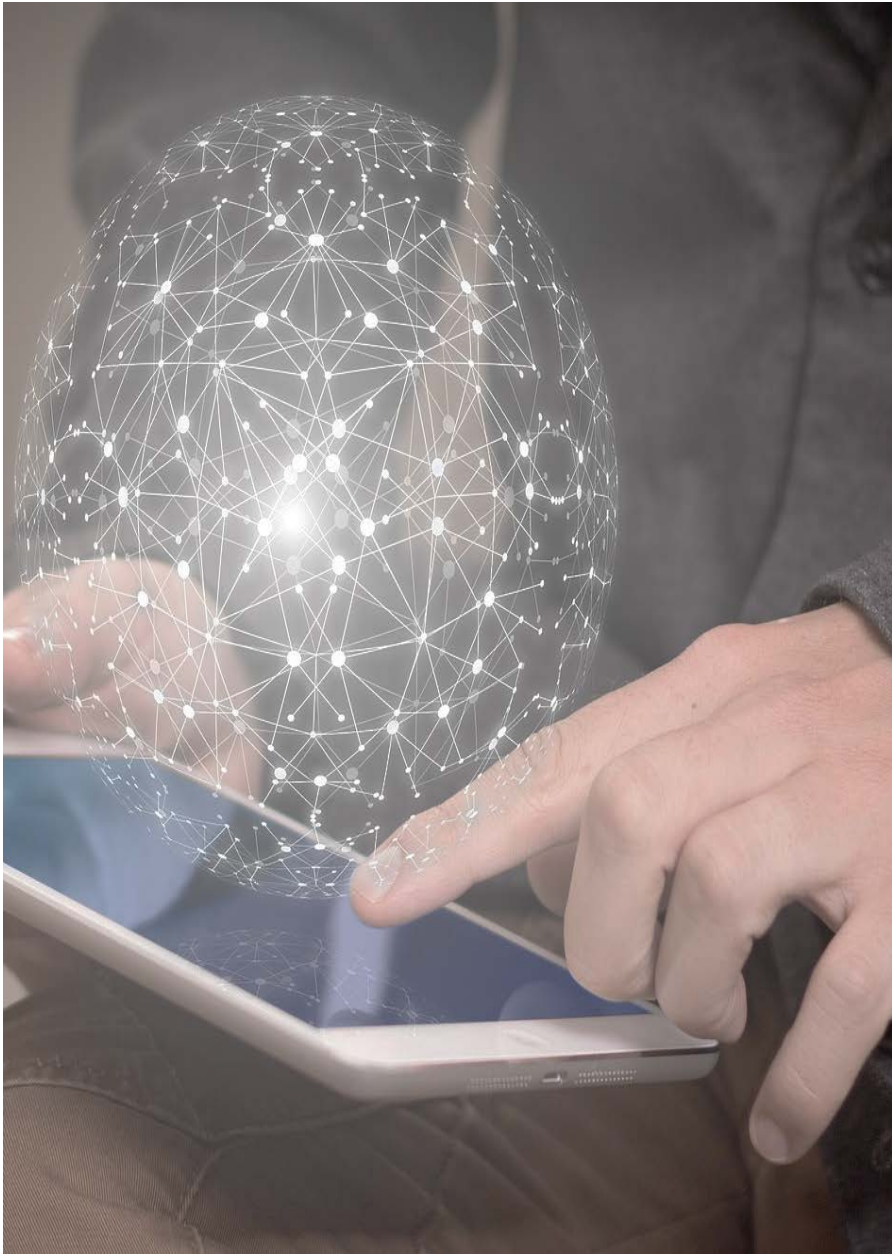
- ❖ Future Spotlights - Specialty Care, Pediatrics
- ❖ Today: Maryland Health Care Commission
 - Melanie Cavaliere
 - David Sharp, PhD
- ❖ Wednesday: Behavioral/Mental Health Presenters
- ❖ Friday: Guest Healthcare Practitioners



Health IT Adoption

Advancing Telehealth in Ambulatory Practices

May 2020



Program Goal

Help practices that are considering telehealth adoption complete crucial steps that will allow them to leverage technology to appropriately engage providers and staff, improve patient convenience, and ensure continuous clinical improvement

General Education and Awareness Building – Key Categories

- Overview of telehealth
- Providers
 - The business case for telehealth adoption
 - A paradigm shift
 - An effective encounter
 - Measuring success
- Consumers
 - Engaging patients in the encounter
 - Privacy and security
 - Ask patients for feedback on the encounter

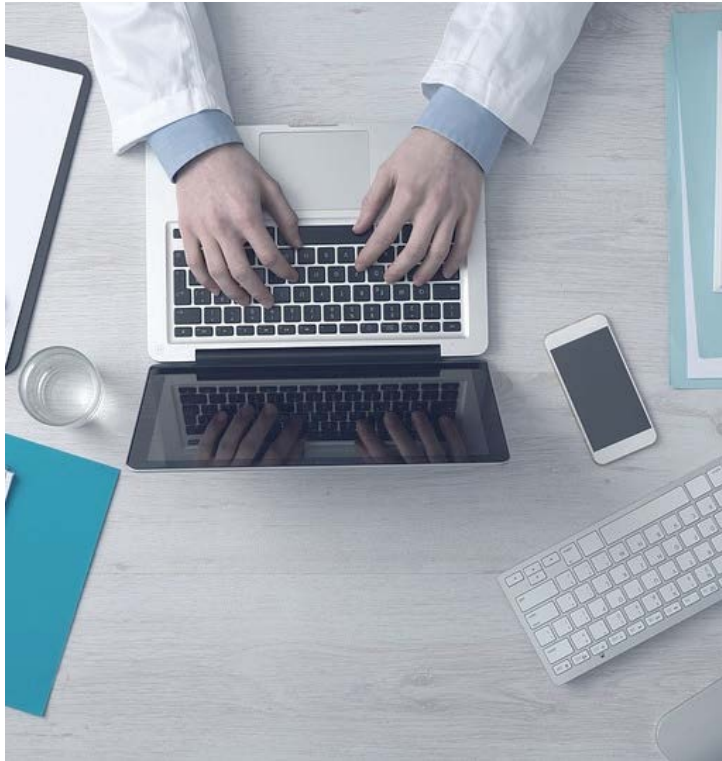


Practice Readiness Assessment



- A critical step in evaluating telehealth is to determine practice readiness for implementing telehealth services
- Telehealth Readiness Assessment Tool – five concepts:
 - Core Readiness
 - Financial Considerations
 - Operations
 - Staff Engagement
 - Patient Readiness

Workflow Redesign



- Successful implementation involves mapping clinical workflows to seamlessly integrate telehealth into day-to-day practice processes
- Practices need to create a visual representation of the series of tasks that occur before, during, and after a telehealth encounter

Workflow Redesign *(Continued...)*

- Workflow mapping involves holding discussion with providers and staff to identify:
 - How patients will be informed of the availability of telehealth services
 - Who should be involved in scheduling and coordinating the encounter
 - Who explains the telehealth encounter to patients
 - Who is responsible for coordinating follow up care
 - The process for data integration



Program Elements

Program Milestone 1

- a. Completion of the Telehealth Readiness Assessment (TRA) tool
- b. Development of a plan by the Management Service Organization (MSO) to address areas of improvement including prioritization of those areas identified in the TRA tool
- c. Consultation advice to practices on the selection and implementation of a telehealth solution; a range of options must be presented, from affordable, non-public facing applications to higher-end, telehealth platforms that are HIPAA-compliant

Program Milestones (continued)

2. Educate practice staff on telehealth guidance issued by State and federal entities and public and private payers regarding new and existing requirements, temporary waivers, etc.
3. Development of telehealth workflows in consultation with practice staff
4. Training of practice staff on using the selected telehealth technology and the practice approved reengineered workflows to support telehealth

Practice Rebate

- Practices will receive a \$500 payment to offset their administrative investment cost for adopting telehealth after completing the MSO satisfaction survey and attesting to billing for telehealth on three unique encounters, subject to fund availability
- Payments will be made to the MSO to distribute to the practice



MHCC – An Information Resource to Practices

- Address questions on telehealth adoption and use
- Virtual Telehealth Resource Center
- Address consumer questions related to telehealth use, privacy and security



Questions

Contact Melanie Cavaliere
Chief, Innovative Care Delivery
Melanie.cavaliere@Maryland.gov

Free online Resources

Telehealth Main Page

https://mhcc.maryland.gov/mhcc/pages/hit/hit_telemedicine/hit_telemedicine.aspx

Telehealth Resource Page developed after COVID-19

https://mhcc.maryland.gov/mhcc/Pages/hit/hit_telemedicine/hit_telemedicine_virtual_resource.aspx

TRA Tool (electronic version)

<http://mhcctelehealthtool.herokuapp.com/>

AMA Telehealth Playbook

<https://www.ama-assn.org/system/files/2020-04/ama-telehealth-playbook.pdf>

Q&A

Questions and Answers

Please type into the Questions box on the right side of your screen.

Appendix

Resources and Links

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**

Billing for End-of-Life Planning

- ❖ 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)

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 (CSC)



- ❖ The **CSC** call center (**800-337-8958**), staffed with specialists 7 days a week, matches volunteers to senior citizens in their homes to help with:
 - Individuals' self-administration of medications
 - Ambulation and transferring
 - Bathing and completing personal hygiene routines
 - Meal preparation and arranging for delivery of groceries and/or prepared meals
 - Teaching how to use video technologies to connect with loved ones and/or healthcare providers
- ❖ Healthcare providers should alert their patients that they are being referred
- ❖ Seniors, their families and friends may call 211 to seek help and referrals to the elderly in need
- ❖ The CSC is functioning now on the Eastern Shore and soon in Montgomery County

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

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

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](#)
- [Montgomery County](#)
- [Prince Georges County](#)
- [Charles County](#)
- [Frederick County](#)
- [Howard County](#)
- [Anne Arundel County](#)
- [St. Mary's County](#)
- [Harford 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.